AUDITOR'S SKILL PART I

A lecture given on 13 July 1950

Straight Line Memory

There are two things wrong with a preclear trying to check his recalls with his elders. One, he is going back from data which is probably, or at least partially, accurate in his own recalls to data given to him by people who are not in reverie, who are merely remembering, and who are remembering with an end in view of whitewashing their own activities and maybe even cutting the preclear's throat.

Secondly, the relay of such information, particularly in the accusative line, will very often bring about a deterioration in the health of the person or persons, particularly if it is his parents.

My first clue to this was in auditing someone who didn't even ask his parents for information, he just did a very small amount of swearing, not terribly violent, calling attention to a couple of things. He had this background feeling they had lied to him about certain things, but he had never triggered on to any proof of the matter.

He brought up this incident which happened to be prenatal, and his mother promptly went to bed with what was diagnosed as pleurisy and an abdominal disorder of some sort. He had triggered an engram, and she was sick for about two and a half months.

She, of course, attributed it to damp weather. She didn't think that he had had any connection with it. After that I began to watch for this.

Now, as far as his own data is concerned, a preclear who would do this is posing a very difficult problem for his auditor. In the first place, all his auditor can do is get down to the most valid possible information. If the preclear suddenly, through some aberrated computation, decides to check this data, and the data does not check, he can be expected to go into a serious spin immediately.

In the first place, he is operating on "You've got to believe me, you've got to believe what we tell you, you've got to believe your elders," and so on. Now he goes to the elders to check his own recalls. They probably won't give him the straight material because after all they can't remember. They put no thought in trying to remember. They just fly off the handle about such a thing and they are liable to tell him most anything.

It's a practice which would only be indulged in by somebody who wanted to slow his therapy down and put himself into a spin—completely aside from the fact that recriminations will be very embarrassing to him in the future if he does recriminate, or find any material. One day he is going to achieve a release, and further on, clear, and he is going to have to patch up personal relations without the benefit of Dianetics, which is not easy to do.

In addition, the preclear who does it is posing a very difficult problem for the auditor. He has no right to cause the auditor this much work. If he is interested in objective reality as far as his case is concerned, or as far as Dianetics is concerned, let him test somebody else. He is in no situation to test himself.

For instance, if you get an aberrated set of circuits with the person reacting poorly on flash answers, and you ask him for an age flash, you are liable to get the last count in an operation or something like that, so the information has a limited validity.

Conversely, the running of the engram, with its somatics and aberrative effect, has great validity. If you reduce that, know that you have recovered approximately the right content, or it would not have reduced.

Ask him for a flash answer and you are liable to get an age. The preclear may say, "Well, let's see, this happened to me then when I was 9." If he starts to check, he is probably checking with somebody whose memory is not good, because remember, he got the bulk of his aberrations from them.

So they are liable to say, "Well, that didn't happen to you when you were 9 years of age. That happened to you when you were a little baby."

And of course this throws him, "Oh, I'm this wrong!" He never bothers to add it up. He is in a state of anxiety about his parents anyway.

Anybody who goes in for checking reality comes up against this roadblock. It poses a difficult problem for the auditor. We actually have minimum time on any case, so there is no reason to slow it down still further.

Straight line memory processes are going to require skill. It is not a skill which is very odd, magical or impossible, but one that you will have to develop. It is the process of determining by straight line diagnosis the case computations. That is based on the formula that what the preclear believes about himself which worries him, what he does that concerns him, or what obviously aberrates him, is contained in its exact counterpart in the mouths of the dramatic personnel in his engrams. Somebody has said it, is the watchword on straight line diagnosis.

Because it was said, the person is worried. If it had not been said, he would not be worried. If he is rational on some point, the chances are that it is a natural concern. For instance, we find that he likes women. I would not look for an aberration. But if we find that he is just crazy about women and can't leave them alone, I would look for it.

There is a matter of degree. He is worried, let us say, because he is not making \$500 a week. Look over his capabilities. If it's possible he can make \$500 a week, fine, that's his expectation. That's not a real, valid worry, because measure it this way: Is he trying to do something about it?

Most of the time in engrams the worries are there but nothing is being done about it. No action is being taken. It's an engram, it doesn't call for action. It is merely a didactic statement of condition. The person has this command "You've got to control yourself," but obviously doesn't.

It doesn't call for an overall control, merely irrational control. It calls for him to inhibit his emotions, inhibit his expression, to tie himself up inside himself, perhaps, or to try to get others to control themselves. But you will often find this person in apathetic slumps, which is complete lack of selfcontrol.

He will go into an apathy, but you will find him very often with more rage dramatizations per square inch than anybody else around. He's got a "You've got to control yourself," and if somebody dares to suggest that he is not controlling himself, watch him get mad. That is a test, the actuality of effort. How much real effort is he putting forth?

This person says, "Oh, I'm so happy, I'm very happy, you know, I've always been happy. I was such a happy child, I had a wonderful, happy childhood," and so forth, yet there he is sitting on the couch. There is something wrong. If this person was really happy, he wouldn't be there. You would have to do quite a lot of talking to get such a person convinced that he should have a check run on something.

Now the auditor can go in against these aberrations and break them if he doesn't care what happens to the preclear. Any auditor who would go in and try to convince the person that this belief isn't so, or spend any time in this direction, is not only wasting time but is liable to break the dramatization in some way, and probably make the person very nervous.

Hypnotism is an effort to break dramatizations. Somebody with a bad eye is dramatizing an engram which says, "It's a bad eye." If the hypnotist now says, "You haven't got a bad eye. You know you haven't got a bad eye, " and so forth, he has broken that dramatization and at that moment the person comes down with kidney trouble!

So, the hypnotist says, "You know you haven't got kidney trouble. You know very well. Now your kidneys are very good and there's no more pain in the kidneys." All of a sudden he gets gout—dramatization after dramatization trying to come through. A psychosomatic illness is a very basic form of dramatization, and nothing but that.

If you look at psychosomatic illnesses and aberrations manifested as dramatizations, you will recognize that the laws which govern dramatizations are still very much at work and that you should pay attention to them. If the dramatization is ineffective, if it's broken, then the person is knocked in that engram back toward worse health. You can run the scale on psychosomatics from a light illness to a very serious one, and you could keep on hammering down and knocking flat the physical dramatizations of psychosomatics until you had a very sick patient on your hands. This could be as simple a statement as saying to the person who comes in for a session all worried and sweating about something, "Well, you know there's nothing to worry about."

There is something to worry about. He doesn't know what it is, but there is something to worry about. So he will have to think hard to find something to be worried about. You are stiffening up the engram.

It would eventually come out and the auditor one way or the other could break the dramatization and make the person admit that he is no longer worried, but at that moment he has got a sick patient on his hands. The patient might not be sick immediately, but watch him tomorrow or the next day.

Alcohol is a restimulator, just as the smell of ether acts as a restimulator. In the womb, the taste of alcohol comes straight on through to the child. As a result, alcohol may restimulate the alcoholic engrams only, and as such give a very lopsided picture of the person's engram bank if one were to give him therapy after he had been drinking.

However, there are alcoholics who have been shoved into alcoholic valences who have to drink. Maybe Mama never took a drink, and at first alcohol is not a restimulator. But it very shortly becomes one with his dramatizations, and the fights and quarrels he has with people.

An alcoholic really gets himself in a bad way by telling people how he has to drink. The engram says, "I have to drink. I've got to have my bottle." The demon circuit says, "You've got to have your bottle. The baby's got to have his bottle, that's what he needs, his bottle. That's what he's crying for. Now he'll feel much better. Aw, he couldn't get along without his bottle."

So this alcoholic is saying, "Well, you know I couldn't get along without my bottle (hic). A man has a right to drink," dubbing in his justifications along the lines of the engram. Then people stand around this alcoholic saying, "You know that you are becoming a pariah for drinking. You mustn't drink. You will ruin your family, completely aside from ruining your health. You can't hold down this job any longer because you are a drunk. You realize this. You've got to stop drinking."

Now this person has really got to drink. And we go up against this dramatization harder and he drinks harder, until the point where we break the dramatization. Now he is simply in a

confused, unreal state and he goes right on drinking. Or he gets sick. There is the alcoholic who has been getting along fairly well, and because of the social aberration of alcoholism, eventually deteriorates and begins to think of himself as a bum.

Understand he is under the sedation of alcohol. Remarks are made to him. They pile up as locks, and suddenly you may have a sick person on your hands, who started out to be quite efficient when he was drinking, but who has had the dramatization raised up and blunted and raised up and blunted and raised up and blunted until he is finally broken.

It all depends on the circuitry. An alcoholic is no different in the reactive circuit than anybody else. I know people who are food drunks. "You've got to eat. You've just got to eat it."

A prolonged history of alcoholism brings about some deterioration of the body on an indirect line by muting the productivity of the cells. For instance, in glandular secretions, a man may have had his testosterone output, or in the case of a woman, her estrogen output, seriously interfered with. And if you watch them you will see glandular deficiencies or excitements picking up and throwing out their physical structure, and this as such is bad.

So there is an indirect physical deterioration in any engramic situation, and there is always a point in the life of an individual when an aberration, or an engram, can have produced a state from which the patient cannot recover. He has gone too far along some certain line and now the fat is in the fire.

A person once told me that somebody he knew had been on a very small dosage of drugs for a number of years. He was alarmed, thinking he had run into a drug addict. If you have ever been up against a drug addict, there is no doubt about the fact that you are. The dosages have to be extremely heavy in proportion to what would be a standard medical dosage to produce such an effect.

There is a condition of craving, which is proportional to a physiological deterioration. Phenobarbital, for instance, has to be in a pretty high dosage before a person could be called an addict to it.

People who know vaguely that they are dub-ins or suspect that maybe they are in a state of upset and who know the cause of the dub-in and know that it's remediable are not going to be as seriously affected by it as those that do not.

The approach on such a thing is one of cheerful reassurance, of sympathy for it, and concern. The quickest way you can stop a person working is to obviously not care what has happened to that person. One can go just so far. One can be cheerful and say, "Oh well, this won't bother you in a week." A person will accept that.

But let's go over the border on it and say, "You know very well this won't bother you in a week, what are you griping about it for?" and the person becomes very upset. It is the difference of attitude. So it's a matter of cheerful reassurance when the person says, "But I know I must have dub-in because I have prenatal visio, and this and that, and these words just keep coming to me and I don't know what I'm going to do about them."

You say, "Well, take it easy, we'll straighten this out," and the person will respond to it.

The next thing you have to set about building up is the preclear's confidence in his own recalls. A nice adjustment to the other person's mood and to their reactions is what is required.

A preclear with a lack of self-confidence probably goes right across the boards with aberration. Then there are a few people who have too much self-confidence, which would be aberration in itself to a manic. But I have never seen that do anything like the damage that I have seen lack of self-confidence do to an individual. If I had to choose the aberrations of a society, they would

all go on the lines of "It is real. I can believe it. Everybody believes me. I believe in myself. I can do anything I put my hand to."

In some past schools of psychology there have been terrific prohibitions against giving children a good opinion of themselves. I ran into this in Washington recently. I was horrified. There was a beautiful little girl, and I said, "My, you're a pretty little girl."

Her mother immediately said, "Oh, don't say that to her."

I said, "What's the matter, isn't she pretty?"

And she said in a low voice, "Yes, but we mustn't mention some of these things."

So I countered with, "Well, of course how could she expect to be other than very beautiful having such a very lovely mother!"

Faith is a very fascinating subject. Faith can be artificially installed. You can take a person as a clinical experiment, hypnotize him and install the Great God Motaw.l You tell him that the Great God Motaw is now taking care of his life, safeguarding him, looking after his concerns, will see that the future is all arranged for him, will see that all goes well and that everybody loves him, and will, beyond everything else, give him absolutely correct data every time he asks for it.

The Great God Motaw, installed in such a circuit, more or less takes the whole computer, moves it over, and now he has the Great God Motaw sitting there. You can even install it so that the Great God Motaw has sonic, which is strictly hallucination.

In that way you have moved the computer out from behind the aberrations, you have divorced it from the reactive mind, and you have divorced some of its circuits. They now compute perfectly. You can ask the Great God Motaw anything, and the patient can too, and get a positive and correct answer. The Great God Motaw will predict, command, plan and so on.

In setting this up on a writer, they had him say, "The Great God Motaw will now give me a story plot. Will you please give me a story plot, Motaw." And this writer would get a dictated plot, and a good one too!

Of course, the writer could always think of wonderful plots anyhow, until about 965 rejection slips had landed one after the other on his desk. At the same time he had sold a couple of thousand short stories. But those 900 and some rejection slips, one after the other, told him he was no good and he couldn't plot, and he couldn't do this and he couldn't do that. It just added up on him too high and he stopped writing. Now we move the Great God Motaw out from behind all this invalidation and say, "Give us a plot." Wham! He's got a plot.

However, if he believes this Great God Motaw implicitly, he will sooner or later begin to place all his reliance on him, and the Great God Motaw will begin to sap the person's own individuality. The Great God Motaw's circuits will become themselves infected with aberrations, and because of other social aberrations eventually some fear of punishment from the Great God Motaw may enter into it and at this moment you would have a mess.

But for the first few days it would be wonderful. Now, by encouraging the person to believe that the file clerk's data is always absolutely correct, you are setting up the Great God Motaw, because you are actually encouraging the file clerk to set up a couple of loops to get a good, solid flash. And it is a good procedure because you are not asking the file clerk to run his life. The file clerk situation only becomes confusing on a patient that you have let run exclusively on the file clerk, because this data is not validated on a straight memory circuit for him. He is bypassing everything and getting it all from the file clerk.

I have even uncovered the following in people—they will say, "You know, I set up this file clerk and told him to run out everything while I was asleep, and he's just getting along fine."

All he is doing is perhaps shifting engrams from-bank one to bank two of the reactive mind.

I'm not condemning the file clerk, because you can suddenly knock him loose from the engrams. In a lot of cases one needs to encourage the file clerk, and say, "You've got a good file clerk, by golly, he really knows his stuff," and so forth, even when you know this file clerk is mixed up with too many circuits. The file clerk is always all right. The problem is to reach the file clerk.

I ran across an interesting circuit recently on this order: "I've got to rewrite this. I've got to go over it again, and rewrite it." So, of course the second time through, the person had to change all the words in it. That is locatable merely because you know two things—that Papa is a writer, and by the doingness of the preclear when he goes through the incident, "No, I don't think that was right. Now let me see, I had better say it some other way." As a consequence he tackles the engram the first time straight, and the next time through he changes the wording because when he goes over it again he "has to change it." There was an automatic set of circuitry there that was going to flip, but that wasn't a real honest circuit, merely an aberration.

You can't predict exactly what engram you are going to find unless you know the person himself. But I can think of half a dozen very common aberrative commands in the society, such as, "You think you're going to change things around here. Well, you're not and I'm going to show you." Or, "When the job is done, it's done, I'm through with it, and nobody's going to tell me off about it."

One caution about working on writers' and actors' children is that often their sense of reality has been ripped up, because actors and writers are fond of saying, "It is all a world of imagination anyway," or, "I've got to get my imagination to work on this, it just doesn't seem real to me."

In conclusion, encourage the person to believe his file clerk. But you can't do this up against his knowledge of the fact that the file clerk is handing up bad data consistently. The best way to tackle the problem is to tackle it dually, by telling the person how strongly that file clerk is trying to come through and then getting those circuits out.