

Official Publication of
The Hubbard Dianetic Research Foundation, Inc.
Elizabeth, New Jersey

The Processing of Children

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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 prenatal 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. De-intensify 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 percepts to the percepts 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 not to drink any water before he went. In spite of this "education" the 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 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 weird misconceptions about many everyday 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 noncommittal about anything connected with his past life and completely

* “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.”

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 violent quarrels occurred as a regular feature in the household, particularly during mealtimes. 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 affect 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 in life when the adults around him do not enjoy themselves as adults, take 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 nursemaid 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 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 objects 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 somehow 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 it 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, this 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

stem 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 is 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 him 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 backyard, with a look of grim determination on her face, running out the licking papa had just administered!