REVIEW OF MATERIAL

A lecture given on 7 July 1950

Facts for the Auditor

This lecture is a review, although as such it is going to contain a lot of fairly new material, and it will contain data which you really can't go over too often, together with correlations of data which you probably have not gone over before.

We are going to start out with a theoretical case, but before we do, we have to have a thorough knowledge of the mechanism of engrams and the other two mechanisms which they carry with them: valences and demon circuitry.

The engram bank, as we well know by this time, consists of moments of pain or unconsciousness (which is to say, pain and unconsciousness but sometimes it is very deep unconsciousness with minimum pain and sometimes it is maximum pain and the unconsciousness is not deep), and grief—the other type of engram which comes from a moment of loss and which engram cannot be received unless it has a physical pain engram lying below it.

The entity with which we are dealing is the engram. Any phrase occurring in an engram acts as a command upon the analytical mind. If the engram is uttered by an antagonist, the command may be negated against or it may be quite null in its efforts to aberrate. If the command is uttered by an ally, the aberrative quality of it is sometimes very high.

For instance, one patient, let us say, is running through an engram that says, "I've got to keep quiet." Papa is saying, "I've got to keep quiet. I know I've got to keep quiet."

And Mama says, "Well, don't talk!" The preclear runs very happily through "I've got to keep quiet." This doesn't worry him although it has pain on it. The utterer is either an antagonist or a null he doesn't care about. Then he gets to the next part of the engram and he clams up completely. There is pain, but the auditor has a terrible time getting it out. Mama is the aberrative character in this case, and when you go up and down the bank you find out that whatever Mama utters is law. So you had better look to Mama for his principal aberrations.

These engrams begin at a remarkably early age. The engram actually begins at the moment when the sperm takes off to hit the ovum. In the old days we were simply running it on the basis of: "Well, it's another engram; the sperm dream comes up, the person says he has a headache, so we run it off." But there hasn't been anybody who did not have one of these sooner or later. So we have decided to accept this fact as an engram which can be counted on to form basic-basic. It so happens that this engram may have 15 or 20 bundled in with it, or others appear to be earlier than it. And sometimes it is so locked up with later moments that it doesn't come up immediately. But if you have a good working file clerk you will get it, and most certainly you will on the erasure, so let us consider basic-basic as the sperm sequence.

I have gotten things earlier than that but I have never gotten anything with any pain on it at all. I have gotten earlier recollections back to 1205, and somebody one day came up with one which had to do with the early days of the Roman Republic, but I discounted this. My credulity can be stretched just so far. It is already completely stretched out of shape by what I have encountered in Dianetics.

So, here we have basic-basic as the sperm sequence, and cases resolve very fast if you can get it out first.

There is a technique of taking a person back to a moment when he is enjoying sexual pleasure, and without having him tell you what he is doing, passing him through it a few times and then shooting him back to the sperm dream. It is not an invariable technique but it often works, so it is a good, valid tool, although there are probably better ones.

If the engrams were filed neatly by time and topic we would not have any trouble. But they are not filed neatly. They are pitchforked in right side up, upside down and their own commands glue on to other engrams. They bundle and bunch, and late in the bank a nitrous oxide incident may pick up basic-basic and fifteen dozen others and throw them up into the nitrous oxide incident. Then somebody gives the patient an electric shock which brings birth up into present time, and a lot of things happen.

Operating right with the standard memory bank we have an elusive and strange character we know as the file clerk, who probably wears a green eye shade, and he is very accurate. That is why I am going to expand further on the subject of demon circuitry. The real file clerk is infallible. When somebody asks a preclear for a datum, the real file clerk tries to hand it out. Then demon circuitry will pick it up and throw it away.

I will describe to you for your visualization the office of the file clerk. It is a very neat place, and he has evidently got a lot of clerks working for him. He sits there at a big desk with a battery of telephones in front of him, getting reports in. But over in the corner he has got a pile of black stuff that he would love to get rid of because he doesn't know what to do with it, and those are engrams. But he can pick the top one off—the one which will go away—and that is all he can do.

He will go through any datum you want that can be answered on a yes, no, or factual basis. The file clerk is no good as a predictor. He is merely a chief clerk, and he shoots information out with great rapidity if he is not stopped by a demon circuit.

So we have the engram bank which can be visualized as lying up and down a time track, and first to last, engrams are not filed neatly but approximately according to time. These things are pretty messy, but the file clerk, when he is working, can reach them as they come off.

The reactive mind is using these things, and it uses them very thoroughly. It pushes them up and brings them back, but its time clock is inoperational. It doesn't know whether it's raining or Thursday, which is very confusing particularly to the analytical mind.

For instance, someone says, "You know, it's a funny thing, but during June I always have terrible colds." Another one says his ulcer is much worse during June and July. Well, those are hot months and the ulcer had to do with Mama feeling hot. The restimulator was heat, by command. So all these things take place. We needn't belabor the activity of the engram, but we have these up and down the track and some of them will lift, but some of them won't. The only person who can tell you which one is going to lift is the file clerk.

The only reason the file clerk can't always tell you is because of demon circuitry. The demon is actually a parasitic circuit which is fastened on to some part of the analytical mind and has a thinking capacity. It is a walled-off part of the analytical mind. It also has an identity, and when that identity becomes strong and powerful enough to control the body, "I" begins to submerge. The more demon circuits are laid in by engrams, the more "I" is in conflict with other apparent but airy identities which exist by no virtue except electrical circuitry. Somebody one of these days may discover, or be able to pull out through the ears, some ectoplasm and find out that there are really ghosts after all, but I doubt it.

So, the demon circuitry can take over the role of "I." "I" can be completely submerged, but at that instant we have a psychotic break. The person now runs on nothing but an engram computation, there is no regulation of it whatever. This is insanity. It is demon circuitry moving in on "I." That is an analogy but it is quite valid and it is usable.

As you lay your hands on psychotics you will find this to be the case: The psychotic is being controlled by another entity than "I," and as soon as you can get "I" back into control, he stops being psychotic, even to the slightest degree. Therefore the really important circuits as far as psychosis and neurosis are concerned are those circuits which command obedience and control, because it can set up a false post of command in the mind.

You will find when the channels (the bits of analyzer which have been lopped off by these control forces) are supercharged by death and sorrow, that the valence walls in the mind have a tendency to become very sharp, and when you watch a psychotic, you will see him going across the walls into various valences. You can almost hear him click as you swing his valence, and you can swing a psychotic's valence rather easily. He is talking violently out of an engram which is part of the valence into which he has gone.

The valence is actually set up by engrams charged with grief, and it sits there as an actual portion of the mind. The individual can go into this valence, and if he goes into it 100 percent, it is no longer modified in any way by "I," and that person is a psychotic. You will find psychotics go into these valences and stay in them.

Sometimes an auditor can flick them into other valences, but you will never find such a person running a whole engram, he runs them one valence at a time, and as such they don't deintensify. In curing a psychotic, a lot of it is finding out who else is talking, and knocking the holders and control mechanisms out of what he is saying.

I have never seen a raving psychotic without a lot of supercontrol demon circuitry, even if the demon circuitry says, "I am so apathetic I can't move, I can't help myself." That is a demon circuit working. The violent one is in a demon circuit that is saying, "You've got to control yourself," or any species of it, because that sets up a false "I."

Going further on this, there are valence walls that are set up which act as complete and actual identities. A person is commanded into a valence, he doesn't happen into one by accident. He is driven into one, or bounced off one. Four or five valences can be in existence simultaneously in an individual, all in restimulation.

There could even be some sort of circuitry, since any kind of circuitry which you can imagine could be set up in the human mind, theoretically. You will find psychotics with crossed circuits where they are living a couple of valences, but usually it is pretty sharp.

The next thing you will be interested in when you confront a case is how a person has been led into the valence and what holds him in that valence. These things can be spotted most easily in the form of locks such as, "You're just like me," "Heb just like so-and-so." This gives the person no choice but to go into a valence. If these phrases occur in engrams, now they have locks on top of them.

If a person is solidly in a valence and the person it approximated dies, of course the subject dies too but goes on living. You can spot these things by the fact that the psychosomatic illness of a person held in one of these valence situations is an approximation of the illness of which the owner of the valence died.

So Grandma dies of cancer of the stomach. The little boy is in that valence. He gets stomachaches and has stomach trouble. This is not complicated but it is most certainly observable and very important, because when you start to work a patient who is in some other valence, he is not going to run his own somatics, he is not going to have sonic, he is going to be very thoroughly chewed up one way or the other.

When you have a sharply charged case with a lot of demon circuitry in these valences, you get a very sharp, heavy wall between the valences. The usual psychotic is running a valence at a time, and the normal person has much lighter walls which shift very readily. Anybody can start putting his hands the way his father used to put them, or do something that his mother used to

do, and he will just slide over into the other valence. That person slides rather lightly through these things and there is so much of his own valence present that he can slip into and out of these other valences without much concern. But as these valences become tougher and more identified as such, it is harder and harder to get out of them. At last a person is in them, and if something such as a control mechanism or demon circuitry submerges "I," you have got a psychotic.

There is a spectrum at work here. A person could be all in his own valence, or slightly in other valences, or more in other valences, or these valences start to stiffen up and he gets 100 percent into one, at which point we have these valences existing only on the plane of an engram. But a person has to be held on the track somewhere else than present time in order to have one of these things operate 100 percent of the time.

Saying that someone has a split personality is a ridiculous simplification of valence walls. I have never met one of these gentlemen who only had two. I have met them with five that were very distinguishable, but most of them had far more than five. It is an oversimplification with very poor observation on the part of people who are studying psychotics.

You can pass these people from one valence wall to the other. You can give them certain orders and they will shift right across into other valence walls. You can flick them around like a ball, and they will go to this valence, to that valence, to some other valence. When you get somebody who has got a big control mechanism in each valence, he will get shifted into one and he will be "stable," you might say, in that one but far from stable mentally. Something else will hit some night, and he will turn into Mr. Hyde. But there you have only got two at work. The actuality is that you may get also Mr. Hyde's dog, and you may find him going into the valence of something else along the line.

In short, those are valences at work.

There is the time track, and we have engrams on this time track. If a person is held solidly in a certain engram, let's say with a call-back, a denyer, a holder, or several of each, as well as allies at work and so forth, there are as many valences present in that engram as there were people present and speaking.

If we move a psychotic out of this engram which had, let us say, Sve people—Grandpa, Grandma, Mama, Papa and a collie dog—and into this engram which has two people in it, we get an entirely different manifestation.

We could theoretically shoot a person with some drug that would momentarily release them off one engram and into another one. They are doing that now rather badly with ACTH. It is very spotty, but it seems to knock a person out of one engram into another, and it is potluck. A person may be in a mild engram and they knock him out of that into a heavy one, back and forth.

Each one of these engrams has its valence walls. Each one is a compartmentation, and there is where you get your valences. But you stack up a number of engrams with Mama, let us say, as one common denominator to these walls, yet here is Papa with common denominators to these walls as well. You have got two potentially very strong valences, but up here you have got Grandma also in the case, so this is one other continuous wall. But that wall only exists in engrams.

The demon circuitry mixed up in these has to do with a person being more or less stuck, and he can be stuck in two or three. What that engram commands in the way of demon circuitry gets wound up in the mind and then it can dictate. And if it says, "I've got to tell you what to do," the demon circuit can be set up so that it does tell a person what to do. It doesn't say, "I've got to tell you what to do," all the time. The psychotic goes over into this valence and repeats, "I've got to tell you what to do. I've got to tell you what to do." This doesn't give him any relief because probably there are holders in other valences. So, he says, "I've got to tell you what to

do," and he goes around telling people this. If you cross him over into some other one, he may keep saying, "Yes, dear.-Yes, dear. Yes, dear. Yes, dear." He is no longer telling anybody what to do, he is all caved in.

If you throw him into some other valence of "I've got to tell you what to do," and he is still in the "Yes, dear" valence, this other is a set up circuit, and is not only telling him what to do, it may be saying, although it doesn't say this in the engram, "The best thing for you to do is go down and rent an office in the Empire State Building." Any stimulus that is coming in is being picked up by this section of the analytical mind which is held by this parasitic circuit. So it talks to the valence he is in. Now he can cross over the line and somebody says, "Yes, dear. Yes, dear. Yes, dear," to him, and it will start him telling that person what to do. There may be many such valences in the one engram. You may be working a man who is in a bundle of engrams. Get him up in present time and this won't occur.

The worst kind of circuitry is the "control yourself" species. For instance, there is some valence saying, "Control yourself, control yourself," and although this valence is going, "Yes, dear; yes, dear," unless we have got a sharp division valence wall, you have set up an additional "I" in place of the natural control post of the mind which is the real "I." When it gets stronger than the real "I," we have a psychotic.

We could artificially make it stronger just by restimulating that valence sufficiently hard with something like narcosynthesis so that that control circuit would be so overpoweringly strong that "I" would completely disappear as far as we could observe in watching the person as we enter him into therapy.

These mechanisms add together to make one of two things: A person goes into the winning valence—the top valence—or he is crowded into it by commands. He has no choice if these things are really strong.

He can exercise somehow his necessity level and skip over the whole thing where necessity adds up the available units of the analytical mind to such an extent that a person to live must exert every effort toward a goal.

Now he has got a goal and he is being driven by pain, and even a psychotic by necessity level theoretically can kick out the psychosis. It does not mean that it just disappears; it is there waiting, and when he reaches that goal he will relapse.

So, we have the picture of the engram bank. This is what you are looking at when you engage in Dianetic auditing. It is right there in front of you. The analytical mind has the power of mimicry. The analytical mind has the power of almost anything. The engrams come forward and force the mind into an exaggerated and continuous use of one of its powers, and that overbalances because it can't kick out or in as needed. It stays in.

For instance, a man can build bridges. But let us say that he had an engram that had pushed forward concerning building bridges; he would do nothing but build bridges and he would be quite excitable about building bridges. Remove this manic and you find out that the analytical mind was all this time able to build bridges, but it could not hick it out, so he never enjoyed the movies or had a good time anyplace else; he had to build bridges. Kick it out and he will build better bridges and he can also go to the movies. There one had the powers of the analytical mind exaggerated.

We are not going to cover the analytical mind vastly here. The Dianetic auditor merely needs to know the analytical mind is constant. There are some papers on the subject of the analytical mind, but this is in the field of. Educational Dianetics which you as an auditor may be interested in, in order to educate your patient

As you work the patient, you must know what you are looking at. You must know what denyers and bouncers and holders and misdirectors can do and what they are, and you must

know what demon circuitry is and what it isn't. You must know what a dramatization is and what causes it. That is all in the Handbook. It is very obvious once you have been around this material for a while. If someone goes running down the street screaming, "Everybody hates me, everybody hates me, everybody hates me," you know what he is doing. He is dramatizing an engram. That engram has moved in on a temporary basis on the analytical mind and that is the record it is playing off. And it will just play off that one valence of it more and more. Sometimes something will change it and he will go off into some other valence of the same engram.

If you are talking to a person and he starts telling you that the Democratic Party is the only one to which you must belong in the whole world, you can be pretty sure you are listening to an engram on the subject of democracy and the Democratic Party. There is nothing wrong with democracy and the Democratic Party, but in an engram play-off it is not good.

Engrams exist on almost any subject and contain practically the whole English language in any bank, and some of it very fancy language too where Mama and Papa were very well educated. I have heard some of the most polysyllabic engrams you ever wanted to hear!

When you have a patient before you, you should not ever make the mistake of believing, however, that he speaks only out of his engrams. He has a vocabulary and unfortunately his analytical vocabulary, as well as his engram bank, contains these standard phrases. If he says, "I don't know," he might mean he doesn't know! And if you keep insisting to a patient that everything he says is engramic in source, you will eventually undermine the self-confidence of "I." And maybe "I" is not too well in command.

If you undermine it thoroughly enough, if you invalidate his data, if you break the Auditor's Code on him in some particular way, even slightly, you may trigger him. Keep that in mind, particularly when you are working on a severely neurotic person, a potential psychotic.

Don't keep insisting to any patient at any time that everything he says is engramic, and never argue with people on that level.

The smoother, more efficient way to go about this is to discover the dramatizations of his father and mother by noting them down, after he has recognized that they are dramatizations, then it puts no onus upon "I." You are not telling "I" that "I" is wrong all the time, and because someone says, "I don't know," you don't immediately say, "Repeat that," as you will carry through the message to him that he is talking out of engrams. Maybe he is, but you don't need to use the fact. It is not very valuable to you.

Once in a while a phrase will keep recurring in a person's speech until at last you conclude this person is playing one record. And then you finally find out who said that. But don't take him up on every word, because you will ruin his self-confidence. Don't take him up on every word any more than you would say to him, "Now how do you know this really happened? Maybe you're just imagining it."

If you want to enter Dianetics into a dangerous practice, break the Auditor's Code. Never mess a person up on his data, or evaluate his material for him, or argue with him as to whether or not this material is good, bad or indifferent. The preclear is right. The auditor is not. The auditor should never make a remark like, "That's why you have a crippled leg," or "You just pulled up basic-basic." That is evaluation.

The patient may say to the auditor, "I think that is basic-basic. Do you think it's basic-basic?" The auditor should note this down on this basis: This patient has a lot of engrams which destroy his sense of reality. And he should say to the patient, "If it was basic-basic you would know it. If it wasn't basic-basic, we will find basic-basic; but it's up to you, not to me, to tell you." When he takes that attitude, his patient will progress.

So, when you are working with a psychotic particularly, remember your Auditor's Code. And remember that when you are working with a psychotic you have got to do a better job, because you are working with demon circuitry and lots of it.

I am telling you these things so that you will know what you are working with.

What to do about a psychotic break can be difficult, but you should not be treating a patient without knowing his background, and without liaison with some properly authorized gentleman of the medical profession, and without having a sanitarium close to hand where you can put him and continue to work him if he does break.

By looking over the background of your patients you can tell very easily in most cases whether or not you are dealing with a psychotic. A psychotic demonstrates various irrationalities which are very far from normal. The best test is with the Rorschach.

These things are going to happen though. You are going to have a patient trying to tell somebody how much better he is, and they are going to slap him in the face with "Dianetics is no good, you're no good, you know nothing about it." He may try to surmount this and go into a dramatization and stay there.

So, as a professional auditor you had better work in liaison with a medical doctor constantly who knows what you are doing, and if you want to take on some patient, he should have a medical examination first.

If someone came to me wanting to be audited through to a release, I would say, "All right, go down and see so-and-so and get a medical examination," and I would also have a setup whereby he gets a Rorschach and other tests.

Equip yourself with facilities so that these tests can be given. Play it safe, because when you are dealing with aberrated human beings, as any field of mental science has learned in the past, you are dealing with loops, which can cause you a great deal of trouble one way or the other.

It has not been too long a series but it has been our experience in Dianetics that a Rorschach will show up an incipient psychotic, and when it does so, you should take precautions on the matter.

These are some of the things you face. Someone comes in, he is apparently okay. Go ahead and treat him. But you had better have some liaison to fall back on if the going gets rough, because you may have to park him someplace. He may have had many breaks, and he might even have come to see you because he felt one coming on.

But, remember this: If you keep the Code, if you keep him squared around and you do what you are supposed to do with Dianetics, your chances of anything like this happening are practically zero. The only traces I have of this come from very bad auditing plus a great deal of trouble and disturbance in the patient's environment. These two factors combined can mean dynamite.

I don't want anybody to do any bad auditing.

The way you can do bad auditing is to go into a case and stir it up, reduce nothing you put your hands on, evaluate for the patient, invalidate his data, and be upset and unsympathetic about his troubles by throwing them back in his face. You could do these things and you would have, if this person was in a highly restimulative environment and he was an incipient psychotic, a person ready to go to an asylum.

I don't wish to drop a pall of gloom across you, but this world is full of people who are crazy and who have been crazy or who will go crazy. These same people, if you walked up to them on the street and grabbed them by the shirt front and shook them, might go crazy. These same

people might walk into a bar, have 20 drinks, fail to pay their bill, be kicked out, and go and stab ten people on the street.

In other words, their incipiency is with us all the time. The world has psychotics in it and you are going to be dealing with these people to some degree. Certainly you will get incipient psychotics on your hands, but don't go on the basis that every patient you get hold of is an incipient psychotic because he is not, very far from it. The percentage is very much in favor of the contrary.

We live in a world which has in it a lot of aberration. And if as Dianeticists we suddenly say all is sweetness and light in this beautiful world, we are overlooking the fact that the reason this world needs Dianetics is because it is, to a large degree, mad. If the world were unaberrated and the social cultures understood themselves well, we would not have any use for Dianetics.

That is why you are studying it, because the world doesn't run well these days. People are unhappy, and the social cultures are to a large degree incipiently psychotic. Right now the United States of America, which you would treat as a rather sane organism, is bordering on psychosis. Then there is Russia, which is a severely neurotic nation, busy Sghting wherever it can and in any way it can. These things exist, therefore Dianetics is valuable and can be carried forward. We can't close our eyes and say this is a fairyland that we are walking through. It's not.

Go through an insane asylum and you will see humanity in the most degraded state imaginable. It was the social aberration of failure to understand the nature of insanity that made it possible for us to have prisons and insane asylums. They will be cleared up one of these days by some measure within the next generation.

The engram bank can be live ammunition, but just like gunners can play catch with ammunition when they know what they are doing, an auditor can do a lot with engrams. He can even do a lot of things wrong and still get away with it. But do too many things wrong and the law of averages will catch up with him. If he doesn't do enough things right, he is not going to get any results.

It is my job to tell you what to do right.

In review, I have given you a sketch of the anatomy of the beast. The first thing you do about a patient is find out something about him. That is important. People often overlook this. When you have found something out about your patient, you can then proceed.

Very often when you are pressed for time and somebody calls you in and says, "Give me a demonstration," and you plunge down the bank someplace, you pick up more than you want to handle at the moment and you are taking a risk; so, it is a risk which I would like you to take with wide open eyes. Don't just go in and wrap your hands around the patient and say, "Shut your eyes. Now let's go to basic-basic."

When you have looked the person over and you are confident of your own ability, you can do it. But the proper procedure is to sit the person down and start asking him questions. If he is a psychotic, his accessibility is very bad, so you have to try to free him on his track before you can ask him any questions.

You are trying to find demon circuitry. You are also trying to stop the nature of the engram bank. What kind of people were around this patient?

I have noticed some people having a hard time keeping up with the computing of a professional auditor. He asks certain questions, but why the next question is asked becomes a mystery. They lay it down to the fact that the auditor is thinking too fast for them, but that is not what is happening.

The professional knows his business, just as you should know your business. He is looking for computations in the patient. Simultaneously he is trying to spring out locks. He does a diagnosis on the basis of asking about Grandpa, Grandma, Mama and Papa, finding out such things as when they died and how sick the preclear was, and so on. He gets the patient talking about it and that gives him valuable information.

After he has gotten such valuable information as when the preclear was hypnotized, and when did Papa leave Mama, and what was the cause of the divorce and all that, he has a pretty good idea about what the patient is like. For instance, with great ease he can see an occlusion circuit or a secrecy circuit at work, such as, "I mustn't tell anybody. If I tell anybody about this, I will die," because he will be getting dodgy replies.

Now, he spots the originator of each one of these engrams insofar as he can. He knows that this patient is being very secretive. This patient is being evasive, and after a very short time he may discover this patient is pathologically lying without reason. Now the auditor wants to know who in the family used to be reprimanded for telling lies, or who in the family had a reputation for lying, or something of that sort. Without calling him a liar he just asks this out of thin air.

It looks like a very strange and magical observation that the auditor has made, since most of the time the person doesn't recognize that he is being talked to on the subject of lying. The auditor doesn't ever ask him in such a way as to accuse him. He asks him first, "Now, did anybody in your family ever like horses? Did anybody in your family ever drink very much?" He isn't a drunkard, and he doesn't like horses. Then he says, "Did anybody in your family ever tell lies?" The person is liable to think it over and smile for a moment and say, "Well, yes, my father. I've even caught him a few times in recent years myself," and he will tell the auditor the truth about that. Papa is the liar demon circuit.

So we spot that down, and we have got a valence. But we have done something else, we have already accomplished therapy on this man. We have spotted the fact that although he wasn't aware of the fact that we were looking for it, he has connected up some of the things he is doing as belonging rightly to somebody else. When he does that without being told that this is the case, he feels better and he is better.

The auditor asks him a very important question after he has discovered some of these things. He merely asks the patient, "Who used to say, 'I am so tired of living I could die'?"

"I don't know."

"Come on. You can remember this. You can remember this."

"I don't know. It doesn't seem.... Oh, yes, my mother used to. She was always grousing about how tired she was of living. Also she was tired of me."

"Now let's remember a specific incident when she said that," and he will fumble some more. He has got the conceptual, now he gets the specific incident. In running an engram, you will see the same mechanism at work. At first you get a conceptual on some engrams, and then you get the real content. It is the same way with a straight circuit.

The auditor is looking for demon circuitry. He is looking for what might have broken the preclear's concept of reality. The preclear's concept of reality depends on those straight memory circuits.

The auditor has got to be cagey about this. He can't go hanging things on a person. He has to know what he is going after, and the patient will go right along with him.

Demon circuitry gets locks on it. An auditor can actually, on some patients, spring them back into present time with a straight circuit.

It is perfectly valid to go along for hours with some patient until one has got some data on his demon circuits, his valences, his reality and so on. The auditor has got to find out about this patient. If this patient rolls up on the couch and says, "You know this engram I just ran" (he ran this engram practically in convulsion), "I don't believe it," the auditor looks for demon circuitry. If he knocks that out, he can rehabilitate the preclear's sense of reality.

As you ask him about these things, include valences. Find out who used to tell him who he was like. Find out who is dead and what they died of and what was wrong with them and what is wrong with him, and he may get a little relief. You may even take some charge off that valence simply by getting him to spot it. Your questions can be very leading, but your questions should never be demanding.