HSDC

HSDC - DRUGHANDLING AND CORRECTION

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C/S Series 93

NEW GRADE CHART

The "**new**" thing to do is the Grade Chart. Everything you are doing should contribute to getting the pc up the Bridge. **this** is the Bridge.

There is a new Grade Chart being prepared which has some changes in it, based on recent discoveries. It is urgent that you know of these in advance.

DRUG RUNDOWN

The effects of an omitted or incomplete Drug RD are severe enough to deny a person any lasting case gain.

This is covered in HCO B 31 May 74, "Unhandled Drugs and Ethics". Some orgs have taken this HCO B so literally however, that they have taken pcs off Adv Cses Grades, refused to do Assists on ill pcs and some showed pcs the HCO B and invaled their gains.

This was not the intention of the HCO B. The C/S Series remain valid.

The Drug RD belongs on the Grade Chart after Life Repair. A Drug RD cannot be done over out ruds and a Life Repair may be necessary to get in a pc's ruds.

Life Repair is not a prerequisite for the Drug RD, however, and if done is not to be dragged out intensive after intensive. In some cases a pc could not complete Life Repair without a Drug RD.

Following the Drug RD is ARC S/W, then the rest of Dianetics to completion.

EXPANDED DIANETICS

Ex Dn by the way belongs after Grade IV Expanded.

Some pcs R/S and have Evil Purposes to do others in. But no Grade 0 or Grade I or Grade II. What others? Martians?

"Got to secretly do everybody in" probably applies to Apeville some long date ago and he's never come up to PT.

The answer is to bring the pc up the Grade Chart to Expanded Grade IV *then* do his Ex Dn.

The prerequisites for Ex Dn are covered on HCO B 23 April 74, Ex Dn Series 22, "Expanded Dianetics Requisites". Add to that Expanded Grades up to IV and you have it.

GRADE II

Some orgs specialize in Grade II, especially on org staff. The pc is always getting Integrity Processing or his O/Ws pulled on so and so.

If you look on the Grade Chart you will find Withholds and Overts are Grade *TWO*.

Below Grade **Two** lies Grade I (Problems) and Grade Zero (Communications). And below that is Dianetics and at the bottom end of Dianetics is the Drug Handling.

Now how do you expect a fellow who has unhandled drugs (or omitted drug items because of "no interest") to even know (no Grade 0) that other people are around or that (Grade I) he is caved in with problems he's never cognited on?

And he's supposed to have enough responsibility to answer up on Grade II? With real overts and withholds?

This does not mean you must never Sec Check. It does mean that Sec Checks are no substitute for auditing or guarantee of innocence.

Grades are Grades and the Grade Chart sequence is correct.

SOLO SET-UPS

Set-ups for Solo are fully covered on HCO B 8 Jan 72R, Revised 8 July 74, Solo C/S Series 11R.

This will be included as part of Solo on the Grade Chart as it is a vital step.

Pcs won't make it on Solo if they aren't set up.

FULL LIST

Here's the full list of Grades showing where the various RDs now offered fit.

Group Processing – Not mandatory or a prerequisite.

Life Repair – As needed but not prerequisite for Drug RD. To get ruds in on Life.

Drug RD, means:

- TRs 0-4, 6-9 – Mandatory for a Druggie currently on Drugs, **flat**.
- Full C/S-1 – Where not done. To fully educate pc.

- Objectives – Full battery to full EPs per basic books and early HCO Bs on them.

- Class VIII Drug Handling – List and rehab all drugs, 3 way Recalls, Secondaries and Engrams of Taking and Giving Drugs.

- AESPs on each reading Drug – Listed separately and handled with R3R, each drug to full F/N assessment of Drug List.

- "No Interest" Drug Items – All reading ones run where they exist.

- Prior Assessment – AESPs listed separately and run R3R, prior to first drug or alcohol taken.

ARC S/W Expanded.

Dianetics, means:

- C/S 54 – Complete handling of Pc Assessment Form begun with Drug RD.

- Health Form – Fully handled to full F/N Assessment.

Expanded Grade 0 – As issued.

Expanded Grade I – As issued.

Expanded Grade II – As issued, including Integrity Processing.

Expanded Grade III – As issued.

Expanded Grade IV – As issued.

EX DN – Not mandatory except where pc is a low OCA, an R/Ser (2%, chronically ill or psycho. Means:

- Set-ups – Per HCO B 23 April 74, Ex Dn Series 22.

- Introspection RD – Where pc ill, introverted or in a psychotic break.

- R3R all E. Purps.

- OCA Left-hand Side Handling – As issued.

- OCA Right-hand Side Handling – As issued, with PTS RD as necessary.

Power Processing Grades V & VA – Only prerequisites are Drug RD and Grade IV.

Solo Grade VI, means:

- Solo Set-ups – Done at SH or AO per Solo C/S Series 11R.

- Solo Auditor's Course.

- Solo Audit Grade VI materials.

Clearing Course

OT I

OT II

OT III

OT VII Processes

OT III Expanded

OT IV

OT V

OT VI

Full OT VII Verification

OT VIII – When issued.

PROGRAMMING

The C/S Series, especially the early HCO Bs, numbers 1-13R, fully cover the use of the Grade Chart in programming.

The grade chart is the basic programme of a pc.

This datum has been neglected in some orgs, who have specialized in the new RDs developed since '71.

With refinement of repair and corrective actions and the release of new RDs, some may have forgotten that repair is only done to get off the overwhelm so that you can put the pc back on the Grade Chart.

SUMMARY

I thought I'd better fill you in on these changes and how the new Grade Chart lines up.

Make full use of this Chart with C/S Series programming tech in and your pcs will fly.

Here's to lots of case gain and rave success stories.

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Remimeo

DRUG DRYING OUT

It occasionally happens that someone is still on drugs when he or she requires drug processing.

This sets up a very rough problem.

Drugs prevent any case gain.

If the person is still on drugs, processing will have little effect. He will not cease to be a drug addict. The drugs trap him.

When the world went druggie (about 1960), this problem of drying out became one of the first order. It was not just a problem to us. All pre-Scientology efforts failed – and had been failing for all Man's history. But relatively small numbers had been involved. After 1960 the problem became planet-wide.

Our first organization to handle this was Los Angeles. They made the person cease to take drugs for 6 weeks, then audited the drugs out. Most of these cases stayed stable and thereafter had case gain and were no longer condemned to an eternity of disability.

However, some were unable to stop taking drugs.

What is called **Withdrawal Symptoms** set in. These are the body and mental reactions to no longer taking drugs. They are ghastly. No torturer ever set up anything worse.

The patient had this problem then:

    A. Stay on drugs and be trapped and suffering from here on out.

    B. Try to come off the drugs and be so agonizingly ill meanwhile that he couldn't stand it.

This was a dead if you do, dead if you don't sort of problem.

Medicine did not solve it adequately. Psychotherapy was impossible.

Two approaches now exist to this withdrawal problem.

    1. Light objective (look outward, take attention off body) processes ease the gradual withdrawal and make it possible.

    2. Nutritionist experiments indicate that vitamins assist the withdrawal.

Objective processes are covered elsewhere in this material.

VITAMIN THERAPY

According to world-renowned nutritionist Adelle Davis, vitamin therapy has had success in handling Withdrawal Symptoms.

Instead of just telling the person to break off drugs with all that suffering and danger of failure, the patient is given heavy doses of vitamins. The data is repeated here for information.

DRUG BOMB

ONE DOSE

- 1,000 mg of niacin amide *(not* nicotinic acid as it is severely toxic in such amounts). This for any mental disturbance.

- 500 milligrams of magnesium carbonate (to make the Vitamin C effective).

- 2,000 milligrams of Vitamin C.

- 25 milligrams of B6.

- 200 milligrams of B Complex.

- 100 milligrams of pantothenic acid.

ADMINISTRATION

The bomb is given four times a day, roughly every six hours.

It is given in a mild preparation that furnishes intestinal flora such as yoghurt.

Great caution must be used to give the dose in such a way that the vitamins will not corrode the stomach. If this is neglected the patient can be given a false duodenal (upper intestine) ulcer and will be unable to continue the treatment. Druggies are usually in terrible physical condition anyway. Thus all the above would have to be in "enteric coated" capsules, meaning an intestinal shielding must be on the pills so they gradually dissolve and don't hit the sensitive upper stomach hard enough to corrode it.

Thus milk with powdered amino acids in it would have to be given to wash the pills down.

In testing these recommendations stomach corrosion from the bomb was the main barrier noted.

If the bomb is given without any cushion the patient can (a) feel too full after eating (b) have a stomach ache (c) have a burning sensation (d) the exterior of the stomach can get sore. These are all stomach ulcer symptoms.

If such symptoms turn on, end off the vitamins. Aluminum hydroxide tablets chewed up and swallowed in milk each time the symptoms start will ease the stomach. Amino acids, intestinal flora and milk must then be given until the stomach gets better.

Shots, with a needle, especially of Vitamin C can be too painful. Not the needle, that's nothing; but the vitamin itself.

Such medication is in a crude state of research, mainly because of the violent hostility earlier exerted against vitamin people by the American Medical Association and other reactionaries to anything beneficial or new.

It is hoped that the stomach corrosion factor can be lessened by new preparations which do the same thing but less violently.

I am not particularly advocating the use of the Drug Bomb but as a pioneer in this area of research I feel that any data of value on the subject of drug withdrawal should be widely published.

The difficulties and agonies of withdrawal are the primary failure point in trying to salvage a being from the insanity of drugs.

SUMMARY

People who have been on drugs do not make case gain until the drugs are handled in processing.

Processing such as Dianetics is not effective when done on a person who is taking drugs.

Withdrawal from drugs sometimes sets up a violent physical reaction too painful or depressing to be continued and the person goes back on drugs.

Anyone on drugs or who has taken drugs is doomed as a being just like that. He or she will cave right on in and finish up in the ash can from here on out.

Only processing by Dianetics and Scientology can handle the effects of drugs fully. No other technology, medical or biochemical, has ever helped – we have thousands of cases to prove this completely.

The primary barrier to processing is getting the person off drugs and keeping him off until he can be fully audited. Then he will be very okay.

Two means to do this are known – A. Light objective processes while "drying out" and B. Nutritional therapy.

A and B can be combined.

Neither A nor B will fully handle drugs. The person on vitamins if not processed will relapse.

Vitamins are not drugs. They are nutrition. A person can be processed while on them.

By close application of these principles the person can be salvaged.

And having been salvaged can go on up to greater freedom and ability.

He won't make it otherwise by any other known technology.

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DRUGS

(Note: Drug taking has become very common
in the West, pushed by psychiatrists.)

It is possible to come off drugs without convulsions.

Drugs essentially are poisons. The degree they are taken determines the effect. A small amount gives a stimulant. A greater amount acts as a sedative. A larger amount acts as a poison and can kill one dead.

This is true of any drug. Each has a different amount. Caffeine is a drug. So Coffee is an example. 100 cups of coffee would probably kill a person. 10 cups would probably put him to sleep. 2 or 3 cups stimulates. This is a very common drug. It is not very harmful as it takes so much of it to have an effect so it is known as a stimulant.

Arsenic is known as a poison. Yet a tiny amount of arsenic is a stimulant, a good sized dose puts one to sleep and a few grains kills one dead.

But there are some drugs which have another factor. They directly affect the reactive bank. Marijuana (pot), peyote, morphine, heroin, etc. turn on the pictures one is stuck in. And they turn them on too hard to audit out.

LSD-25 is a psychiatric drug designed to make schizophrenics out of normal people. It is evidently widely distributed by psychiatrists. It looks like cube sugar and is easily made.

Drugs are considered valuable by addicts to the degree that they produce some "desirable effect".

But they are dangerous to those around because a person on drugs

(a) has blank periods

(b) has unrealities and delusions that remove him from PT

(c) is *very* hard to audit.

Thus a drug taker can be holding a boat alongside, go into one of his blanks, think he is on Venus and let go.

A drug taker left on watch may go blank and miss a menacing situation and not handle it because he is "somewhere else".

Giving an order to a drug taker can be grim as he may simply stand and stare at one. He ARC breaks anyone with it.

It takes about six weeks apparently for LSD to wear off. After that a person can be audited. But it ruins his case to a marked degree as it builds up ridges which don't as-is well.

A drug or alcohol *burns up* the Vitamin B1 in the system rapidly. This increased speed of burning up B1 adds to his "happy state". But now his system is out of B1 so he goes depressed.

To avoid convulsions take lots of B1 daily when coming off drugs.

And wait for six weeks before one is audited.

And then lay off. It's a pretty poor trick on those who are dependent on one and get let down.

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*(Corrected & reissued 10 June 1975
as contained a misprint in para 4)*

DRUG DATA

LSD-25 is a colourless, odourless, tasteless and virtually undetectable derivative of a rye mould called ergot. The use of sugar cubes as a medium was discontinued several years ago. Dosage is fantastically small, 50 to 1000 *micrograms* per dose, so capsules and tablets are used to reduce evaporation. Price varies from 3 to 7 dollars and it is only sold on the black market. Prior to 1964 the drug was administered by psychologists and psychiatrists. However, it is now illegal for them to do so. Despite its illegal status, LSD is very popular among teen-agers and college students. An entire sub-culture of psychedelic (mind-manifesting) posters, light shows, and electronic music has emerged on the West Coast. Most of the Pop music has hidden drug references. A recent survey indicated that over 50% of the students graduating from the Los Angeles City School System had tried either LSD or marijuana.

Marijuana is the most popular of the psychedelic drugs. One ounce may be readily purchased for $10 and will furnish 30-50 cigarettes or "joints". A smoker quickly progresses from the one ounce "lids" to purchasing a "brick" or "kilo". This is a kilogram (2.2 lbs) and sells for $75 to $150. Marijuana may be easily identified. It has a strong characteristic odour which is similar to fresh hay or wet, freshly cut grass. Smoking some tea leaves, rolled up into a cigarette will give you a good stable datum for identifying marijuana odour. Marijuana may be physically identified as a green or greenish brown tobacco with varying amounts of brown stems and small round seeds.

Hashish, like marijuana, comes from the female hemp plant, *Cannabis sativa.* When matured, the plant is hung upside down and resins collect which are dried into hashish. One gram of hashish sells for $10 and will supply 10 to 30 "hits" or periods of being "high". Hash-ish is brown, tan, or black and is usually kept in tin foil. Users of both hashish and marijuana will have bloodshot eyes while under the influence. Someone under LSD may be identified by very dilated pupils.

Peyote "buttons" are several inches in diameter and come from the peyote cactus of S.W. America. The pure *form of* the drug is a synthetic *(white) or natural (brown) powder* called *mescaline.* A beefed-up version of this drug was recently made available but was, as of June 1968, unnamed.

Another new drug is STP. This drug is much more powerful than even LSD. As of June 1968, STP was waning in use as people found its results too unpredictable.

One other drug worth mentioning is DMT. This drug is smoked or injected and has immediate effects which end in about an hour. It may be identified by an odour similar to moth balls and is either a white powder or soaked into a medium such as pot or tobacco.

Marijuana is basically a very mild drug which creates euphoria. Also it has the unpleasant consequence of distorting the senses of the user to the point that people on "trips" have been known to open the door of a car going 80 mph and step out "since they could walk faster".

The remaining psychedelic drugs are much more powerful and will strongly influence a pc.

It was found in L.A. that over a period of several months (4-6) every single income slump was traced to the accidental acceptance of one or more drug (LSD, etc) users into the Academy and/or HGC and traced as well to the spreading waves of chaos in attempts to handle their "disagreements" with the tech, demands for special handling and no case gain.

The "trips" that a drug user goes on tend to produce stuck points on the track with much fixation of attention on that area. Bad "trips" tend to act like Super Engrams collapsing the track at that point.

Users of drugs cannot as-is, do not get TA, nor do they have cognitions.

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DRUGS, MORE ABOUT

Reference: HCO B of 28 August 1968,
Issue II, "Drugs".

WITHDRAWAL SYMPTOMS

The most wretched part of coming off hard drugs is the reaction called "withdrawal symptoms". People go into convulsions.

These are so severe that the addict becomes very afraid of them and so remains on drugs. The reaction can also produce death.

In the reference HCO Bulletin above, B1 is mentioned as a means of easing convulsions.

Actually, practice since 1968 has shown that "Objective TRs", a Scientology process described in detail in HCOBs 11 June 1957, "Training and CCH Processes", 15 July 1971, C/S Series 48R, "Drug Handling" and BTB 25 Oct 1971R, Issue II, "The Special Drug Rundown", handle withdrawal symptoms when properly used. Great success has been achieved with them.

There is another supplementary way of handling withdrawal symptoms. This does not replace "Objective TRs" and at this writing is theoretical, being in a research phase. But so terrible can be withdrawal symptoms and so lacking in success has the medical and psychiatric field been, that the data should be released.

Muscular spasms are caused by lack of Calcium.

Nervous reactions are diminished by Magnesium.

Calcium does not go into solution in the body and is not utilized unless it is in an acid.

Magnesium is alkaline.

Working on this in 1973, for other uses than drug reactions, I found the means of getting Calcium into solution in the body, along with Magnesium so that the results of both could be achieved.

This was the "Cal-Mag Formula".

CAL-MAG FORMULA

1.   Put one level tablespoon of Calcium Gluconate in a normal sized glass.

2.   Add ½ level teaspoon of Magnesium Carbonate.

3.   Add 1 tablespoon of cider vinegar (at least 5% acidity).

4.   Stir it well.

5.   Add ½ glass of boiling water and stir until all the powder is dissolved and the liquid is clear. (If this doesn't occur it could be from poor grade or old Magnesium Carbonate.)

6.   Fill the remainder of glass with lukewarm or cold water and cover.

They will stay good for 2 days.

It can be made wrongly so that it does not dissolve. Variations from the above produce an unsuccessful mix that can taste pretty horrible.

Anything from 1 to 3 glasses of this a day, with or after meals, **replaces any tranquilizer**. It does not produce the drugged effects of tranquilizers (which are quite deadly).

The application to handle muscular spasms and tics is now quite well established.

Using this to combat withdrawal symptoms is experimental.

The theory is that withdrawal symptoms are muscular spasms.

The matter should be given tests where persons suffering from withdrawal symptoms are available.

This does not supplant "Objective TRs". These work.

But it may be that "Cal-Mag" would assist those suffering where no competent auditing is available.

As Calcium and Magnesium are minerals, not drugs, they form no barrier to auditing.

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DRUGS AND "INSANITY"

NON-COMPLIANCE AND ALTER-IS

I have been doing some research on drug cases and takers which has shed some interesting light on this and also insanity.

The basic equation is apparently:

When threatened with unmocking a thetan mocks up obsessively.

Actually the datum is a small bit from OT VIII data, being part of energy creation.

It applies too well at lower levels, however, to leave it in such a stratosphere.

It explains for instance why a pc, challenged by an "auditor" who is breaking the Auditor's Code, gets such a solid reaction in the reactive bank.

Threatened by an apparent effort to destroy him instead of letting him find the truth, the pc reacts by mocking up hard below his awareness level. This does not, of course, make him insane. It just sticks him a bit in the session.

Drugs (LSD, marijuana, alcohol, whatever) produce a threat to the body like any other poison. The threat is to the *body*. The thetan reacts by mocking up.

Of course what he mocks up is some engram, secondary or combination of fancy and fact. He can do this in some cases, so hard that it becomes more real (and safer) than present time.

Thus, under threat, he goes out of present time.

Now comes the next bit which is important as a new discovery:

His time track is not then being made up wholly of present time events. It is a composite of past track, imagination and present events.

Thus, right there before your eyes he, apparently in the same room as you are, doing the same things, is really only partially there and partially in some past events.

He *seems* to be there. Really he isn't "tracking" fully with present time.

What is going on to a rational observation is *not* what is going on to him.

Thus he does not duplicate statements made by another but tries to fit them into his composite reality. In order to fit them in, he has to alter them.

We therefore have the real basis of *alter-is*.

He may be *sure* he is helping one **repair** the floor but in actual fact he is hindering the actual operation in progress which really consists of **cleaning** the floor. So when he "helps one" mop the floor he introduces chaos into the activity. Since *he is* **repairing** the floor a request to "give me the mop" has to be reinterpreted as "hand me the hammer". But the mop handle is larger than a hammer handle so the bucket gets upset.

As a thetan can mock up an infinity of combinations, there would be an infinity of types of reactions to drugs. There would also be an infinity of types of insanity.

What is constant is that he is **not running in the same series of events** as others.

This can be slight, wherein the person is seen to make occasional mistakes. It can be as serious as total insanity where the events apparent to him are *completely* different than those apparent to anyone else. And it can be all grades in between.

It isn't that he doesn't know what's going on. It's that he perceives *something else* going on instead of the Present Time sequence of events.

Thus others appear to him to be stupid or unreasonable or insane. As *they* don't agree in their actions and orders with what he *plainly sees is* in progress "they" aren't sensible. Example: A group is moving furniture. To all but one they are simply moving furniture. This one perceives himself to be "moving geometric shapes into a cloud". Thus this one "makes mistakes" "alter-ises" "non-complies". As the group doesn't see inside him and only sees another like themselves, they can't figure out why he "balls things up so".

Such persons as drug takers and the insane are thus slightly or wholly on an apparently different time track of "present time" events.

A drug may be taken to drive a person out of an unbearable PT or out of consciousness altogether.

In some persons they do not afterwards return wholly to Present Time.

A thetan can also escape an unbearable PT by dropping into the past, even without drugs.

The penalty is running into obsessive mocking up to counter the threat of being unmocked.

The answer is to erase the engrams and reactive mechanisms.

As all this out-of-PT is unknowing, it is aberrative. Things one is doing that one knows one is doing are not aberrative.

The drug taker and the insane alike have not recovered present time, to a greater or lesser degree. Thus they think they are running on a different time track than they are, which, unknowingly and out of the past, they are, to a greater or lesser degree, mocking up.

These are the underlying facts in odd human behaviour.

ENTURBULATION

Thus we get an explanation of enturbulation as well.

As what is going on according to the perception and subjective reality of such a person is varied in greater or lesser degree from the objective reality of others, such a person enturbulates the actual environment.

What is really going on is not what is going on for them.

Orders, then, are not complied with, other things happen and people around such a person have their own consecutive events disrupted. This causes enturbulation.

The non-compliance, alter-is and upsets from a person who is out of present time

and (what is new about this) who is running on a different series of events than those going on for the rest cause general enturbulation.

This is why it takes two additional staff members to handle the routine goofs of such a person. They are forcing events to run more or less normally against the counter effort of a person with a delusory time track.

We have all known such a person, many more than one, so it is not uncommon in the current civilization. The sudden non sequitur remark, out of context. The blank stare when given an order or a remark – behind these lies a whole imaginary time track which we jar into and accidentally disrupt.

EXTERIORIZATION

In OT sections we sometimes hear of a person who is "exterior" and so can't be audited any more.

The symptoms of the person have not changed. So he still has aberrations.

The answer is to clear the word *exteriorization* with them. They often are exterior into a never-never non-extant universe. Or exterior in a past death.

When the word is cleared with them, they often don't really say what was going on. They experience a strange reaction and change.

If one then runs a bit of objective havingness, they come into present time.

This applies only to exteriorized cases who can't be audited because they are "exterior". And yet aren't all right casewise.

The usual course is to just handle the case by Standard Tech. They eventually come right.

DANGEROUS ENVIRONMENT

Anyone forced into a dangerous environment tends to either go fully into PT or retreat from PT.

The only ones who suffer from it afterwards are those who don't move on up the track as life goes on but stay there, retreated from a long gone present time or stuck in a moment of the past.

This is done, of course, because of pictures mocked up obsessively under the threat of unmock.

When you understand the condition you can't be fooled by it and think such people are there with you when they are not.

Auditing of course resolves this.

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DRUGS & TRIPPERS

Any case that won't run or won't rehab is probably a "tripper", meaning somebody who has taken drugs.

Standard practice for anyone who has ever taken drugs or even alcohol is to rehabilitate the moments of releases in these.

Drugs (or alcohol) give an enforced moment or period of release. It is surrounded in mass.

LSD, marijuana (pot, hashish), peyote, opium, ether (in operations), nitrous oxide (laughing gas in dental operations), weird "biochemical" compounds used by "psychiatrists", Benzedrine, solid alcohol (canned heat), alcohol, turpentine, gasoline, witch herbs of various kinds, and even certain rays, in this lifetime and on the back track, could have caused a moment of release.

Death does also but it's a bit steep to rehab.

In a rehab session, or before such a this lifetime one is audited on grades, the moments of release should be rehabbed.

The C/S directs this to be done before a rehab of ARC Straight Wire.

Such releases usually need rehabbing only once.

Tough rehabbing and probably all "Black Vs" probably trace to these chemical "releases".

They are deadly because they give the sensation of release while actually pulling in mass.

When "All black" reads on a GF one of these chemical release periods is probably in restim.

These "Chemical releases" give us a lot of trouble *unless* (a) detected and (b) rehabbed.

Such pcs often withhold the fact (non-acceptable or discreditable datum) quite madly and thus make detection difficult unless directly asked for on a hard to run case.

Such persons can also be a mess on III if the chemical period rehabs aren't done.

Delusory or dub-in cases also sometimes trace to chemical "releases".

Painkillers, tranquilizers or morphine can also be explored where no "drug taking" is traced.

All the above come under the heading of forceful exteriorization and can inhibit the act of exteriorization on V.

Such pcs are a bit blank, irresponsible or detached.

Each **type** of chemical which produced "release" must be rehabbed and it is best to count how many times released on each type.

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Dn Checksheet
Class VIII Chksht

DRUGS, ASPIRIN AND TRANQUILIZERS

I have just made a real breakthrough on the action of painkillers (known as aspirin, tranquilizers, hypnotics, soporifics).

It has never been known in chemistry or medicine exactly how or why these things worked. Such compositions are derived by accidental discoveries that "such and so depresses pain".

The effects of existing compounds are not uniform in result and often have very bad side effects.

As the *reason* they worked was unknown very little advance has been made in bio-chemistry. If the reason they worked were known and accepted possibly chemists could develop some actual ones which had minimal side effects.

We will leave the fact that this could be the medical biochemical discovery of the century and let the Nobel prizes continue to go to the inventors of nose-drops and new ways to kill and simply ourselves use it. Biochemical tech is not up to the point at this time that it can utilize it.

Pain or discomfort of a psychosomatic nature comes from Mental Image Pictures. These are created by the thetan or living beings and impinge or press against the body.

By actual clinical test, the actions of aspirin and other pain depressants are to

A. **Inhibit the ability of the thetan to create mental image pictures** and also

B. **To impede the electrical conductivity of nerve channels.**

Both of these facts have a vital effect on processing.

If you process someone who has lately been on drugs, including aspirin, you will not be able to run out the Dianetic engram chains properly because they are not being fully created.

If you process someone immediately after taking aspirin for instance, you probably will not be able to find or assess the somatics that need to be run out to handle the condition. For the next day after taking the aspirin or drug the mental image pictures may not be fully available.

In the case of chronic drug taking, the drugs must be wholly worn off and out of the system and the engrams of drug taking must be run out in their entirety, triple flow. If this is not done, auditing will be trying to handle chains that aren't being fully created by the thetan.

In the case of auditing someone who has taken drugs – aspirin, etc – within the last few hours or two or three days, the chains of engrams definitely will be found not fully created and therefore not available.

This would all be fine except for three things:

1. Auditing under these conditions is very difficult. The TA may be high and will not come down. One gets "erasures" at TA 4.0 with an "F/N". Auditing errors become easy to make. The bank (chains) is jammed.

2. The thetan is rendered **stupid**, blank, forgetful, delusive, irresponsible. A thetan gets into a "wooden" sort of state, unfeeling, insensitive, unable and definitely not trustworthy, a menace to his fellows actually.

3. When the drugs wear off or start to wear off the ability to create starts to return and **turns on somatics much harder**. One of the answers a person has for this is **more** drugs. To say nothing of heroin, there are, you know, aspirin addicts. The compulsion stems from a desire to get rid of the somatics and unwanted sensations again. There is also something of dramatization of the engrams already gotten from earlier drug taking. The being gets more and more wooden, requiring more and more quantity and more frequent use.

Sexually it is common for someone on drugs to be very stimulated at first. This is the "procreate before death" impulse as drugs are a poison. But after the original sexual "kicks" the stimulation of sexual sensation becomes harder and harder to achieve. The effort to achieve it becomes obsessive while it itself is less and less satisfying.

The cycle of drug restimulation of pictures (or creation in general) can be at first to increase creation and then eventually to inhibit it totally.

If one were working on this biochemically the least harmful pain depressant would be one that inhibited the creation of mental image pictures with minimal resulting "woodenness" or stupidity and which was body soluble so that it passed rapidly out of the nerves and system. There are no such biochemical preparations at this time.

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These tests and experiments tend to prove that the majority of pain and discomfort does come from mental image pictures and that these are immediately created.

Erasure of a mental image picture by Standard Dianetic processing removes the compulsion to create it.

Drugs chemically inhibit the creation but inhibit as well the erasure. When the drug has worn off the picture audited while it was in force can return.

The E-Meter Tone Arm under drugs or on a drug case can go very high – TA 4.0 TA 5.0. It can also be dropped to "dead thetan" (a false clear read).

Auditing a person on drugs can obtain an "erasure" and "F/N" at TA 4.0. But the erasure is only apparent and must be "rehabbed" (verified or redone) when the person is off drugs.

Any habitual drug taker applying for auditing while still on drugs should be given a six weeks "drying out" period, off drugs this whole time, and then the drug taking (by somatic or sensation of drugs or prior assessment to drugs – preferably both) must be run out as an early auditing action.

A person who has taken aspirin or other drugs within the past 24 hours or the past week, should be given a week to "dry out" before auditing of any kind is given.

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It is not fatal to audit over drugs. It is just difficult, the results may not be lasting and need to be verified afterwards.

Chronic drug takers who have not had drugs specifically handled may go back to drugs after auditing as they were too drugged during auditing to get rid of what was bothering them and which drove them to drugs.

With the enemies of various countries using widespread drug addiction as a defeatist mechanism, with painkillers so easily available and so ineffective, drugs is a serious auditing problem.

It can be handled. But when aspirin, that innocent seeming painkiller, can produce havoc in auditing if not detected, the subject needs care and knowledge.

The above data will keep the auditor clear of the pitfalls of this hazard.

To paraphrase an old quote, we used to have iron men and wooden ships. We now have a drug society and wooden citizens.

I've been studying this for over a year and a half and have made the breakthrough.

Drug companies would be advised to do better research.

And auditors are advised to ask any pc, "Have you been taking any drugs or aspirin?"

The medical aspect is an understandable wish to handle pain. Doctors should press for better drugs to do this that do not have such lamentable side effects. The formula of least harmfulness is above.

L. RON HUBBARD
Founder

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ANTIBIOTICS

A pc on antibiotics *should* be given Dianetic Auditing.

Very often antibiotics do not function unless the illness or injury is also audited.

The basic failures of antibiotics apparently stem from a traumatic condition which prevents the medical treatment from functioning.

When a person is medically treated for an illness, it is best to back up the action with auditing.

Sometimes the patient is too ill to be fully audited. It is difficult to audit someone who is running a temperature. In such a case, let the antibiotics bring the temperature down before auditing. But if the temperature does not come down, in the interest of the patient's recovery, auditing should be done.

It is usually too late when the patient is in a coma. But one can still reach a patient who is unconscious by touching the patient's hand to parts of the bed with "Feel that (object)".

A patient will sometimes respond to commands even when "unconscious" if you tell them to squeeze your hand to acknowledge they have done the command.

Years ago the auditing of unconscious persons was worked out and successfully done.

Needless to say, auditing any sick person requires the most exact, careful auditing, strictly by the Auditor's Code.

POSTOPERATIVE AUDITING

A person who has been operated on or medically or dentally treated or a mother who has just delivered a child should have the engram audited out *as soon as possible* by Dianetic R3R.

The after-effects of anaesthetics or the presence of drugs or antibiotics is to be neglected.

The usual action is to

1.   Get them medical treatment.

2.   Audit them as soon as possible on the illness or injury.

3.   Audit them again when they are well.

4.   Get them a Review if they seem to be showing much later after-effects despite Dianetic auditing.

Heavy doses of vitamin B1, B complex and C should accompany all such auditing actions.

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SAVING LIVES

All this comes under the heading of saving lives.

At the very least it saves slow recovery and bad after-effects and resultant psychosomatic illnesses.

Dianetics is the first development since the days of Rome that changes and improves the **rate of healing**.

Dianetics is also the first development that removes traumatic barriers from the path of healing.

Medicines and endocrine compounds quite often are effective in the presence of Dianetic auditing which were once inexplicably ineffective in many cases. The barrier to healing was the engram. With that removed, healing can occur.

OBJECTIONS TO USE

Any barriers or objections to using Dianetics to assist the effectiveness of medicine or to increase the rate of or even secure effective recovery place the patient at risk as certainly as failing to use antiseptics.

Such objections can be dismissed as stemming from barbaric or superstitious mentalities or from motives too base to be decent.

It would not be possible to count the number of lives Dianetics saved in the 19 years even before the advent of Standard Dianetics. Few human betterment activities have been so widely successful and so uniformly helpful as Dianetics.

L. RON HUBBARD
Founder

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Sthil Cl VII
 Course Students
Sthil Staff
Ethics HATS
Star-Rated Check

Qual & Tech Divs
All HATS

HCO Div
All HATS

PROCESSING

Since 1950 we have had an ironbound rule that we didn't leave pcs in trouble just to end a session.

For fifteen years we have always continued a session that found the pc in trouble and I myself have audited a pc for nine additional hours, all night long in fact, just to get the pc through.

Newer auditors, not trained in the stern school of running engrams, must learn this all over again.

It doesn't matter whether the auditor has had a policy on this or not – one would think that common decency would be enough – as to leave a pc in the middle of a secondary or an engram and just coolly end the session is pretty cruel. Some do it because they are startled or afraid and "Rabbit" (run away by ending the session). Auditors who end a process or change it when it has turned on a heavy somatic are likewise ignorant.

What turns it on will turn it off.

This is the oldest rule in auditing.

Of course people get into secondaries and engrams, go through misemotion and heavy somatics. This happens because things are running out. To end off a process or a session because of the clock is to ignore the real purpose of auditing.

The oldest rules we have are

(a) Get the pc through it.

(b) What turns it on will turn it off.

(c) The way out is the way through.

These now are expressed as **policy**. A falsified auditor's report is also subject to a Court of Ethics. Any auditor violating this policy letter is liable to an immediate Court of Ethics convened within 24 hours of the offence or as soon as is urgently possible.

Auditing at all levels works well when it is done by the book.

The purpose of Ethics is to open the way for and get in Tech. Then we can do our job.

There is no modern process that will not work when exactly applied.

Therefore in the eyes of Ethics all auditing failures are Ethics failures – PTS, Suppressive Persons as pcs, or non-compliance with tech for auditors.

And the first offence an auditor can commit is ceasing to audit when he is most needed by his pc.

Hence it is the first most important consideration of Ethics to prevent such occurrences.

Then we'll make happy pcs, Releases and Clears.

LRH:wmc.jh   L. RON HUBBARD

Remimeo
Dianetics Checksheet

AUDITOR TRUST

A pc tends to be able to confront to the degree that he or she feels safe.

If the pc is being audited in an auditing environment that is unsafe or prone to interruption his or her confront is greatly lowered and the result is a reduced ability to run locks, secondaries and engrams and to erase them.

If the auditor's TRs are rough and his manner uncertain or challenging, evaluative or invalidative, the pc's confront is reduced to zero or worse.

This comes from a very early set of laws *(Original Thesis)*:

- Auditor plus pc is greater than the bank,

- Auditor plus bank is greater than the pc,

- Pc minus auditor is less than the bank.

(By "bank" is meant the mental image picture collection of the pc. It comes from computer technology where all data is in a "bank".)

The difference between auditors is not that one has more data than another or more tricks. The difference is that one auditor will get better results than another due to his stricter adherence to procedure, better TRs, more confident manner, and closer observance of the Auditor's Code.

No "bedside manner" is required or sympathetic expression. It's just that an auditor who knows his procedures and has good TRs inspires more confidence. The pc doesn't have to put his attention on or cope with the auditor and feels safer and so can confront his bank better.

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CenOCon

All Levels

Q AND A

A great number of auditors Q and A.

This is because they have not understood what it is.

Nearly all their auditing failures stem not from using wrong processes but from Q and A.

Accordingly I have looked the matter over and re-defined Q and A.

The origin of the term comes from "changing when the pc changes". The basic answer to a question is, obviously, a question if one follows the duplication of the Comm formula completely. See Philadelphia Congress 1953 tapes where this was covered very fully. A later definition was "Questioning the pc's Answer". Another effort to overcome it and explain Q & A was the Anti-Q and A drill. But none of these reached home.

The new definition is this:

Q and A is a failure to complete a Cycle of Action on a Preclear.

A cycle of action is redefined as Start – Continue – Complete.

Thus an auditing comm cycle is a cycle of action. It starts with the auditor asking a question the preclear can understand, getting the preclear to answer it and acknowledging that answer.

A process cycle is selecting a process to be run on the preclear, running the Tone Arm action into it (if necessary) and running the Tone Arm action out of it.

A programme cycle is selecting an action to be performed, performing that action and completing it.

Thus you can see that an auditor who interrupts or changes an auditing comm cycle before it is complete is "Q and A-ing". This could be done by violating or preventing or not doing any part of the auditing cycle, i.e., ask the pc a question, get an answer to a different idea, ask the different idea, thus abandoning the original question.

An auditor who starts a process, just gets it going, gets a new idea because of pc cognition, takes up the cognition and abandons the original process is Q and A-ing.

A programme such as "Prepcheck this pc's family" is begun, and for any reason left incomplete to go chasing some new idea to Prepcheck, is a *Q and A*.

Unfinished cycles of action are all that louse up cases.

Since Time is a continuum, a failure to carry out a cycle of action (a continuum) hangs the pc up at that exact point.

If you don't believe it, prepcheck "Incomplete actions" on a pc! What Incomplete action has been suppressed? etc. cleaning the meter for real on every button. And you'd have a clear – or a pc that would behave that way on a meter.

Understand this and you'll be about ninety times as effective as an auditor.

"Don't Q and A!" means "Don't leave cycles of action incomplete on a pc."

The gains you hope to achieve on a pc are lost when you Q and A.

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Basic Theory Of CCHs

A lecture given on 5 July 1957

[Based on clearsound version and checked against the old reels. Omissions marked ">"]

[the following opening sentence is on the clearsound tape in place of the edited out material. We assume it was copied from another tape.]

\# Very good, thank you. Thank you.

[The reel begins with the following:]

> Thank you! You got a Congress here yet? > > Audience: YES! > > Well, good. Good. You got a Congress here. > > Audience: YES! > > Well, alright. And I just want to ask you this one question. Has it begun yet? > > Audience: YES! > > Alright. > > Today, we don't have very much to take up, so you can just relax about the > whole thing. There's no reason to keep your attention. You can sit there and > self-audit, that's probably much better. (laughter) There's hardly, really, > anything worth taking up today in Scientology, we have it all wrapped up and > there isn't much use straining at it, you know? I could talk to you a little > bit about these new things, these new improvements, I could say a word or two > about those, if you wanted me to. > > Audience: OK! (applause) > > You're gonna have to beg harder than that. (laughter, more applause) OK. > Today I did want to take up, then – if you've asked me to, I will – I did want to take up CCH and some of the various aspects of it.

> And sometime or another, between now and the end of Congress, I'd like to give > you a little group processing, providing you want it. You might not want it. > (applause) OK. Well, if that's the case, then, I have good news for the staff > of the, the FC staff, the "goon squad." And the auditors of the group > intensive will operate as the goon squad here at the Congress and everybody > else can get audited. OK? > > Audience: Sure. (applause) > > OK. >

Well, now, there's practically nothing you don't know already about this. The sober truth of the matter is, you DO know all there is to know about this. Otherwise, I couldn't tell you a thing about it at all. And the game here has been trying to find out what postulates you've made to get you in THIS much trouble. You've sure been busy! (laughter) Very few people will recognize the actual, the actual constitution – organization – of Scientology as being based entirely upon what life made up its mind to be. Somebody comes along and speaks to me about "my theories." Ha! It's always somebody who isn't taking very much ownership of their own. My theories. I'm glad I've added very few of my theories to this. There

were enough there already. Because, you remember, I had, I had a little experience in the field of fiction writing and, if I really wanted to add some theories onto this, we could get, we could get FANCY. (laughter) Yes sir. Yes sir. It's quite remarkable, though, that only those – those people who speak about "MY theories," you know, to me, they say to me, "Well, Ron, your theories about this and that" – you get them in a processing session and they don't move, you know? They're not right up there on top right away and so on.

Well, what, what coincidence is there here? What co-ordination is there between these two things? Well, one is that if an individual has assigned proper ownership to postulates, proper ownership to existence and to creations in existence, they are relatively weakened, they are not fixed concrete. The way you want to get something to be fixed concrete is very simple. I'll just give you a little example of this. You want me to give you an example?

Audience: Yes. Sure.

Alright.

Take that curtain there. Now let's, let's get the idea that John McCormick owns that curtain entirely, he is the sole proprietor. Can you look at it and get that idea? Hm? Well now, look at it and get that idea more thoroughly. Get a CONVICTION that this is the case. Now, sort of wonder what it's doing up here, since he owns it entirely. Well, by now, that curtain ought to either look more solid or rather peculiar. Alright. Now get the more proper idea that that curtain is simply part of the physical universe. Now, get what your earlier conviction was, that it's the property of the Shoreham Hotel.

Audience: Mm.. Mm-hm. Yeah.

Alright. Now get the idea that YOU own it exclusively. You're the ONLY person that owns it, the sole proprietor, and nobody else can have any use of it. It's right back there. OK.

Now, answer this. Is there any differences to the appearance of the curtain as you do those things?

Audience: Yes. Yes.

Do you have any difference of concept concerning the texture or solidity of the curtain?

Audience: Yes.

Well, the truth of the matter is, you can take an engram that you yourself made with your own little theta paws (laughter) – shaped it up, grooved it, put in all the bad perceptions – and you could say, "Mother did that!" The engram come, clunk! And you say, "Well, maybe that's not the right answer to it. Father had a hand in it, too." Clunk! Then we say, "It was really made by this universe and they're all against me," see? And then you can dramatize it, see?

Ownership. Unless one assigns the proper ownership to energy, masses, thoughts, postulates and so on – proper cause, in other words – he gets at the wrong end of the communication line. Unless he says, unless he says, to some degree, the truth, concerning the proprietor or the creator, unless he says this with some accuracy, why, he gets a very great deal of solid-

ity, which he can then do very little with. By assigning improper ownership to things, one then gets a continuation or perpetuation of the item or object. And the reason one does it is called havingness. This is one of the minor tricks that a thetan pulls in order to continue to have something to have, which he can't duplicate, so it'll give him trouble.

If you continued to blame Henry Ford for your automobile, or for the numbers of automobiles on the highways, actually, automobiles would get thinner to you. So, it's better to blame the police or somebody, see, and then, automobiles get thicker.

I'll give you an idea, I'll give you an idea of this. You say, "This is MY body. I have THIS body, and I am the one who HAS this body and I am the sole proprietor of this body, I created this body, I AM this body," all kinds of nonsense of this character, you see, and never give the family a break or the genetic line a hat-tip. See? One day, you're in an auditing session and somebody says, "Be three feet back of your head." They don't do that anymore, but you just get there – different. You're in an auditing session and the time comes when you should exteriorize and take a broader look at things. Concrete. Heavy. Mass. Can't get out of it. The body's THICK, heavy, solid, merely because you put into action this favorite trick of yours. To make solids, it's only necessary to misown. Of course, from the beginning, it wasn't your body, it isn't your body. Couple of people in the audience just that moment said, "Ehhhh! I've been found out!" They did, didn't they?

An interesting, interesting factor here. You assign exactly proper ownership to the body and insist on it and think that way, hard, fast and thoroughly, the body has a tendency to get rather thin, rather flimsy. The liability of knowing the truth could be a loss of havingness, unless the person has recovered from his obsession to have solids and possessions. If a person has a great deal of obsessiveness about solids, or if he's gone on the inversion, if he's dropped down a few scales and he no longer can have ANYTHING, somebody comes along and they hand him a ten-dollar bill and he'll say, "Oh, I couldn't have that. Couldn't have that."

A chap right here in the audience – a very fine fellow, to whom the London HASI owes a great deal – I am going to tell this story on him. He was out to dinner with a couple of London Scientologists, and he had been associating with the general public a lot and he had been playing this gag on the general public. He'd been taking out a five-pound note, patting it down in front of them and say, "That's yours." So, the general public, people out of it, would immediately say, "Oh. Mine? What for? You know, it's not mine, I mean, what are you giving me that for? I ..." So, he had these two Scientologists out to dinner, part of the London HASI, and he took two five-pound notes and he laid one down in front of each one and he says, "Those are yours." And they picked them up and put them in their pockets. (laughter)

> That's right, isn't it, Reg Sharpe? > You get, you see, these people, these people had gotten over the inversion that they, the idea that they couldn't have money.

Well now, just above that you get over the idea that you HAVE to have money. But money is a game, and it's barter and it makes carrying eggs around in your pockets unnecessary. And as a result, the whole society, apparently, moves and exchanges, and goods and havingnesses change position and place and so on. There's some sort of reward, it's a method of approval and all that sort of thing, so people tend to hang on to this. But they can get up to

a point where they don't have to have it and still use it. There are a lot of Scientologists in that position, who used to be in the position of give them a dime, "Oh-ho-ho you, what're you giving me that for, I mean, I couldn't have THAT!" That's for true. I am telling tales out of school, but they were running, running one of the people on staff on money one day, and they had him waste money and waste money and waste money, and do other things in order to improve his havingness and his ability to possess money, and they got him up to where he could have a nickel. (laughter)

It was very funny how, how a state of mind influences possessions such as money. Very, very, very remarkable. They're tremendous – I mean, an individual who can't have money seems, in some fashion, to reach over an invisible hand and unmock and sweep away any source of money, he just gets rid of it, he just won't let the money come anywhere near him. Nobody ever walks up out of a quiz show and says, "Well, here's the sixty-four thousand dollars for missing the question." They're going to start running a quiz show on that basis after a while, you see, that's, gonna have to do that because havingness on money is getting so poor, they now have an inflation. People won't take the stuff and it keeps piling up in the streets. No kidding, a society could get into that condition. Make sure that your havingness on money at that time isn't so obsessive that you keep putting it in wheelbarrows and carrying it around with you when it won't buy anything. Many people do that. Every once in a while they... It's always an old building, and it's always on Park Avenue in New York, and it's always a brother and a sister, and they've, they've starved to death in this old building, and then the police come in to remove the cadavers, the "corpse delicious," (laughter) and they dig into the mopboards or something of the sort, and they find out that they had 150 thousand dollars in cool coin, and yet they couldn't, couldn't BUY anything with it. Well, that's in a very obsessive condition.

These various conditions just vary from one to the other rather easily. Well, this is simply a subject of havingness, of havingness. And people put ownership vias in order to increase the perpetuity, the survival value and continuity of money. And if you put enough vias into the line, so that nobody can tell WHO made the stuff, why, the money tends to perpetuate. And if there's no vias in the line, why, it doesn't. Truth of the money, matter is, with money, is somebody, somebody runs something through a printing press and gives it to somebody, tells him he can spend it. I mean, that's all there is to money, it's rather simple.

Congress, Congress, under the Constitution, was the only organization that had the power to coin money. Fellow by the name of Alexander Hamilton – who served his country up to the time he no longer was part of the artillery in the Revolutionary War – he got to be an aide of Washington and then started to work for the New York bankers. I think that was an interesting switch. He introduced a system of banking here which is quite remarkable, and the government sometimes comes off of it, as in the days of Andy Jackson and other times. But the point is that this system of money, whereby somebody else had to be the author of the money than the US government in spite of what the Constitution says, was simply the introduction of a number of vias into the line so nobody could trace the ownership of money. And the government has bought this, they think this is a wonderful idea.

For instance, you can go right down on the Hill and ask senators, who should know better concerning coinage and issuance of currency and so on, and you say, "Well, now how about just printing three billion dollars and just passing it out in public works, and so forth?" "Oh, God! You couldn't do that," he'd say, "That's, that's printing-press money!" I'd like to know what ANY of it is. Printing-press money. The funny, funny part of it is, I suppose he thinks the money is enfranchised by the, some church out in the Middle West or something, I don't know, some right or power that has something to do with higher beings than senators. Truth of the matter is, when he says – that's pretty high – when he says "Yea" for a bill on the Senate floor that authorizes a further indebtedness for the United States, all he authorizes is for somebody in New York to write in a little black book the number of figures that he has – oh, two billion dollars or something like that – and then they send it down to Washington and Washington issues some bonds and then the bonds go back up to New York, and then New York sends it down to the Treasury Department, issues the two billion dollars in cash, and that's the way it's done. And so, there's nothing to it. It's better than a magic show, trying to find out where the money came from.

Once in a while, some nation gets foolish enough to borrow a central banking idea, whereby the government IS the bank, the government issues the money, and then they wonder why they get inflation, why people have very little faith in the money. All they have to do is put a few more vias in the line. Yeah, they could have a central bank very easily, providing the central bank was totally managed by the farmers in some other county, you see, and it was managed over there and it was their say-so that permitted the money to be created, but they had to consult with their wives and their wives had to consult with the Druids in a cave, and they just keep burying it off over here somewhere, you know, and tracing it down. All of a sudden, the money'd become more and more solid, more and more REAL to people.

You, we know that all you do to issue a dollar is simply to print it and issue it. That's the truth of the matter. Pushing it through several terminals, up to the point of its entrance into the public hands, has no bearing on, on the situation at all. The public thinks it does. They've misowned that dollar to a tremendous degree. For instance, there are people right here who thoroughly believe that the dollar bills, possibly, are issued by the Federal Reserve. There are people here who believe that their tens and twenties and so on are issued by the US Treasury. And yet, you look at your tens and twenties, and they, you'll find across the top of it there "Federal Reserve Note," issued by a private bank. It's quite amazing. There are silver certificates and silver notes. The government's getting more and more involved. They instinctively know the right answer, they know that all you have to do is put more vias on the line and you get more reality as far as substance and solid is concerned. In other words, the thing can't be unmocked.

And you mock something up over here and you say, "Joe mocked it up." You did it and then you say Joe did it and it would then continue. Why does it continue? Because to unmock it, it is necessary to conceive of its creation, and part of its creation is WHO created it, part of EVERY creation is who created it. And you have to get that idea of who created it at the time that you look at it, and it will simply go fffst. It's quite interesting. That's why shame, blame and regret are so interesting. Somebody's so ashamed of what he did, and you check up

with him and you find out that he, usually, is upset about things somebody else did. You have a whole philosophy in existence in this modern age which is quite interesting, is, that is, that is, if you take all the blame on yourself, if you did it all yourself, if you alone were totally responsible for everything that is wrong everyplace, and if you just own up and admit this, you'll feel a great relief.

Well, the funny part of it is, is you might have done a lot of it, but somebody else did, too. Always remember that when you're going over your shames, blames and regrets. Otherwise, the bank'll collapse on you. It'll get totally solid. Why? Well, you AREN'T guilty of everything that ever happened in this universe. You personally are not guilty. You're guilty for SOME of it – guilty of some of it but not all of it. And this philosophy, then, whereby YOU take the blame for EVERYTHING, is simply an effort to do what? It's simply an effort to have more solids, to make the things which you have unmockable – in other words, un-unmockable, I should say – fix them up so that nobody can trace where they came from, so there's no getting rid of them. They're THERE. And the idea of trying to put an object there by masking who created it, where it came from and so forth, is quite prevalent. But it only gets us into trouble when we run into shame, blame, regret, and we say, "Well, I'm responsible for it. I'm guilty," – by which we mean, "I'm guilty, I'm to blame. That's the way life is. Oh, look at all the horrible things I did," – when, as a matter of fact, nearly every crime of the body required somebody else. See that? There's usually two present. Maybe there was just you and your body, there's still two present.

It's very funny, you know, bodies have machinery laid into them from other times. It's quite interesting. You'll find some preclear wallowing around, one time or another, "Well, look what I have done to this body. Look at the horrible machinery and things I have set up." Then he wonders why it runs much faster and gets much more solid. Well, some thetan that had the thing on the genetic line way back when, has already installed a tremendous number of items. You didn't install everything that's wrong with your body.

Now, you can trace the moment when you decided to USE it, you can trace the moment when you decided to reactivate some of this machinery, you can trace the moment when you WANTED to have something wrong. But if you yourself try to trace the moment when YOU made up all the machinery and the gimmicks and what-nots in the body that would or are going wrong, boy, you're looking down a blind alley because you didn't make them all. But the idea that you DID will make those that are there, solid. Now, why do you do that? It's just this subject of havingness. Havingness is a sort of an A-number-1 game, it's one of these gorgeous games. Here is a thetan who is that thing that was looking at the cat yesterday and here, and here he is and there's a cat and there he is. Well, actually, by his own laws of communication, nobody else's, NOTHING cannot duplicate a SOMETHING. You have to be willing, to some degree, to BE a thing before you can SEE a thing.

A thetan can be what he can see, he can see what he can be. Don't take great pride in being able to notice tramps and don't think it's your social consciousness that won't let you look at beautiful girls. Sometimes, sometimes your wife has nothing to do with it at all. (laughter) Here's the, here's the situation. You often see some girl, some woman sneers at some gorgeous gown that's in some shop window, you know, and says, "Oh, that horrible rag!

Tzh! It's horrible. It's horrid." No duplication there. She is probably, to some degree, defending herself against the possibility that she will never be able to have a gown like that, you see, she has various ramifications concerning this. But once in a while, once in a while, she looks at somebody and, and once in a blue moon, says, "My, I wouldn't mind being that person." And as a matter of fact, the person becomes brighter and more visible. So, you have these two factors that associate themselves with solids. Being able to see something requires that you at least have some willingness to duplicate it or BE something like it. And then you get you here, nothing, looking at this mass over here, and you say, "I'm not unwilling to BE that mass," when you're all set, see, you can see it clearly. But, every once in a while, the mass comes up and hits some other mass that you're fond of and you say, "I don't like all that mass, that mass is treacherous." And you can get so bad that you could walk down the street and see this mass over here that you now consider treacherous, without seeing it at all. In other words, you could stare straight at it and not even notice it was present. Quite interesting, isn't it?

Objects very often disappear out of an auditing room. An individual's looking around the auditing room and he says, "I could have this in the room and I could have that in the room and I could have something else in the room," and the auditor wonders why he never has noticed a shotgun on the wall, or has never noticed a wastebasket, or has never noticed a desk ornament or has never noticed his OWN BODY, and sometimes, never notices the auditor. Well, you can be absolutely sure that these are masses which the person cannot BE.

Now, let's put these two things together. Let's do a little mental gymnastics here and get the idea of misowning solids. We get the idea that somebody else created what we created. You get the idea or that, see? Now, that makes it solid. Then we say, "I am now unwilling to perceive that. I don't want to perceive that because it's treacherous." We say that more in a roundabout fashion. We say, "I'm unwilling to BE that thing, I'm unwilling to have that thing continue to live, I'm unwilling to have that thing's existence in my vicinity." And we get these two things combined. The first time one said, "There it is and I want it solid." Then he found out it was dangerous and be didn't like it, so he walks over this way and he says, "I don't want that." He never bothers to undo the mental gymnastics by which he made it solid. We get an engram bank. The persistence of a bank is quite interesting, the persistence of, of masses, one kind or another.

He said, he first said, "Oh, these beautiful pictures, these gorgeous pictures of the world, these gorgeous pictures of, oh, battles and gorgeous pictures of crashes and lovely, lovely pictures of people being murdered," those, too – those, too, were beautiful, as well as the beautiful pictures of the temples and all that sort of thing. "Well, all these pictures are just gorgeous. Now, I'll get the idea..." and you put a machine over here that mocks up the pictures over here, that shows them to him here, so that he can say, "I wonder where they came FROM?" See? And, "This body is making pictures," or something of the sort. It's a very, very unusual thing. And then he gains experience. Experience is a synonym for "knowing better." Another synonym for experience, which is much more germane, is "not wanting to be or not wanting to perceive, again."

Well look, he's got a mechanism that says this must be solid, and now he has some experience and he says that sort of thing is bad and mustn't be solid. Now he's in trouble – just

as simply as this, he's in trouble. Why? He gets a mental image picture, gets a mental image picture of his fifth or sixth wife standing there looking pathetic, he can't get rid of it! He says, "Ffwttha." And you see men walking down the street, particularly in New York, talking to the air, you know? "Yap yap yap yap, gob-gob-ra-ra-arr, arr-arr-arr-arr, gob-gob yap-yap arr-arr-arr."

I had a fellow one time come into a white-arm restaurant there in New York. I was up there in the automats, up there on the second floor. This fellow raced up the stairs and he went and put two chairs up against a table, reserving two places, and went over and got his sandwiches or whatever that was, and brought them back on a tray and set his food down, and opened out both chairs and says, "You sit there." And he sat down and then got raving mad at this empty chair, argued and pounded on the table and growled and snarled. And there were a few people around, looked up, they minded the noise. Truth of the matter was, however, very simple, they were used to that sort of thing.

Well, this fellow was carrying a spook of some sort or another. That's a technical word, a spook. Every once in a while, you find a spook. Somebody right down there, second row, looked at me one day and he says, "What do you know!" he says, "We were running this thing, and there, right, standing there all the time, he had been there all the time, was my cousin." He'd been walking around with his cousin. Well, there's hardly anybody doesn't have a spook of one kind or another, and there's certainly nobody who doesn't have some sort of a persistent picture that he'd better not look at because he can't be that thing which, so therefore, must be invisible to him – you get the idea – which is totally solid. And this is about all that gets wrong with the mind.

When you say a specific experience is bad, let me assure you that ANY experience, according to a thetan, is better than NO experience. There isn't, probably, any such thing as an "immoral" experience, except by another consideration that something was immoral. You have to make ANOTHER consideration, you see? It isn't such a thing that there's no such thing as immorality. Oh yes, there is such a thing as immorality. People have considered certain things immoral and they decided that that was the way to go about it and these things must be prohibited, and everybody gets solid pictures of them – they BECOME them. (laughter)

Well, we get to this second stage now. There is one thing a thetan can do with something he doesn't want to look at. He can wear it. That's one solution, isn't it? Huh? Now, here's something funny. If you took a horrible looking dress and you put it up in the living room so that every time you entered the living room, or entered or left the house, you saw this dress there, and you'd say, "Boy, I got to ragbag that thing quick." But you wouldn't let yourself do so, see, it's just there, there's that dress. Every time you found yourself putting it away, put it back there again. The next thing you know, you say, "Well, it's not a bad dress." You put it on. At least you don't have to look at it when you're wearing it. (laughter)

I've seen people do this with clothes, but they certainly do this – it accounts for some of the fashions that come out of Princeton – I've certain-, I've seen people do this with physical objects. But they do as they do with physical objects, with mental objects. In other words,

anything a person will do with a physical object, he will also do with a mental object – and vice versa, because they're just objects. They are not a special kind of objects, they're simply an object. The only reason other people don't see your facsimiles is they are not that heavy, they're not that, they don't stop light that well. They stop light for you because you're the one that sheds the light on them.

Every once in a while you run into an auditor who can see other people's facsimiles. Every once in a while you really, he really CAN see other people's facsimiles. He's not seeing something he mocked up himself. It's very easy to get in somebody's head and take a look at the mental image pictures that are stuck. Rather simple. You or an auditor can quite often see things or sense things or perceive things or get a feeling about things that the person himself will not sense, feel, experience or see. Why? Because he's gone through this goofball thing I just showed you. He gets a machine over here which mocks up something over there which takes some pictures over here, and he gets something solid. See? Then he's over here and he says, "Boy, I don't want to be that. That's bad. That's bad." And he says, "Get out of here! Move. Unmock. Vanish." Now he says, "OK. At least I don't have to look at it." (laughter)

Well, in view of the fact he's NOT looking at it, we get this oddity that an auditor can do more for a preclear than the preclear can for himself, providing they don't both have the same aberrations. (laughter) You see how this works? Well, we get these stuck manifestations in the mind. Alright. We say, "Well, that's what's wrong with it. Now let's do something about it," see, that's very easy, "Now, oh, let's do something about it."

Dianetics. The only thing that is not in Book One Dianetics is havingness. There's some tiny reference to it, but it's just not there, and it's a terribly important subject. A thetan's desire to possess mass, any mass is better than no mass, he just wants mass, he wants having-ness, he wants possession. It's quite amazing. Now, what happens here? Auditor comes along, and with force and duress, wears this thing out this fellow had here, see? You'd think the thetan would have felt better, but he doesn't feel so good, because the other factor has come along – his havingness has been reduced. In spite of the fact that it was bad, he didn't want to see it, he couldn't observe it, he couldn't experience it, he really couldn't own it, one way or the other – its absence, nevertheless, profoundly affects him.

This is quite weird. Police social workers and so on, are always struck by this, this phenomenon. I think it's Oliver Twist, isn't it, where Bill Sikes had the dog that he kicked all over the place and so on, and I'm sure that the dog was very upset when Bill Sikes went to Tyburn or wherever he went. You know? Thing kicked him all the time, but he still had something there.

So somebody is always trying to solve this problem of separating a husband and a wife because they're both so unhappy together, and then they go spang! There they are, back together again, see? You say, "Well, he beats her and she nags him and between the two of them, they're going to ruin their lives." So you say, "Well, obviously the proper solution is that-a-way." So, we get it all fixed and they go that-a-way, and they're either very unhappy or they come this-a-way all over again. See that? That's merely havingness, the total explanation of it. The lack of mass, loss of mass and so on, is quite fundamental. In order to take a wife

away from a husband, you would have to at least give him a clothes dummy in return. And what do you know? He's liable to be satisfied with one, too. (laughter) That, that is about, that, that is one of the riddles. But it isn't really a riddle, it's simply a consideration that havingness is valuable and one should have havingness, and so on.

Actually, as one runs processes aimed at remedying havingness, a person gets over the idea that he has to have everything in sight without criteria. He gets over such ideas as greed, and he also gets over such ideas as "can't have." He gets over the idea that he can't have anything, and he gets over the idea that he's got to have everything. Quite interesting. He, he can get out of this. Unless he gets out of this havingness bracket – it's not bad, you understand, it's just something he has to get over if he's ever going to shift his attention very much. And so, he gets out of this havingness bracket, he can do all sorts of things, he can exteriorize, he can tolerate space, he can do various things that he couldn't do before.

The anatomy of a trap, of course, is an inability to have it but have to have it. A trap is better than no trap if a person has to have mass. You, this is the great, great wierdity. You wonder why criminals who have been in jail always go out and commit more crimes and go back to jail again. The police prefer to be very baffled about this. Well, there's nothing baffling about it at all. They moved in the havingness that close, they got him used to that much – you know, small mass, small confines, rather small space as a cell, and so on – they move the guy out of it and, to some degree, he feels unhappy about it. He steals something, he's trying to remedy his havingness already on a criminal basis – he can't really have something so he has to steal everything. And he'll, he'll do this sometimes, just to get back in jail. And he goes out and he leaves clues around so that Dick Crazy and the FBI and other people can go out and arrest him, bring him back, and give him that much havingness again.

In other words it's hard to keep thetans out of traps unless they have some fairly sane notion of possession. And their notions of possession, havingness, what they can perceive, what they should have solid – unless these things are fairly straight, well, the fellow is leading a very confusing existence. He doesn't quite know what the existence is all about. He, he hasn't a clue. Well, we look at, we look at the problems of mass, the problems of ownership, the problems of perception, and we find these things are very intimately connected. And the entrance point is quite interesting. The entrance point of havingness – and this, apparently, is WAY over the hills and far away from what I've just been saying – is control.

Now, let's get down to the basic factor of what makes things bad. Things are bad which exert an influence a person doesn't want. You got that, that's a bad thing. A bad thing exerts an influence a person doesn't want. Therefore, it is attempting, you might say, a control of the person. And when a person has this happen to him too much, when too many things attempt to influence him without his consent, then he gets into a state where he blurs out. He says, "Nothing must influence me." Well, because control is a two-way proposition, right hand in glove with it is, "I mustn't influence anything." We also get this phenomena where he says, "This object here mustn't influence anything," and then he moves over here and becomes the object – he also inherits the, the idea that it mustn't influence anything.

Control. Control. It's fortunate that that is the entrance point. Earlier, we had communication as an entrance point. Now, communication doesn't go as far south as control, because communication has to be as significant as control to have any reality on an unconscious person. In other words, to communicate with an unconscious person, it is necessary to add the additional significance of control, and also a communication line and also some mass. Communication all by itself is too simple. Somebody's lying there unconscious, we walk in, we say, "How are you, Daisy?" She wakes up, she says, "No, I'm not bad."

See, if communication worked, we could walk through a hospital ward very easily and simply open the doors and say... "How are you people?" wouldn't work, by the way. Communication is a, communication is a fairly individual thing. We'd have to say, "How are you?" and "How are you?" and "How are you?" and "How are you?" and "How are you?" and "How are you?" and theoretically, they'd all wake up and get well, and that'd be that. But you have to add the additional significance of control before they pay any attention to the communication. We have processes now which do this. Control, a solid communication line, communication, all added up together, will reach, evidently, almost any level of unconsciousness.

Now what, what, what advantage is there? Why should an auditor be worried about unconscious people? (laughter) Scientologists wake up rather easily. They're generally awake before they have anything to do with Scientology. It's quite remarkable that very few of them have any reality at all on the general state of Home Sap. It's quite remarkable. Most of them have always considered themselves a bit of an odd ball. That is almost a common denominator of a Scientologist. Up to the time he came into Scientology, he considered himself was just, just slightly an odd ball. (laughter) He'd look at things and he would see that they weren't quite right. And the other fellows around would take a look at them and they'd say, "Wehl, thes nothun wrong withat." (laughter)

The person, who was going to become a Scientologist someday, would say to himself, "Well, there must be something wrong with me." Well, there was something wrong with him. He was awake. Any person who has served a rather adventurous career has, sooner or later, in times of stress, had an occurrence happen to him where, sound asleep, he has acted and behaved as though he was wide awake, and then has suddenly awakened finding himself in action. You know, almost anybody that's been around has had some sort of an experience like this. You know? It, it could be as innocent of, as you were up all night at a party, and you have to get up and get everybody's breakfast in the morning and, and so you know that, you go to sleep and you know that. Next thing you know, you're standing over a stove making coffee! (laughter) And you say, "Hey! How'd I get here? I don't remember getting out of bed!" And yet, obviously, for some little time you were performing actions – Got that? – for some little time. You must have gotten up, gotten dressed, lighted the fire, put the coffee in the pot, to wake up, all of a sudden, with yourself standing over a stove with the coffee in the pot. You've had that happen, something like that. Don't have it happen to you when you're driving a car. (laughter)

I very often – oh, on an expedition one time, been about three days in a storm, four days, and I remember distinctly going below – and I was back on deck again! I'd evidently been acting all right because I woke up in mid-sentence of somebody else, somebody else

was talking to me and I woke up in the mid-sentence. And I, "What the hell am I doing here? I went below a couple of hours ago. I distinctly remember it!" Well, if you have any subjective reality at all upon such an experience, let me invite you to apply that experience to a great proportion of your fellow man. He hasn't awakened. He is walking around, going through all the proper mechanical actions, he's going through life, he goes to school, he studies his textbooks, he gets up, he goes to work, he thuh-thuh-thuh. And you'll see this, every once in a while, when you're auditing somebody. He, all of a sudden, will say, "Clonk! What am I doing HERE? Who am I?" (laughter) You woke him up.

What did it take to wake him up? Well, processing, processes. Therefore, for you to be able to process, individually or collectively, mankind as a whole, then you had to have the clue and the key as to how you processed an unconscious person, because that's mostly what you've got. You wonder, "Why do people tolerate this sort of thing?" They're not tolerating it. They're just there, you know? (laughter) And, back in the old days, when you thought of yourself as an odd ball and so forth, just, just reapply this thing. You're standing there and you were the only one present who was awake. And then you thought something was wrong with you? Yes, there was something wrong with you. You were awake. (laughter)

Now, havingness, havingness has a great deal to do with this. When a person loses too much too suddenly, he thinks he can't see at all, thinks he can't experience, and assumes, himself, this state that we call unconsciousness. And that is the one thing that is personally assumed. Actually, there is no such thing as a bank full of unconsciousness. When the stress gets too great, the individual says, "I can't have that thing which I misowned into solid. I am about to see it and my only defense is to see nothing," so, he goes clonk, unconscious. A thetan turns this on himself. You present, I'm sure that there are girls around that you could present them with a gold-plated Rolls-Royce or something, and they'd just go glong, just go out cold. Possible. It's just too much havingness, too fast. Well, this other manifestation is, any time an unwanted bit of havingness appears, any time something appears in the bank that they really shouldn't look at, they themselves shut down their attention. And that we call analytical attenuation, or anaten, or just plain dope-off or boil-off or other technical terms. (laughter)

Now here, here is this phenomenon. We have havingness versus unconsciousness. The havingness is mocked up on vias and misowned, and many times is no longer perceived because the person is unconscious toward that object. He hasn't really got an automatic mechanism which makes him unconscious. He just all of a sudden begins to know that's bad to look that way and he just, uuuuh. The only reason people go to sleep in the dark is because the dark is dangerous. Then they get on an inversion to it, they get on an inversion to it and they say, "It's so dangerous, I better keep prowling around in it," and they sleep all day. They get various odd ideas, strange ideas, concerning how alert and awake they ought to be, but the remedy for anything you don't want – and remember that it's better to have something than nothing – the remedy for that is to go unconscious and this mechanism is pretty well under the control of the thetan. And it's demonstrated by the fact that in an auditing session, when somebody goes unconscious, the best thing to do is to wake them up – just like it said in Book One.

Actually, there's a method of doing it.

> You were practising it here this morning. > And that is, you acknowledge them until they wake up. And an acknowledgement, all by itself, if it's good enough, will wake somebody up. It's very funny when you see them wake up. Sometimes, they'll wake up and then wish to God they hadn't and then go to sleep, and they're just... (laughter) Very amusing.

A thetan wants and has to have and really, basically, is unhappy unless he DOES have, and uses against this the defense of unconsciousness if he finds himself having at any time. Confusing, isn't it? An individual creates something and makes it perpetuate beyond his control, because he says, "I must have this, and I want it to go on forever." Then he says, "This thing is bad, and I mustn't perceive this, and I can't possibly be it," and so on. Therefore, he just shuts his mind, he shuts his eyes to it. He said, "This is no longer there," while it's standing in front of him. Until he can tolerate havingness, for its own sake, you can't expect anybody to wake up. So, in reality, the clue to consciousness, the clue to unconsciousness and the ways to resolve it, is totally in the field of havingness. And havingness gets bridged over to the person with the significances of control and communication. And if you can get control and communication between the person and havingnesses, you got it made. Person wakes up. He finds there WAS something to look at, he finds he COULD look at it and discovers, therefore, that it's possible for him to be awake though alive. (laughter)

This is, evidently, the basic mechanism of havingness, the basic contest in which we find a thetan involved, and the co-relation between havingness and consciousness is simply that a person becomes unconscious if he believes he cannot have. And so, we reverse the thing around the other way and we showed him that he CAN have and he therefore becomes willing to be conscious. We do not resolve unconsciousness, or the somnolent state in which the human race finds itself, by simply running unconsciousness because this mechanism is really never otherwise than under his control.

So, we have found the entrance point to a case and that is havingness, and we have found how to get it across to the person, and that is by control and communication – thus CCH. And this is the basic mechanism and theory of CCH.

Thank you.

[End of lecture]

RUNNING CCHs

A lecture given on
22 June 1961

I had a piece of interesting news today. The Explorers Club just awarded me Flag No. 163 for the Ocean Archaeological Expedition.

Some of you are wondering, "What's this expedition?" [laughter] Yeah, what's this expedition?

Well, it's a long story. But in 1950, a fellow name of Palmer walked into the Explorers Club just as I was leaving the mail room, and Palmer says to me, he says, "Hey, Ron," he says, "you want a – you want an expedition?"

And I said, "Well, sure."

And he said – he said, "Well," he says, "there's a whole bunch of Greek and Roman statuary that was being brought from Athens to Rome, and the ship went aground on the north side of the Dodecanese." And he says, "Been there ever since. And they've just located it at about thirty fathoms of water." And he says, "Nobody's having anything to do with it." He said, "We have permission from the Greek government, and so forth, to recall the thing.

"But," he said, "I was getting it all organized, and everything was going along fine," he said, "and all of a sudden the government of Ecuador" – he was in an awful rush – "the government of Ecuador has just grabbed all of us to explore the hinterland of Ecuador."

And that's always a very juicy activity when one of those South American governments tells you to explore the hinterland, because they pay you. [laughter] And that is almost unheard of. And they actually pay you by giving you a half a million square miles of head-hunter-ridden jungle or something of the sort.

But anyhow, anyhow, he was on his way and he was picking up a couple of fellows instantly. And as a matter of fact, they were walking into the club. And they had the spiked mustaches and looked very Ecuadorian, and they were seeing him to settle these affairs, and so forth.

Well, anyhow, this fellow threw all of his papers and so forth with regard to this expedition in my box at the club. And a few days later I was just about to put my hand in and recover them when May 9th occurred, 1950. That was an interesting day: it was publication day of *Dianetics: The Modern Science of Mental Health.*

I want to call something to your attention: this is eleven years later; there's eleven years more algae accumulated on this statuary. And I haven't had a breather. I haven't had a breather at all. It doesn't take very long. Doesn't mean I would be vastly absent for any length of time.

Actually, what you do is you take the sunny, stormless period of the year (which is not necessarily summer, as anyone in the West Indies will tell you), and, oh, you take a run down and get your feet wet and let the diver get his hose snagged on the coral, you know, and do what you got to do, survey it and lay it out. And next year you go back and push it around a little bit further. And then you happen to find out that Alexander the Great's Wall of Tyre is very interesting, you see? So you drop down and see what's happening there. And you accumulate various things.

We have now accumulated the Maritime Museum at Greenwich. It is now one of our boosters, and the museum at the United States Naval Academy at Annapolis is one of our boosters. And we're accumulating left and right. And actually the nephew of Round-the-World Slocum – you've heard him, around-the-world-single-handed-in-a-twenty-eight-foot-boat Slocum? Well, his nephew is a Royal Navy retired captain, so he has now joined the ship's company. This kind of thing starts snowballing, you see? And all you do is innocently lift your head and say, "I think I will go on an expedition", you see? And you've said it; you've said it.

Actually, it doesn't take very much time. You decide, you see, that an expedition is something that people disappear into small igloos for six months at a crack, or something like this. This isn't the way it goes at all. I call to your attention there are aircraft these days, and they put you in the area where your people have been working getting things ready. And put you in the area on a Tuesday, you see, and you can pull out from that area on a following Wednesday. And you can keep up with it pretty closely.

Anyway, we have a ship that's a 111-ton, twin-screw diesel schooner that I have rebuilt on paper, now, into an expeditionary vessel; arguing with the United States Coast Guard as to whether or not it's a scientific ship or a yacht, or whether it can remain to be a yacht and still be used as a scientific ship. And almost ready to throw up my hands and fly the Panamanian flag, if not the Jolly Roger. [laughter]

And I've just been sort of working on this in my spare time and – of which I have quite a bit, actually – and getting it together. Nothing very dramatic in the way of progress.

But we hit these dramatic points, because you have to be pretty well accredited or reputed in order to get accreditation on an expedition; they don't give that to everybody. So the Explorers Club hadn't written me and hadn't written me and hadn't written me; they had me right there on Wait on the Prehav Scale, you know? And I finally wrote them a letter and asked them if the letter was – my letter had been lost, or something of the sort, you know, or if I'd been taken out of the files or something.

And just today, why, they – their delay was explained. They had already put it before the Flag Committee and the board of directors and that sort of thing. So the expedition, as of that action, became an official scientific expedition: ocean archaeological survey with the purpose of discovering various periods of marine history in the past, as possibly represented on the floors of sunken harbors long since passed from the view of man where there are, of course, still ships.

And I don't guarantee that we won't stop by on some of the stuff sunk during World War II and pick up a few tommy guns. [laughter] But anyhow, an expedition of this character

does get a sort of a lonely activity, because people always are smelling the idea that you might bring up the crown jewels of Ophir, or something of the sort, and no telling what might happen.

Anyway, the wide blue horizon opened up and there it is, and I just thought I would tell you about it.

You ever see the Explorers Club flag? It – Oh, I've got it upside down, I sure have. There it is.

Audience: It's pretty. Very. Gorgeous. Yeah, it's quite good.

Yeah. Now, this flag is not in bad shape – not in bad shape. It was just carried by Waldo Schmitt in his expedition into the Belgian Congo just before the recent difficulties began. My old flag, as I was – I pinned it up there on the bulletin board for you to see – is reported to me to be in such a state of dishabille that it couldn't be issued to anybody else, [laughter] which is absolutely true. Hurricanes are only supposed to go about 100 miles an hour. But that particular flag was flying all through a hurricane that was blowing at 185 miles an hour at Anchorage. It was really rough. Yeah.

All right. Well, I probably used up tape there I shouldn't have used. But anyway, that's the tale about it. Thought you might be interested. I don't always have my attention on the hot brains – don't always. But actually, although I do other things, neither do I let them get in my road. All right. And I keep my job up – try to, anyway.

Now, understand that you're probably going through a number of catastrophes, you probably have run into some imponderables. And I wish to tell you somewhat amusedly that Johannesburg has found a new way of running the CCHs, which is you just sit there and pump somebody's hand for many hours, hoping there will be a reaction. That's pretty good.

I have a hint for that area: they should read a bulletin. [laughs]

Now, they've got one guy on a course that isn't progressing in spite of the fact that they have run him for hours and hours and hours and hours and hours on CCH 1 with no reaction. So Routine 1 "isn't working."

Oh, no! Yeah. That's right. Well, a three-hundred-word cable has just gone out. [laughter] We insulated the telex up here. Actually, the cable is pretty articulate, hardly gibbers at all! [laughter]

Now, I'd better cover the running of the CCHs just for fun, just for fun, just as an amusing activity that, of course, has no relationship to anybody that's ever going to make a mistake; particularly here.

And the way the CCHs are run is CCH 1, 2, 3, 4; 1, 2, 3, 4; 1, 2, 3, 4 – just like a waltz step. [laughter] You just continue them over and over and over and over and over and over and over and over and over and over and over. And it is a breach of the Auditor's Code, clause 13, to run a process longer than it is producing change; and it is a breach of the Auditor's Code, clause 13, to cease to run a process that is producing change. And nothing we are doing these days has exceeded the Auditor's Code in any way, shape or form.

The odd part of it is, the more we seem to change our minds, the more they remain the same, as far as what we're doing is concerned. People who accuse us, you see, of always changing our minds miss the point that we haven't changed very many fundamentals. But we've sure been looking for an opening in other people's minds, and CCH is one of them.

And the CCHs were basically pioneered, I see, back in about 1956. And that is the first way they were run, and that is the way they produce the maximum change. And after that, I didn't pay too much attention to them, and they slopped into very careless ways. And people started adding additives to them; that is the usual thing that happens. And people started to endure while running them, and it hadn't anything to do with the CCHs.

Hence I'm calling this back to your attention. Commands have been added to them, like "Put your hands back in your lap." Now, what that has to do with the CCHs, I'm sure I don't know, because I never heard of it until I picked it up on a sheet of paper not too long ago.

Somebody refined it and I okayed it carelessly and then forgot about it, and so forth. Truth of the matter is, the words in a CCH process have practically nothing to do with the process.

Now, I had a question on an auditor's report here the other day, as to whether or not you were really supposed to put the person's hand – or touch the person's wrist with your other hand. At least that's the way I interpreted the question. Well, how are you going to get the man's hand? It's a matter of seizure, as far as you're concerned; it doesn't matter whether he's hanging from a chandelier or anything else. You take his wrist delicately between your thumb and forefinger and put his paw in your paw, and you execute the auditing command for him. And you continue to do that. It's always the same repetitive motion; you always do it the same way.

And there are exact motions that you go through. I won't try to describe these verbally; I'd rather show you. They're very simple. For instance, when you're doing CCH 1, your knees are interlocked with the pc's knees. Try to get out of a chair when somebody has got your knees clamped. You see, you don't sit back across the room and so on. You do so much formal auditing that you've forgotten that there was an awful heavy routine regimen laid down here on these CCHs. They were quite precise.

Anyway, you're moved in practically into the pc's chest, and you've got at least one of his knees between your knees, and he starts anyplace, why, there he is. He isn't going to get up, not if you close your knees. And furthermore, you should be between him and the door Always. Your back's to the door; his face is toward it.

Now, he's got a wide perimeter to leap through to get to the door, but you're covering all of it. If you're suspicious of him, back him to the far corner of the room on a CCH 1; so therefore he has to walk through you to get to the door. And you don't lose pcs. I mean, they sit there and run CCH 1, that's all.

You do a certain routine with your hands, and you present the hand into your hand, and you don't shake it and wish him happy days and all that sort of... He has given you his

hand, and at that moment you put his hand back. See, you don't tell him "Now, put your hands back in your lap."

What was this – telepathic CCHs? Well, the CCHs are run with meat. They are very meaty protesses, you see? They're not a verbal "Let's all get along ..."

We had a student one time on one of the ACCs that was running CCH 2, and the pc was giving the auditor a very bad time, you see? But it was just a coaching session because they were doing Upper Indoc. And this pc was – acting as the pc, of course – was slumping and doing unexpected twists and turns. And this dear person who was running this TR, all of a sudden just abandoned the whole thing and turned around to her Instructor – I think it was Dick or Jan, and said, "Pcs never act that way; I'm simply not going to run that TR anymore."

Well, time went by, and she ran into one who did act that way, who acted much worse in an actual session. So all of your Upper Indoc was simply basic training by which you could then do the CCHs. But unless you'd done Upper Indoc, you see, and got your confrontingness up on this amount of motion, then it was difficult to do the CCHs.

Now, two of the CCHs are as rough as bear wrestling. Now, the other two CCHs are not. Nevertheless, they, too, are done by compulsion if necessary.

You can run one-handedly CCH 3 and CCH 4, and you run it one-handedly. That's an interesting aspect of it. You take the pc's hand and you make the pc's hand touch yours and follow the motion. That's all. And then you release his hand. I mean, that's as simple as that. It becomes a kind of a CCH 1 all over again, but it was with motion in a different pattern each time, don't you see? So if the pc is running fine, you run it two-handed and if the pc is not running fine, you run it one-handed. And that's all there is to it.

And Book Mimicry: He says he's not going to do Book Mimicry because when he was very young he got hit by a book. And you say, "That's fine," and you take the book and you put it through a motion, and then you put the book in his hands and you put it through the same motion. And then you take the book and put it through a motion, then put it in his hands and go through the same motion. You understand?

This pc never has an opportunity not to execute the auditing command, and that's all there is to it. And that's CCH 1, 2, 3, 4. The pc never has an opportunity not to execute the auditing command.

And the auditor who will let the pc get away with a non-execution of a CCH – oh, my. It just isn't done – not at all, not even in Chelsea. Not done. The pc *always* executes the auditing command, no matter if you have to sit on his or her chest and get it done! And you could fully expect the pc to turn up to high-C, high-G, soprano, contralto, or just get into a roaring funk or anything else. Who cares! It has nothing to do with your Tone 40ing through the CCHs. It is just that way. It is not nice; it is effective.

Now, the consequences of letting a pc get out of a CCH are very grave, and you only have to do it once and you will wish to God you never did it again.

I saw a pc let out of CCH 2 one day, and that pc went crazy. How do you like that? It was an institutional pc to begin with. And the pc was getting better under CCH 2 and all of a

sudden made a break for the door, and the auditor did not stop her. And she rushed out into the street. And the auditor walked along behind her trying to persuade her to do the process. And she walked all over the town and was eventually picked up by the cops and thrown into the local spinbin – where she had come from originally; I'm not trying to tell you that CCH 2 drove this person crazy. But do you know that pc didn't get all right for years? Now, the consequences of it are pretty fabulous.

That auditor just stood there and let the pc blow. You got the idea? He heard about it for years, too. Whenever he was getting out of line, why, we'd mention it to him, see? We'd say, "Well, at least you didn't let the pc blow out on the street", you know? And he'd cringe.

No, it's a serious thing. Now, all he had to have done was just to have blocked the pc's leaving. Yes, it was an institutional pc; yes, the girl had been in spinbins till you couldn't count; yes, she'd been electric shocked and all the rest of it. So what? All he needed to have done was simply to have stopped her going out the door and put her back through CCH 2, through the next command. And that psychosis was blowing and would have blown. We know by experience that this is quite common and quite ordinary.

The CCHs run out electric shocks; they run out surgery; they run out almost anything you can think of, if they are run right.

The darnedest physical manifestations turn on. And, of course, the CCH is not flat at its points of hugest volume of reaction. Your pc doesn't, oddly enough, sustain tremendously high-volume reaction, and you almost never see a pc screaming for twenty minutes so that you have to say that it's flat, don't you see, and go on to the next CCH. Almost never happens.

Neither do you necessarily wait till he stops screaming and then say it's flat. Has he stopped screaming for twenty minutes, you see? That would be the test.

But, of course, by rule now, what do we mean by flat? We mean the same aspect of the pc for twenty minutes, which by ne plus ultra, *reductio ad absurdum,* would be, if the pc were screaming at exactly C-sharp minor exactly, for twenty minutes, that is a no-change. So you'd go on to the next process. You got it?

If the pc is lying on the floor in a funk for twenty minutes, that process is flat. Have you got it? You're executing the auditing command, and the pc remains on the floor for twenty minutes, there's no aspect change of the pc, so that process, as far as you're concerned, is flat. Now, you got that?

Now, how slight a change is a change? A somatic enters and leaves in that twenty minutes. Well, that's not flat. You've got to run it for twenty minutes without the return of that somatic. You got it?

Now, most CCHs run rather calmly. Most of your CCHing is not done with this tremendous duress. About the only time that tremendous duress sets in is usually when the pc is going through something he considers quite painful.

Now, the CCHs turned it on and the CCHs will turn it off, and that is in the oldest rules of auditing: That what turns it on turns it off.

What do you think is going to happen? You've got a horrible, strong, beefy process of this character, and you've turned something on with it. Well, when is he going to get the CCHs run again? See, you didn't run it on through and turn it off. Well, that's a serious thing, you see? That's a blunder of magnitude.

But it's twenty minutes, and it's by the clock. It's not *about* twenty minutes; it's twenty minutes, by Greenwich meridian, navigational chronometer, sidereal time. Twenty minutes. And if there's no change of aspect in the pc for twenty minutes, then it's flat.

Well, what if the pc, during the whole of the run... nothing happens? Pc just offers his hand and he offers his hand and offers his hand and offers his hand. Well you ... Nobody said anything to – you ran it till you got a reaction!

Now, let me point out something: An E-Meter very often, on a level (and this will fool you sometime if you don't know about it, so know about it pretty well) – the E-Meter, assessed on a level, sometimes for the first three to five hours of run will be giving you the answer to a flat tone arm. A flat tone arm. It's giving you less than a quarter of a division of motion for the first three to five hours, in an extreme case. Less than a quarter of a division for twenty minutes is the signal to change to another process, isn't it? How can you call it flat when it hasn't yet begun to bite?

But there is some motion in the tone arm; there is *some* motion in the tone arm. Therefore, it is not flat at the beginning of an assessed level run in Routine 2. In Routine 2, it's moving an eighth of a division. It moves an eighth of a division, it almost reaches a quarter of a division, it moves a sixteenth a division, it moves an eighth a division, it moves almost a quarter of a division. You get the idea?

Well, those all say – according to the test – "process flat," because it's moving less than a quarter of a division. Look, how can a process be flat when it hasn't begun to run? It can't be. And you needed some subjective reality on this; you'll run into it soon enough, because it happens to people early in processing, particularly on a Routine 2. But it sometimes happens when you've assessed the goal and you're running on a Routine 3, too. All right.

Here's this little crea-eak, crea-eak, crea-eak, you know? And you say, "Well, by all the rules, it's moving less than a quarter-division in twenty minutes; therefore, I'll come off of it." And then you say, "Well, the pc was ungratefully spun." And the process has not yet begun to run.

Three to five hours, sometime in that period, all of a sudden it suddenly picks up and moves a quarter of a division. Now suddenly it moves a half a division. Now, all of a sudden it moves a division. And then it gets down and you say, "Well, thank goodness, it's coming on down now, and this level is flattening." And it's only moving about a third of a division, and pretty soon it'll move a quarter-division, and then it goes from 1.0 to 6.0 to 7.0 to 5.0 to 3.0 to 4.0 to 2.0, because when they do this, sooner or later they get hot, hot, hot!

Now, the only danger in overrunning a process, of course, is sticking the tone arm. And the only danger there is that you stick it for a couple of sessions, and you can't reassess. But you could stick it for a half an hour and still reassess. So if you're in doubt, while you're feeling your way over this, go ahead and stick it!

It's like I told Barry up at HGC London. He kept telling me, on this one pc, he said, "Well, it's just ... I just ... when will it ever get flat?" You know, it had picked up and had gone very slow, and he'd come off it and he'd reassessed another level in the same afternoon. And of course there I was, looking right down the telex wire at him.

And I said, "Ah-ah-ah-ah-ah-ah-ah-ah-ah-ah!" I said, "With a tone arm doing that little, the tone arm has not yet begun to move on that level. That tone arm will begin to move on that level. So let's get on the ball here." And he promptly and instantly went off of the second one he had assessed and went back to run the first one he had assessed. And much to his amazement, the first one really started to pick up and fly!

And then he finally wrote me in desperation, about six or seven hours of auditing later. He says, "When is this thing ever going to flatten?"

So I said, "All right now, Barry, you just run it to a stuck tone arm."

And he did; it took quite a while, but he ran it to a stuck tone arm, and then reassessed – stuck the tone arm for twenty minutes and learned how long you could run it and what it looks like.

In other words, this tone arm action, sometimes early in auditing, takes a long time to get going; and at no time can you consider that flat, because it's never run yet. It assessed, so if your assessment was good, it will run. And it may take three to five hours for it to start to run, and we've seen that quite consistently.

Now, that's just one level of the Prehav Scale. Now, let's apply this same thing to the CCHs. This is why I'm taking it up.

Now, your CCHs are run without Model Session and without an E-Meter. We care nothing about the E-Meter in running the CCHs because the pc is the E-Meter. Just as you've learned to watch the tone arm move, so must you learn in the CCHs to watch the pc move – the body reaction. It isn't what the pc says; it is what the pc is doing and is what is happening to the pc. Now, the pc may communicate to you that certain things are happening, and that's fine – that's a change. But the pc is the E-Meter.

You have to consider all four of the CCHs as one level of the Prehav Scale, in this wise, for this purpose: sometimes the CCHs do not begin to bite. So, what do you get? You get twenty minutes of CCH 1, followed by twenty minutes of CCH 2, followed by twenty minutes of CCH 3, followed by twenty minutes of CCH 4, followed by twenty minutes of CCH 1, followed by twenty minutes of CCH 2 and followed by 18 1/2 hours of CCH 3. You got that?

Just as it takes, on a normal level, a while for a tone arm to pick up and run, so does it also take a while on some cases for the CCHs to begin to run. But if you sit there and grind on just one CCH, this won't happen. And if you don't run the CCHs ...

The reason why the CCHs were trotted back out of mothballs, dusted off, the smell of camphor whisked off the top of them, and put back into the lineup, was because you had what happened in the CCHs: the person would run up against the withhold block. In other words, the person would accumulate more responsibility and become aware of more withholds, and

there was no way to get rid of them because the pc wasn't being talked to and no rudiments were being run. So the CCH game was limited by the fact he never had a chance to get his withholds off. Right?

So, in running the CCHs today, you are going to run a processing check – a standard HCO WW form. I repeat, no Security Check is permitted to be edited or altered, changed or added to, ah... period. If it doesn't say HCO WW Form something-or-other at the top of it, it isn't a Security Check. Okay?

And, of course, you don't use a staff member Security Check – that is to say, a new ... one of these new HCO WW Form 6s or something like that – as the repetitive Security Check for processing, or something like that. It means right what it says.

You run a Joburg. You take your most violent versions of Security Check, and you run them one for one. If the pc is an hour on the CCHs, the pc gets an hour of Security Check. You got it?

Now, if you're really booting somebody over the horizon and just really giving them the rocket in a mad way, swap their broomstick for a rocket: give them the CCHs from one auditor and a Joburg from another one. Perfectly feasible. Now, you can actually go ahead and assess for SOP Goals with a third auditor, all at the same time.

In the morning pc gets his CCHs, and in the afternoon he gets assessed for goals, and in the evening gets a Security Check run on him. How fast can you get a gain? Well, wait till you've tried that one – wait until you've tried that one and seen that one go, because, man, you get a gain. It's really inevitable.

But the CCHs are quite powerful, and they throw overts into view quite easily. And the person who is pegged down gets a little bit of auditing and all of a sudden these overts start to loom a little large, and they have to get rid of them.

Now, I don't want you to run into trouble and I don't want you to be abused in auditing, but I hope it happens to you at least once that you get a lot of wonderful auditing that gives you a beautiful case advance without a Security Check, and then suffer for two or three days, and it'll sure make a citizen out of you. Boy, that gives you a subjective reality, right there.

An auditing gain without a Security Check – an auditing gain with velocity, you understand, such as we're handing out now, without a Security Check to clean it up – and you've really handed somebody a bad time. They just practically start bleating, you know? "Why am I doing all these horrible things? My life is such a horrible mess. I have..." You know? They didn't think it was; they were in a wonderful state of fixed irresponsibility just a day before and then something got run on them, like Routine 1 or Routine – I mean, the CCHs or assessments on the general scale. And this was run and all of a sudden, there they are, off to the races.

And you let them improve and improve and improve and improve, and don't inquire into their private lives, because that wouldn't be nice. You'd practically kill them.

I don't wish you any hard luck, but there's nothing that makes a citizen out of you like having that happen to you. You get miserable!

So the CCHs are highly functional as long as they can produce a change in the pc. And the change in the pc is ordinarily stopped by the fact that the pc can't get off his overts. And he's to become more responsible by running the CCHs, and then can't get off his overts and so, bang! – that parks his progress on the CCHs.

Now, how many ways could you park progress on the CCHs? One, you could fail to run Tone 40 auditing. You could go at it in some old crummy way, you know? You got so used, in the Academy, to putting it into the ashtray that you keep putting the intention in the ashtray throughout the auditing session, you see? Be pretty wild.

You run it sort of permissively. You say, "We shouldn't be mean to the preclear," and we just sit back and we don't really press it home. And the pc says, "Well, I'm tired today. And I really don't feel ... I really think this CCH 1 is pretty flat now, and I'm very tired today, and so forth, and I'd rather it wouldn't ... weren't run. I'd rather you'd go on to CCH 4. I think that was the one I was interested in."

Go on to CCH 4, you've had it. Here we go, because you violated C. The first C is control, the next C is communication and the H is havingness. Control, communication and havingness, or communication, control and havingness. Either way, because you apply control, you get communication; and if you apply control and get communication, havingness will result. If you communicate with somebody you can apply control, which will give you havingness. Whichever way this adds up, the end result is havingness.

Now, irresponsibility can deny havingness. Irresponsibility, then, is pulled off of a case by the Security Check, which results in havingness. All O/W results in havingness. So Routine 1, whether looked at from above, below, plan view, or projected, gives you havingness. And the final net run of it is havingness. Routine 2, all the prehavingness buttons, are the things that prevent people from having. Prehavingness might as well mean "prevent havingness" buttons. But we don't call it that because somebody would say the scale was designed to prevent havingness. And by that overt, of course, they prevent themselves from having any gain.

Anyhow, prehavingness, and the end result of patching up somebody's various buttons on the Prehav Scale is to give him havingness. And when the individual has enormous numbers of unrealized goals all over the track, the net result of all of these all up and down the track was to deny him havingness because he never attained the goals. So that when you do a Goals Assessment – just the assessment – the end product of it is havingness. And you've got three havingness routines. Now, all three routines – you have in these routines the inherent fact that you run O/W on a preclear and he gets havingness.

Now, why does he get havingness? Because the individual individuates from things because he can't have them. And therefore he develops overts only on those things he can't have. And when you get the overts off, he can then have.

Here's one of the tests: If you can't get the havingness of the Havingness and Confront Process to work, did you know that all you had to do was run some O/W and you will achieve the same thing?

Supposing we did this weird one: We had him ... This is just taking it straight from theory, you see? I don't say it's workable or anything else, but it's just theoretical. You look around and you say, "Well, notice that cupboard." And you say, "Well, have you ever done anything to a cupboard? Have you ever withheld anything from a cupboard?" And he recalls one. You say, "Good. Look at that floor; notice that floor. Now, have you ever done anything to a floor? Have you ever withheld anything from a floor? Oh, you have. All right. That's good. Now, notice that fireplace. Have you ever done anything to the fireplace – a fireplace? Have you ever withheld anything from *a* fireplace? Oh, you have. That's dandy. Very good."

You didn't force him, you see, to have actually done something to fireplaces, and so on, because some of these will draw blanks. He says, "No," that's right; you say, "We'll go on to the next one."

And all of a sudden that room will become the most fantastically real room he ever was in. You just – theoretically, that would be the normal outcome of it. You got it? You give him the environment.

But of course you have shorthanded ways of doing this with all of those thirty-six Havingness Processes that you run on a pc objectively in the room. They all more or less do just this. You see?

So your routines are all devoted to increasing the pc's havingness. And they are devoted to – Routine 1, applying control so as to get him into communication so that he can have; Routine 2, getting out of the road the fixed reactive buttons which prevent him from having things; Routine 3, getting out of the road all of these unrealized goals, each one of which has been a defeat for him at some time or another – any goal – all of which goals had as their end product havingness. You can't help but raise his havingness.

Now, running right along with this you run O/W and get off all of his withholds which are preventing him from having. See, he gets the impulse – he can now have, but he'd better not have because he's done bad things, and if he had these things he would ruin them. And therefore, if you don't get this out of the road, you've left him stuck with the idea that he now could have these things but he'd better not, and he's never noticed before now. And it becomes quite painful to him. He says shame, blame, regret, guilt – oh, he says all kinds of things, but that's what it results in. You got it?

So everything you are doing in auditing at the present moment has the end product of havingness. And, of course, if you could have the whole ruddy universe, I assure you it wouldn't be the least trouble to you, not the least bit of trouble. It's only those things you can't have you have trouble with.

Next time you have a PT problem, look it over – look it over. And just ponder this: "How many things are involved with this problem? All right. What blocks off my having *of* these things or people?" You'll see a problem blow up.

You see, individuation: individuation from the thing, from the object, from the universe, from the dynamic is what brings about the trouble, because you get into an obsessive games condition. And an obsessive games condition simply adds up to the fact that you can't have *it*; and it, of course, by your determination, can't have anything to do with you.

Had a fellow around one time who had a games condition going with fire. And my Lord, that fellow burned up couches and suits and fire just pursued him everyplace. He could stand in the middle of a street without a bit of fuel anywhere in view and have a roaring bonfire almost consume him. [laughter] And he was in this terrific games condition with regard to fire.

Now, if you'd improved his havingness in general, sooner or later along the road you would have hit the reactive button "fire", see? What has he done with and to fire? In some way he's made it discreditable, in some way he has made it guilty, in some way he's become irresponsible for fire.

All of a sudden, fire no longer has this obsessive chasing effect. Fire just doesn't pursue him up and down all the boulevards and through his whole life, you see? Because fire isn't pursuing him anyhow: he simply cannot have fire, he cannot control fire, and he can't communicate with fire. Soon as he gets into that condition, wow, he's had it. Because no matter where fire will occur, he has to retreat from fire and pull it in on him. See, he's part of the same universe this fire's in, only he hadn't noticed that.

All right. Now, the CCHs, then, are no different than the other two routines. Where an individual is having any difficulty whatsoever with their physiological beingness, where the individual has been obsessively abused, particularly in this physiological beingness that they find themselves in at the moment, the CCHs knock out individuation from the physical beingness. That physical beingness – individuation has been caused by duress on the part of the preclear toward his body and by, apparently, his body toward him.

He's having difficulty: he can't get in his head, he can't come near the body, he can't do this, he can't do that, and therefore, the body is giving him somatics and he's having trouble with the body. You've got the natural concatenation: he's just individuated, that's all. He's one thing and the body's another thing and he can't have it.

And of course the CCHs attack this one particularly, right on the button. It isn't necessarily the criteria for running CCHs, but it's its most immediate and direct result.

So you take somebody that's been given electric shocks. Of course, this has individuated him from the body, because of his own giving the body electric shocks of one kind or another. Well, what happens to this fellow? You start running the CCHs and his havingness on a body starts rising, inevitably. So he has to become aware of all these electric shocks. So as soon as he becomes aware of them, they start running out.

All right. But as soon as they start running out, if he himself takes no further mental step to find out what he's done to bodies and get rid of his overts against bodies, he's left with the somatics running out – but they stop running out – and his overts against the body in full bloom. Pow! This hurts.

So you've got to improve a pc's responsibility if you're going to improve his having-ness, because he won't permit himself to have unless he can be responsible for having. And that's the other philosophic button on which this rests, which we've known for a very long time. Now, you got this?

So the way you run the CCHs is directly, immediately and so on, precisely, and you pay very little attention to the pc's mental reactions. All you do is give him a demonstration that that body he's sitting in can be controlled; as soon as he sits in on this one and says, "You know, somebody's controlling this body. Heh-heh. Somebody's controlling this body. Maybe I can." And so he'll try.

Now, if you let him get up to a point where the body flies out of control and you say to him, "Well, that's all right. That's giving you some trouble. You want to rush out in the street and not come to session and so forth? Well, go ahead" – mmmm, you've shown him the body *can't* be controlled, haven't you? And he retrogresses like mad. So you mustn't do that to him, because it's a direct reversal to what you're trying to do.

You're trying to show him that his body can be controlled; a failure to execute the CCHs show immediately and directly the body *can't* be controlled. Of course the body wins.

Now, all you'd have to do if you're going to ruin somebody – I can tell you how to ruin somebody – is start the CCHs and if the guy says, "Oh, I'm tired of this silly process, 'Give me that hand.' What are we doing? Getting in practice to join the Elks?"

And you say, "Well, if you're tired of it, then we just will go off onto something else."

All right. And we go off onto CCH 2 and we march him up and down the room, and eventually he suddenly throws us off a little bit and says, "You know, this is getting awfully annoying to me."

And you say, "Well, all right. We'll go on to something else. Now, let's sit down here in the chair, and now, you put your hands up there ..."

"Well, I don't know that I want to!"

"Well, all right. Then here's this book. All right. Here's this book and ..."

Fellow says, "I never read books. I don't like books. Don't want anything to do with books."

You say well, there's nothing you can do about it, and you go and see the Instructor, the senior auditor, or call somebody long distance, or send them cables from Johannesburg, you know? [laughs] And you say... you say, "Well, we have this pc who we can't make any progress with, with these CCHs."

Now, do you know that you can take Routine 2 and Routine 3 and do – I'm being very hard on Johannesburg. Actually, Johannesburg is snapping out of it, and I'm very happy to notice it. I have noticed it. It was sure in the basement for a while.

But, anyhow, if you were to do the same thing with any auditing activity, and let the pc get out of control at each and every turn of the road, you of course are giving them the side

effect of proving it to him that his aberrations are so strong that they cannot be controlled. And don't be too puzzled if the pc eventually becomes practically unauditable.

Don't be too surprised, if you fail to exert heavy auditing control during a session, if the pc starts getting mad at you, chopping you up, doing this, doing that, doing the other thing; because by not controlling him, by taking his advice all the time, by asking him, "How do you run this process, anyway?" by doing this and doing that, you have shown him that you are not controlling him in the session. And showing him that you are not controlling him in the session, of course, results in the *model* of "no control" taking over and he himself is defeated because he sees that he cannot control his mind, he cannot control his body, he cannot control. That's true of any auditing process.

That might give you a new shading on this idea of control. Whereas you would look on it very bad – I've mentioned this to you just the other day. I was auditing a pc, actually on a think process, and the pc said, "Oh, I've had enough of that," and *leaped* madly out of the chair from a very, very calm demeanor, and actually said "I've had enough of that" while springing through the air like an impala. And was springing straight to the door, and in mid-flight I simply grabbed her by the wrist, turned her around in mid-flight and brought her back sitting down in the chair – its legs almost spraddled out into a total splash, you see? – and gave the next auditing command. And that pc began to run like a doll. Nothing to it, man. And we had that process flat just in *no* time.

And you say, "God, that's awfully harsh!" No, I wasn't being harsh to the pc; I was being rather decent about it. If I'd been mad at the pc, all I would have had to have done was not reach out and grab her wrist, let her reach the door, and then not audit her. Oh, pow. She's had it. She's had it! She'd go around now in the total belief, "Well, if Ron can't control this much aberration and so forth, it's uncontrollable," don't you see? And *"Zzooh!* What can poor little me do about it?" You know, some kind of a stupid rationalization like this, you know, to herself. She'd go off hiding from herself in corners.

All right. So she did have a black-and-blue addendum. That was an awful lot better than having a black-and-blue psyche.

And if you for a moment think you're being anything but ornery when you fail to control a pc in session, get rid of the idea. Don't get this kindness all mixed up. I saw I didn't get through to you too good the other day on the subject of kindness, but that's right on the button now. By misguided kindness, you let the pc take control of the session; by misguided kindness, you let the pc off from finishing off the somatic; by misguided kindness you consult endlessly with the pc to make sure that he isn't displeased with what we are doing; and out of that misguided kindness, you practically drive somebody to the bottom of a well.

Be the most vicious thing you could do to a pc is to fail to control him.

The factor is so strong that even if the pc is right in his advices, you had better not take it, because he will suffer more from having been run rightly but out of control, than wrongly in control. Now, do I make myself clear?

Just the fact that the pc has said, "But this has been flat for days!" And you were just that moment going to open your mouth and say, "You know, I think this level has been flat

for days!" You were just about to say this. But the fact that he says it, that's enough, man. You have no choice but to run it. Why? Because his announcement of the fact throws him out of control. And it is more serious to let a pc out of control in session than it is to run the wrong process or to overrun a process. That can't louse him up, but letting him go out of control can practically kill him.

So if you ever want to err, don't err on the side of sweetness and light, man; err on the side of the heavy-handed parent; err on the side of the lion tamer; err on the side of the machine gunner. Keep the Auditor's Code, but keep control. And if you do that, your pcs will never do anything but recover, because the hidden factor of the CCHs are present in whatever you're running, even though you're doing formal auditing.

"Well, is it all right with you if I end this process?"

And he says, "No, it certainly is not!"

And you say, "What objection do you have?"

And he says, *"Sa-rowr, rowr-rowr, rowr-rowr."*

And you say, "All right. Okay. Thank you very much. Now, I'll give you two more auditing commands and end this process."

"Oh, God! What are you doing to me?"

And you say, "Have you ever shot the moon? Thank you. Have you ever shot the moon? Thank you. Is there anything you'd care to say before I end this process?"

And you know, about that time, if you've done the job right, he'll say, "No, as a matter of fact I don't have."

You say, "Good. End of process."

What happened to the ARC break you knew was going to occur? It wasn't that he was knuckled under and overwhelmed – that was not what happened. You say, "What do you know? This outburst is easily controlled. Look, pc controlled it."

Pc's controlled it. "Not only did the auditor control it, I controlled it, too. Heh-heh. What do you know? *Tooh!* Nothing to it." Got the idea?

All right. Wrong – wrong way: "Well, is it all right with you if I ask you two more times and end this process?"

"No, my God, I will say it isn't! I've got a somatic eight feet thick, and why don't you ever pay any attention to your auditing, and what is the matter with you anyway?"

"Well, how wide is this somatic? Okay. All right. Well, we'll carry on the process a little while longer then, and see if you get rid of it."

"Well, you'd better."

Fifteen minutes more auditing and you've got a real roaring ARC break. What's the ARC break over? You did what the guy said! You tried to flatten this terrible somatic; you were being nice about the whole thing; you were being reasonable about the whole thing. Well, the test is, did the somatic get better? No, as a matter of fact, it will always get worse.

Always. It's better to end the process wrongly on the auditor's determination, than to end it on the pc's rightly. Remember that. Of course, it's a happy chance that you end it rightly on the auditor's determination. [laughter]

Give you a new viewpoint of this sort of thing?

Audience: Yes.

Yeah.

Now, the auditor is running the session, and if the pc starts running the session, expect trouble – expect trouble, man. It's not a kind thing to do; it's a rotten, mean, dirty, nasty thing to do to a pc. It's almost covert hostility to do that to a pc.

Pc says, "Oh, God, you're not gonna ... you're ... you're actually ... no, my God! You're not going to run any more 'failed can't'!" [laughter]

And the auditor says ... My normal response to such a thing is "What's the matter?"

And he says, *"Yow, yow, yow, yow, yow!* And *yow, yow, yow, yow, yow."*

You say, "No kidding! All right. The auditing command is, 'What have you failed to can't?' 'Who has failed to can't you?' " And he'll all of a sudden – he's suddenly good as gold. He says, "Well, it *(kmpf-kmpf)* wasn't flat. Process wasn't flat."

The pc can steer a session wrong on me by being too informative of actually what is the exact situation, because he opens a gate there that you can't let him go through. And he says, "Well, this 'failed can't' has been flat for the last session. I know it." And you were just about to open your mouth and say, "This 'failed can't' has been flat for the last session, I'm sure."

And he says, "This 'failed can't' has been..." *Whooh.* Well, here goes a half an hour of "failed can't".

In the first place, I wouldn't believe it was flat if he was protesting against it. And the other thing, even if it was flat, it would do him more harm to let him start running the session than it would be to overrun a process or underrun one. You got that? It would do him more harm.

Now, many people have trouble ending sessions, and that's because they keep consulting the pc as to "what's the state of the pc," so as to determine when the session should end. And I'll tell you a good test sometime, is the next time a pc says to you that the session shouldn't end, or he has something undone, or he feels very bad about it, or he hasn't made his goals, why, that's just dandy; just nicely, firmly and pleasantly end the session – and find no ARC break. And you'll say, "What happened to the ARC break that we knew was coming?" It didn't materialize.

No, what happened to it was, this is an effort of a breakout, an effort at a continuance, and you come along behind the thing and you say, "You see? It wasn't necessary to continue it."

And he says, "It wasn't necessary to continue it."

So the next time you have trouble ending a session... This, by the way – a new auditor on an HGC almost always, has this difficulty. They say to the old-timers, "How could you possibly get your sessions ended by 6 – 3:30? How can you end a session by 3:30?" And the new auditor is staggering out of the auditing room, you see, at 6:45.

Well, that's a sure indicator that the new auditor does not have his pc in control, because he's said to the pc, "Now, how do you feel now? How do you feel about the process we've been running, and so forth? How's your general health?"

And the pc says, "Well, it's pretty bad, actually. My aunt Methuselah matildaed the other day, and it's pretty bad." And the new auditor would say, "Well, the poor fellow. Why, we ... the best ... the best thing for him to do is to carry on here and get this matildaing out of the way." And so he does that, and then he'll find something else, and he'll find something else and it goes on and on and on. And the pc as-ises less and less, and makes less and less progress, and is slowed down more and more, and the auditor's getting into more and more trouble, and he wonders, "What on earth is happening to me?"

Whew. The only thing that's happening is, is back there at 3:30 with the tone arm moving – it could have been, you see, as bad as this: The tone arm was moving on a rock slam – the tone arm was rock slamming, you see, not the needle. And 3:30 was about to come around, and he just had time to get in his end rudiments before he reached 3:30, and he said, "All right. Is it all right with you if I give you two more commands and end this process?"

"All right with me? My God, I'm just getting going!"

You say, "All right. Thank you very much." Give him two more commands.

"Is there anything you'd care to say before I end this process?"

"Well, there certainly is. My God, I never saw such horrible bad auditing, and you're doing me in," and so forth.

And you say, "Good. End of process." And then you run your end rudiments. "Now, is there any ARC breaks?" And you expect immediately that you're going to get your head taken off, before you get used to this kind of thing, you know? And you're sitting there all ready for the meter to blow up. Ah, there's a little twitch.

And you say, "What was that?"

"Well," he says, "you didn't end the ... you ended it. You ended the process, and I don't know if I can ever get back into it or not."

"All right", you say. "Well, is it all right with you if we take that up tomorrow?" And you say, "Okay. Now, do you have any ARC breaks?" And there is none. And you say, "All right. And here we go", you see, and run off the end rudiments and that's it. The pc goes out whistling and everything's fine, dandy.

But the new auditor, the new auditor at 6:35, you see, streaked with sweat and coal dust, comes staggering out of the auditing room, you know, and he says to the others, he said (who have now assembled for an evening briefing session or something of the sort), "How do you people do it? You must be terribly cruel. You must just *chop* the pc off in the middle of nothing, you know, and you just must be thinking about yourselves and nobody else, and ... "

They say, "Well, I don't know, we end it, and it never seems to do any harm." And that's the correct way to go about it, that's all. You run the session.

Now, that's very, very observable in the CCHs, but, of course, it carries over into the remainder of auditing. In the CCHs it is so observable that if you *let* the pc start running the auditing session, he will practically *spin*, and in the others he just has an ARC break.

You want to know what an ARC break is? Sometime or another the pc went out of session and you lost control of the pc. And it sometimes takes as much as an hour to an hour and a half for that ARC break to materialize in the physical universe. That is so true that when I get a pc who is ARC breaking (which doesn't happen very often, because I do this other one), I say to them, "What happened a half an hour ago?"

"Half an hour ago? Oh, a half an hour ago. I'm not interested in a half an hour ago. It's what's happening right now. I mean, I'm ... after all, I feel these bayonets in my chest and so forth, here."

"No, what happened a half an hour ago?"

"Oh, I remembered a half an hour ago, I – yeah, that's right. There was something there. I ... I remember about a half an hour ago I'd forgotten to phone my wife at noon and she's probably furious with me." There was your ARC break; didn't have anything to do with what you were doing in auditing.

Now you, not understanding what ARC breaks are, or how to take ARC breaks apart, find your auditing apparently under criticism all the time from the pc, and then you try to put your finger on what it is that you are doing wrong in your auditing so as to set it right. And the truth of the matter is, the only thing you're doing wrong in your auditing is not being pig-bullheaded. And a half an hour after you have broken down and relinquished control of the session, you get an ARC break and get all this criticism from the pc of your auditing. And that happens an hour and a half to a half an hour after you have committed the "fox pass"[1]. And you let them "foxes" through and you've had it. [laughter]

And that's what occurs. You got it now?

Audience: Yes. Hm-hm.

Try sometime to be overbearingly, stupidly domineering about a session. Just try it sometime, just for the hell of it! Have the pc make a perfectly reasonable suggestion, such as "Could I have a break so that I can go to the bathroom?" and look at him as though he has suddenly stolen the crown jewels, see? And say, "Well, we'll get a break in an hour or so", and note the peculiar lack of an ARC break.

And then sometime have a pc say this to you, "Well, actually, I don't quite feel up to running the process at the moment." And you say, "Well, we'll do something else," and watch the ARC break materialize in an hour and a half to a half an hour.

You see? And because it's an hour and a half to a half an hour afterwards in most cases, you don't associate cause and effect, because it's such prior cause that you haven't no-

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[1] Editor's note: pun with "faux pas"

ticed where you lost control of the session. But the best way to patch up an ARC break is to find out where you lost control of the session and reassert control of the session, not Q-and-A with the ARC break! Now, there's a real way to patch them up.

So you're very graduate in the way of auditors, and you ought to learn that one, and you ought someday, just for the hell of it, just to find out that it's true – as you're auditing, just be pigheaded about something sometime or other, just utter pigheaded. Pick out one of the cartoons they used to draw of the German army back in World War I, you know, and put it on.

And the pc has made a perfectly reasonable request. The pc has said, "Can we end the session by 4:30, because I have a date with a millineuse[2]?"

And ...look at him pityingly, you know, and just disregard it utterly. Just make as if – pointedly – he'd never said a word. You're going to be charitable; you're going to disregard this terrible thing he has obviously done.

Now, to your way of thinking, that would cause an ARC break. No, the way the ARC break is caused, you must also do this one – do this other one, see?

Sometimes a pc says, "Oh, I don't know if... I ... you ... God ... God almighty! I ... I don't ... I don't have to run this. You say you found a present time problem on that meter. Well, look, I'm so tired of having all of my auditing time wasted on present time problems! Can't we just skip the present time problem for once?"

Go ahead. Skip it. Just knuckleheadedly skip it, pleasantly, and just say, "Well, all right. Well, if you don't want to run it, we won't run it. Okay. Now, let's take up the next one here." And watch it start to arrive. You can actually measure it on your clock. The maximum time you will have to wait is one and one-half hours of auditing, but somewhere – certainly, certainly within an hour and a half, and in certainly not less than a half an hour, you're going to have an ARC break on your hands.

"Your fingernails are dirty. Your fingernails are dirty. You know, you really ought to get some training at the local Academy, because if you ran your confronting a bit better, I'm sure I could make some progress or something. Do you realize that you have crossed your legs?" Any kind of an ARC break you can think of that has nothing to do with the price of fish. No, it was right back there.

And you say, "Well, naturally. We had a present time problem. That's making him edgy." No, that is not what happened. You let the pc run his own bank for a moment and showed him that you were an incompetent, weak schnook. [laughter] And showed him that his bank was not controllable, and you've proved this to him conclusively that his bank was not controllable, so what materialized? The simplest thing in the world materialized: the bank, having been demonstrated to be uncontrollable, of course becomes uncontrollable. And you get what is commonly called an ARC break.

And auditors who have constant, continual ARC breaks with pcs can be rated just exactly this: no control of pc. Pc says, "I am schnooking today", and the auditor says, "You poor

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[2] Editor's note: probably meant as female form of milliner.

fellow, so therefore we're not going to schnook." You know, he says, "It's schnooking. Naturally, we'll avoid schnooking then. We won't get into that nasty field.", or the pc says, "I keep hearing these violins in my ears", and that sort of thing. And the auditor is sitting down there just to do one thing, which is to run an assessed level of the Prehav Scale – get the rudiments in order to run a level of the Prehav Scale. And the pc knows very well what's going to happen. And he says, "Violins in my ears", you know, "all the time!" and so forth.

And the auditor says, "Well, is this a present time problem with you?"

And he says, "It certainly is."

And the auditor just goes right on down the line and gets the rest of what he ought to do and runs the assessment, and we don't hear anything more about it. And the violins turn off because they were part of the level.

But, this one: The auditor says, "Oooh, violins. Well, we'll have to do something about violins. Now, what trouble have you had with violins in your life?" and just throws the session away. And you've got an ARC breaky pc from that point right straight on. You got it?

Learn that one well. Because it's the difference – no matter what tricks you learn, that one that I've just been talking about, which is very much in keeping with the CCHs, that one is the difference between auditing and no auditing. You've got a black and white: auditing or no auditing. Auditing, the auditor's in control of the session with a capital C and a capital T. Got it? All right. Auditing takes place. Auditor not in control of session, reactivity takes place, because there's nobody now in control of the session, so there couldn't be any auditing.

And the easiest way in the world to get rid of auditing is to delete control from an auditing session. Then the auditor isn't controlling the session, the pc can't control the auditing session, the reactive mind damn well won't control the auditing session, so where is the auditing?

Actually, a lot of your feeling about auditing, or some of your flinches that you occasionally get about auditing, simply stems from times when you have not controlled an auditing session; and only then did you come under heavy criticism from the reactivity of the pc. Only then.

The only thing that could ever be criticized about any of you as an auditor is that you do not control a session heavily enough.

So take your cue from the CCHs and control the rest of auditing the same way, and the results which you get will be five to ten times as fast as they are right now. You want to know how to speed up auditing results? Just try it. Okay?

Audience: Thank you. Hm-hm.

Righto. Said my piece.

Thank you very much.

Franchise

CCHs

PURPOSE

A long time ago – in 1949 – while doing research in Dianetics, I experienced considerable trouble in getting some pcs "up to present time".

As you know, a pc can get "stuck in the past", and if you can get a pc *out* of his engrams and reactive mind (his perpetuated past) he becomes aware of the present. He or she is unaware of the present to the degree that shock or injury has caused an arrest in time.

After running an engram, we used to tell the pc to "Come to present time" and the pc would, ordinarily, but sometimes no.

By telling the pc to examine the room, the return to present time could be accomplished on many.

I observed that a common denominator of all aberration was interiorization into the past and unawareness of the present time environment.

Over the years, I developed what became the CCHs.

Control, In-Communication-With, and Havingness of Present Time became feasible through certain drills of Control, Communication and Havingness, using the present time environment.

This is the purpose of the CCH drills – getting the pc out of the past and into present time. Any drill which did this would be a CCH drill, even "Come Up to Present Time!" as a single command.

The pc is stuck not just in engrams but in past identities. In fact the pc out of present time *is being* the past.

The pc can be made to see he is being the past and that there is a present.

Thus when the pc "has a somatic" and you ask the pc what it was, you get him or her to differentiate between self and past by looking. A being who *is* something, cannot observe it. A being who looks at something, ceases to be it. A pc can even *be a* somatic!

Hence the CCHs must be run with a non-forbidding present time, with queries about somatics and changes.

It's all as simple as that, basically. That's why they work – they get the pc to Present Time. But only if they are run right. Only if they invite the pc to progress.

Run wrong, the CCHs can actually drive a pc *out* of present time or park him or her in the session.

Do you see, now?

L. RON HUBBARD

LRH:jw.cden

Remimeo

DRUGS AND OBJECTIVE PROCESSES

DRUGS AND THE BACKTRACK

There was a discovery about a decade ago that drug withdrawal symptoms could be eased by objective processes. Such processes as the CCHs, 8-C, remedies of havingness and even TRs were found to aid a person in coming off drugs and became part of standard routines to accomplish this.

In 1973 another observation was made, that the current civilization seemed to be regressing. "Regression" means a "return to earlier or more infantile behavior patterns". Men's shoe styles had become little boy shoe styles; the most popular women singers were singing lullabies; cars were being treated like toys and abused rather than maintained. More recently it was observed that life attitudes had become less responsible, that "playing" took a higher value, that productivity was declining steeply, that people seemed to require more and more care by the state - and all of these things seemed to indicate that people were getting stuck at or going back to childhood or infancy.

There is another observation: people taking drugs tend to go backtrack. Sometimes, when seeking to get a druggie to run engrams, he will balk and adversely react; apparently he has already hit the backtrack while on "trips" and it terrified him.

On such evidences one could construct a theory that drugs tend to throw people out of present time and park them on the backtrack. Experiments of the late forties did show that certain drugs and gases did throw people backtrack and into en- grams. The "visions" that turn on under the influence of such a drug as peyote or when inhaling volcanic gases are probably simply the restimulation of backtrack. (It should be noted in passing that inducing engrams with drugs and gases in the hope of running them out does **not** work - one only runs them **in**.) So it can workably be assumed that drugs do throw people out of present time.

OBJECTIVE PROCESSES

The thing that characterizes OBJECTIVE processes is that they bring about interaction between the individual and the existing physical universe. This is different than SUBJECTIVE processes in that these interact between the individual and his past or himself.

Objective processes do several things: they remedy havingness, they locate the person in his environment, they establish direct communication with the auditor and, last but not least, they bring a person to present time.

"Present time" is a very important factor in mental and spiritual sanity and ability. A human being can be stuck in literally thousands of different past moments. His behavior and attitudes are influenced by such past incidents and experiences. As a matter of fact a person can be totally regressed and can be in an incident of the past to the entire exclusion of present time.

As an example, if you were to walk through an insane asylum and say, to each patient you met, "Come up to present time", as an authoritative command, you would get a small percentage of complete recoveries. In one instance when this was done, those on whom this had been done gotr up in "group session" that night and volunteered how glad they were to be here. What would have happened is that the person would have come out of his past track incident or incidents and would have moved up to present time and sanity. While this process is not a "sure cure" for all insane, it does demonstrate the point. Those on whom it did not work can be supposed to have been just too mired down in their backtrack.

Drugs, of course, do not only regress a person. They do other things. And amongst these is a communication dulling. This is best observed when drugs are seen to reduce pain. This is simply a communication shut off. Drugs can also temporarily restimulate (before they ruin them) body glands and produce momentary feelings of well being. Part of this is probably a communication shut off from the bank. Drugs can also speed up the burning of reserves of vitamins; alcohol probably burns up rapidly all reserves of Vitamin B1; other drugs also burn up all available niacin and C. This speeded burn up can also bring about a temporary feeling of well being. But when the reserves are gone, the delusions called delirium tremens (D.T.s) and withdrawal symptoms are nightmares indeed. But this again is simply the bank caving in on someone and he is now parked back on the track, not only with the nightmare but with the incidents in the past which caused them.

CONCLUSION

Objective processes, properly chosen and run, bring the person gradually more and more into present time.

As the process is orienting the person in the present time of the physical universe and as this present time is not threatening, he has a time point and a location point from which to sort out his confusions. His attention has been pulled out of his bank and has been placed on the physical universe around him.

Because it is the backtrack that is causing his aberration, putting his attention on the physical universe tends to de-aberrate him.

Because it is the backtrack that is causing his aberration, putting his attention on the physical universe tends to de-aberrate him. The backtrack contains mass and taking his atten-

tion off of this backtrack mass tends to lose it for him. But the masses around him in the physical universe substitute for the track mass and he receives a remedy of havingness.

Objective processes are not in themselves a total answer; a certain amount of subjective processes must be run to remove the reasons he is being called back into the past. Vitamin, mineral and nutrition reserves must also be replaced or the body also pulls him in and affects him.

This tells you as well why "MEST work" and exercise have a de-aberrating effect upon a person. They are a sort of objective process in themselves even though they do not replace objectives.

Objectives also by-pass misunderstood words and significances. This makes them runnable with a minimum of word clearing and error.

Having an idea of why objective processes work assists one in applying them. One can see the person change masses, become located, and above that coma bit by bit more and more into present time.

It is not that the physical universe itself is therapeutic. It is that it provides a single reference point including time, location and mass.

Without objectives, no being is likely to recover in his infinity of future.

L. RON HUBBARD
Founder

LRH:bk

Remimeo
All Students
St Hill Courses
All staff

CCHs

(Replaces HCO Bulletin of July 5th, 1963, "CCHs Rewritten")

As per HCO Pol Ltr May 17th, 65, the CCHs are processes. They are *not* drills. The following revised rundown on the CCHs is to be used by all Auditors.

CONTROL – COMMUNICATION – HAVINGNESS PROCESSES

The following rundown of CCH 1, 2, 3 and 4 has been slightly amended. CCHs are run as follows:

CCH l to a flat point then CCH 2 to a flat point then CCH 3 to a flat point then CCH 4 to a flat point then CCH I to a flat point, etc.

————————————

No: CCH 1.

NAME: GIVE ME THAT HAND. Tone 40.

AUDITING COMMANDS: GIVE ME THAT HAND.

Physical action of taking hand when not given and then replacing it in the PC's lap. Making physical contact with the PC's hand if PC resists. THANK YOU ending each cycle.

All Tone 40 with clear intention, one command in one unit of time. Take up *each new physical* change manifested *as though it were an origin* by the PC, when it happens, and querying it by asking "What's happening?" This two-way comm is *not* Tone 40. Run only on the right hand.

AUDITING POSITION: Auditor and PC seated in chairs without arms. Auditor's knees on outside of both PC's knees.

PROCESS PURPOSE: To demonstrate to PC that control of PC's body is possible, despite revolt of circuits, and inviting PC to directly control it. Absolute control by auditor then passes over towards absolute control of his own body by PC.

Never stop process until a flat place is reached. Freezes may be introduced at end of cycle, this being after the THANK YOU and before the next command, maintaining a solid comm line, to ascertain information from the PC or to bridge from the process. This is done between two commands, holding the PC's hand after acknowledgement. PC's hand should be clasped with exactly correct pressure. Make every command and cycle separate. Maintain Tone 40, stress on intention from Auditor to PC with each command. To leave an instant for PC to do it by own will before Auditor decides to take hand or make contact with it. Auditor indicates hand by nod of head.

Tone 40 Command = Intention without reservation. Change is any physical, observed manifestation.

No: CCH 2.

NAME: TONE 40 8c

AUDITING COMMANDS:

> YOU LOOK AT THAT WALL. THANK YOU.
>
> YOU WALK OVER TO THAT WALL. THANK YOU.
>
> YOU TOUCH THAT WALL. THANK YOU.
>
> TURN AROUND. THANK YOU.

Take up *each new physical* change manifested *as though it were an origin* by the PC, when it happens, and querying it by asking "What's happening?" This two-way comm *is not* Tone 40. Commands smoothly enforced physically when necessary. Tone 40, full intention.

AUDITING POSITION: Auditor and PC ambulant, Auditor in physical contact with PC as needed.

PROCESS PURPOSE: To demonstrate to PC that his body can be controlled and thus inviting him to control it. To orient him in his present time Environment. To increase his ability to duplicate and thusly increase his Havingness.

Absolute Auditor precision. No drops from Tone 40. No flubs. Total present time. Auditor on PC's right side. Auditor body acts as block to forward motion when PC turns. Auditor gives command, gives PC a moment to obey, then enforces command with physical contact of exactly correct force to get command executed. Auditor does not block PC from executing commands. Method of introduction as in CCH l. Freezes may be introduced at the end of cycle, this being after the THANK YOU and before the next command, maintaining a

solid comm line, to ascertain information from the PC or to bridge from the process, this being the acknowledgement "THANK YOU" after the command "TURN AROUND".

CCH 1 and CCH 2 were developed by L. RON HUBBARD in Washington, D.C., in 1957 for the 19th ACC.

No: CCH 3.

NAME: HAND SPACE MIMICRY

AUDITING COMMANDS: Auditor raises 2 hands palms facing PC's about an equal distance between the Auditor and PC and says "PUT YOUR HANDS AGAINST MINE, FOLLOW THEM AND CONTRIBUTE TO THEIR MOTION". He then makes a simple motion with right hand then left. "DID YOU CONTRIBUTE TO THEIR MOTION?" Acknowledge answer. Auditor allows PC to break solid comm line. When this is flat, the Auditor does this same with a half inch of space between his and the PC's palms. The command being "PUT YOUR HANDS FACING MINE ABOUT ½ INCH AWAY, FOLLOW THEM AND CONTRIBUTE TO THEIR MOTION". "DID YOU CONTRIBUTE TO THEIR MOTION?" Acknowledge. When this is flat, Auditor does it with a wider space and so on until PC is able to follow motions a yard away.

AUDITING POSITION: Auditor and PC seated, close together facing each other, PC's knees between Auditor's knees.

PROCESS PURPOSE: To develop reality on the auditor using the reality scale (solid communication line). To get PC into communication by control and duplication. To find Auditor.

Auditor should be gentle and accurate in his motions, all motions being Tone 40, giving PC wins. To be free in 2-way communication. Process is introduced and run as a formal process. If PC dopes off in this process Auditor may take PC's wrist and help him execute the command one hand at a time. If PC does not answer during anaten to question "DID YOU CONTRIBUTE TO THEIR MOTION?" Auditor may wait for normal comm lag of that PC, acknowledge and continue process.

TONE 40 Motion = Intention without Reservation. Two-Way Communication = One Question – The Right One.

HISTORY. Developed by L. Ron Hubbard in Washington, D.C., 1956 as a therapeutic version of Dummy Hand Mimicry. Something was needed to supplant "Look at me. Who am I?" and "Find the auditor" part of rudiments.

No: CCH 4.

NAME: BOOK MIMICRY

AUDITING COMMANDS: THERE ARE NO SET VERBAL COMMANDS.

Auditor makes simple motions with a book. Hands book to the PC. PC makes motion, duplicating Auditor's mirror-image-wise. Auditor asks PC if he is satisfied that the PC duplicated the motion. If PC is and Auditor is also fully satisfied, Auditor takes back the book and goes to next command. If PC is not sure that he duplicated any command, Auditor repeats it for him and gives him back the book. If PC is sure he did and Auditor can see duplication is pretty wrong, Auditor accepts PC's answer and continues on a gradient scale of motion either with the left or right hand till PC can do original command correctly. This ensures no invalidation of the PC. Tone 40, only in motions, verbal 2-way quite free.

AUDITING POSITION: Auditor and PC seated facing each other, a comfortable distance apart.

PROCESS PURPOSE: To bring up PC's communication with control and duplication (control and duplication = communication).

Give PC wins. It is necessary for Auditor to duplicate his own commands. Circular motions are more complex than straight lines. Tolerance of plus or minus randomity is apparent here and the Auditor should probably begin on the PC with motions that begin in the same place each time and are neither very fast nor very slow, nor very complex. Introduced by the Auditor seeing that PC understands what is to be done, as there is no verbal command, formal process.

HISTORY. Developed by LRH for the 16th ACC in Washington, D.C., 1957. Based on duplication. Developed by LRH in London, 1952.

L. RON HUBBARD

LRH:ep.rd

HUBBARD COMMUNICATIONS OFFICE
Saint Hill Manor, East Grinstead, Sussex
HCO BULLETIN OF 2 AUGUST 1962

CenOCon

CCH ANSWERS

The following queries and my reply are useful in the CCHs.

Ron from Ray = 1/8 = 335L

Thanks for Telexes 233L2 and 334L2. That's fine.

Some queries have come up about CCHs. Could we have the latest stable data on

1. When is a physical origination picked up – after command is executed and before acknowledgement, or after acknowledgement?

2. Does one pick up by saying – "How are you doing?" "What happened then?" or "I noticed – so and so – happened. What's going on?" – or is there any other method that we don't have and which is better than any of these?

Love Ray

Ray from Ron = 15.30 = 2/8 = 335L2

1. When it happens.

2. Only by a two way comm query like "What's happening?"

Never designate the origin.

Don't make a system out of queries. Three commands nicely done is flat.

Don't take spoken data from PC about somatics as a reason to keep on.

Also the process that turns something on turns it off.

Love Ron.

                                                          L. RON HUBBARD

LRH:dr.cden

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RUNNING CCHs

CCHs being run terribly wrong.

Correct version follows: Run a CCH only so long as it produces change in the pc's general aspect.

If no change in aspect for three commands, with the pc actually doing the commands, go on to next CCH.

If CCH producing change do not go on but flatten that CCH.

Then when for three commands executed by the pc it produces no change go on to next CCH.

Run CCHs One Two Three Four, One Two Three Four, One etc.

Use only right hand on One.

The CCHs are run alternated with Prepchecking session by session depending upon whether or not the pc has had a win on either and whether the CCHs in the CCH Session were not left with the pc stuck in one CCH which was producing terrific change and thusly very unflat as a process.

CCHs are not run in Model Session, nor run on the E-Meter, nor are goals set. The reality factor is established before the first command is given.

It is code break clause thirteen to run a CCH that is producing no change or to not flatten in same or subsequent session a CCH that is producing change.

Some pcs get no reaction at first on any CCH; therefore run each one as above, CCH One Two Three Four, One etc, and with Prepchecking being given in alternate sessions, or as stated above in case one of the CCHs has to be flattened off in another session on the CCHs.

L. RON HUBBARD

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FLATTENING A PROCESS

A process is flat when:

1. There is the same lag from the moment the command is given until the time the pre-clear answers the command at *least* 3 times in a row.

2. A cognition occurs.

3. An ability is regained.

L. RON HUBBARD

LRH:-.rd

HUBBARD COMMUNICATIONS OFFICE
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HCO BULLETIN OF 19 MARCH 1978

Remimeo
Snr HSDC

QUICKIE OBJECTIVES

Ref: HCOB 12 Apr 62,   CCHs PURPOSE
            HCOB 11 Jun 57   TRAINING & CCH PROCESSES
            HCOB 3 Feb 59,   FLATTENING A PROCESS
            CREATION OF HUMAN ABILITY
            CONTROL AND THE MECHANICS OF SCS
            HCOB 14 Aug 63,   LECTURE GRAPHS (No. 5 on pg 342 of Tech Vol V)

Recent investigations into the effectiveness of Drug RDs including their rate of repair and re-repair revealed a marked tendency to quickie Objectives.

Failure to run Objectives fully and completely, especially on a case with an extensive drug history can set up the pc for less than optimum gain on Dianetics. A Drug RD without full and complete Objectives is not a Drug RD.

TWO-WAY COMM

The easiest and very out tech way to quickie Objectives is to run some commands and then put the pc on the meter and 2WC to F/N or do some fast "rehab." But did the Objective process ever get run? What actually F/Ned, the Objective or the 2WC? Any Objectives run this way are invalid.

The tech of Objectives is extensive and still very much in force. They have their own EPs and with these they are fully run to actual change for the pc. Only this is valid handling of Objectives.

CURE

The way to handle auditors who quickie Objectives is a full W/Cing of the subject and a big clay demo of the purpose of Objectives and a big clay demo of what effect Objectives have on running a Drug RD and R3R. Then get the auditor's own Objectives flattened.

Any Drug RD that needs to be repaired or redone must include a careful study of the Objectives to see if they were honestly run and if the valid Objective EPs on the processes themselves were obtained. Where the Objective was obviously quickied just R-Factor the pc you are going to flatten it and do so. If the EP of an Objective was questionable you can ask

the pc what happened and if he F/Ns on a real Objective EP fine, otherwise flatten the process.

A fully completed Drug RD with Objectives sets the stage for the pc to fly up the Grade Chart so do it right the first time.

L. RON HUBBARD
Founder

As assisted by CS-5

LRH:JE:nc

Franchise

CCHS

AUDITING ATTITUDE

This is an important bulletin. If you understand it you will get results on hitherto unmoving cases and faster results (1 hour as effective as a former 25) with the CCHs.

Here is what happened to the CCHs and which will continue to happen to them to damage their value:

The CCHs in their most workable form were *finalized* in London by me in April 1957. That was their high tide of workability for the next five years. After that date, difficulties discovered in *teaching them to auditors* added extraordinary solutions to the CCHs (not by me) which cut them to about one twenty-fifth of their original auditing value. Pcs thereafter had increasing difficulty in doing them and the gain lessened.

How far were the CCHs removed from original CCH auditing? Well, the other night on TV I gave a demonstration of the proper original CCHs which produce the gains on pcs. And more than twelve old-time auditors (the lowest graded ones out of 36) thought they were watching a demonstration of entirely foreign processes.

Although these auditors had been "well trained" on the CCHs (but not by me) they did not see *any* similarity between how they did them and how they saw me do them. Two or three students and two instructors thought they were being done *wrong*. Even the higher ranking students were startled. They had never seen CCHs like this.

Yet, the pc was very happy, came way up tone, lost a bad before-session somatic and within 48 hours had a complete change in a chronic physical problem, *all in 1½ hours* of proper original CCHs.

The students and instructors "knew they weren't watching the correct CCHs" because there was no antagonism to the pc, because the Tone 40 was not shouted, because there was no endurance marathon in progress. There was just quiet, positive auditing with the pc in good, happy 2-way communication with the auditor and the auditor letting the pc win.

In the student auditing of the next two days, some shadow of the demonstration's attitude was used *and the cases audited gained much faster* than before. Yet at least two or three still feel that this is far too easy to be the CCHs.

In five years, the CCHs, not closely supervised by me, but altered in training, had become completely unrecognizable (and almost resultless).

Why?

Because the CCHs were confused with Op Pro by Dup which was for auditors. Because the CCHs became an arduous *ritual*, not a way to audit the pc in front of you. The CCHs became a method of auditing without communicating, of running off strings of drills without being there. And the CCHs are so good that even when done wrong or even viciously they produced some slight gain. The CCHs shade from bright white to dark grey in results, never to black.

Having been perverted in training to a system to make auditors audit them, they became something that had nothing to do with the pc.

What these students saw demonstrated (and which upset them terribly) was this:

The auditor sat down, chatted a bit about the coming session with the pc, explained in general what he was about to do. The session was started. The auditor explained the CCH 1 drill in particular and then began on it. The pc had a bit of embarrassment come off. The auditor took the physical reaction as an origination by the pc and queried it. The routine CCH 1 drill went on and was shortly proved flat by three equal responses. The auditor went to CCH 2. He explained the drill and started it. This proved to be flat. The pc did the drill three times without comm change. The auditor explained and went to CCH 3. This also proved flat and after a three times test, the auditor came off it, explained CCH 4, and went to CCH 4. This proved unflat and was gradually flattened to three equally timed correct responses by the pc on a motion the pc could not at first do. About 50 minutes had elapsed so the auditor gave a ten minute break. After the break the auditor went back to CCH 1, found it flat, went to CCH 2 and found the pc jumping the command and, by putting short waits of different lengths before giving commands, knocked out the automaticity. The auditor went on to CCH 3, found it flat, and then to CCH 4 which was found unflat and was accordingly flattened. The auditor then discussed end ruds in a general way, got a summary of gains and ended the session.

All commands and actions were Tone 40 (which is *not* "antagonism" or "challenge"). But the pc was kept in two-way comm between full cycles of the drill by the auditor. Taking up *each **new** physical* change manifested as *though it were an origin* by the pc and querying it and getting the pc to give the pc's reaction to it, this two-way comm was *not* Tone 40. Auditor and pc were serious about the drills. There was no relaxation of precision. But both auditor and pc were relaxed and happy about the whole thing. And the pc wound up walking on air.

These were the CCHs properly done. With high gain results.

The viewers saw no watchdog snarling, no grim, grim **purpose**, no antagonistic suspicion, no pc going out of session, no mauling, no drill-sergeant bawling and **knew** these couldn't be the CCHs. There was good auditor-pc relationship (better than in formal sessions) and good two-way comm throughout, so the viewers **knew** these weren't proper CCHs.

Well, I don't know what these gruelling blood baths are they're calling "the CCHs". I did them the way they were done in April 1957 and got April 1957 fast results. And the processes aren't even recognized !

So somewhere in each year from April 1957 to April 1962 and somewhere in each place they're done, additives and injunctions and "now I'm supposed to's" have grown up

around these precise but easy, pleasant processes that have created an unworkable monster that is called "the CCHs" but which definitely isn't.

Not seeing the weird perversions but seeing the slow graph responses, the vast hours being burned up, I began to abandon recommending the CCHs after 1959 as too long in others' hands. I didn't realize how complicated and how grim it had all become.

Well, the *real* CCHs *done right*, done the way they're described here, are a fast gain route, easy on auditor and pc, that goes all the way south.

Take a reread of the June and November bulletins of last year (forget the 20 minute test, 3 times equally done are enough to see a CCH is flat) and, not forgetting your Tone 40 and precision, laying aside the grim withdrawn militant auditor attitude, try to do them as pleasantly as you find them described in the above outlined session, and be amazed at the progress the pc will make.

The CCHs easy on auditor and pc? Ah, they'd observed a lot of CCHs and never any that were *easy* on auditor or pc. Everybody came to know it was a bullying, smashing, arduous mess, a fight in fact. The only trouble was, the gains vanished when the ARC ran out.

Today, put *any* pc on the *original* CCHs done as above until they're flat, then go to 3D Criss Cross and the pc will fly.

Surely you don't have to look and sound so hungry, disinterested and mean when you audit the CCHs. You want to *clear* this pc, not make him or her into a shaking wreck. The CCHs are easily done (when they're done right).

They'll get lost again, too, unless you remember they can get lost.

I believe Upper Indoc should be canceled in Academies and extra time put on just the CCHs as it is the Upper Indoc attitude carried over that makes the CCHs grim.

SUMMARY

The **purpose** of the CCHs is to bring the pc through incidents and into present time. It is the reverse of "mental" auditing in that it gets the pc's attention exterior from the bank and on present time. By using Communication, Control and Havingness this is done. If you make present time a snarling hostility to the pc, he of course does not want to come into present time and it takes just that much longer to make the CCHs work.

You do the CCHs with the Auditor's Code firmly in mind. Don't run a process that is not producing change. Run a process as long as it produces change. Don't go out of 2- way comm with the pc.

Complete every cycle of the process. Don't interject 2-way comm into the middle of a cycle, use it only after a cycle is acknowledged and complete.

Don't end a process before it is flat. Don't continue a process after it is flat.

Use Tone 40 Commands. Don't confuse antagonistic screaming at the pc with Tone 40. If you *have* to manhandle a pc, do so, but only to help him get the process flat. If you have

to manhandle the pc you've already accumulated ARC breaks and given him loses and driven him out of session.

Improve the ability of a pc by gradient scale, give the pc lots of wins on CCH 3 and CCH 4 and amongst them flatten off what he hasn't been able to do.

The CCH drills must be done precisely by the auditor. But the criteria is whether the pc gets gains, not whether the auditor is a perfect ritualist.

Exact Ritual is something in which you should take pride. But it exists only to accomplish auditing. When it exists for itself alone, watch out.

Audit the pc in front of you. Not some other pc or a generalized object.

Use the CCHs to coax the pc out of the bank and into present time.

Take up the pc's physical changes as though they were originations. Each time a new one occurs, take it up with 2-way comm as though the pc had spoken. If the same "origination" happens again and again only take it up again occasionally, not every time it happens.

Know what's going on. Keep the pc at it. Keep the pc informed. Keep the pc winning. Keep the pc exteriorizing from the past and coming into present time.

Understand the CCHs and what you're doing. If it all deteriorates to mere ritual you'll take 25 to 50 times the time necessary to produce the same result as I would.

The auditing is for the pc. The CCHs are for the pc. In auditing you win in the CCHs only when the pc wins.

L. RON HUBBARD

LRH:jw.rd

Remimeo

TRAINING AND CCH PROCESSES

NUMBER: CCH 5

Name: Location by Contact.

Commands: "Touch that (indicated object)." "Thank you."

Position: Auditor and preclear may be seated where the preclear is very unable, in which case they are seated at a table which has a number of objects scattered on its surface. Or auditor and preclear may be ambulant, with the auditor in manual contact with the preclear as is necessary to face him toward and guide him to the indicated object.

Purpose: The purpose of the process is to give the preclear orientation and havingness and to improve his perception.

Training Stress: Training stress is upon gentleness, ARC and the raising of the preclear's certainty that he has touched the indicated object. It should be noticed that this can be run on blind people.

History: Developed by L. Ron Hubbard from Locational Processing in 1957.

NUMBER: CCH 6

Name: Body-Room Contact.

Commands: "Touch your (body part)." "Thank you." "Touch that (indicated room object)." "Thank you."

Position: Auditor and preclear move about together as needed, the auditor enforcing the commands by manual contact using the preclear's hands to touch objects and touch body parts.

Purpose: To establish the orientation and increase the havingness of the preclear and to give him in particular a reality on his own body.

Training Stress: Training Stress is upon using only those body parts which are not embarrassing to the preclear as it will be found that the preclear ordinarily has very little reality on various parts of his body. Impossible commands should not be given to the preclear in any case.

History: Developed by L. Ron Hubbard in 1957 in Washington, D.C., as a lower step than Body-Room Show Me.

NUMBER: CCH 7

Name: Contact by Duplication.

Commands: "Touch that table." "Thank you." "Touch your (body part)." "Thank you." "Touch that table." "Thank you." "Touch your (same body part)." "Thank you." "Touch that table." "Thank you." "Touch your (same body part)." "Thank you," etc., in that order.

Position: Auditor may be seated. Preclear should be walking. Usually auditor standing by to manually enforce the commands.

Purpose: Process is used to heighten perception, orient the preclear and raise the preclear's havingness. Control of attention as in all these "contact" processes naturally takes the attention units out of the bank which itself has been controlling the preclear's attention.

Training Stress: Training stress is on precision of command and motion, with each command in its unit of time, all commands perfectly duplicated. Preclear to continue to run process even though he dopes off. Good ARC with the preclear, not picking one body part which is aberrated at first but flattening some non-aberrated body part before aberrated body part is tackled.

History: Developed by L. Ron Hubbard in 1957 in Washington, D.C., as a lower level process than Opening Procedure by Duplication, or Show Me by Duplication. All contact processes have been developed out of the Pre-Logics.

NUMBER: CCH 8

Name: Trio.

Commands: "Look around the room (environment) and tell me something you could have." Run until flat. "Look around the room and tell me something the body (body part) can't have." Valence form: "Look around the room and tell me something mother (or other valence) can't have." Long form: "Look around the room and tell me what you could have." Run flat. "Look around the room and tell me something you would permit to remain." Run flat. "Look around the room and tell me what you could dispense with." Dispense in long form is sometimes run first when preclear is set on wasting.

Position: Auditor and preclear seated at a comfortable distance both facing toward majority of the room.

Purpose: To remedy havingness objectively.

Training Stress: Run it smoothly without invalidative questions. One of the most effective processes known when thinkingness can be controlled somewhat. Run when havingness drops or for a full intensive.

History: Developed by L. Ron Hubbard in London in 1955. Name derived from the three questions of the long form. Originally called the "Terrible Trio".

NUMBER: CCH 9

Name: Tone 40 "Keep it from going away."

Commands: "Look at that (indicated object)." "Thank you." "Walk over to that (indicated object)." "Thank you." "Touch that (indicated object)." "Thank you." "Keep it from going away." "Thank you." "Did you keep it from going away?" "Thank you," and so forth.

Position: Auditor and preclear ambulant. Auditor assisting by manual contact.

Purpose: The purpose of the process is to increase havingness of the preclear and bring about his ability to keep things from going away, which ability lost, accounts for the possession of psychosomatic illnesses.

Training Stress: The Training stress is on precision and accuracy and finding out that this is actually Tone 40 8-C with a thinkingness addition. This is the first step on to the route of making things solid.

History: Developed in 1956 in London, England, by L. Ron Hubbard.

NUMBER: CCH 10

Name: Tone 40 "Hold it still."

Commands: "Look at that (indicated object)." "Thank you." "Walk over to that (indicated object)." "Thank you." "Touch that (indicated object)." "Thank you." "Hold it still." "Thank you." "Did you hold it still'?" "Thank you," etc., in that order.

Purpose: To improve an individual's ability to make things more solid and to assert his ability to control his environment.

Training Stress: Same as CCH 9.

History: Developed by L. Ron Hubbard in London, England, in 1956.

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L. RON HUBBARD
Founder

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LRH:ne.rd

OP PRO BY DUP

Use two objects – a book and a bottle.

Have the pc look them over and handle them to his satisfaction. Then have him place them at some walking distance apart in the room, on a couple of tables or similar locations.

The commands:

"Look at that book."

"Walk over to it."

"Pick it up."

"What is its colour?"

"What is its temperature?"

"What is its weight?"

"Put it down in exactly the same place."

Repeat with the bottle.

Do not vary the commands in any way. Use Tone 40. "Thank you" acknowledgment. The basic commands should never be departed from, and never, never trick the preclear by using the book again when you knew he was just about to start toward the bottle. The purpose of the process is duplication. Good control should be used.

Accept the pc's answers whether they are logical, silly, imaginative, dull or unlawful. In starting the process you can discuss with him what you are about to do and make sure you have got the rudiments established. Run the process until the comm lags are flat.

This process is an HPA/HCA requisite.

L. RON HUBBARD

LRH:mc.rd

OP PRO BY DUP – END PHENOMENA

Exteriorization is an EP for the process Opening Procedure by Duplication, but is not the only EP. The reason Op Pro by Dup had an EP of exterior was because we didn't have Int-Ext then, and had to end it off on the first exteriorization.

The EPs for OP PRO by DUP include:

A.   Flattened Comm lags and no more change on the process (per PAB 48).

B.   A real big win with F/N, Cog, VGIs and ability regained (per HCO B 20 Feb 70, "Floating Needles and End Phenomena").

C.   Exterior with an F/N, Cog, VGIs.

In the presence of heavy overts, it is possible that a pc won't exteriorize on Op Pro by Dup.

Overts are handled on Exp Grade 2. Op Pro by Dup could grind on and on for as long as 50 hours with no change in an attempt to run it to Ext, when it's an out Grade II.

Nothing in this BTB should be used to quickie Op Pro by Dup.

Taken from an LRH C/S
Reissued by Flag Tech Compilations
for CS-4, W/O Ron Shafran

Approved by

L. RON HUBBARD
Founder
for the
BOARDS OF DIRECTORS
of the
CHURCHES OF SCIENTOLOGY

BDCS:LRH:RS:LG:rs.jh

Remimeo
Tech
Qual
Survival RD
NED
Academy Levels
SHSBC

START-CHANGE-STOP

COMMANDS

(Ref: HCOB 28 Jul 58   CLEAR PROCEDURE
PAB 97 1 Oct 56   START-CHANGE-STOP
CONTROL AND THE MECHANICS OF S.C.S.
SCIENTOLOGY: CLEAR PROCEDURE - ISSUE ONE)

Start, Change and Stop is the anatomy of control.

This is the cycle of action.

There is no such thing as bad control, only nonpositive control. Good control is positive control and positive control is not bad control.

Start-Change-Stop is the name of an Objective process. It has two stages, both of which are designed to gradiently raise the pc's ability to control.

The process is often abbreviated as "SCS".

SCS ON AN OBJECT

The first stage of running Start-Change-Stop is **"SCS on an object"**.

Starting, changing and stopping an object is a lower level than moving the body.

The following are the commands for **SCS on an object**. (This has been taken from parts of the LRH film script "SCS" which is scheduled for academy showing.)

COMMANDS - SCS ON AN OBJECT

START:

1.   "I am going to ask you to start the (object) and when I tell you to start, you start the (object) in that direction (Auditor indicates a direction with his hand). Do you understand that?"

2.   "Start."

3.   "Did *you* start the (object) 2"

(Repeat commands 1,2,3,1,2, etc. until pc is easily doing the commands on that object.)

CHANGE:

1.   "This spot we are going to call 'A'." (Auditor indicates spot "A" with a piece of marked tape on the table or a marked piece of paper on the floor as appropriate.)

2.   "This spot we are going to call 'B'." (Auditor indicates spot "B." with a piece of marked tape on the table or a marked piece of paper on the floor as appropriate.)

3.   "This spot we are going to call 'C'." (Auditor indicates spot "C" with a piece of marked tape on the table or a marked piece of paper on the floor as appropriate.)

4.   "This spot we are going to call 'D'." (Auditor indicates spot "D" with a piece of marked tape on the table or a marked piece of paper on the floor as appropriate.)

5.   "When I ask you to change the (object) I want you to change the {object's) position from 'A' to 'B'. Do you understand that?

6.   "Change."

7.   "Did *you* change the (object)?

8.   "When I ask you to change the (object), I want you to change the (object's) position from 'B' to 'C'. Do you understand that?"

9.   "Change."

10.   "Did *you* change the (object)?"

11.   "When I ask you to change the (object), I want you to change the (object's) position from 'C' to 'D'. Do you understand that?"

12.   "Change."

13.   "Did *you* change the (object)?"

(Repeat commands 1-13, 1-13, etc. until pc is easily doing the commands on that object.)

(Note: When the commands 1-13 are repeated, the locations of the designated spots do not have to be the same as the previous time as it makes the process too much like duplication, brings the preclear to predict the process too easily and he will do it machinewise.)

STOP:

1.   "I am going to tell you to Bet the (object) moving in that direction (Auditor indicates direction with his hand). Somewhere along the line I will tell you to stop. Then you stop the (object). Do you understand?"

2.   "Get the (object) moving."

3.   "Stop!"

4.   "Did *you* stop the (object)?"

(Repeat commands 1,2,3,4,1,2,3, etc. until pc is easily doing the commands on that object.)

        The auditor would now run Start again on the same object and so on, until neither Start, Change nor Stop produces any change.

        The auditor starts **SCS on an object** by running commands on a small gradient object (such as a paper clip).

        When the first object is flat, the auditor runs SCS on an object that is larger (such as a brick, a beach ball, etc.) until this is flat and then goes to a larger object and so on until the pc has a realization about Starting, Changing and Stopping objects and can do so easily. (This can happen at any point while running **SCS on an object**.)

SCS ON THE BODY

        The second stage of running Start-Change-Stop is "**SCS on the body**".

        The pc is at this point, processed towards the ability to be in control of his body.

        The following are the commands for SCS ON THE BODY. (This has been taken from parts of the LRH film script "SCS" which is scheduled for academy showing.)

COMMANDS - SCS ON THE BODY

START:

1.   "I am going to ask you to start the body. I am not going to ask you to stop."

2.   "then I ask you to start the body, start the body. OK?"

3.   "Start!"

4.   "Did *you* start the body?"

(Repeat commands 1,2,3,4,1,2,3,4, etc. until the pc is easily doing the commands.)

CHANGE:

1.   "This spot we are going to call 'A'." (Auditor indicates spot "A" with a piece of marked paper on the floor.)

2.   "This spot we are going to call 'B'." (Auditor indicates spot "B." with a piece of marked paper on the floor.)

3.   "This spot we are going to call 'C'." (Auditor indicates spot with a piece of marked paper on the floor.)

4.   "This spot we are going to call 'D'." (Auditor indicates spot with a piece of marked paper on the floor.)

5.   "Then I ask you to change the body, I want you to change the body's position from 'A' to 'B'. Do you understand that?"

6.   "Change."

7.   "Did you change the body?"

8.   "When I ask you to change the body, I want you to change the body's position from 'B' to 'C'. Do you understand that?"

9.   "Change."

10.   "Did you change the body?"

11.   "When I ask you to change the body, I want you to change the body's position from 'C' to 'D'. Do you understand that?"

12.   "Change."

13.   "Did you change the body?"

(Repeat commands 1-13, 1-13, etc. until pc is easily doing the commands.)

STOP:

1.   "I am going to tell you to get the body moving in that direction (Auditor indicates direction with his hand). Somewhere along the line I will tell you to stop. Then you will stop the body. Do you understand?"

2.   "Get the body moving."

3.   "Stop!"

4.   "Did you stop the body?"

(Repeat commands 1,2,3,4,1,2,3,4, etc. until pc is easily doing the commands.)

STOP SUPREME:

1.   "I'm going to ask you to get the body moving. And at some point I am going to tell you to stop. And when I do, I want you to stop the body as fast as you can and hold it as still as you can. OK?"

2.   "Get the body moving."

3.   "Stop!"

4.   "Did you do it?"

(Repeat commands 1,2,3,4,1,2,3, etc. until pc is easily doing the commands.)

The auditor would now run Start again on the body and 80 on, until neither Start, Change, Stop nor Stop Supreme produces change. The pc will be able to do the steps of SCS easily and will have a realization about Starting, Changing and Stopping the body. (This can happen at any point while running SCS ON THE BODY.)

Whenever the pc is standing to execute a command, the auditor is standing next to the pc. He also ensures that he is touching the pc (hand lightly on pc's arm or elbow, etc.) when he gives the pc the R-factor such as in steps 5, 8 and 11 above.

The auditor of course always acknowledges the pc for every execution of an auditing commend.

The only way to err on running SCS is to run it with imprecision and bad ARC. It is perfectly easy to be precise with high ARC.

L. RON HUBBARD
FOUNDER
As assisted by
TECHNICAL PROJECT I/C

LRH:MM:bk

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4 September 1954

With this issue of the Professional Auditor's Bulletin begins a new series by L. Ron Hubbard entitled A BASIC COURSE IN SCIENTOLOGY. The bulletins in this series are planned to cover the period of at least one year. This Basic Course consists of numerous articles by Ron on the theory and techniques of present day Scientology. The experienced professional auditor will find this an excellent source of review; the newcomer will have available a wealth of new data in easily used and highly understandable form.

OPENING PROCEDURE, SOP-8-C

A Basic Course In Scientology – Part 1

Because many people write to me requesting information on how to run a particular technique, and because the greater portion of such inquiries are on how to get a case running, this process is here outlined for your use as the first part of the Basic Course. Having once run this Opening Procedure, SOP-8-C on a so-called "tough case," you will not require any further reassurance or sales talk about it. And having it run thoroughly on yourself by an auditor skilled in its use will adequately demonstrate its workability.

Important: In processing psychotics and neurotics of whatever degree or those having psychosomatic ailments of any type, use only opening procedure, 8-C, each part, until the person is sure who is doing it. Use only opening procedure, SOP-8-C until the case is fully sane. Use no other process of any kind.

The entire modus operandi of Opening Procedure 8-C consists in having the preclear move his body around the room under the auditor's direction until (a) he finds he is in actual communication with many spots on the surface of things in the room, (b) until he can select spots in the room and know that he is selecting them and can communicate with them, and (c)

select spots and move to them, decide when to touch them and when to let go. Each one of these steps is done until the auditor is well assured that the preclear has no communication lag.

The auditing commands for part (a) are as follows: **"Do you see that chair?" "Go over to it and put your hand on it." "Now look at that lamp." "Now walk over to it and put your hand on it."** This is done with various objects, without specifically designating spots of a more precise nature than an object, until the preclear is very certain that he is in good communication with these objects and walls and other parts of the room.

The above is run until the following manifestations of communication lag (and any others you may encounter) are well erased: the preclear just brushing the object he is told to touch, looking away from it very quickly, not looking at it at all, looking at the auditor instead of the object he was told to touch, carrying out the command before it is given such as going over to touch the lamp when all the auditor has said is **"Do you see that lamp?",** complaining about the process in any way, objecting to being ordered to do the actions, unwillingness to touch the items designated, putting all his attention on creating an effect on the auditor, and apathy, grief, anger, fear and boredom turned on by this process.

When the above has been accomplished the auditor can say anything he pleases, or seemingly introduce any significance he wishes to so long as he hews very closely to the actual thing in this method which makes it work – which is to say perceiving the physical universe and making contact with it. At this time the auditor can become very specific about the selection of spots for the preclear to touch. **"Do you see that black mark on the left arm of that chair?" "Go over and touch it with your right index finger." "Now take your finger off it." "Do you see the lower bolt on the light switch plate?" "Now go over to it and touch it with your left ring finger." "Now take your finger off it,"** and so forth until the preclear has *a uniform perception* of any and all objects in the room including the walls, the floor and the ceiling. This step can be kept up for a long time. It has an infinity of variations. But it is not the variations which work, it is the making and breaking of communication with the actual designated spots. You *can* do the following at this point: make certain the preclear is doing the process by asking questions such as, **"Are you touching the door knob?" "Where is the door knob?" "What is its shape?" "What is its color?" "What sort of texture does it have?" "Are you sure you are touching it?" "Can you feel it?" "Look at it." "Who is touching it?" "Whose hand is on that door knob?" "Who is holding your hand there?" "Where is that door knob?" "When is it there?"** You can badger the preclear in the above fashion until his actions show that he is in communication with the object and until he is not angered by your questioning and direction.

If at any time there is any doubt about the preclear's case do this step [Part (a)] until satisfied that communication is good. A case which will not obey 8-C (a) orders will always pervert or alter commands to be performed with less supervision than perception of his body.

Part (b) has these auditing commands: **"Find a spot in this room."** No further designation is necessary for this spot. Spotting procedure gives the preclear determinism of selection. When the preclear has done this the auditor says, **"Go over to it and put your finger on**

it." When the preclear has done this the auditor says, **"Now let go of it."** It must be emphasized that the preclear is not to act upon a command until the command is given and must not let go until told to let go. The preclear is permitted to select spots until such time as all communication lag is flat and until he is freely selecting spots on the walls, objects, chairs, etc., with no specialization whatsoever – which means that his perception of the room has become uniform. Many things turn up in running this procedure such as the fact that the preclear cannot look at walls, etc.

Part (c) of this procedure is run with these auditing commands: **"Find a spot in the room." "Make up your mind when you are going to touch it and then touch it." "Make up your mind when you are going to let go of it, and let go."** A variation of this process is to have the preclear make up his mind about a spot and then have him change his mind and select another spot.

The trouble with most cases, and the trouble with any case which is hung up and is not progressing, is that an insufficient quantity of Opening Procedure 8-C has been used by the auditor. This has been found to be an invariable rule. Preclears will pretend to run commands of a subjective nature but not run them at all. In other words, the auditor is saying do one thing and the preclear is doing quite another. Thus the process is not actually being used on the preclear. The difficulty in this case is a specific difficulty in communication where the preclear cannot duplicate. But more important than that, any preclear whose case is hanging up is out of touch with reality and the environment to such an extent that he has begun to do processes on mock-ups rather than on the actual physical universe. It will be discovered that doing processes on mock-ups such as finding spots in them, finding distances to them, and so forth is productive of no gain, and even negative gain. Only processes which directly address the physical universe are found to raise the tone of the preclear. He has to come to full tolerance of it before he can get out of it. Thus any case bogging down somewhere in more intricate procedures can be relieved and brought into present time by Opening Procedure 8-C. The only caution on the part of the auditor is that he must be very precise about giving his orders and must insist on the preclear being very certain that he is actually seeing spots and touching them and inhibiting the preclear from executing the commands before they are given.

L. RON HUBBARD

Remimeo
Auditors
Supervisors
C/Ses

REACH AND WITHDRAW

Ref: PAB 7; 1953 ca. mid-Aug SIX STEPS TO BETTER BEINGNESS

   6307C25 SHSBC 290 COMM CYCLES IN AUDITING

   HCOB 14 Aug 63 LECTURE GRAPHS

   THE PHOENIX LECTURES (page 45)

Reach and Withdraw is a very simple but extremely powerful method of getting a person familiarized and in communication with things so that he can be more at cause over and in control of them.

One would not expect a person to be at cause over or to have much control or understanding of or skill in something with which he was not familiar. The keynote of familiarity is communication.

Reaching and withdrawing are two very fundamental actions in this universe and Reach and Withdraw is actually a breakthrough from advanced technology.

Life itself is composed of reaching and withdrawing.

Communication is actually based on reach and withdraw.

A person is out of communication with something because he is withdrawing from it and is not about to reach out to or contact and part of it.

If a person cannot reach and withdraw from a thing he will be the effect of that thing.

A person who cannot reach and withdraw has no space. Everything is caved in on him. And this is awfully true in these druggie contemporary times.

If a person can reach for something and withdraw from it he could be said to be in communication with that thing.

To be in communication with something is to be at cause over it.

By REACH we mean touching or taking hold of. It is defined as "to get to," "come to" and/or "arrive at."

By **Withdraw** we mean move back from, let go.

A highly effective action called "Reach and Withdraw" has been developed to bring a person into communication with and more at cause over, objects, people, spaces, boundaries and situations.

It also extroverts a person from something he tends to be introverted into.

USES

Reach and Withdraw has a variety of different uses.

It can be run as a drill on a student, staff member or any person, in order to familiarize him with the objects and spaces and boundaries of his work or study area.

It is also used in session, as in Assists, etc.

Reach and Withdraw is a very broad tool and whether used on a staff member, student or pc will have far reaching effects.

Reach and Withdraw is very easy to run.

Anyone can run Reach and Withdraw who has been checked out on the theory and procedure as contained in this HCOB.

THEORY

In Reach and Withdraw you are doing connection with Associative Restimulators.

An Associative Restimulator is something in the environment of an individual that he has confused with an actual restimulator.

Restimulators are the direct approximations (in the environment of the individual) of the content of engrams. They can be words, voice tones, people, objects, spaces, etc.

The person has confused the objects, forms and spaces in his environment with those of incidents in his past.

A=A=A enters in and you get a whole dangerous environment to the individual. Some areas are more restimulative than others, because they contain objects which directly restimulate past engrams.

When a person runs Reach and Withdraw on his space or area he knocks out the Associative Restimulators in that area. The whole place is not restimulative to his past. It might just be the desk. Or it might be the air vent.

You don't know what it is and he doesn't know what it is, but you'll get it and you'll run Reach and Withdraw on it and when you hit it, that thing will cease to be an Associative Restimulator or Restimulator and he'll get a cognition.

In other words the objects, forms and spaces of earlier incidents go back into the past and those in the present cease to be restimulators and he comes into present time, boom!

When you run Reach and Withdraw on a pilot making him reach and withdraw from an airplane and its various parts, you're getting rid of all the joy sticks that went into his stomach 200,000 years ago and the propeller that cut his head off on Arcturus and all that sort of thing. These things get peeled off and actually go into the past and cease to trouble the person when he perceives a similar object, form or space in the present.

This is why Reach and Withdraw works.

REACH AND WITHDRAW ON POST AND WORK AREAS

In the physical universe communication with objects, forms, spaces and boundaries is best established by actual physical contact.

Reach and Withdraw is a valuable tool to use to get a person into good communication with his work environment, especially the tools and objects he uses.

A pilot would do Reach and Withdraw on all the objects and spaces of his airplane, his hangar, the earth; a secretary would do Reach and Withdraw on her typewriter, her chair, walls, spaces, her desk, etc.

Reach and Withdraw is also used for the same purpose as part of Debug Tech. It is run after a Crashing Mis-U has been found and cleared in order to refamiliarize and get a person into communication with his production area.

Feeling comfortable with the tools of one's trade is a very important step in getting out products. One can increase the amount of production tremendously with this drill.

It is not kindergarten tech: a flight surgeon, trained by us, ran Reach and Withdraw on his squadron and for one whole year there was not one single accident, not even so much as the touch of a wingtip to a wingtip. It is probably the only squadron in history that went a whole year without even a minor accident and there was no accident at the end of that year either, we simply stopped keeping records of it.

REACH AND WITHDRAW ON THE COURSE ROOM

Any student in any course room can be run on Reach and Withdraw.

Reach and Withdraw on the course room environment gets the student into communication with the course room and the people and materials he will be working with. It tends to handle any back-off the student may have.

It can be used to handle students who are withdrawn from the course room environment or who are restimulated by the course room environment.

Reach and Withdraw can be run on: anything or anyone in the course room, paper, books, dictionaries, a student, a supervisor and the course room and its spaces.

Reach and Withdraw is run on the above to a win for the student.

The student will now be more in communication with and feel more comfortable in his study environment.

REACH AND WITHDRAW IN AUDITING

Reach and Withdraw in auditing has long been used to bring about an increase of sanity – it has both mental and physical uses.

It is used to get a preclear into communication with anything that may be troubling him, be it a person, a situation, an area or a part of the body. It also serves to separate him from terminals and situations so that he is not compulsive towards them.

Reach and Withdraw can be used to restore communication to a sick or injured body part, and is often used this way in Assists.

It is also used in Repairs and Assists of all kinds to restore a pc's communication and cause level, as covered in HCOB 13 Jun 70, C/S Series 3.

COMMANDS AND PROCEDURE

The commands for Reach and Withdraw are:

    1)   "Reach that _____ ."

    2)   "Withdraw from that _____ ."

The following commands may be substituted if the wording is more appropriate to the particular person, place or thing being addressed:

    1)   "Touch that _____ ."

    2)   "Let go of that _____ ."

A person, place or thing is named in the blank and the commands are given alternately (1,2,1,2, and so on) repetitively, with an acknowledgement given after the execution of each command.

It is done on that one thing until the person has a minor win or 3 consecutive sets of commands with no change in the pc's motions or attitude. Then another person, place or thing is chosen and the commands are taken to a win on that item, and so on.

The words "reach" and "withdraw" are defined for the person using only the definitions given on page 1 of this HCOB.

The person running Reach and Withdraw on another always points to the object (or person, space, etc.) each time he gives a command so there will be no mistake made by the person doing it.

When being run as a drill on work or study areas different items are chosen and the action is done on each one until the person is in good communication with his general environment or specific area that is being addressed. In choosing objects one usually progresses from

the smaller to the larger objects available, touching different parts of each one in turn to a minor win of some sort on that object or 3 sets of commands with no change. One can also include walls and floors and other parts of the environment.

One doesn't keep the person reaching and withdrawing endlessly from the same *part* of anything that is being used but goes to different points and parts of an object being touched. If you keep him reaching for the same point on an object or just the general object time after time you are actually running a duplication process not Reach and Withdraw and Reach and Withdraw is not to be confused with Op Pro by Dup.

The person would be taken to a win or 3 sets of commands with no change on that one object or space (not on each different part of it that he is reaching and withdrawing from).

The reason why we have to have the 3 sets of commands with no change rule is that the person isn't on the meter and we have to depend on the person running the action to know when he hits a no-change. The object being used at the moment may not be of interest to the person or he may have no aberration on it. Yet he is working right there next to something that is extremely restimulative to him and his attention keeps being pulled onto it. So he can actually be quite distracted if Reach and Withdraw isn't run on the 3 sets of commands of no change rule. It also prevents an endless grind on Reach and Withdraw.

So when the person has a minor win or does 3 sets of commands with no change, go onto the next object or space.

The person administering Reach and Withdraw walks around with the person doing the action, ensuring that he actually does get in physical contact with the points or areas of objects, spaces and boundaries.

We used to run Reach and Withdraw on ship stewards by having them walk into the dining room and walk out of the dining room over and over. This is used when you're running Reach and Withdraw on a room or a space rather than an object. Of course we also ran them on the other objects connected with their duties.

END PHENOMENA

The end phenomena of Reach and Withdraw is a win or cognition accompanied by good indicators on the whole area being addressed.

Reach and Withdraw would not be run past a major win on the area.

In auditing, Reach and Withdraw is run to a cognition accompanied by an F/N and very good indicators.

RUNNING REACH AND WITHDRAW

Auditors and other people running Reach and Withdraw have encountered some interesting phenomena, occasional difficulty and some astounding wins.

Some of these are given here to supply additional reality and data on Reach and Withdraw.

Phenomena

A person being run on Reach and Withdraw will often begin by being very careful and slow and exhibit back off from touching the thing. He may not want to touch it at all. This flattens as the action is continued.

There is a large variance in how long the action will run before the EP is reached. Sometimes it is very fast, sometimes it runs for quite a while before the person hits the EP.

Occasionally the person will begin to do the process on automatic – he just goes on circuit and carries out the commands, but it isn't really *him* doing it. If this should occur one can simply ask "How is it going?" or "What's happening?" and ack his answer and continue the process.

Pictures or incidents show up or turn on and then blow off. This is perfectly all right – in fact it is usual. One would simply continue running the action to EP.

People will go through a cycle of interiorizing into the object or space and then after a while they exteriorize from it.

They may get *very* interested in the object and all of its detail and parts.

These are not all of the manifestations that will be encountered. But it gives one a good idea of what to expect.

Difficulties

Obviously anyone running Reach and Withdraw must stay in excellent communication with and be aware of the person he is running it on, so as not to miss a win or 3 sets of no-change commands. The person might not voice the win if he isn't in sufficient communication with the person doing the action on him. One must take care not to overrun a person on Reach and Withdraw.

Sometimes the person doing the action will try to take over control of the action and choose what he will be run on and for how long. This is an indicator that the person running it is not controlling him well enough.

Some people like to touch and feel the thing when they reach for it, not just give it a light tap. One must be alert to this and not prematurely acknowledge as it may cause an upset.

Overrunning this action will cause difficulty. This has been a problem particularly when the person is supposed to run Reach and Withdraw on a series of items (as in Reach and Withdraw on the course room). The person may hit the EP of the whole action on the second item, yet it is continued to be run on other items past the EP. One runs Reach and Withdraw to its stated EP and that's the end of it. Don't go rote and plow the person in. When he's had his win and is brightly in present time and feels good about the environment, end off.

Grogginess and anaten may turn on, but actually this is perfectly fine and the person would simply be continued on the action and he'll come out of it.

Reach and Withdraw is a very simple action and if it is run per this HCOB one shouldn't get into difficulty.

Wins

The most common wins people have on Reach and Withdraw are increased perception, renewed communication and coming into PT on the area addressed.

Sometimes a person will realize he has had a picture there instead of the object and when Reach and Withdraw is run, just as given above, the picture blows and he is there in PT with the object for the first time. Don't get involved with the picture, continue Reach and Withdraw.

All sorts of pictures and incidents can turn on and blow during this action.

Reach and Withdraw run on equipment has produced some amazing results.

It increases the person's ability to use the equipment by increasing his familiarity and ARC for it.

One person was run on Reach and Withdraw on a large piece of equipment he was having trouble installing. The installation seemed hopelessly bugged. During the Reach and Withdraw he realized that a large cable necessary to hook up the machine was totally disconnected! He'd never even *seen* the cable before.

Reach and Withdraw has also handled a person's accident proneness with equipment.

Often a person will go exterior when run on Reach and Withdraw on a large area or object.

Reach and Withdraw on a sick or injured pc has keyed out engrams and greatly speeded recovery.

One pc was suffering from a mysterious, but rather severe, pain in a body part. He was run on Reach and Withdraw on that body part and realized the source of the pain and blew the somatic totally.

The wins and gains available from Reach and Withdraw are actually limitless.

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Reach and Withdraw is very easy to do. It is enjoyable for both the person administering it and the person receiving it and has very valuable results.

If a person is going to do anything – study a subject, learn to drive a car, start a new job or post, attain a high level of production, be at cause over the things he deals with or simply survive better, Reach and Withdraw on objects, people, situations, spaces and boundaries will greatly assist one's control, familiarity, cause level and understanding.

L. RON HUBBARD
Founder

LRH:sk:rw:iw

HSDC Project[3]

Important

Urgent

C/S Series 48

DRUG HANDLING

See: HCO B 28 AUG 68, ISSUE II, "DRUGS"

HCO B 29 AUG 68, "DRUG DATA"

HCO B 23 SEPT 68, "DRUGS & TRIPPERS"

Refer: HCO B 19 MAY 69, "DRUG AND ALCOHOL CASES PRIOR ASSESSING"

HCO B 12 AUG 69 (HCO B 10 DEC 68 UPDATED), CONFIDENTIAL – "CASE SUPERVISOR ACTIONS" (PAGE 24 RESISTIVE CASE 220D.)

A person who has been on Drugs is one of the "Seven types of resistive cases". (These types are found on the Scientology Green Form No. 40.)

In other words, someone who has been on drugs does not make good case gain until the drugs are handled. The same somatics will come back again. The case roller-coasters – goes up and down.

Drugs since 1962 have been in very widespread use. Before then they were rare. A worldwide spread of drugs occurred. A large percentage of people became and are drug takers.

By drugs (to mention a few) are meant – tranquilizers, opium, cocaine, marijuana, peyote, amphetamine and the psychiatrist's gift to Man, LSD, which is the worst. Any medical drugs are included. Drugs are drugs. There are thousands of trade names and slang terms for these drugs.

Alcohol is included as a drug and receives the same treatment in auditing.

They are supposed to do wonderful things but all they really do is ruin the person.

Even someone off drugs for years still has "blank periods". The abilities to concentrate or to balance are injured.

The moral part of it has nothing to do with auditing. The facts are that:

(a)   People who have been on drugs can be a liability until the condition is handled in auditing.

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[3] To this bulletin has been added the narrative auditing of drugs, Step 4a. And exp. On Quad Auditing instead of Triple.

(b) A former drug user is a resistive case that does not make stable gains until the condition is handled.

(c) Auditing is the only successful means ever developed for handling drug damage.

THOSE ON DRUGS

On persons who are currently on drugs, it is necessary to take them through a special TR Course while they are still on them. They gradually come off of them voluntarily in most cases without painful "withdrawal symptoms" (which is the term for the agony and convulsions caused, particularly in the case of heroin takers, by just stopping the drug. Alcoholics are of course included.)

DRUG ENGRAMS

People who have been on drugs are sometimes afraid of running engrams.

In fact, it is almost a way to detect a "druggie".

The drugs, particularly LSD and even sometimes antibiotics or other medicines to which the person has an allergy, can turn on whole track pictures violently.

These tend to overwhelm the person and make him feel crazy. Some of these people are afraid to confront the bank again.

The TR and other steps of the special TR Course improve their confront.

If a person "doesn't like Dianetics" and doesn't want to be run on engrams, it is necessary to put them on the special course. If Dianetics *has* been run but poorly, it should of course be repaired fully with an L3B (List used to correct Dianetic errors). But if the person still flinches, the Special Course successfully completed will handle. It contains recall steps giving the pc a chance to confront the bank more easily and get used to it.

FULL AUDITING RUNDOWN

A full auditing rundown on drugs, all done on the same pc, would be:

1. Special TR Course for ex-drug users or alcoholics.

2. Pc Assessment Form.

3. Class VIII Drug Rundown Quad (done by a Class IV or VI).

4. By a Dianetic Auditor: Pains, emotions, sensations, attitudes connected with drugs (or alcohol), R3R Quad.

5. Prior Assessment to Drugs, Quad R3R, Dianetic Auditor.

This can be followed by routine Quad Dianetics to EP for the grade.

DONE FIRST

Drugs are done *first.* They are **not** done after the Health Form and regular Dianetics.

Why? Because Drugs make a resistive case! Regular Dianetics will get loses.

Any current Dianetic case failures are from flubby Dianetic auditing or the person has been on Drugs or alcohol which were not handled by Dianetics.

It hasn't harmed anyone to omit drugs. But it made it hard or impossible to get stable case gain.

Thus any Dianetic pc who has had drug handling omitted must be run on drugs as soon as possible before more auditing is given.

I repeat, drugs or alcohol in most instances make a resistive case so the point must be handled before the case will attain and hold case gain.

Any pc who is not making it in auditing should be checked for a drug or alcohol history.

DISCOVERY

In investigating a series of cases who were not making it, I found in each one that the person had been on drugs or alcohol and that drugs or the alcohol had not been run out.

Drug data was not covered fully enough in the Dianetics pack. Only Prior Assessment to Drugs was given.

Thus I find several Dianetic pcs were only run on the Prior Assessment to Drugs. This is not good enough.

DIANETICS ONLY

Where Dianetic Auditing only is available and the rest of the rundown given above is not, drugs can still be handled by a Dianetic Auditor in this way with this Dianetic Pgm.

1. PC Assessment Form.

2. Full C/S 1, also doing the TRs well with the pc.

3. Write down the drugs from the pc assessment form. Take the one that reads best on the meter.

4a. Narrative Handling on Drugs – First.

All drugs, medicine and alcohol which the pc has taken in this lifetime have been listed on the Original Assessment Sheet.

At this point, choose the best reading drug, alcohol or medicine from the Original Assessment Sheet and run it out R3R Quad Narrative. (For example: "Return to the time you took whiskey and tell me when you are there.")

You do not check interest on drug items.

Run out each reading drug, alcohol or medicine on the drug list (in order of read) by R3R quad narrative *first*. Otherwise, you can end up spinning the pc way down the track.

In running narrative on this lifetime drug, medicine or alcohol individual items you will find that it is easier to do if you run earlier beginning and earlier incident rather than attempt to limit him to the first this lifetime incident he comes up with, as there will usually be more than one incident when he took whiskey, for example. So you always ask earlier beginning but if it is necessary you ask earlier incident with the question, "Is there an earlier incident when you took whiskey?"

Pcs commonly tend to wind up way back down the whole track at this stage of their auditing and that is not what you're aiming for here either. What you're interested in is this lifetime, this body. But this doesn't mean you don't run track on the Drug Rundown; just don't push it. And never insist the pc run any type of chain when he says there's nothing there.

When all reading drugs, medicines, alcohols on the list have been run to EP by R3R Narrative Quad, go on to the next step.

4b. List, what pains, emotions, sensations or attitudes are connected with taking (the drug, medicine or alcohol) in this lifetime.

5. Take the best reading Dianetic item from the list in 4b. Run R3R Quad.

6. Complete items found on 4b. above in order of reads with R3R Quad.

7. Take another drug, medicine or alcohol from 3. above that reads.

8. Repeat 4b.

9. Repeat 5.

10. Use up the whole list in (4) above in this way until the entire list of drugs F/Ns when called.

11. Do Prior Assessment to Drugs (medicine or alcohol). R3R Quad.

12. Quad R3R on any missing flows of earlier Dn items run.

13. Do Health Form.

14. Proceed with routine Quad Dianetics.

This program is the one that would be done at step 4 in the full Drug Pgm above that includes the TR Course and Class VIII Rundown.

However, when only Dianetic Auditors are available, at least the above Dianetic Program must be done.

———————————

This repairs an omission in the Dianetic pack and unblocks the case gain of a great many pcs on whom a drug or alcohol history was never noticed or handled.

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Founder

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AUDITING OUT SESSIONS

NARRATIVE VERSUS SOMATIC CHAINS

Now and then it is necessary to audit out the last session or an auditing session.

One does this by R-3-R but there is a slight change in wording when asking the pc to go earlier. One asks for an **earlier similar incident**. "Is there an earlier similar incident?" A session, when audited, does not always erase. Instead it has become part of a chain. Therefore one has to run R-3-R on it and get an earlier similar *incident*.

The chain may go back vast amounts of time.

Whereas the pc may only have been in Scientology 3 days, before Scientology there were other types of "sessions" such as psychoanalysis. And before that, in Rome and Greece, dream therapy in which one was "visited by a God". And before that – well, the chain can have a very far back basic. One does not of course suggest ever what the earlier incident may be. There is no telling what the pc may confuse with a session.

If one asked the pc to "locate an earlier incident with a similar feeling" one would be on another chain entirely. Hence one asks, simply, "Is there an earlier similar incident?" when running a session out.

Running a session out has the liability that one is running a **narrative chain**, a similar *experience* rather than a similar somatic.

One of the major 1969 breakthroughs was that chains are held together mainly by somatics. The body condition or somatic is what keeps the chain in association.

One can of course run "narrative incidents" by which one means similar **experiences**. "Locate an earlier time your mother spanked you." "Locate an earlier wreck." These will run and sometimes even get to and erase a basic. **But** they are **long** and sometimes don't ever get to basic at all and the chain may not erase. Running only narrative incidents is what made early Dianetics run up such fabulous numbers of hours in processing.

Somatic chains go quickly to basic and are the important chains.

Thus when we erase a chain of sessions we sometimes run into a very long chain. Sometimes the TA goes up to 4 or 5 (particularly if the auditor grinds). Using a wrong go-earlier command is a primary reason for trouble.

Usually if you ask simply for an earlier similar incident the pc goes back to something that will erase and the chain blows.

But remember, asking for similar types of *experience* can cause trouble in that it gets very long and basic may not appear for some time.

You can get away with running out sessions in most cases, enough to make it a worthwhile action. But only if you ask for "an earlier similar incident". This phrase is a work-horse phrase of auditing anyway.

The *best* thing to do is goof no assessments or sessions in the first place.

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Remimeo
Dian Checksheet

DRUG AND ALCOHOL CASES

PRIOR ASSESSING

Those cases which have been long and habitually on drugs and alcohol sometimes suffer from a **"Somatic Shut-Off"**. They appear anaesthetized (unfeeling) and sometimes have "nothing troubling them" whereas they are on drugs, drink and are in reality in a suppressed physical condition and cannot cease to take drugs or drink.

One can find, in such a case, a very high TA which doesn't seem to reduce. The TA can be brought down by auditing the drug and alcohol engrams as a chain.

However, there is another approach.

Any such case took up drugs or alcohol because of unwanted pain or sensation or misemotion. You can use that as a stable datum which resolves the situation.

All it requires is a special assessment called a **Prior Assessment**. For the person looked on drugs or alcohol as a cure for unwanted feelings. One has to assess what was wrong *before* or prior to the cure.

You determine if the person is on drugs or alcohol habitually. If so you determine which was earlier.

Now you ask for and list the pains, sensations, emotions or feelings he or she had before taking drugs or alcohol.

In doing this assessment, you must grab the read and mark it plainly as it occurs. If you just list and then go over the list the person may be back in present time and, as these are now cut off by the masses of drug or alcohol engrams on top of them, they won't read again. So you must catch the read as the person first mentions it.

You choose the longest read and find and run the chain by R-3R as in any other Standard Dianetic auditing.

The only difference is the assessment time period. You are listing for a time before they went on drugs or alcohol.

The running out of the chain of unwanted feelings they had before going on drugs or alcohol removes the reason they started taking drugs, smoking marijuana or drinking. The compulsion to still use drugs or drink is lessened and they can come off it.

This can also be used as a working rule to get earlier than any "curative" activity. Almost anything which comes later is a cure for something earlier. It could be said that the present time being is a compound of past cures. To handle, the action would be the same as for drugs or alcohol. List the unwanted pains or feelings before the cure and run the longest reads by R-3R.

As there will be more than one chain involved, you of course take your next longest read and run that next, just as in any assessment.

The general term for this type of assessment is **Prior** Assessing, not because it is done before auditing but to determine what the pc was suffering from before he used a harmful "cure".

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Remimeo

Expanded Dianetics Series 6

C/S Series 82

DIANETIC HCO B

INTEREST

On two certain subjects the "Interest?" question is omitted from Dianetic R3R patter.

On *drugs* and when running Evil Purposes or Intentions one does **not** ask the pc if he is interested in running the item.

The requirement on both drug items and intentions is that the item *read* on the meter (suppress and inval can be used) and has not been run by R3R previously.

Many pcs, it has now been found, have replied "No, no interest" on a drug item, the item has not been run and the pc then continued to have trouble with drugs.

Checking back pcs who returned to drugs after auditing showed "drug rundowns" that were so brief as to be nothing. One pc who had been on LSD for years had only a I hour quickie drug rundown. Later this person relapsed.

Tracing this, in each case the "Interest?" question had been used and the pc had replied "No interest" **but meant "I'm no longer interested in drugs**."

So Drug items that have read are run R3R without asking for interest. The command is simply omitted.

In Expanded Dianetics the same thing has occurred in running Evil Purposes or Intentions. The Auditor asked the pc if he was interested in running the item and the pc said "No" and so it went untouched. But the pc had it confused with interest in doing the purpose and missed running it and then fell on his head later. Tracing the case back it was found that R/Ses and such had not been run due to the pc saying "No Interest".

Nothing bad will happen if the item is run.

C/S RESPONSIBILITY

The C/S must keep telling his auditors, on drugs or Expanded Dianetics, "Omit asking for interest on R3R on these (drug) (intentions). Run them if they read on the meter."

REPAIR

In repairing cases it is good sense to check this point on drugs and intentions to see if they were neglected in R3R due to "no interest".

If so, then have them run and the case will suddenly do well.

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Remimeo
BPI
HGC
All Auditors

New Era Dianetics Series 5R

ORIGINAL ASSESSMENT SHEET

WHEN IS THE ORIGINAL ASSESSMENT SHEET DONE

This Original Assessment Sheet is done as the beginning action of Dianetics. It is done in a formal Dianetic auditing session in an auditing room with the pc duly signed up, and in session.

WHO DOES THE ORIGINAL ASSESSMENT SHEET

The auditor assigned to audit the preclear does the assessment. It is included as part of the preclear's auditing time as it is valuable data collection on the preclear's case, done with the preclear on the meter.

PURPOSE OF ORIGINAL ASSESSMENT SHEET

The purpose of this form is to provide essential data regarding the preclear to the C/S, the D of P and the auditor, and to better acquaint the auditor with the preclear at the onset of auditing.

HOW IS THE ORIGINAL ASSESSMENT SHEET DONE

The assessment is done with the preclear on the meter.

The preclear is given the R-Factor that you will simply be asking him for essential data about himself for the purpose given above.

The auditor notes down the data as the pc gives it. He does not take up the pc's answers to the questions, except, when necessary, to make sure the question is answered and the auditor has the facts straight. TA at start and end of the assessment is noted, along with any TA action during the assessment. Needle reactions to the questions are noted when the question is given plus any needle reaction that occurs during the pc's reply.

NEATNESS OF ORIGINAL ASSESSMENT SHEET

The data should be written plainly and neatly on the assessment sheet so that it is readable, as the information is wanted. Auditor does not delay or hold up the pc giving answers, however, while he completes admin.

WHERE DOES THE ORIGINAL ASSESSMENT SHEET GO WHEN COMPLETED

When completed, the Original Assessment Sheet is kept in the preclear's folder. A note is made on the Summary Sheet of pc's folder that the Original Assessment Sheet has been done.

ORIGINAL ASSESSMENT SHEET

Name of pc: Date:

Auditor: Org:

Age of pc:

TA Position at Start of Assessment:

A. FAMILY:

1. Is mother living?

2. Date of Death:

3. Pc's statement of relationship with mother:

4. Is father living?

5. Date of Death:

6. Pc's statement of relationship with father:

7. List brothers, sisters, and other relatives of the pc, date of death of any and E-Meter reaction:
Relation   Date of Death

8. Where and with whom do you live?

9. Are you currently associated with anyone who is antagonistic to mental or spiritual treatment or Scientology? (If yes, who?):

On questions 10 through 17 if the answer is "yes" find out who and E-Meter reaction.

10. Is anyone actively objecting to your getting treatment?

11. Has anyone insisted you get treatment?

12. Has anyone ever objected to your getting treatment?

13. Has anyone encouraged you to get treatment?

14. Has anyone ever objected to you getting better?

15. Has anyone ever assisted you in self-betterment?

16. Does anyone not like you the way you are?

17. Has anyone tried to make you change or be different?

 B. MARITAL STATUS: E-Meter Reaction

1. Married

Single

No. of times Divorced

2. Pc's statement of relationship with spouse:

3. List any marital difficulties pc presently has:

4. If divorced, list reasons for divorce and pc's emotional feeling about divorce:

5. List children, date of death of any child and E-Meter reaction:
Children   Date of Death

 C. EDUCATION LEVEL: E-Meter Reaction
State the level of schooling pc has had, university education, or professional training:

 D. PROFESSIONAL LIFE: State main jobs pc has held: Job   E-Meter Reaction

E. DRUGS: *(NOTE: LIST DRUGS, MEDICINE OR ALCOHOL TAKEN THIS LIFETIME ONLY.)*
1. Are you taking any drugs currently? What Drug Date (How Long)   E-Meter Reaction

Have you ever taken drugs? What Drug Date (How Long)   E-Meter Reaction

2. Are you taking any alcohol or alcoholic drink currently?   E-Meter Reaction

What Alcohol/Alcoholic Drink   Date (How Long)

Have you ever taken alcohol or alcoholic drinks?   E-Meter Reaction

What Alcohol/Alcoholic Drink   Date (How Long)

3. List any medicine currently or previously taken.   E-Meter Reaction

What   When (How long)

F. LOSSES: What severe losses have you had in life that influenced it?   E-Meter Reaction

Loss   Date   Description

G. DEATHS: What deaths have severely affected your life?   E-Meter Reaction

Loss   Date   Description

H. UPSETS: Are you upset with or cross about anything or anyone at this particular time?   E-Meter Reaction

Upset   Date   Description

I. DANGERS: E-Meter Reaction

1. Are you in any particular danger at this time?   Description

2. Are there engrams that match this in the past? (Note meter read.)

J. ACCIDENTS: List any serious accidents pc has had, the date of such, any permanent physical damage, and E-Meter reaction.   E-Meter Reaction

Accident   Date   Physical Damage

K. ILLNESSES: List any serious illness pc has had giving date of each, any permanent-physical damage, and E-Meter reaction.   E-Meter Reaction

Illness   Date   Physical Damage

L. OPERATIONS: List any operation, the date of each and E-Meter reaction.   E-Meter Reaction

Operation   Date

M. PRESENT PHYSICAL CONDITION: List any bad physical condition pc pres-   E-Meter Reaction
ently has and E-Meter reaction to such.

Physical Condition

N. PT ILLNESSES: 1. List any illnesses the pc currently has.   E-Meter Reaction

Illness   Date

2. Do you have any recurring physical ailment?

O. DISABILITY PAYMENT OR PENSION: E-Meter Reaction

List any disability payment or pension received by the pc, what it is for, how much and for how long it has been received.

What For   How Much   Duration

P. ANY FAMILY HISTORY OF INSANITY: E-Meter Reaction

Who   What   When

Q. EYES: E-Meter Reaction   E-Meter Reaction

Any tint in eye white

Eye Color

Color Blindness

Glasses

R. BODY WEIGHT: E-Meter Reaction

Overweight?

Underweight?

S. ANY PERCEPTION DIFFICULTIES: E-Meter Reaction

T. ANY PERCEPTION TROUBLE IN FAMILY: E-Meter Reaction

U. SICK OR DISABLED FAMILY: E-Meter Reaction

V. EARLIER ALLIES OR CLOSE FRIENDS: E-Meter Reaction

W. HUSBAND OR WIFE PHYSICAL TROUBLES: E-Meter Reaction

X. ATTITUDE TOWARDS ILLNESS: E-Meter Reaction

Y. ATTITUDE TOWARDS TREATMENT: E-Meter Reaction

Z. ANY CURRENT TREATMENT IN PROGRESS: E-Meter Reaction

AA. COMPULSIONS, REPRESSIONS AND FEARS: List any compulsions (things   E-Meter Reaction
pc feels compelled to do), repressions (things pc must prevent himself from doing)
and any fears of pc.
Compulsions:

Repressions:

Fears:

Are you trying to change something someone else doesn't like? What and Who   E-Meter Reaction

BB. CRIMINAL RECORD: List any crime committed by pc, prison sentence, if any.   E-Meter Reaction
Crime   Sentence

CC. INTERESTS AND HOBBIES: List any interests and hobbies of pc.   E-Meter Reaction

DD. ARE YOU HERE ON YOUR OWN SELF-DETERMINISM?   E-Meter Reaction

EE. PREVIOUS DIANETIC OR SCIENTOLOGY PROCESSING: E-Meter Reaction

1. List auditors, hours, and E-Meter reaction to any processing done.

Auditor   Hours

2. List briefly processes run:

3. List goals attained from such processing:

4. List goals not attained from such processing:

FF. 1. Do you look on yourself as somebody else?   E-Meter Reaction

2. When you see pictures of the past do you see yourself from a distance?

GG. FORMER PRACTICES: 1. What practices or treatments have you engaged upon in the past?   E-Meter Reaction
Practice or Therapy   Date

2. Are you continuing any of the above in the present?

HH. What problems are you trying to solve by processing?   E-Meter Reaction

II. Have you ever done anything harmful to Dianetics, Dianeticists, Scientology, E-Meter Reaction
Scientologists or organizations?

JJ. REALITY FACTOR: E-Meter Reaction

       You know of course that people sometimes get cross at the auditor or run away when they are withholding information from them and we don't want you to do that.
       Anything you tell me is confidential and is protected under ministerial confidence.

Is there anything we have missed or omitted while doing this assessment? (Carefully note any meter reads.)

Ask: "Is there anything you would care to tell me about this?"

State of needle at the end of the above

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HSDC

AESP – HOW TO DO IT

It is very important for a Dianetics Auditor to have a good Running Item when he wants to run a Dianetics chain to its EP. There are several bulletins and tape lectures of L. Ron Hubbard where he mentions it. Those are:

HCOB 19 July 1969	DIANETICS AND ILLNESS
HCOB 26 April 1969	SOMATICS
HCOB 9 May 1969 II	CASE SUPERVISOR FORMS
HCOB 24 July 1969	SERIOUSLY ILL PCS
TAPE 30 March 1972	EXPANDED DIANETICS

This bulletin is written to make it easier for a new student to grasp the subject and to drill it. Here are some stable data from the referenced materials:

HCOB 19 July 69: "The correct auditing action on 'bronchitis' or 'chest trouble' or 'migraine headache' or any other continual worrisome illness is to continue to find somatics, sensations, feelings, emotions or even attitudes in the area affected and run their chains.

"It takes more than one chain of engrams to build up an ill area.

"Having found and run the 'deflated feeling' of bronchitis, which was the first best read, the C/S should order and the auditor find and run the next somatic, sensation, feeling, emotion or attitude in that area.

'It is sometimes necessary to add to the list for that area of the body.

'Seeing a continual or recurring illness on the Health Form the C/S and auditor should dig out of that area every somatic, sensation, feeling, emotion and attitude that can be made to read and run those chains, each one to basic and erasure."

HCOB 26 April 69: "There are a thousand different descriptive words that could add up to a feeling. Pain, aches, dizziness, sadness – these are all feelings. Awareness, pleasant or unpleasant, of a body is what we are trying to run in Dianetics.

"We ask for and follow down only feelings. Those can be aches, pains, sensations, misemotion – any feeling.

"When the pc says some mere symptom like 'headache' or medical term like 'arthritis' the auditor writes it down but also asks, 'What is the feeling of that?' or some such question and writes what the pc then says and only assesses the feeling stated.

"Example: Pc says a complaint is 'Sinusitis'. The auditor writes it down. But asks also for the feeling of it. The pc says, 'A burning sensation in the nose.' In assessing the list the auditor does not call out 'Sinusitis.' He says, 'A burning sensation in the nose.' And marks down its meter read."

_____

AESP stands for "Attitudes", "Emotions", "Sensations" and "Pains". When there is a C/S "AESP Sinusitis" then the auditor is expected to list for a Running Item that he can use to run a chain.

Normally the auditor starts with the first of those four items and begins with listing. Note: this is not Listing and Nulling. You are just listing down until you have at least a good reading item, at least a Small Fall, better a Fall or even better a Long Fall.

Example: The auditor first lists for "What attitudes are connected with sinusitis?" The pc will now give all kind of attitudes that are connected with sinusitis. It is important that the auditor takes up only somatics which are real Running Items and not Original Items[4]. It must really point out what the pc is feeling. The auditor should help the pc by directing him to say what he is really feeling; the pc must describe the attitude. Of course the auditor would never offer the pc an item by stating a wording for him. But he is supposed to get the pc to give items.

If the pc is giving a reading Original Item the auditor asks the pc to describe it as a feeling to get a real Running Item. On a non-reading Original Item, he would just note it down and continue with the action and do nothing with this item.

Note: The C/S can change the sequence of AESP or even omit one or two of these lists if they are not appropriate to the Original Item. Also C/S can consider it helpful to have additional lists done apart from attitudes, emotions, sensations and pains and write an according C/S. However, that does not change the procedure and the Dianetics Auditor doesn't need to know any more about it.

It is not necessary that the auditor depletes the question for somatics fully in the first assessment ("What attitudes are connected with sinusitis?"). It is good enough if he at least gets a well reading item. Of course he lets the pc say everything that comes up, but he doesn't need to let the pc ponder on and on to make sure that no item is missed, because the pc will have later the opportunity to extend the list. When the pc indicates that this is all for the moment that comes to his mind and a well reading Running Item is on the list, the auditor supposed to run that item immediately, without any session break.

Flow 1 is never checked for a read because the read on the item implies that it is charged on Flow 1.

_____

[4] Original Item: the Original Item is a condition, illness, accident, drug, alcohol or medicine, etc. that has been given by the pc to the auditor.

Flow 2 or any other reading Flow can be run in a later session, but if possible it should be run in the same session. The auditor always carefully notes any item run in the Full Flow Table (Dianetic Flow Table).

When all reading items from the attitudes list have been run, the auditor asks the pc for further attitudes connected with … (sinusitis). The pc might have more answers. If amongst them there are reading items they are handled just the same way as above.

After the auditor has depleted the first list of the AESP – Attitudes – he takes the next one: Emotions. He handles all Running Items he can find through listing emotions connected with … (sinusitis), then Sensations, then Pains.

The auditor repeats this procedure until the Original Item is handled.

The main stress lies in getting the pc to formulate his somatic. The auditor has to realize that this is not a rote procedure at all and he has to help the pc by coaxing him to put it in words. He should use questions like "How do you perceive it?" "What exactly do you feel about it?" "How would you word that sensation in a different way?" "Describe that pain as it appears to you", etc.

Note that there is a liability that the auditor might evaluate for the pc. If so, that has to be flunked by the coach (in a drill) and pinksheeted (in a session) by the C/S consequently.

Although listing AESP to get a Running Item is usually a short action, it sometimes can take a while and the auditor should not hesitate to take the time until he finally has a good item for running.

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E-METER

INSTANT READS

An instant read is defined as that reaction of the needle which occurs at the precise end of any major thought voiced by the auditor.

The reaction of the needle may be any reaction except "nul". An instant read may be any change of characteristic providing it occurs instantly. The absence of a read at the end of the major thought shows it to be nul.

All *prior* reads and *latent* reads are ignored. These are the result of minor thoughts which may or may not be restimulated by the question.

Only the instant read is used by the auditor. Only the instant read is cleared on rudiments, What questions, etc.

The instant read may consist of any needle reaction, rise, fall, speeded rise, speeded fall, double tick (dirty needle), theta bop or any other action so long as it occurs at the exact end of the major thought being expressed by the auditor. If no reaction occurs at exactly that place (the end of the major thought) the question is nul.

By "*major thought*" is meant the complete thought being expressed in words by the auditor. Reads which occur prior to the completion of the major thought are "prior reads". Reads which occur later than its completion are "latent reads".

By "*minor thought*" is meant subsidiary thoughts expressed by words within the major thought. They are caused by the reactivity of individual words within the full words. They are ignored.

Example: "Have you ever injured dirty pigs?"

To the pc the words "you", "injured" and "dirty" are all reactive. Therefore, the minor thoughts expressed by these words also read on the meter.

The major thought here is the whole sentence. Within this thought are the minor thoughts "you", "injured" and "dirty".

Therefore the E-Meter needle may respond this way: "Have you (fall) ever injured (speeded fall) dirty (fall) pigs (***Fall***)?"

Only the major thought gives the instant read and only the last *fall* (bold-italic type in the sentence above) indicates anything. If that last reaction was absent, the whole sentence is nul despite the prior falls.

You can release the reactions (but ordinarily would not) on each of these minor thoughts. Exploring these prior reads is called "compartmenting the question".

Paying attention to minor thought reads gives us laughable situations as in the case, written in 1960, of "getting P.D.H.ed by the cat". By accepting these prior reads one can prove anything. Why? Because *Pain* and *Drug* and *Hypnosis* are minor thoughts within the major thought: "Have you ever been P.D.H.ed by a cat?" The inexpert auditor would believe such a silly thing had happened. But notice that if each minor thought is cleaned out of the major thought it no longer reacts as a whole fact. If the person on the meter *had* been P.D.H.ed by a cat, then only the discovery of the origin of the whole thought would clean up the whole thought.

Pcs also think about other things while being asked questions and these random personal restimulations also read before and after an instant read and are ignored. Very rarely, a pc's thinks react exactly at the end of a major thought and so confuse the issue, but this is rare.

We want the read that occurs instantly after the last syllable of the major thought without lag. That is the only read we regard in finding a rudiment in or out, to find if a goal reacts, etc. That is what is called an "instant read".

There is a package rudiment question in the half truth, etc. We are doing four rudiments in one and therefore have four major thoughts in one sentence. This packaging is the only apparent exception but is actually no exception. It's just a fast way of doing four rudiments in one sentence.

A clumsy question which puts "in this session" at the end of the major thought can serve the auditor badly. Such modifiers should come before the sentence, "In this session have you……?"

You are giving the major thought directly to the reactive mind. Therefore any analytical thought will not react instantly.

The reactive mind is composed of:

    1. Timelessness.

    2. Unknownness.

    3. Survival.

The meter reacts on the reactive mind, never on the analytical mind. The meter reacts instantly on any thought restimulated in the reactive mind.

If the meter reacts on anything, that datum is partly or wholly unknown to the preclear.

An auditor's questions restimulate the reactive mind. This reacts on the meter.

Only reactive thoughts react instantly.

You can "groove in" a major thought by saying it twice. On the second time (or third time if it is longer) you will see only the instant read at the exact end. If you do this the prior reads drop out leaving only the whole thought.

If you go stumbling around in rudiments or goals trying to clean up the minor thoughts you will get lost. In sec checking you can uncover material by "compartmenting the question" but this is rarely done today. In rudiments, What questions, et al, you want the instant read

only. It occurs exactly at the end of the whole thought. This is your whole interest in cleaning a rudiment or a What question. You ignore all prior and latent reactions of the needle.

The exceptions to this rule are:

1. "Compartmenting the question", in which you use the prior reads occurring at the exact end of the minor thoughts (as above in the pigs sentence) to dig up different data not related to the whole thought.

2. "Steering the pc" is the only use of latent or random reads. You see a read the same as the instant read occurring again when you are not speaking but after you have found a whole thought reacting. You say "there" or "that" and the pc, seeing what he or she is looking at as you say it, recovers the knowledge from the reactive bank and gives the data and the whole thought clears or has to be further worked and cleared.

You can easily figure-figure yourself half to death trying to grapple with meter reads unless you get a good reality on the instant read which occurs at the end of the whole expressed thought and neglect all prior and latent reads except for steering the pc while he gropes for the answer to the question you asked.

That's the whole of reading an E-Meter needle.

(Two Saint Hill lectures of 24 May 1962 cover this in full.)

L. RON HUBBARD

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[HCO B 21 July 1962, Instant Reads, adds to this HCO B.]

Remimeo
All Levels

F/N EVERYTHING

Whenever an auditor gets a read on an item from Ruds or a prepared list (L1B, L3A, L4B, etc., etc.) **it must be carried to an F/N.**

To fail to do so is to leave the pc with by-passed charge.

When a pc has had several reads on various lists which were none of them carried to F/N, it can occur that he will become upset or depressed without any other apparent reason. As one has **done** the lists without F/Ning each item, one now has the mystery of what is wrong?

The error is reading items from Ruds or prepared lists cleaned to no read but not carried to F/N.

This action (amongst many such refinements) is what makes Flag auditing so smooth and indeed makes it Flag Auditing.

When an auditor first tries this he may well think it is impossible.

Yet it is simplicity itself. If you know bank structure you know it is necessary to find an earlier item if something does not release. What has been found as a read on a prepared list *would* F/N if it were the basic lock. So if it doesn't F/N, then there is an earlier (or an earlier or an earlier) lock which is preventing it from F/Ning.

So the **rule**:

Never walk off from a reading item on a rudiment or a prepared repair list before you carry it down (earlier similar) to an F/N.

Example: ARC Brk reads. Pc says what it is, Auditor does ARCU CDEI. If no F/N, Auditor asks for an earlier similar ARC Brk, gets it, ARCU CDEI, etc. until he gets an F/N.

Example: PTP reads. Carry it E/S (earlier similar) until a PTP F/Ns.

Example: L4B: Has an item been denied you? Reads. Answered. No F/N. Is there an earlier similar denied item? Answered. F/N. Go on to next reading item on the list.

Example: GF assessed once through for reads. The next C/S must take every item on it that read, by 2WC or other process, to an F/N.

So there is a much more general rule:

Every item that reads must F/N.

In Dianetics you get the F/N when you run E/S secondaries or engrams to an erasure, F/N, Cog, VGIs.

In Rudiments, every out rud you get a read on is run E/S to F/N.

On a prepared list you take each read to an F/N or E/S to F/N.

On an LX list you run each flow chain to an F/N.

On GF you get by whatever process an F/N.

On Listing by the Laws of Listing and Nulling, your eventual item listed must F/N.

So another rule:

Every major and minor action must be carried to an F/N.

There are **no** exceptions.

Any exception leaves by-passed charge on the pc.

Also, every F/N is indicated at the conclusion of the action when cog is obtained.

You take too soon an F/N (first twitch) you cut the cognition and leave by-passed charge (a withheld cognition).

––––––––––––––––––––

I could take any folder and simply write out the ruds and prepared list reading items and then audit the pc and carry each one to F/N and correct every list so disclosed and wind up with a very shining, cool calm pc.

So "Have reading items been left charged?" would be a key question on a case.

––––––––––––––––––––

Using lists or ruds on high or low TAs that are not meant for high or low TAs will get you reading items that won't F/N.

So, another rule:

Never try to fly ruds or do L1B on a high or low TA.

One can talk the TA down (see HCO B on Talking the TA Down).

Or one can assess L4B.

About the only prepared lists one can assess are the new Hi-Lo TA HCO B 13 Mar 71 and possibly a GF+40 once through for biggest read. The biggest read will have a blowdown on it and can possibly be brought to F/N. If this occurs then one also handles all other items that read.

––––––––––––––––––––

The most frequent errors in all this are:

- Not taking a read earlier similar but just checking it and leaving it as "clean".

- Not using suppress and false on items.

- And of course leaving a pc thinking things are still charged by failing to indicate the F/N.

- Indicating an F/N before Cog.

- Not going back through the folder to handle ruds and items that read but were called "clean" or were simply abandoned.

A pc audited under tension of poor TRs has a hard time and does not F/N sometimes, inviting overrun.

The rules then to happy pcs are:

- **Good TRs.**

- **F/N everything found on Ruds and Lists.**

- **Audit with TA in normal range or repair it so it is in normal range.**

<div style="text-align: right;">
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Founder
</div>

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SCIENTOLOGY III

AUDITING BY LISTS REVISED

(Note: We now F/N everything. We do **not** tell the pc what the meter is doing. This changes "Auditing By Lists" in both respects. We do not say to the pc, "That's clean" or "That reads".)

AUDITING BY LISTS

(Reference: HCO B 14 Mar 71, "F/N Everything")

Use any authorized, published **list**. (Green Form for general review, L1C for ARC Brks, L4B for listed items list errors.)

METHOD 3

Use meter at a sensitivity so meter needle is loose but it is easy to keep needle at "Set". If sensitivity is too high the needle will be in constant motion as one tries to set the TA. If too low, the instant read will not be visible. 5 is usual for upper grade cases. 16 is usual for lower grade or Dianetic cases.

Have your meter in a position (line of sight) so you can see the list and the needle or you can see the needle and the pc. The meter position is important.

Hold the mimeoed list close beside the meter. Have your worksheet more to the right. Keep record on your worksheet. Mark the pc's name and date on it. Mark what list it is on the W/S with Time. It remains in the folder stapled to the W/S.

Read the question on the list, note if it reads. Do **not** read it while looking at the pc, do **not** read it to yourself and then say it while looking at the pc. These are the L10 actions and

are called Method 6, not Method 3. It is more important to see the pc's cans than his face as can fiddle can fake or upset reads.

TR 1 must be good so the pc clearly hears it.

You are looking for an **Instant Read** that occurs at the end of the exact last syllable of the question.

If it does not read, mark the list X. If the list is being done through an F/N and the F/N just continues, mark the question F/N.

If the question reads, do *not* say "That reads". Mark the read at once (tick, SF, F, LF, LFBD, R/S), transfer the number of the Q to the W/S and look expectantly at the pc. You can repeat the Q by just saying it again if pc doesn't begin to talk. He has probably already begun to answer as the Q was live in his bank as noted by the meter.

Take down the pc's remarks in shortened form on the W/S. Note any TA changes on the W/S.

If the pc's answer results in an F/N (Cog VGIs sometimes follow, GIs always accompany a real F/N), mark it rapidly on the W/S and say, "Thank you. I would like to indicate your needle is floating."

Do **not** wait endlessly for the pc to say more. If you do he will go into doubt and find more, also do **not** chop what he is saying. Both are TR errors that are very bad.

If there is no F/N, at the first pause that looks like the pc thinks he has said it, ask for an Earlier Similar _____ whatever the question concerned. Do **not** change the Q. Do **not** fail to repeat what the Question is. "Was there an Earlier Similar Restimulation of 'rejected affinity'?" This is the "E/S" part of it. You do *not* leave such a Question merely "clean".

It does not matter now if you look at the pc when you say it or not. But you can look at the pc when you say it.

The pc will answer. If he comes to a "looks like he thinks he said it" and no F/N, you ask the same Q as above.

You ask this Q "Was there an earlier similar _____" until you finally get an F/N and GIs. You indicate the F/N.

That is the last of that particular question.

You mark "F/N" on the list and call the next question on the list. You call this and other questions without looking at the pc.

Those that do not read, you X as out.

The next question that reads, you mark it on the list, transfer the question number to the W/S.

Take the pc's answer.

Follow the above E/S procedure as needed until you get an F/N and GIs for the question. Ack. Indicate and return to the mimeoed list.

You keep this up until you have done the whole list in this fashion.

If you got no read on the list Question but the pc volunteers some answer to an unreading question, do **not** take it up. Just ack and carry on with your mimeoed list.

Believe your meter. Do not take up things that don't read. Don't get "hunches". Don't let the pc run his own case by answering non-reading items and then the auditor taking them up. Also don't let a pc "fiddle the cans" to get a false read or to obscure a real one. (Very rare but these two actions have happened.)

BIG WIN

If half way down a prepared list (the last part not yet done) the pc on some question gets a wide F/N, big Cog, VGIs, the auditor is justified in calling the list complete and going to the next C/S action or ending the session.

There are two reasons for this – one, the F/N will usually just persist and can't be read through and further action will tend to invalidate the win.

The auditor can also carry on to the end of the prepared list if he thinks there may be something else on it.

GF AND METHOD 3

When a GF is taken up Method 3 (item by item, one at a time and F/Ned) it can occur that the TA will go suddenly high. The pc feels he is being repaired, that the clearing up of the first item on the GF handled it and protests. It is the protest that sends the TA up.

This is not true of any other list.

Thus a GF is best done by Method 5 (once through for reads, then the reads handled).

L1C and L4B, L7 and other such lists are best done by Method 3.

The above steps and actions are exactly how you do Auditing by List today. Any earlier data contrary to this is cancelled. Only 2 points change – we F/N everything that reads by E/S or a process to handle (L3B requires processes, not E/S to get an F/N) and we never tell the pc that it read or didn't read, thus putting his attention on the meter.

We still indicate F/Ns to the pc as a form of completion.

L1C and Method 3 are **not** used on high or very low TAs to get them down or up.

The purpose of these lists is to clean up by-passed charge.

_____

An auditor also indicates when he has finished with the list.

An auditor should dummy drill this action both on a doll and bullbait.

_____

The action is very successful when precisely done.

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Founder

LRH:nt.rd

(Revised 28 Jan 1974)

(Revised 8 March 1974)

Remimeo
Dianetics Chkshts
Int RD Chkshts
Class IV and above.

Important

L3RD

Dianetics and Int RD Repair List

This list includes the most frequent Dianetic errors.

A high or low TA and a bogged case can result from failures to erase a chain of incidents.

Do not attempt to repair a chain or engram without using this list as it can have different or several errors.

Remember to clear each word on this list. If a question reads and the pc says he doesn't understand it, clear it and reassess (don't explain it and take it as it read on a misunderstood not on a fact).

Running pcs on Dianetics without a full and complete DN C/S-1 indoctrination is a foolish action.

Take any read found to F/N by full repair of it per the instructions.

1. **There was an Earlier Similar incident.**   _____
    Indicate it, flatten the chain.

2. **There was no Earlier Similar incident.**   _____
    Indicate it. Determine if the chain is flat or if the last incident needs
    to be run through again. Complete the chain to F/N by indication or
    D/L if needed, or by flattening it.

3. **There was an earlier beginning.**   _____
    Indicate it. Handle with R3R and complete the chain.

 4. **There was no earlier beginning.**   _____

     Indicate it. Complete the chain with R3R ABCD on last incident if
     unflat.

 5. **An F/N was indicated too soon.**   _____

     Indicate it. Flatten the last incident.

 6. **An F/N was indicated too late.**   _____

     Indicate it. Spot the flat point, indicate the overrun, D/L if necessary.

 7. **An F/N was not indicated at all.**   _____

     Indicate it. Spot the flat point, indicate the overrun, D/L if necessary.

 8. **There was no charge on an item in the first place.**   _____

     Indicate it, and that it shouldn't have been run, D/L if necessary.

 9. **Jumped chains.**   _____

     Indicate it. Reorient to the original chain, spot flat point and indicate
     the overrun, D/L if necessary, or flatten the chain.

 10. **Flubbed commands.**   _____

     Indicate it, E/S to F/N.

 11. **Didn't have a command.**   _____

     Indicate it, E/S to F/N.

 12. **Misunderstood on the command.**   _____

     Find it and clear it.

 13. **Incident should be run through one more time.**   _____

     Indicate it. ABCD on the incident, flatten the chain.

 14. **Too late on the chain.**   _____

     Indicate it. Get the Earlier Similar incident and complete the chain
     with R3R.

 15. **Incident gone more solid.**   _____

     Indicate it. Check for earlier incident or earlier beginning and com-
     plete the chain.

 16. **Stopped running an incident that was erasing.**   _____

     Indicate it. ABCD on the incident and erase it.

17. Went past basic on a chain. _____
Indicate it, D/L if necessary.

18. An earlier misrun incident restimulated. _____
Indicate it. Find out what it was and do an L-3RD on it.

19. Two or more incidents got confused. _____
Indicate it, sort it out with an L-3RD on it.

20. An implant was restimulated. _____
Indicate it, if no joy do an L-3RD on the time of the restimulation.

21. The incident was really an implant. _____
Indicate it, D/L if necessary or L-3RD on it.

22. Wrong Item. _____
Indicate it was a wrong item and that all other actions connected with it were wrong. If it is from an L&N list or if any question or difficulty, L-4BR.

23. Not your item. _____
Indicate it, E/S to F/N.

24. Not your incident. _____
Indicate it, E/S to F/N. L-3RD if any trouble.

25. Same thing run twice. _____
Indicate it. Spot the first flat point, indicate the overrun, D/L if necessary.

26. There was a wrong date. _____
Indicate it. Get the correct date and flatten the incident if unflat.

27. There was no date for the incident. _____
Indicate it. Get the date and flatten the incident if unflat.

28. It was a false date. _____
Indicate it. Get the correct date and flatten the incident if unflat.

29. There was an incorrect duration. _____
Indicate it. Get the correct duration and flatten the incident if unflat.

30. **No duration was found for the incident.**   _____
     Indicate it. Get the duration and flatten the incident if unflat.

31. **There was a false duration.**   _____
     Indicate it. Get the correct duration and flatten the incident if unflat.

32. **An earlier Dianetic upset was restimulated.**   _____
     Locate what it was, indicate it. Sort it out with an L-3RD if neces-
     sary.

33. **An earlier ARC Break on engrams was restimulated.**   _____
     Indicate it. Sort it out with an L-3RD, ARCU CDEINR or an L-1C as
     applicable.

34. **There was an ARC Break in the incident.**   _____
     Indicate it. Flatten the incident if unflat. ARCU CDEINR at that time
     if necessary.

35. **You were protesting.**   _____
     Indicate it, clean it up E/S to F/N.

36. **Auditor demanded more than you could see.**   _____
     Indicate it, E/S to F/N. L-1C if necessary.

37. **Auditor refused to accept what you were saying.**   _____
     Indicate it, E/S to F/N. L-1C if necessary.

38. **You were prevented from running an incident.**   _____
     Indicate it, E/S to F/N. Flatten the incident if unflat. L-1C if neces-
     sary.

39. **You were distracted while running an incident.**   _____
     Indicate it, E/S to F/N. Flatten the incident if unflat. L-1C if neces-
     sary.

40. **Audited over an   ARC Brk**   _____
                        Problem   _____
                        Withhold.   _____
     Indicate it and handle the out rud. Do not pull W/Hs before the en-
     gram or chain is repaired or it will mush engrams.

41. An item was suppressed.   _____

Indicate it. Get the suppress off E/S to F/N, then run or flatten the
item.

42. An item was invalidated.   _____

Indicate it. Get the inval off E/S to F/N, then run or flatten the item.

43. An item was abandoned.   _____

Indicate it, get the item back and run or flatten it.

44. The wording of the item was changed.   _____

Indicate it. Get the correct wording and give it to him. Flatten it if un-
flat.

45. Stuck picture.   _____

Indicate it. Do an L3-RD on it. You can also unstick it by having him
recall a time before it and recall a time after it. D/L if necessary.

46. All black.   _____

Spot the black field or picture. Get the correct duration. If no go, L-
3RD on it.

47. Invisible.   _____

Spot the invisible field or picture. L-3RD on it.

48. Constantly changing pictures.   _____

Indicate there was a misassessment and a wrong item was taken off
the list. Get the correct item and run it, or L-3RD on that session.

49. There was a persistent mass.   _____

L-3RD on it, or D/L.

50. There was trouble with a pressure item or pressure on an item.   _____

L-3RD on it, or D/L.

51. You went exterior.   _____

Indicate it, D/L if necessary or rehab. If TA high as a result of this do
an Int RD Correction List or send to the C/S if pc hasn't had Int RD.

52. Your Int RD was messed up.   _____

Indicate it, Int RD Corr List if TA high. If TA OK, 2wc "going into
things" or clear up any misunderstoods on Int, Ext, etc.

53. Audited over Drugs, Medicine or alcohol.   _____
    Indicate it. L-3RD on that time, then verify all chains to ensure they
    erased.

54. A past death restimulated.   _____
    Indicate it, if it doesn't blow run it out.

55. There was nothing wrong in the first place.   _____
    Indicate it. Continue the action you were on.

56. The real reason was missed.   _____
    Indicate it. Locate the real reason and handle or do a GF.

57. Something else wrong.   _____
    Locate what it is and sort it out or do a GF M5 and handle.

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Remimeo
Class VIII
Tech Secs
Qual Secs

PHYSICALLY ILL PCs

AND PRE OTs

(with a note on Drugs)

One can very easily go to extremes on mental illness vs physical illness.

One school says all trouble comes from physical illness.

Another says it all comes from mental illness.

The psychiatrist mixes the two and says all mental illness is physical.

It is time every auditor, particularly Class VIIIs, took a hard look at this area.

The *body is* capable of having physical illness, acute (momentary) or chronic (continual). Broken bones, pinched nerves, diseases can any of them occur to a body *independent* of any mental or spiritual action.

The mind or spirit can predispose the illness or injury. By this is meant a person can be distraught and have an accident, or decide to die and get a disease.

But the disease or injury when he's got it is a body circumstance and responds best to skilled medical (ordinary usual, put on a tourniquet, set a bone, give a shot) treatment.

On a sick or injured person, you can reduce the time of healing or recovery by removing the spiritual or mental upset, providing the person can be audited, but usually after effective physical treatment. The facts are real enough. Auditing a person with a broken leg *after* it is set and he is comfortable, to remove the engram of the accident or treatment and the earlier "reason" he or she was distraught or had the accident, can improve the bone knitting time by as much as 2/3rds by actual test. This would be six weeks down to two weeks.

But the bone has to be set!

A body is a biological object. It has all manner of internal communication systems and organized interrelated functions.

Now if you tried to audit a preclear when he was acutely ill, you would find him hard to audit, confused and distracted and unable to follow commands. He may become over-whelmed easily. He certainly is not likely to respond properly. Because the *body is* sending all sorts of pain or discomfort messages and confusions, it is very much in his way. Two things are going on at the same time – his case as a spiritual being, his body as a distracting pain or sensation object.

The pc assigns the body to his case or his case to his body.

You have to get the body out of the attention area to some degree before anything helpful usually occurs by way of auditing.

Now let us take the pc with a *long term* illness. He has been sick with something since the age of 8. He really doesn't know he's sick physically. He blames it all on his own case.

In a lot of cases we audit him and he has enough relief to then get physically well. For he was mentally or spiritually suppressing his body.

These successes (and they are numerous) could cause us to do an *all mental* concentra-tion and lead some to insist all illness was from the mind. This makes some make the mistake of omitting physical examination and treatment in all cases. Certain schools of healing in the past got the entire field in disrepute by assuming and stating and acting on just that.

When you find a pc who does not easily respond, whether he answers up to 7 cases "Physically ill" or not, you sure better get him to the nearest clinic for a thorough physical examination including head and spine X-rays and get him examined pathologically. For you will usually find he is physically ill, in suppressed pain or discomfort. There are cures for a lot of these things now and not requiring "exploratory" operations either.

Don't throw away all the grades of auditing on him. He's sick. Physically.

That's why you do a White Form. A long history of accident and illness should prepare you to be alert and to send him to a clinic if his response to auditing is the least bit poor.

Then when you have the physical side of it in hand, audit him at assist level.

When he is *well* give him his grades.

Don't force auditing into physical healing. It works much of the time. Special types of auditing (running out injuries, etc.) assist healing markedly. That doesn't mean you should avoid all medical treatment!

"Failed cases" are medically ill or injured cases. Without exception. So why fail. There *are* medical doctors and clinics. There are standard, usual treatments. You don't have to buy "exploratories" and questionable actions. These are done only when the medical doctor can't find out either. When this impasse occurs, start doing assists or look for engrams.

There are some bizarre or strange postoperative (after operation) or post injury (after injury) conditions which do surrender miraculously to auditing. A suppurating incision (op-eration cut that remains open and unhealing), a bone that will not heal after having a plate put

on it, such things usually surrender to auditing. These facts should be used but they do not contradict that medical treatment was needed in the first place.

———————————

The psychiatrist is an example of the other extreme to spiritual healing. Instead of "all mind" he is saying "all physical".

Holding either extreme produces failures.

The psychiatrist got into his "all physical" by a sensing that insanity symptoms seemed to resemble persons in pain or delirium.

In these cases the stress of physical suffering is pouring back into and overwhelming the mind.

After considerable study on this, I realized that an error could have been made out of a statement "all insanity is physical".

This is probably the case in the large percentage of the insane. But from this one cannot then say "all mental trouble is physical" because that can be demonstrated as not true. We see it as easily as in a case of a person falling ill on the receipt of bad news, who then gets good news and gets well. The great Voltaire, on his deathbed, received news that he had been awarded the Legion of Honor, after a lifetime of being scorned by Authority. He promptly got up, put on his clothes and went down to receive the award.

In the case of insanity having physical causes, one could discover this, say it and be promptly misunderstood in this way. The sufferer is in a general agony from a nerve long ago crushed. This actual pain is distributed from its point of concentration to the whole of the nervous system. The person cannot think, looks dazed, cannot work or act. An operation removes the pressure causing the condition. The person is then "sane" in that he can perform the actions of life.

After a few successes of this nature, the psychiatrist leaps to the conclusion all *mental* trouble is physical. He teaches some student saying "all mental trouble is physical". The *student* goes off, tries to figure it out, dreams up a special insanity virus or "genes" or a special illness called "insanity". He then resorts to all manner of odd and often brutal treatments. By cutting or shocking a nerve channel one can stop the pain messages but such actions lay in new complications which usually terminate in premature if not immediate death or injury.

This tells one why tranquilizers (psychotropic drugs) make a patient rational or at least able to function for a short while. They too have their side effects. Usually all they do is, like aspirin, reduce the pain.

Patients do not always know they hurt. They suppress the pain or sensation. It seems normal to them or "life". When they receive a distressing experience or have an accident they cease to suppress and may go "insane", which is to say, become continuously overwhelmed by pain or unwanted sensation. They cannot think or act rationally. They may even be insane

only during periods of the day or month that coincide with the *time* of the accident. But they are in physical distress.

As they cannot eat or sleep, their condition worsens by exhaustion and they may go into various states including a deathlike motionlessness or actually die.

The correct action on an insane patient is a full searching clinical examination by a competent medical doctor.

He may find disease, fractures, concussion, tumours, or **any common illness** which has escaped treatment and has become chronic (perpetual). He should keep looking until he finds it. For it is there. **Not** some "insane germ" but some ordinary recognizable illness or physical malfunction.

The **wrong thing** is to cut nerves or subject the person to more pain. Electricity can *force* a nerve channel to flow or paralyze it. That is probably why it *seems* to work some-times. But it cures nothing and more often *confirms* the insane condition and certainly fills the patient with dread and terror, injures him and shortens life.

———————————

The problem in insanity is often how do you keep the patient from injuring himself or starving or dying before he can be examined by a competent medical doctor in a properly equipt clinic.

This is done by rest, security, feeding, under drugs if necessary.

A patient can be "built up" by various biochemical compounds, diathermy and other mild means that add to his stamina.

Treatment of what really troubles him such as continual sensation from a once broken leg which was never set, a broken spinal disc or such pathological ills as disease, can then be treated properly and corrected.

Recovered from the treatment, the patient will be found not to be "insane" any longer.

Auditing can then occur, any and all engrams (traumas) erased and the person's recovery will be greatly accelerated.

Of course the real target of auditing is the improvement of the ability to handle life, greater intelligence, reaction time and other benefits.

———————————

Like the spiritual healer of another age who said all was mind and forbade physical healing, the practitioner who says all is body and scorns mental healing is an extremist.

Each of these is at the opposite ends of "Aristotle's Pendulum". Each has *seen* with his own eyes *a few* remarkable cures. Thus each is confirmed in his belief and will hotly argue and even attack others who do not share his or her extreme view.

The truth, as is usually found, lies in between.

There is no "insanity virus". Even heredity remains unproven since families perform similar actions, are prone to similar physical ills and they also mentally pattern or copy each other. Either physical or mental facts can similarly prove that "insanity runs in the family" when it seems to do so. Thus "hereditary insanity" is an apparency which gives rise to the folk tale.

There is the spiritual identity of man, the mind, the thetan, call it what you will.

There is the physical body of man and that, even if cellular, is still material or physical or whatever you call that.

Proponents of both extreme illnesses are likely then to go off on an erratic course of search and research as the truth includes both and when you do include both you then begin to add up successes toward the desirable 100% of the physical sciences in result.

One cannot call either extreme more than an art. And the proponent of the purely physical does not have a "science" just because sciences are also physical.

One has a science only when one can predict and attain uniform results by the application of its technology.

It was very natural for the psychiatrist to *think* he had a foe in Scientology as all he had to hear was "spirit" and he was off. Since that has been his opposite "foe" for a long time.

To *heal* Man one has to realize he is dealing with two things – the spirit and the body. When a preclear comes to us because he wishes to be *physically* cured of a real current illness or malfunction, we do not serve him well if when we see he does not respond to auditing we do not require a full physical clinical study of his body until a real illness is found and treated.

If we already *know* he is ill we should call in the doctor. And we should limit auditing to assists.

This is also a case of crossed purposes. We are trying to give him greater capability and freedom. He is only trying to stop hurting.

Go ahead, sign them up. But at the first smallest clue (like the White Form) that he is being audited only to get well, we should have in good contact a medical doctor or clinic who is friendly and does not do unusual things to people and get the preclear diagnosed to *really* find what is wrong with him, get it cured if it is medically feasible and then, with a physically well pc, give him his auditing.

If this is done routinely, another benefit will also occur. The preclear so audited will not again become ill easily and will retain his very real auditing gains when he has these.

We are good enough to often get by. The ability of the body to get well often asserts itself when a preclear is given auditing, since the source of perpetuation (continuance) is removed from the illness and it changes.

Letting a pc, who has a badly set continually painful bone go on up the grades is doing him a disservice. He probably will not attain or retain his gains.

———————————

The stable datum on which I operate as a case supervisor is that if a pc does not get good gains quickly I want to know (and will find) what is physically injured or ill about him before I go on letting him be audited. The X-ray machine and other clinical actions become a must. For he is in suppressed pain and each time he gets a *change,* he puts on full stops as it started to hurt. He won't get the same gain again and tomorrow the same process or type of process won't work. He stops the pain if it starts to hurt and puts a new stop on his case. This is true of those cases who really have a physical illness.

Slow gain, poor result is a physically ill pc.

The exercise of these points requires judgement for a person can be given treatments which will not heal him. Where this is the case, and the treatment seems too damaging or uncertain, treat the pc on this routine:

1. Rest

2. No harassment

3. Food

4. Mild sedatives.

When the person seems well, audit him.

———————————

The truth of the above definition of "insanity" can be experienced easily with no great stress. To have a headache or toothache is sometimes quite distressing and distracting, making one gloomy or inactive. Taking an aspirin cheers one up and he can work.

That is in fact the basic mechanism. It is why tranquilizers work.

This is why old-timers thought they had to cut nerves to "cure" the insane. But that's like fixing the telephone exchange by throwing a hand grenade into the switchboard. You may get no more complaints but you sure don't have a telephone any more. Which, I suppose, is the basic way to stop *all* complaints. Nobody can ring up even if the house were on fire!

———————————

Drugs such as marijuana are craved only when the being "needs them" to stop undesirable physical pain or sensation. Then they backfire, causing more distress than they cure.

Some pcs, taken off marijuana for a few weeks, can be audited. Some can't. Those who then can't be audited are in pain whether they consciously realize it or not. In their "unconscious mind" (below their self-suppression) they *hurt*.

So those who can't be audited well when taken off some drug like marijuana should be gotten to a good clinic and given "the works". A competent medical doctor will find the broken bone, the disease, the diabetes. Give it a medical cure.

Then audit the pc by Standard Tech, checking resistive case lists, etc. all over again.

Pcs don't always know they're ill.

Mental upset aggravates physical discomfort. Physical discomfort aggravates mental unrest.

So play it safe.

A slow case who doesn't respond well to very usual approaches has something else wrong with him physically.

Don't be an extremist.

Your job after all is to do the most you can for the pc.

                                                L. RON HUBBARD
                                                Founder

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DIANETIC ASSISTS

(Include in Medical Series)

The Use of Dianetics to the Medical Doctor

There is everything to be said for correct medical treatment in the handling of the sick and insane.

"Insanity" is most often the suppressed agony of actual physical illness and injury.

To "treat" this agony with shock and "brain operations" is a Nuremberg type offense and is indictable as mayhem or manslaughter.

The medical treatment of "insanity" requires sure awareness by the patient of his whereabouts and present time. These are usually quite unbearable so he has sunk into the past to escape the agony of the present.

The **Touch Assist** given to such injured persons permits healing to occur by restoring the person to the present and his whereabouts to some degree.

Healing after medical treatment might not occur rapidly if the "insane" or chronically ill person remains in the past, unable to confront the present.

Thus the touch assist speeds and often permits healing after medical treatment and sometimes in minor injuries and illness permits the doctor to accomplish healing without further treatment.

There is the **Touch Assist**, the **Contact Assist** and the **Auditing Assist**.

The touch assist done as described elsewhere brings the patient's attention to injured or affected body areas. When attention is withdrawn from them, so is circulation, nerve flows and energy which for one thing limits nutrition to the area and for another prevents the drain of waste products. Some ancient healers attributed remarkable flows and qualities to the "laying on of hands". Probably the workable element in this was simply heightening awareness of the affected area and restoring the physical communication factors.

The **Contact Assist** is remarkable when it can be done. The patient is taken to the area where the injury occurred and makes the injured member gently contact it several times. A sudden pain will fly off and the injury if minor lessens or vanishes. This is again a physical communication factor. The body member seems to have withdrawn from that exact spot in the physical universe.

The restoration of awareness is often necessary before healing can occur.

The prolongation of a chronic injury occurs in the absence of physical communication with the affected area or with the location of the spot of injury in the physical universe.

The **Auditing Assist** is done by a trained auditor using an E-Meter.

It consists of "running out" the physically painful experience the person has just undergone, accident, illness, operation or emotional shock. This erases the "psychic trauma" and speeds healing to a remarkable degree if done properly.

In addition to assists there is Dianetic auditing of an acutely ill person which handles the current and past illnesses and injuries by erasing the "physical trauma".

The last is a skilled activity. Practitioners who have the idea such things do not have causes will of course fail to locate the causes.

A sickness can be composed, let us say, of a headache, a nausea, apathy and weariness.

Such a sickness may be bizarre, without medical reason.

By first getting the patient to find and say what shock occurred when the sickness began, getting when, and getting it recounted, the "illness" will lessen, the emotional state will alter – called a "release of affect".

By then finding an earlier similar instance and getting that one dated and recounted a further release of affect may occur.

If the good indicators, smiles, etc, do not occur in the patient, one again asks for an earlier incident, dates it and gets it recounted.

The phenomena of "floating needle" on the E-Meter should not be bypassed on a physically sick person. If it occurs, regardless of when, and the patient is smiling and suddenly free from symptoms, one at once desists with further auditing on that subject and at that time.

If no floating needle and a full release of symptoms occur, one then traces back the remaining symptoms. Let us say the headache is now gone due to recounting times of emotional duress. But the patient is still slightly nauseous. One traces the nausea to earlier or other incidents. It will vanish when found and dated.

The apathy vanished somewhere along the way but weariness remains. One traces the weariness to another or other incidents.

In short one handles each manifestation of the bizarre illness until all symptoms are gone and the patient is happy and cheerful.

Needless to say all this requires a skilled auditor but the skill can be acquired in a Dianetic training course.

The important thing is not to tell the patient what caused it, but to let him tell you. Otherwise the symptom suppresses.

The approach in any of these assists is quiet, gentle, permissive, never forcing the patient, speaking only the words required to do the process.

The temporarily insane by reason of emotional shock, where no medical illness exists, should be permitted rest and should then be handled by an assist as above or normal Dianetic auditing. Most often, rest and no further harassment result in a return to sanity in a short time such as a few days, but not in a terror atmosphere such as a psychiatric asylum where the patient is in the risk of being hurt or killed. Electric shock prolongs the condition and brain surgery is of course not treatment but murder as at best it deprives the person of his coordination and at worst shortens his life. The occasional and rare brain tumour is of course an exception but this is a medical not a psychiatric matter, no matter what manifestations the person exhibits. Most medically ill people do exhibit symptoms of mental derangement at some stage of their illness.

The acceleration of healing of medical illness or injury such as broken bones or the aftereffects of delivery or operations can be accomplished by the Dianetic auditing of the resulting trauma soon after full medical treatment or attention. The improvement factor is about ⅓ the normal time of recovery by some thousands of test cases.

Such auditing is done by a usual Dianetic procedure.

In addition to the above assists there is regular Dianetic auditing which handles chronic discomforts and prevents future illness as well as improving the state of well-being of a person.

The mechanisms of the mind revealed in Dianetics are of great use to the field of medicine.

They are easy and quick to apply.

About one month's training is all that is necessary to acquaint an otherwise educated and intelligent person with the fundamentals and skills necessary to assists.

Considerably more time of course is necessary to train a skilled Scientology auditor, but this is not the subject of this paper.

There is no conflict of interest between any healing profession and Dianetics. Dianetic materials and papers are fully available.

There is a conflict between Dianetics and political practices such as psychiatry since electric shock, brain operations and general degradation of the person may prevent the patient's recovery by Dianetics.

As answers exist now for insanity there is no reason to continue Medieval or Fascist solutions to the problem of the psychosomatically ill or the insane and we are doing everything in our power against fantastic opposition to end the torture and killing of the insane regardless of the politically "desirable" ends envisioned by some groups.

Dianetics, like any other true treatment, like aspirin or penicillin, was originally designed to handle the apparent basic cause of psychosomatic illness. The first research was intended to help allied prisoners of war degraded by the Japanese and Chinese prison camps and who after VJ day were transferred to Oak Knoll Naval Hospital. Later, in 1954, in a much

more advanced state of development, Dianetics was successfully employed to eradicate the results of allied prisoners of the Korean war who had been subjected to Russian brainwashing. The subject has been improved, made easier to teach and apply and its results bettered continually over a total period of 29 years. It has in 1969 been fully updated as *Standard* Dianetics. It is very successful and is in very broad use over the world.

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Dn Checksheet

SICKNESS

It will sometimes happen that a pc has a session and then three or four days later becomes physically ill.

The auditor may feel that auditing did it. It didn't. The auditing given would have to be non-standard for this to happen, but the auditing is not to blame.

According to my friend Dr. Stanley Lief, over a century ago Hahnemann developed a healing technology known as homeopathy which administered minute doses of medicine. The original theory seems to have been that the disease or illness was still in the body and would be released. The person would be wildly ill again and then permanently recover. This is probably a poor statement of the whole subject of homeopathy and its basic techniques may have worked well but have been lost.

In any event, the phenomenon has application here.

We would say that the mental image picture of the incident was stopped at a "stuck point" and that it would "run out" of itself if it were unstabilized.

A touch assist can do this. The person may become wildly ill after one and then recover.

What apparently happens is that the chain of incidents becomes unsettled and the same incident on the chain in which the person has been stuck for a long while runs out physically. It completes itself, which is to say, it finishes its cycle of action.

At a hospital where I studied, this was part of the things I observed.

Medicine sometimes will not work on a patient. It works on others but not on a particular one.

If that particular one is given mental attention even as mild as brief Freudian analysis, it will be found that medicine will now work on the person.

This formed one of the first application discoveries I made. From it I inferred that function monitors structure and proceeded to investigate mental actions and reactions in the field of illness. From this came Dianetics some years later.

Mental therapy prior to 1945 was so ineffective, consisting only of 19th Century psychoanalysis and Russian and East European psychiatry, that no one else seems to have ob-

served, then or now, that "mental blocks" are able to obstruct medical treatment of a real physical nature.

The proof is that when one even reduces the mental block slightly, medicines such as antibiotics or hormones will now be effective when they were previously ineffective on some patients.

It is this factor which gives purely medical treatment a somewhat random appearance. The patient is "stuck" at some point in time. Even inadequate handling of him mentally (such as a touch assist or a poorly or partially done session or even a "bad" session) "unsticks" the person from the frozen or fixed "stuck" point.

One of three things can now happen:

1. The person can be treated medically for his illness with greater effect.

2. The person in two or three days gets apparently sick or sicker but eventually recovers and is not subject to that exact sickness again – (it "ran out").

3. No further result is noted.

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These data are *very* useful to a Dianetic auditor or a medical doctor. A person can be ill and the illness not surrendering to the usual treatment. Brief mild Dianetic auditing can be done. The medicine may now work.

An auditor who specializes in keying out locks at the first F/N will find occasionally that his preclear becomes ill in two or three days from some occasional but longstanding illness which then "runs out" and doesn't appear again.

An auditor who gives a non-standard, very poor session may find a preclear occasionally becoming ill within the next three or four days. The auditor and others blame the auditing.

Any auditing is better than no auditing.

Standard Dianetics is much more powerful than old Dianetics and should only be done by auditors trained to do it exactly.

Sessions which are non-standard should be corrected *as soon as possible,* certainly within two days or you may find the preclear beginning to go through an illness cycle.

The cycle was waiting to complete itself for a long time. The auditing unsettled it. It "ran out" physically because the pc was moved in time in the incident in which he has been "stuck".

An understanding of this phenomena is necessary. It is useful data. Audit a pc badly, audit a pc too much to F/Ns on locks only, give a pc too many touch assists and you will find

now and then that the occasional pc becomes physically ill, runs a temperature, etc. Before blaming yourself too much, realize the pc has often been ill in the past, that the mental cause of it has been loosened up and manifests itself and runs out physically. It is not fatal. That illness won't recur again as it has in the past.

However, that it is not fatal to the pc is no excuse not to do a good **standard** job of auditing.

If Standard Dianetics is used **with no departure** from its technology and procedure the phenomenon will not occur and no pcs experience a physical aftermath.

Standard Dianetics taught precisely, done precisely, only makes people well.

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Dianetics Checksheet
Class VIII
Case Supervisors
Registrars
Public Officers

DIANETICS AND ILLNESS

Although mention of this is made elsewhere in the Dianetics Course, the facts about **illness** do not seem, in practice, to reach the Case Supervisors or Dianetic Auditors.

The idea that one can always get rid of an illness by auditing **one** chain to basic is false. Man dreams about "one-shot" cures to a point where he could be accused of being impotent!

Here is an example: A preclear "has always wanted to get his bronchitis handled". In Dianetics a list is made for chest or lung pains or sensations. *One* is chosen and erased. The "bronchitis" is now better or even absent for a few days. Then we have the preclear back again saying "It didn't cure my bronchitis".

Enough cases are handled successfully by running *one* chain on a somatic that people get stuck in the win.

Here is another example: The pc says he has migraine headaches. The auditor assesses a "head pain" quite correctly and then runs out one chain. The migraine does not occur for a week after. Then here's the pc again saying "I've still got a headache".

All this is invalidative of the tech and the auditing. A Registrar or Public Division hearing this tends to lose faith in the powers of the tech.

The **fact** is that the illness was not properly handled or C/Sed or audited.

In the first place a pc trying to get cured of bronchitis or migraine – or any one of a dozen other illnesses – should be sent for a medical examination. How do you know the bronchitis isn't tuberculosis? Or the migraine headache isn't a fractured skull?

A "continual side pain" may be a gallstone.

In short, something which continually hurts or disables may be structural or physical.

So, when you omit the first action (medical) in handling an illness, you set up an auditor for a possible failure.

Many of these things can be cured medically without too much heroic action.

If it *is* medical and can be cured medically, then it should be.

Also it should be audited. This lets the medical treatment work. Many "incurable" illnesses become curable medically when they are also audited.

The second thing that gets overlooked is that **an illness is a composite** (composed of many) **somatic**.

The correct auditing action on "bronchitis" or "chest trouble" or "migraine headache" or any other continual worrisome illness is to continue to find somatics, sensations, feelings, emotions or even attitudes in the area affected and run their chains.

It takes more than one chain of engrams to build up an ill area.

Having found and run the "deflated feeling" of bronchitis, which was the first best read, the C/S should order and the auditor find and run the **next** somatic, sensation, feeling, emotion or attitude in *that* area.

It is sometimes necessary to add to the list *for that area* of the body.

Seeing a continual or recurring illness on the Health Form the C/S and auditor should dig out of that area every somatic, sensation, feeling, emotion and attitude that can be made to read and run those chains, each one to basic and erasure.

That is the way you handle any illness, whether continual or temporary.

The maxim is that **it takes more than one chain of engrams to make a body ill.**

Continual reassessing and adding to general lists will get there eventually providing it is done long enough. But this general approach will find a certain number of pcs saying to Registrars, Public Officers and friends, "I've still got my _____".

It is in fact a false report. They didn't still have all of it. It is one chain less and therefore better.

But auditing gives gains by *deletion*. A pc does not suffer from what has been erased. He suffers only from that which has not yet been handled.

Some persons tried years ago to get their trouble handled, somebody or some practice failed and after that they don't mention it at all. They don't support the technology anymore either.

So, in handling illness, give the handling of the structural disease side of it to the medical doctor, and thoroughly handle *all* the mental side of it with auditing and everyone wins.

Any Registrar or Public Division personnel colliding with "My lumbosis was not handled" should call this HCOB to the attention of the person, the Case Supervisor and the auditors.

Only then can you have 100% tech.

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Class VIIIs
Dianetic Auditors
Case Supervisors
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SERIOUSLY ILL PCS

In Green Form No. 40 there is an item:

"Seriously Physically Ill".

This is handled as follows:

1. Medical Examination

2. Medical care

3. Dianetic Auditing as follows:

    List all somatics and feelings connected with the illness.

    Assess the list.

    Run R3R.

    Continue to assess the list and run R3R on items found.

    Add to the list any new items connected with the illness.

    The main point is to exhaust the entire list, of all reading items.

    An illness contains many somatics, feelings, emotions.

    As a pc who is ill is easily made an effect, the auditing sessions should be smoothly done and each session relatively short, completing each session on the first erasure that gives the pc an F/N and a win (Erasure, Cognition and F/N).

    The remaining items on the GF 40 are then handled.

    If "Seriously Physically Ill" is not *the* GF 40 item, it is still handled but in its turn doing the above Dianetic actions.

    Needless to say the item "Seriously Physically Ill" is handled by a Dianetic Auditor.

    (**Note**: No narrative or multiple items must be audited. Get them restated.)

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Dianetic Auditor
Dianetic Checksheets

UNRESOLVED PAINS

It occasionally happens that a pc's certain pain does not resolve on Dianetics.

There are two reasons for this:

1. Not enough auditing on enough chains.

Sooner or later the exact small piece of an engram "already run" shows up on another chain later.

Example: Pain in an area of an operation occurs now and then again weeks, months or years after the operation has been run out as an engram. Sooner or later just on general auditing the missing bit of the operation shows up, blows. Voila! Pain gone forever.

This is peculiar especially to abdominal operations like an appendectomy. The operation was run out. The scar stays puffy. The pc is occasionally ill from it. Pc's conclusion is that Dianetics hasn't worked on it. More auditing on other somatics (just general Dianetics) is given. One day the remaining bit of the operation, hidden from view, apparently erased, shows up, blows. Pc now fine.

A reason for this is "overburden" in that the incident was too charged in one place to be confronted. As the whole case is unburdened, confront comes up. The piece that was missing (and giving the pain) blows.

There is no way of forcing it. In fact it would be fatal to try.

The other reason for it is that the missing bit causing the pain is a different somatic like "a Chest Compression". This bit of the operation had another basic than the one run.

The answer to a persistent or recurring somatic in an injured area is always more Dianetic Auditing of the standard type, just addressed to the bank not the special somatic. Just keep doing the usual and one day it all straightens out.

2. Sympathetic nervous system pains.

There are two sides to the body. As you learn in touch assists, if the right hand is injured you include also the left hand.

Body nerves conduct pain. The two sides of the body interlock. Pain gets stopped in the nerves.

If the right elbow is hurt the **left** elbow will have echoed the pain.

Example, you find a pc with a pain in the left elbow. You try to audit a left elbow chain. It doesn't fully resolve.

If you ran injuries to the **right** elbow, suddenly there's a somatic going through the left elbow! It gets well.

This is the sympathetic nervous system. The right ear, injured, also gets echoes with a somatic in the left ear. You audit the right ear only. Pc comes up with a sore left ear!

You can actually direct a pc's attention to it (non-standard but a research technique) and he can find where the uninjured ear echoed the injured ear.

Where you can't fully repair a crippled left leg, don't be surprised to find it was the *right* leg that was hurt.

You audit the *left* leg somatic in vain. If you do, start auditing somatics in the **opposite side of the body.**

TOOTHACHE

The mystery of toothache is resolved in both 1 and 2 above, especially 2.

The pain is concentrated on the left upper molar. You audit it in vain. Toothache persists.

Look at the pc's mouth. Has the **right** upper molar ever been pulled or injured? Yes. That's how the *left* molar began to decay. The right upper molar was pulled. The pain (especially under the painkiller on the right side only) backed up and stopped on the opposite side. Eventually the left upper molar, under that stress, a year or ten later, caves in and aches.

Mysterious as it wasn't injured. Mysterious as the opposite molar is long gone, doesn't hurt anymore.

When a toothache does not resolve in auditing, audit the opposite tooth on the other side. You can actually do it by count of teeth.

It's sort of auditing a no-somatic.

Pc in misery with right upper molar. No pain on left side. Audit an injury he had on the left side (it will read on the meter also). Voila! The toothache that wouldn't go away eases up!

The fellow who has the exact opposite teeth pulled (upper right wisdom, upper left wisdom) is in for it as there is a constant cross-play. Makes the mouth odd and pressury. Both sides are reacting to the other side!

Dentists often note the strange pressure, "bursting feelings", a patient has when a tooth "needs pulling". This is the stress in the nerves from an injury which occurred on the opposite side!

An auditor can audit a right side tooth in vain unless he knows enough to audit **the other side**.

For a pc with a toothache, on the *right* side, you can list for feelings on the *left* side of the mouth and get "numbness", "no feeling", etc. Audit *that* list and suddenly magically the toothache on the opposite side not being audited eases up.

As toothaches sometimes give a Dianetic auditor a failure, he should know about the sympathetic factor as above. The failure becomes a success.

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C/S Series 49R

Assists

There are three types of assists.

They are:

1. Contact Assist

2. Touch Assist

3. Dianetic Assist.

They are quite different from each other. They are **very** effective when properly done.

A severe injury or illness case can be run on all three and **should be**.

If the handling is very soon after injury, burns do not blister, breaks heal in days, bruises vanish.

But to obtain such results it is necessary that the C/S and auditor or auditor alone know and **respect** the assist tech. It is too often a toss-off, only one kind being done and then not to EP.

Every assist must end with an F/N (at Examiner or checked on a meter).

CONTACT ASSIST

Done off meter at the physical Mest Universe location of the injury. EP – Pain Gone. Cog. F/N.

SEE HCO B 9 OCT 67, ASSISTS FOR INJURIES. [SEE BTB 18 FEB 74, SAME TITLE.]

DIANETIC ASSIST

Done in session on the meter. EP Pain Gone. Cog. F/N.

SEE HCO BS

    12 MAR 69 II, PHYSICALLY ILL PCS AND PRE OTS

    24 APR 69   DIANETIC USE

    14 MAY 69   SICKNESS

TOUCH ASSIST

Done off the meter by an auditor on the pc's body. EP Pain Gone. Cog. F/N.

See HCO Bs

UNCONSCIOUS PC

An unconscious pc can be audited off a meter by taking his hand and having him touch nearby things like pillow, floor, etc or body without hurting an injured part.

A person in a coma for months can be brought around by doing this daily.

One tells them a hand signal like, "Press my hand twice for 'Yes', once for 'No'," and can get through to them, asking questions and getting "Yes" and "No" hand responses. They usually respond with this, if faintly, even while unconscious.

When one has the person conscious again one can do the assists.

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First aid rules apply to injured persons.

In making them touch something that was moving, stop it first.

In making them touch things that were hot, cool them first.

When possible make them hold the things they were holding, if any, while doing a *contact assist.*

If after a touch or contact assist they don't f/n when taken to or given an exam, check for o/r and if no f/n take them away and complete the assist.

Dianetic assists can be run triple.

_____

This is important tech. It saves pain and lives. Know it and use it.

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Founder

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