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Editorial	-	•	3
The Processing of Children L. Ron Hubbard	-	-	5
Associations, Groups and Clubs	-	-	13
Bag of Tricks · · ·	•		16
Case Histories		-	17
Hubbard Dianetic Auditors	-	-	19
Courses	_	_	24.

Official Publication of

The Hubbard Dianetic Research Foundation, Inc.

The Hubbard Dianetic Research Foundation, Inc.

The Foundation has been chartered in the State of New Jersey as a non-profit, scientific research, educational and charitable corporation. Its main object and purpose, as set forth in the charter, is "to study and conduct research in the field of the human mind and of human though in action." Subordinate purposes include teaching and publication.

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NOTE: Procedures set forth herein should not be applied until the auditor is familiar with "Dianetics: The Modern Science of Mental Health."

Editor Donald H. Rogers

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Editorial

The Real Object

One of the recurring difficulties the dianetic auditor encounters today—a strictly temporary difficulty, but none the less a real one—is that his preclear is being continuously attacked by friends, neutrals and enemies on the basis that dianetics has not been officially blessed by the official "authorities on the human mind."

It may help the auditor to have the following points in mind.

By diligent application, in the course of the next ten years one could become a real authority on alchemy. By collecting ancient tomes, old records, antique manuscripts and forgotten records of long ago, by ferreting out and collecting alembics, powdered unicorn horn, and the various apparatus of the old alchemist's laboratory, a great deal could be learned about alchemy. It would undoubtedly make a fascinating hobby. At the end of the ten years of study, one could probably claim to be the world's leading authority on alchemy.

But alchemy was intended to be a study of the nature of the real, physical universe, and of methods of controlling it. Therefore, as the world's leading authority on alchemy, one could claim to be the world's leading authority on the subject of the physical universe . . . or could one?

It is essential to recognize that the fact of being an authority on a system of thought concerning a real object is NOT the same as being an authority on the real object.

In Medieval schools of medicine, Galen was the source of all wisdom concerning medicine; the graduated doctor was an authority on what Galen said about treatment of the sick; the error made was to assume that being an authority on that system of thought was the same as being an authority on the treatment of the sick.

Thus, while a psychologist is unquestionably an authority on psychology, and while psychology is unquestionably the presently-recognized system of thought concerning the human mind, no honest, clear-thinking psychologist dares claim to be an authority on the human mind. To do so is to violate the most basic principles of scientific thought; it is confusing an idea with the real object the idea concerns. Any man doing so is automatically guilty of unsound thought.

To judge what would constitute a true expert on the real object, consider that the professional engineer can guarantee something like 99.9% success in his design of a bridge. He has first become an expert on the science of engineering; at that point he graduated from school. By years of practice and study and work, he has now become an expert on the real object; bridges. He can properly claim to be an expert on

the real object, because he can display, as evidence for his claim, not the ability to pass questionnaire examinations, but an unbroken succession of unbroken bridges. Even if, on returning to school, he should find that he has forgotten much of his science of engineering, and can not longer pass the questionnaire examinations every graduating engineer is expected to pass, he remains an expert on bridges. It is just that he is no longer an expert on the science of engineering.

In engineering fields, this distinction between the expert on the real object and the expert on the theory of the real object, is sharply recognized.

J. W. C., Jr.

Departmental News

A recent report from Chicago adds an interesting note to the article on *The Processing of Children* in this issue. The Chicago Department has instituted a program for observation and research in the field of Child Dianetics. Currently, it is on a very small scale. Two couples, Lucille and Henry Maurer and Eleanor and William Powers, who have worked with children previously, are carrying forward the immediate work with the children now being cared for dianetically. This program is under the general supervision of David Vrooman, H.D.A.

It is hoped that the number of children being so cared for will increase shortly and that, as a result of increased observation, more definite ideas as to how to deal with the problems of children from a dianetic viewpoint will be formulated.

At the present time, the most striking observation that has been made is in reference to the matter of valence shifts in children's every-day lives. One child, for example, is observed to be virtually unable to talk because of some sort of "shut up" command, and consequently is continually shifting into other, more vocally aggressive valences in order to overcome this handicap in his own valence.

This rapid shifting of valence is apparently a natural part of children's growth, and this is not in itself a sign of aberration but rather a form of exploration on the part of the child. Aberration seems to be present when the child is found to be simultaneously in more than one valence, or when he is found to be stuck in some valence other than his own. This view seems to receive support from our work with adults.

As one aspect of the problem of helping children to absorb data correctly, various games with words as well as with concrete materials are being contemplated, and, in some instances, experimentally applied. It is hoped that the games will give the children a better semantic orientation and that the continued use of these games in their everyday training will give them beneficial training patterns in this respect. When these games are finally formulated, the material on their exact nature and application is scheduled to be presented.

The Processing of Children

L. RON HUBBARD

It is possible to process a child at any age level beyond the point when he learns to speak. No extensive processing should be undertaken until the child is at least five, and full dianetic processing is not encouraged, except in very unusual circumstances, until the child is at least eight years of age. Much good can be accomplished before eight by straight line memory technique, but reverie should not be attempted before that age. In the period from eight to twelve years the child may be processed by any of the techniques outlined here. One should not force the child into the pre-natal area until after he is twelve years old. Sometimes a child will willingly return to the basic area and if this happens naturally, engrams can be reduced or erased. If a return to the basic area is made by the child, it is to be accepted and treated as a matter of course, but the auditor should not in any way force him to do so.

In all except severe cases, a child may be successfully processed by a parent. In all cases, however, it is more difficult for a parent than an outside auditor, since the parent, by dint of being a parent, is a restimulator for the child. Even the tone of a parent's voice, without similarity of word content, will sometimes act as a restimulator. Nevertheless, with some intelligence and objectivity on the part of the parent, it can be done. It should be set up as a well-defined program occurring in a slightly different form than any other household happening. It should be a new, different, exciting game in which the rules are slightly different from those of other forms of play. Even if the processing is done by an auditor from outside the household, the parents still form an essential part of the child's environment, and must be educated into acceptance of the facts of dianetics.

There are three major steps in the processing of children:

- 1. Prevent restimulation.
- 2. Break locks.
- 3. Deintensify painful emotion.

The parent should attempt to avoid the language which is in the child's reactive bank. The emotions accompanying this language should also be avoided, as well as any known duplication of situations which are likely to have been recorded by the child's reactive mind. If the parent cannot recall the incidents in which engrams might have been created, or if he cannot remember the language used at that time, he can soon determine by the child's reactions what sets of words and what kinds of emotion are in the child's reactive bank. He should then be very careful to avoid this language, especially when situations exist which might be engramic. Any aberration in a child is evidence that a key-in has occurred, and the situations in which the aberrations are

most apparent will have similar perceptics to the perceptics which were present when the engram was laid in.

For example, one set of parents tried desperately to keep their child from wetting the bed by continually telling him to go to bed and no to drink any water before he went. In spite of this "education" to child continued to wet the bed. Dianetic evaluation of this situation showed immediately that something in the immediate situation around the child was stimulating an engramic command which caused the bed wetting. In this case, as in many others, the action taken in all good faith by dianetically untrained parents was not preventing the aberration, but rather was keeping it chronically keyed in. These parents found that commands which meant reactively that if you are told not to drink water you must urinate in the bed were contained in the birth engram. The actual engram content was:

"The water is going to come."

"It'll break and go in the bed."

"Just lie there and let it go."

The engram was keyed out by removing the restimulators. When the parents stopped telling the child not to drink water before he went to bed, the bed wetting tapered off and then stopped entirely.

Locks can be contacted and blown through straight line memory techniques. The parent can be of great help in this part of the process because he knows pretty well when he has created a lock, especially in an emotional blow-up of any kind. By remembering the standard pattern of his dramatizations during emotional crises, he can help the child or the child's auditor to find the locks which will best help the child to overcome his difficulties. Whenever anaten* is present in the child, and it is present when any engram is being restimulated, a lock can be created. The resulting aberration will depend on the emotion and pain of the lock as well as of the original engram. This fact, plus the nature of the aberration, can be used to determine which locks should be investigated first.

In a child, returning is a simple and natural mechanism, and the technique of blowing locks is to use a combination of memory and recall. Ask the child, for instance, if his mother ever bawled him out. If so, try to get him to remember a specific incident. At this point many children will close their eyes and return to the event. If the child can remember the exact words his mother used, and the words of any other people in the incident, allow him to run through it as often as it interests him. Most locks will blow with a single recounting, and will cease to have any aberrative effect on the child.

Grief can be contacted in a child as easily as in an adult. The chief point of difference is that the grief will be on moments which seem not very important to an adult. A child will have a definite sense of loss when, for instance, his mother did not allow him to sail his boat on a

^{*&}quot;Anaten" is coined from "analyzer attenuation" to describe the gradual and variable nature of analyzer shutdown while avoiding the classical implications of the word "unconscious."

rainy day. The discharge over this type of grief engram will be small when compared to the grief occasioned by the leaving of a favorite nurse, or the loss of a pet, but any moment of grief which can be discharged will improve the health and well-being of the child.

The Accessibility of Children

The auditor who wishes to deal successfully with children must have, above all, the ability to establish affinity with the child. This is a problem of interesting the child in the incidents which have caused his difficulty. A child's attention is badly scattered. He has not yet learned to focus his attention well, and it is the part of the auditor to pick up his attention and channel it back against the locks and grief engrams.

A child has a great natural sense of dignity. Do not talk down to a child. Treat him with as much dignity as you can. You will find that the child has wierd misconceptions about many every day things around him. Trace these misconceptions to their source and you will usually find an adult who has not taken the trouble to give this child the right data. Never talk over a child's head to his parents. It is better to talk over the heads of the parents to the child. Always work on a partnership basis with the child.

One little boy was almost completely inaccessible at the beginning of processing. He was very non-committal about anything connected with his past life and completely silent in regard to his parents. Knowing that this behavior was not natural to a child, his auditor asked suddenly, "Which one of your parents told you they'd lick you if you told about their quarrels?" The little boy looked startled, and then burst into tears. Subsequent investigation proved that both parents had threatened him if he told anything about their fights. The auditor who deals with children needs to understand that there may be artificial barriers to the building of affinity with the child. In many cases the child can best be processed by dealing with the parents.

Steps in Addition to Processing

Quite often the processing of a child inevitably involves more than working with the child alone. Much of the aberration found in a child will have come from a lack of dianetic knowledge on the part of the parents and steps other than putting the child on a couch and removing locks and running grief engrams need to be taken in the interests of preventing restimulation.

There are three ways of treating a person dianetically, and all of these ways are sometimes necessary in the processing of a child.

- 1. Standard processing procedures.
- 2. Dianetic education.
- 3. Shifting environment.

The case of the little boy who had been warned not to talk about his parents' quarrels will serve to illustrate the type of action sometimes required in addition to regular processing procedures. The measures taken in this instance were rather extreme, but were necessary for the child's health. Blowing of the locks on this case revealed that violer quarrels occurred as a regular feature in the household, particularly during meal times. It was not uncommon for dishes to be utilized as weapons, and for the child to be caught in the line of fire. The child was continually being restimulated at mealtime and was not being fed properly. During the course of processing he had not only blown locks and grief over these and other incidents, but had begun to pick up weight.

When the time came for him to return home, his auditor made the suggestion that the child should be allowed to eat his meals in the kitchen. Both parents immediately became very upset about what their boy had told concerning their quarrels, and the situation seemed to indicate that the parents were not going to be at all cooperative in keeping the child from further restimulation. Since the parents in this particular instance could not be reached with ordinary educational techniques, the auditor merely informed them that if the child ate his meals away from the family he would gain weight, and that if he did not gain weight the proper authorities to prevent cruelty to children would be contacted. The child gained weight.

Dianetic Education of Parents

The auditor who deals with children needs to evaluate the child's environment from a dianetic viewpoint. In many cases it will be the parents who need processing, not the child. In any case it is important that the parent understand what key-ins are, and how to avoid them. One of the important points to remember in this connection is that the "usual" childhood illnesses quite often occur three days after some emotional upset in the home. In processing the child, make sure to explore the area before any illness he may have had for the key-in which helped to bring it on. The first sickness of the child will help you locate the first key-in. If enough of these are found in the child, the parents will be convinced of the necessity of preventing further key-ins. If the child's processing does not provide enough evidence to persuade the parents of the importance of key-ins on the health of the child, it is a part of the processing of the child to demonstrate on one of the parents that such key-ins do take place, and that they effect health and happiness.

A small amount of education for the parents in the principles of Child Dianetics will sometimes accomplish more than the same number of hours spent in processing the child. Perhaps the single most important point in such education is to make clear to the parents the importance of giving goals to a child, and that the most important goal is that of growing up to be an adult. A child should have responsibility and independence commensurate with his status as a child. He should have things which are wholly his, and about which he decides everything.

But under no circumstances should he be possessed automatically of as much right as an adult in the sphere of the home. To give him this is to remove the main goal of his life: growing up. The child, cared for without question and trained toward nothing loses his prime incentive 'n life when the adults around him do not enjoy themselves as adults, ake pleasure in their rights as adults, and insist on their rights as adults. When a child is kept dependent and shielded and recompensed for being a child, his incentive for being otherwise is much reduced with a consequent deterioration of ability and a serious reduction in the quantity of knowledge he will acquire since he does not see any real reason to acquire it.

If a child is not robbed of his main goal, growing up, he can quite often salvage himself. But the child's idea of the adult world depends on the adults around him. If the child looks at mama and sees that she is really a sort of nurse maid for him, and that he can make her do most anything he wants her to do, and that she is always moaning and complaining about having so much work to do, about her health, about a lot of things, he is certain to conclude that he doesn't want to grow up to be like mama. If he looks at papa and sees that papa works all day at the office, comes home at night and sits in a chair doing nothing for the rest of the night, and "plays" by pushing a little white ball around on the lawn, the child may well decide that he doesn't want to be like papa, either. The child is making a pretty good analysis of the situation if he decides that he'd rather stay a child anyhow!

Education of the parent includes, of course, the basic ideas of preventive dianetics. Don't talk around a sick or injured child. As soon as anaten begins to depart after a minor accident, act to make the child comfortable, but do not talk for many minutes. Don't leave the child in a restimulative atmosphere. Don't take a child up from the middle of a nice sleep and tell her repeatedly to "sit there in that chair and listen to what a terrible thing it is to be married to a man," as one mother did. Try to keep the child away from highly charged dramatizations of any kind. Care for the child efficiently, but quietly. Do not establish yourself as an indispensable ally.

Education of the Child

If an auditor finds at the beginning of processing that the child he is working with is in need of constructive things to do (and this will be customary rather than unusual) it is sometimes a good thing to set up a definite program of acquiring skills for the child. These should be primarily bodily skills. This program can be used as a means of shifting his environment slightly away from the most of the restimulation he is getting. Let the child pick his own program. Help him in setting it up, but if it is specifically designed to be his program do not in any way insist on its being carried out.

The child needs very little education in dianetics, or in the dianetic viewpoint toward children. These things are natural for him. He will quickly come to look on his processing as an interesting game if the auditor builds the situation up in this way.

Semantic Re-orientation

In one respect the auditor can perform a very important function in the education of the child. A child is almost always confused about the world around him because of the labels which have been placed on olf jects by adults who do not understand the serious nature of incorrectly labelling an object for a child. Consider the case of a child who has had no previous data concerning death who is read a poem about little tin soldiers and angels with golden hair. If this is his first understanding of the word "death" it must be very puzzling to observe the adult reaction to death. The impression made by this first misconception about the meaning of death must somewhow be obliterated before any accurate communication on the subject can be made to the child. The divergence between this first conception of death and all future conceptions forms a troubled area in the filing system of the analyzer which will tie up some of the available attention of the child until the tension is resolved. The technique for accomplishing this is simply to treat the original incorrect labelling as a lock incident and to lift the tension from it by close present-time contact with it.

Sometimes a lack of semantic orientation will cause problems which have such far-reaching implications that the resolving of the semantic problem in the mind of the child will produce results which appear to be miraculous. One little girl was failing in arithmetic. She was very bright in other subjects and no reason suggested itself for her failure to be able to do her work in this one subject. She was given a few problems, but became hopelessly bogged down trying to work them.

Auditor: If an airplane is travelling at 10,000 feet at 2:00 P.M. and at 5,000 feet at 3:00 P.M., how far would a man have to fall to reach the ground at 3:00 P.M.?

Little Girl: Gee! I dunno. Well, if it's ten thousand and then it's five thousand. Honest. I can't tell you. It's really a problem.

Auditor: Is it just that problems bother you?

Little Girl: I guess so.

Auditor: Does anyone around here ever talk about problems?

Little Girl: Well, maybe mommy might talk about having lots of problems.

Auditor: Has anyone ever called you a problem?

Little Girl: Well . . . no. I don't think so. Auditor: Who might call you a problem?

Little Girl: Well, maybe mommy. Oh! You mean that kind of a problem!

The word had assumed its right meaning, and the little girl soon started getting good marks in arithmetic.

Shifting Environment

An auditor may discover information which will make changes in the environment of the child necessary for the child's health. Usually 't is possible to obtain the cooperation of the parents in making these changes. There is a great deal of natural affinity between parent and child, and the parent is usually genuinely interested in the welfare of the child. If it can be demonstrated to the parent that his child's health will be adversely affected if he visits his aunt and uncle every summer, the parent will usually discontinue the visit.

Most of the changes necessary in a child's environment will be along the line of removing him from the restimulative effect of allies. The insidious way in which allies can completely undermine the health and sanity of a child without even being aware of what they are doing is hard to imagine unless you have examined it for yourself.

In one instance an auditor visited a girl in a hospital. When he arrived he found that the grandmother had arrived previously, and that the girl had developed a fever. A little questioning established the fact that grandmother and the fever had arrived together. Straight line memory contacted an illness at nine years of age during which grandmother had re-established herself as an ally and insisted that she would be around any time the little girl was sick. When this lock was blown, the fever went down immediately and vanished completely in a few hours.

In this respect it is interesting to note that any person who countermands the authority of a parent also undermines the independence of the child. The child's reality consists largely of his relationship to his parents. Any factor which comes between him and his parents is not good for the growth of the child. Any relative or other person who interrupts the communication between a child and his parents, no matter how well meaning his efforts, and especially if he attempts to set himself up as another, less stern, parent is harming the health and sanity of the child. An auditor should use every possible means to have such a person removed from the immediate environment of the child.

Special Problems

The child is not capable of sustained concentration and should not be extended in this regard. Even in working pleasure moments the auditor should be careful not to attempt to keep the child concentrated on one activity any longer than the child can accomplish without tiring. When it is at all possible it is better to work every day with a child, since the working period with a child is shorter. The length of time a child may be able to work at one sitting may be very short, in some cases not more than fifteen minutes to a half hour, but if the child is unable to concentrate his attention for longer than this period, it will do no good at all to attempt to keep him at it longer. In this respect it might be well to note that although working time must necessarily be cut

shorter, the amount of good that can be accomplished in a child by these shorter sessions sometimes seems miraculous to persons who have not tried using dianetic techniques with children.

One problem which exists with children more than with adults i' that sometimes one or both of the parents will be actively against dianetics. If this has extended to the point of using dianetic terminology in a disparaging way the task may be made even more difficult. The answer to this problem is, of course, affinity and communication between the auditor and the child. It is good in a case of this kind to emphasize even more the "playing-a-game" approach, and to avoid use of dianetic terminology until affinity is well established.

Another special problem with children is that the child will sometimes not willingly enter a lock incident which appears light to an adult. One way of getting around this is to ask the child to imagine a television or a movie screen and to picture an incident similar to the lock on this screen. Quite often the actual lock will appear on the screen. One word of warning about this technique (which also may be used with adults on badly occluded locks). Never tell the child that any part of any situation is imaginary or a delusion.

Children, even more than adults, lose their grasp on reality when their data is invalidated. If Junior's picture-screen image of mama has green hair, do not point out to him that mama's hair is really red. Simply run the lock through and proceed with processing. Eventually the data will begin to straighten out in Junior's mind and he will volunteer the information that mama's hair is really not green, but red, and that he knew it all along.

Dividends

Nothing in dianetics provides more thrill than to see a child regain his grasp on reality. Once communication between an auditor and a child has been definitely established, the results of processing in a child are immediately apparent. A child grasps dianetics easily, and it is not at all uncommon to see them beginning to use the new memory games on mama and papa and on playmates. Unless there is a very bad prenatal bank which has already been keyed in, a child's perceptics are usually in good shape. It is a pleasure to watch them regain their own data and re-establish its validity.

Children become particularly adept at running out minor pain incidents immediately after they occur. Since the latest bump or fall may be contacted and the pain lessened or relieved completely by the child itself, several auditors have taught their children the technique of taking care of minor bruises.

Considering the high adaptability of children it was not at all surprising when one professional auditor found his little girl out in the back yard, with a look of grim determination on her face, running out the licking papa had just administered!

Associations, Groups and Clubs

The Foundation has set up a Group Activities Office which will cooperate with and aid dianetic groups throughout the country. A booklet is being prepared setting out the ways in which the Foundation can work with groups and making suggestions as to their organization and operation. All groups—and individuals who would like a dianetic group in communities where none exists—are requested to contact the Coordinator of Group Activities, telling about their group, giving its address, and names of officers or leaders. A copy of the booklet will be sent to officers or leaders of such groups and to individuals who wish to start such groups.

Address: Coordinator of Group Activities

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Yale Dianetics Paul N. Sternbach 735 Yale Station New Haven, Connecticut

Mr. Marshall Breeden 1126¾ N. New Hampshire Hollywood, California

Houston Dianetic Society Fred A. Frank, Jr. 2044 Santa Rosa Houston 12, Texas

C. Arthur Pickering Route 2, Box 17E Turner, Oregon Salem 2-2058 Bay Area Dianetics Seminar Mrs. Mary H. Reher, Secy. 3640 Ashwood Avenue Venice, California Ex 7-9988

Laurel Canyon Group Mrs. Graham Keane 8918 Holly Place Los Angeles, California Granite 2057

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Tampa Bay Dianetic Research Institute

In answer to many questions about group formation, the following report concerning the Tampa Bay Dianetic Research Institute should be informative.

The Institute is an independent, non-incorporated, non-profit organization of Dianetic Auditors, formed in order to coordinate the efforts of those in the Tampa Bay area studying dianetics. It began functioning essentially as an information and coordinating center for Florida regions surrounding Tampa, St. Petersburg, and Clearwater. The Institute cooperates with any team wishing to commence co-auditing, instructs beginning auditors, and aids in case openings for co-auditors. Associate Membership is open in the Institute to anyone interested in dianetics. Full membership is limited to those who have obtained releases and who desire to do auditing and take part in the research program of the Institute.

Regular meetings are held, open to Auditors and pre-clears who have been audited, in which auditing techniques, case-histories, and general questions are discussed. The Institute also issues a mimeographed Bulletin in which case releases are reported, meetings announced, auditing techniques suggested, and general topics of interest discussed. Contributing subscriptions to the Tampa Bay Dianetic Research Institute were established as being available at \$5.00 annually.

The Institute has started a highly commendable research program illustrative of the efficient and valuable accomplishments of which an independent group is capable. This program has been under way for only a few weeks but already indicates the result of organized thought and careful consideration prior to instituting the program. The research program includes the full use of psychometry for all pre-clears before commencing processing, using the SRA Primary Abilities tests, the Kuder Preference Record (vocational), and the Minnesota Multiphasic. Parallel tests are to be given after each 100 hours of processing, or at other suitable intervals. In every case possible, the pre-clear is asked to take a complete physical examination and to request that his physician complete and sign an examination form supplied by the Institute. Psychometry results and the physical examination forms are kept on permanent file and checked upon obtaining releases.

Several members of the Institute have already obtained releases from psychosomatic conditions. The results from the psychometric program are not yet available but should prove to be interesting within a short period of time.

A branch of the Tampa Bay Dianetic Research Institute has been established at the University of Florida, in Gainesville, and correspondence may be addressed to their acting secretary, Mr. Frank Smith, Box 2611, University Station, Gainesville, Florida.

Persons interested in more detailed information in regard to the formation and structure of the Tampa Bay Dianetic Research Institute should contact: Morgan J. Morey, P. O. Box 2719, Tampa, Florida.

Radio Discussions

Since the early days of dianetics, amateur radio operators have been disseminating information and discussing problems over their transmitters. Interested "hams" have joined in these discussions from all over the country and Canada. Other interested parties who have not yet tuned in on these sessions will find the following information of help in locating some of the stations.

Mr. John W. Campbell, Jr., uses the call letters W2ZGU. Mr. Parker Morgan's call letters are W2MUP. Mr. Les Barr, whose wife, Lee Barr, is Director of Admissions, uses the call letters W2YHZ. The bands used are seventy-five, twenty, and ten meter phone. The discussions usually take place in the evenings or on week ends.

Any other "hams" who are interested in joining in discussions of dianetics on the air are welcomed to these bull sessions. Calls will be listed on request.

Bag of Tricks

Most auditors develop within the framework of standard procedure little points of technique which they have found useful. If one trick does not produce quick results, another may. With a full bag of tricks an auditor will be able to pull out the right technique for any occasion. Contributions will be gladly accepted.

When a pre-clear has a chronic somatic and won't get anything else but that chronic somatic, you can be certain that the engram has a grouper in it and that the whole bank is coming up and draining out through that grouper. When a pre-clear suddenly starts running nothing but a chronic somatic or a set of chronic somatics there is a grouper somewhere in a chain that has been triggered but not run out. Work directly for the grouper and once you have found the grouper which affects the somatic, take it down to the basic area and erase the engram in the basic area. Even before running out all the engrams contacted in this procedure (which should be done as quickly as possible) the somatics may drop out of restimulation.

Many phrases have more than one command effect. A holder may also be a grouper, etc. Some pre-clears will use this fact to avoid giving the phrase. If this occurs, ask for an interfering phrase and the pre-clear will usually come up with the phrase you are seeking.

If an auditor has worked hard for a yawn and finally gets one, he can usually double his output immediately by saying, "The somatic strip will sweep through the area where that yawn came from. Go back over it again, please."

If an engram obviously has a grouper in it ("I seem to get lots of phrases at once—It's getting confused down here") ask for the grouper in the engram. If you can not get one, ask for the grouper affecting this engram. When you get it, run it over until it no longer acts as a grouper, go back and finish the original engram, then try for the engram which contained the grouper.

Circuits grow stronger through use. If your pre-clear's stock answer is "I can't feel it", ask him not to use those words during processing unless you specifically ask for them or unless they occur in an engram. The circuit may become weaker and easier to tackle directly.

Case Histories

Case No. 48: "G.A."

Pre-clear is a white female, age 45, divorced. Occupation beautician. Before dianetic processing was under care of gynecologist because of menopausal syndrome and chronic endocervicitis of 12 years duration. Her physician had noted that she appeared to be resistant to the effects of estrogens, whether administered per os or hypodermically. He had also advised trachelectomy. About 3 years prior to the time she was first seen she had had approximately 250 hours of psychotherapy, without apparent benefit; diagnosis: manic-depressive.

At the onset of dianetic processing she was apathetic, saying that she hated her two children, that she couldn't live in one place for any length of time and that she especially disliked men. In spite of this last statement she was markedly promiscuous, having coitus on an average of twice a week, usually with a new acquaintance each time.

Dianetic exploration revealed that the patient's mother had attempted abortion several times, accompanying the attempt with the words, "God is punishing me by making me pregnant again." Following the third abortion attempt, the mother developed a chronic vaginal discharge; two more abortion attempts were made, with the remark that

"God is punishing me by giving me gonorrhea."

When the patient was two years old, her mother died and she was brought up by her grandmother, whose remark with every punishment was, "God will punish you and you won't go to Heaven unless you mind me." At the age of 7 the patient was raped by a young man who stated, during the rape, that he "wanted to make a baby." The rape, incidentally, occurred because she disobeyed her grandmother and went riding in a car with a strange man. She had no feelings of guilt about the sex act itself; her main concern was that she had disobeyed her grandmother and now God would punish her and she would not go to Heaven.

On her wedding night her husband stated that he would not permit her to practice contraception because he "wanted to make a baby." The restimulatory effect of this remark apparently caused her to detest her husband, coitus, and her children. After the birth of her second child she developed chronic vaginal discharge mentioned. She interpreted this as gonorrhea, and continued to regard it as such in spite of numerous negative vaginal smears. She was divorced at 40 and thereafter became sexually promiscuous. She stated that she had never experienced an orgasm during extramarital coitus, or, in fact, during any time of her life.

Dianetic processing consisted of the erasure of painful incidents in her life, both pre- and post-natal. Medical examination about six months after completion of therapy showed that her cervix had completely healed, that she no longer had a vaginal discharge and that her menopausal symptoms were well controlled by relatively small doses of estrogen. Her skin, which had previously been noticeably oily and coarse-textured, regained a normal appearance and turgor, these changes occurring within ninety days after dianetic processing and before estro-

genic therapy had been resumed.

Her mood was definitely improved; she was no longer depressed, she did not quarrel with her children and she ceased being sexually promiscuous. Soon thereafter she was remarried and at last report, one and one half years later, was happy and well-adjusted.

This case was an example of the shorter period of processing sometimes required; total time was 61 hours.

Summary of Case No. 1006: "B.E."

October 10, 1950

Pre-clear is a white male, age 37, divorced. Pre-clear had been an alcoholic from the approximate time he reached adulthood. The severity of the dipsomania had increased until, for the past year, pre-clear had been drinking incessantly. Pre-clear's dipsomania was a fundamental contributory cause of his divorce.

Pre-clear was highly intoxicated on the day he arrived at the Foundation to make arrangements for processing. He was informed at that time that he must refrain from drinking for the entire period of processing. Pre-clear ignored this request and arrived for the first session of processing with evidences that he had continued to drink.

On the third day of processing, an incident was contacted in which the pre-clear was four months old. A flood was in progress and pre-clear's family was deserting their home. The family discusses the advisability of drinking water contained in a large jug. They decide that it is contaminated, and take a small bottle containing satisfactory drinking material. Pre-clear is carried under his mother's arm and his field of vision is limited correspondingly. He catches sight of the small bottle, and there is a feeling of acceptance of the contained liquid. He is carried into a rowboat, and the sight of the turbulent flood waters is terrifying to him.

The correlation of the terrifying flood waters and acceptable drinking liquid contained in small bottles appears to have contributed the engramic commands to the pre-clear's dipsomania. He stated that after contacting this incident on the third day of processing, the desire to relieve his sense of stress and loneliness by drinking was absent. Subsequent to the reduction of this key-in a number of prenatal engrams were contacted and reduced.

Since termination of processing, a period of approximately two months, the desire to drink has never recurred. Pre-clear is also making a socially effective readjustment in the society under the same circumstances in which he previously had failed.

Hubbard Dianetic Auditors

The name Hubbard Dianetic Auditor, abbreviated H.D.A., has been approved as the correct nomenclature for a person who has successfully completed the professional auditors course at one of the training centers of the Hubbard Dianetic Research Foundation. The term and its abbreviation can be used only by those people who have reached the standard of auditing set up at the professional schools and who have been officially certified. The following list is correct as of November 1.

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Courses

The following courses are in progress in Dianetics at Foundation headquarters and Departments of the Foundation. For more particula write Parker Morgan, Secretary, Hubbard Dianetic Research Foundation, or your local Department.

Intensive processing by a Hubbard Dianetic Auditor consisting of thirty-six hours during a six-day period is available at Foundation Headquarters and all Departments. Reservations must be made in advance. Telephone or write to your nearest Department.

COURSE I

Elizabeth and Los Angeles only.

This is the professional course. Those enrolled will work toward certification as a professional auditor which will be granted upon satisfactory completion. It is expected that, during the term of the course, enrollees shall devote full time to the study of Dianetics, including lecture, classes, observation of and practice in Dianetic Auditing. Duration: 4 weeks. Fee: \$500.00.

COURSE II

A series of fifteen lectures given to teams of two who plan to co-audit each other. There is one series of lectures given three evenings a week over a period of five weeks, and another series given Saturday evenings for fifteen weeks. The course includes case opening and instruction on team auditing. Consult your local department for fees and dates of course.

COURSE III

Case opening for a team. This is a session of two hours conducted by a professional auditor who takes each member of a team through reverie under the observation of his co-auditor. Appropriate instruction is given. Fee: \$25.00 per hour.

It is with regret that we must charge for training. We should prefer to extend this knowledge freely to all who desire it. Nevertheless, if research in Dianetics is to continue—and we are sure you agree with us as to its importance—we must charge for our services. Proceeds go to the Hubbard Dianetic Research Foundation.

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