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Handling the Psychotic

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Man's chief weapon in the struggle for survival has been the analytical mind. It is his ability to act rationally that has brought man to his present position of dominance over the other forms of life on this planet. The story of the rise of civilization is the story of man's increasing rationality in the governing of his life. Despite the tremendous job of breaking away from the encystment of old habit patterns, and despite the insidious nature of the contagion of aberration, most of the areas of man's activity are at least partly rational. Only in one area has man made very little progress. *Man has not learned to be rational about irrationality.*

THE USUAL REACTION TO PSYCHOSIS

When confronted with the complete irrationality of psychosis, the first reaction is generally one of fear and terror. The average person, observing a psychotic for the first time, will feel a sweep of terror through him that is somehow connected with his own ability to survive. This is the most incomprehensible of all types of conduct. This psychotic has thrown away the thing which differentiates him from the lower animals. He seems, because of this one reason, less than human. Yet obviously, from his appearance, he is a part of the human race. But, if the human race should evolve in this direction it would no longer be human. After only a short contact with a psychotic, the average person begins to feel that he is not dealing with a human being, but with a thing that is not an animal, but most certainly not human, either.

The built-in reactive mind reaction to psychosis is not only that the psychotic has forfeited his own personality, but that he has forfeited his right to be a human being. Immediately after this sub-monitor-level computation is made, the attitude of the normal person toward a psychotic becomes punitive.

In a thousand years the phrases have changed somewhat, but the intent is still the same. "Kill him! Do away with him!" has changed to, "Take him away! Lock him up!"

"The devil is in him! Tie him to the whipping post!" has become a bit quieter: "He's not himself. Give him shock treatment."

"He'll kill us all! Throw him in the dungeon!" is now much more polite: "He may injure himself. He should be given a complete rest."

The slight change in attitude reflected by these changes in the language is all to the good, and should be heartily commended. Nevertheless the old feelings of terror have only a thin veneer of politeness over them, and the result as far as the psychotic is concerned is not much better. He is still shunted aside, put out of sight, thought of not as a person, but as something that is not quite human, and not quite an animal.

The confusion of personality with the reasoning faculty is very much in evidence in the reaction of an average family to a psychotic break. For a day or so, the family will continue to regard the person who has had a psychotic break as a human being. Then, bit by bit, they begin to excuse his irrationality on the basis that he is "not himself". By this time, fear begins and irrationality sets in. The family will begin to avoid the use of the person's name in their conversation. "What'll we do with him? We

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can't let him run around loose. He's liable to hurt someone. We'll have to get rid of him. He won't know the difference anyway, the way he is now."

Gradually the emphasis shifts from taking care of a real person to taking care that others are not hurt by something which is not a real person. The family is generally very glad to shift the responsibility for solving this vexing problem into the hands of a professional person who is trained to handle the situation.

THE ATTITUDE OF THE PROFESSIONAL

Unfortunately, this shift is not always accompanied by a shift in attitude toward the psychotic. The professional bends his efforts toward making the psychotic an acceptable member of society, *not toward helping him to regain his rationality*. All too often, the highest goal of the professional person who deals with a psychotic is what is called a *remission*. This means that the psychotic can be handled by ordinary people, that he will not cause trouble, and so can be released from confinement. It means that the psychotic will not harm society. It says absolutely nothing about the psychotic himself.

The professional is not immune from the wish to *do something to* the psychotic. He, too, has changed his terminology in the past thousand years, and has refined his techniques. No longer does he house his patient in a dark, stone dungeon. Now he pads the cell! No longer does he publicly flog the miscreant, he privately and discreetly induces an artificial convulsion by running an electric current through his brain. No longer does he burn his patients' eyes out with a red hot poker, or cut off his tongue. He has recognized that the tongue is not responsible for what the psychotic says, nor the eyes for what he sees, so he turns to the brain which controls these members. Now he cuts, and digs, and slices at the brain itself with the most antiseptic of weapons, and in a small percentage of cases, produces a remission.

One successful prefrontal lobotomy was performed on a man who was most unhappy because he could hear voices. After the operation, he could still hear voices, but he was no longer unhappy about it. Before the operation, he was still fighting to be a sane and happy person. Afterwards, there was no fight left in him, and very little rationality. The doctors who performed the operation were very happy with the results.

Most medical men have a sincere interest in helping those who come to them for help. They are not to be censured for their inability to resist the behavior patterns which permeate society. At the same time, now that the real basis for irrationality has been discovered, they certainly should not be encouraged in a pattern of conduct which is so damaging to others.

PRESENT OUTLOOK

Dianetics cannot, at this moment, offer a completed program for the processing of all psychotics, no matter how badly they have been handled. Our work with persons who have had electric shock seems to indicate that most of the damage done to the nervous system by shock can be repaired by the body after dianetic processing. At any rate, a number of electric shocks have been run out as engrams, and the results in restoring sanity to the preclears who have been processed in this way are definitely encouraging. Some work has also been done with persons who have a part of their brain missing, and these persons also respond to dianetic processing, but, of course, the destruction of brain tissue introduces a wild variable, and results are also wildly variable.

Psychotics who have not been treated with shock of any type, or with surgery, may be successfully processed using the techniques outlined in *Dianetics: The Modern Science of Mental Health* as amplified by the material presented in *The Dianetic Auditor's Bulletin*. Data on the processing of psychotics is growing, and a new synthesis of these data will probably yield fresh techniques for the processing of psychotics, particularly in regard to accessibility. Such a synthesis will be made within

the next few months, and a full report will be made at that time. In the meantime, much can be accomplished through the use of standard procedure processing and the hints which are given in this article. Immediately, however, three things can be accomplished:

1. Persons who understand that a psychotic is merely a person who does not have enough attention in present time to be able to act rationally, can stop being irrational about psychosis.
2. These people can help to keep others from being irrational about a psychotic.
3. There need be no despair about psychosis. Something *can* be done.

THE CLASSIFICATION OF PSYCHOTICS

A better definition of the dividing line between psychosis and neurosis is needed. The difference appears to be in whether "I", the awareness of awareness, has been completely taken over by an engram, a series of engrams, or a demon circuit. A neurotic person has not given up the strain of keeping some of his attention in present time, and will not do so until forced by chronic, constant restimulation to do so. When this happens, the neurotic suddenly becomes psychotic: a psychotic break has occurred.

As a neurotic person enters the section of the dwindling spiral of restimulation in which he is in danger of becoming psychotic, his hold on the reality around him becomes more and more frantic. He will cling desperately to the avenues of communication open to him. The attention which is still available for present time use will try in every possible way to stay in present time against the pull of the restimulated engram. But this very narrowing of the possibility of awareness in itself constitutes a lessening of the chance to remain stabilized, and bit by bit, the attention becomes more caught up in the engram or series of engrams which is in such violent restimulation. The last stage of the struggle is almost visible in the face of the person undergoing it. Then, suddenly, the last bit of attention is caught by the reactive mind and forced out of present time. The form of the psychosis depends entirely on the type of engram or circuit which is in restimulation.

In general, there are three types of psychotics: Computational, dramatizing, and the psychotic with missing parts.

A computational psychotic is sometimes able to act more like a normal person than a severe neurotic. Such a person has been caught up completely by a demon circuit, and all of the communication to this person and from him is filtered through this circuit. If the circuit is not of a type that restricts too much the activity of the mind, such a person may well be able to conduct a fairly normal kind of life. Since a demon circuit is able to make elementary computations, this person will be able to act with a slow, stumbling sort of rationality in areas which do not contradict the engrammatic commands which set up the circuitry. Since the current norm requires only a small area of rationality, such persons are sometimes able to pass as normal. If, as is more generally the case, the circuitry is of a type that affects most of the activity in which a person engages, the answers which are possible to the person may be so restricted that it becomes obvious that there is no real communication with his environment. Such a person will be institutionalized, but will be considered a "good" patient by the authorities at the institution: slow, dull-witted, perhaps capricious, but rarely violent.

The dramatizing psychotic is almost always recognized as a psychotic. Such a person is caught either in one engram or in a series of engrams. He will play through a literal recording of the engram on any occasion. He will switch from valence to valence during the playback of these recordings with amazing rapidity. He will pick up new valences from the people around, and will, in general, occupy any valence other than his own. His reaction to the command phrases of the engrams is literal and he is solely dedicated to carrying out these commands. The bewildering variety of the classes of psychotics is simply due to the language which is used while engrams are being formed.

The dramatizing psychotic has formed, prior to Dianetics, the most incomprehensible and the most irrational of all the classes of behavior. They form the bulk of

those who are considered insane, and are generally thought to be hopeless unless they respond to shock therapy of one kind or another. A knowledge of engrams and the action of engrams is all that is necessary to enable a person of normal intelligence to understand the actions of a dramatizing psychotic. These actions are overt engrams—engrams face-to-face.

The psychotic who has part of his brain missing is not difficult to spot. He is not so much a case of irrationality, as of simply an inability to be rational. Something is missing from this person and it can be felt much more easily than it can be described. They may or may not dramatize, but if they do, it will not follow the same set kind of pattern which is followed by the dramatizing psychotic. Mostly, they simply are not able to control themselves in some fashion or another.

These persons can be helped by dianetic processing, but a complete job of rehabilitation would be manifestly impossible for them.

It is a remarkable fact that a great deal of the nervous system can be destroyed by disease or injury or surgery without making the person completely beyond help. Unless the portion of the brain regulating bodily functions has been seriously damaged you can normally do something.

If a person is dramatizing in any way, he is dramatizing out of an engram. If the engram is there, and there is any way at all of communicating with the psychotic, you can do something about reaching the engram and relieving the tension on it.

PROBLEMS PECULIAR TO PSYCHOTICS

There are many problems in working with a psychotic which an auditor will not encounter in processing the average case. The difficulty of finding proper working conditions, for instance, is much greater when dealing with a psychotic than with an average case. Psychotics are apt to make more noise and to demonstrate much more violently than the average case, and the problems of securing a proper place for processing are thus increased. In addition, psychotics frequently must be cared for constantly, and the securing of these services in an institution which will also grant free access to the auditor is sometimes a difficult problem. Nevertheless, something can be done.

One preclear was recently released from a state institution, even though the auditor only worked during visiting hours, releasing grief and blowing locks.

Another peculiarity in working with psychotics is that an auditor cannot expect to be able to do full processing every minute of the time he spends with a psychotic. Sometimes it is necessary to spend several hours in attempted processing in order to accomplish ten minutes of actual processing. Fortunately, the ten minutes thus accomplished will have effect in the psychotic far beyond ten minutes of processing in the average person. A psychotic has so little attention available that even when a small amount is released, the effect is sometimes astonishing.

The problems of working with electric shock and insulin shock are likely to be encountered when dealing with a psychotic. This may be true even though all the information you get from the psychotic or from his relatives and friends indicates that he has never been in an institution and has never had shock of any kind. Unfortunately, there is still a tendency in the society to hide a psychotic away from the public, and to make a dark secret out of the fact that someone in a family has been a psychotic. The fact that almost all psychosis is not hereditary does not seem to alter the feeling that psychosis is something which should make all persons connected with a psychotic ashamed for him. This hiding away of information which is very much needed by anyone who attempts to deal with a psychotic is, of course, foolish and inconsistent, but it can be expected.

If your preclear is psychotic, always expect to find shock of some kind in his bank, no matter what information you are given about him. The running out of electric shock and insulin shock is quite difficult and should not be attempted except by an experienced auditor. The techniques used for this will appear in a future *Bulletin* article.

Psychotics are often subjected to hypnosis and, if so, may be stuck in these hypnotic incidents. Hypnosis, like shock, must be run before prior events are contacted.

One more problem which is more usual in psychotics is the problem of tampering by outsiders. The psychotic must be cared for by others until he can take care of himself, and these persons are, for some time to come, likely to be curious about dianetic techniques. Your preclear may be called on the carpet and grilled at some length over what was done in your sessions. He may have his data constantly invalidated. Some hospital authorities will add locks and engrams as fast as an auditor can pull them out, sometimes with the best of intentions.

One auditor arrived at a hospital to treat a psychotic only to find that the potential preclear had died before he had ever seen her. A careful and searching investigation revealed that the hospital authorities had tried to have this elderly woman in the best possible condition for the auditor, and had given her an electric shock to prepare her for processing! The woman's spine had been fractured.

Until dianetic processing has become the standard method of dealing with psychotics, such tragedies are likely to continue. Let us hope that such completely muddled thinking as brought about this tragedy will not go on for much longer. Widespread knowledge of Dianetics should quickly bring about needed reforms in the treatment of psychotics.

FAMILY RELATIONSHIPS

If the human world were built along rational lines, an auditor could expect to obtain his best support and counsel from the family of a psychotic. There are rare occasions when one or more members of a family can be relied upon to act rationally about irrationality, but in general, families are peculiarly unable to act sanely about the psychotic. The reason for this is quite obvious when you consider the probable content of the engram banks of the people who make up a family.

Most families have a great many engrams and a great many standard dramatizations in common. In other words, the same irrational patterns which occur in your preclear will also occur, in most instances, in the members of his family. Do not expect rational action from the psychotic's family. Usually, the best they will be able to do is to take another valence of the same engram. If the preclear is a paranoid, they will only be able to go over and over the other side of some dramatization: "You don't have to worry. They're not after you. Why, nobody'd hurt you. Can't you see there's nobody wants to hurt you." This, of course, was originally sound advice to somebody, but reasoning with irrationality is like catching elephants with a popcorn popper: It would be a pleasant way of doing things, but it won't work.

It's like a problem in semantics. Reason and irrationality are on different levels of abstraction. One cannot be brought to bear on the other until it is transferred to the same level of abstraction. Once you do that, the problem disappears. Either you have irrationality battling it out with irrationality, or you have rationality. Dianetic processing is a means of transferring irrational patterns to the rational level of abstraction.

The sincerely felt attempts by a psychotic's family to reason with his aberration normally drive him farther into the pattern of his irrationality. Playing through the other side of the engram in which he is held will only result in his being caught more firmly by the engram.

Even in the unusual case of a person in a family who is unaberrated enough to act rationally about a psychotic in his own family, there is still a problem of restimulation to be considered. The voice tones, mannerisms, methods of expression, emotional reactions of any member of a family will be found in the reactive bank of any other member of that family. This definitely does not preclude auditing by a member of the family, but it does mean that processing by a member of the same family is especially difficult for an uncleared auditor, and that the factor of unnecessary restimulation in the preclear must be taken into consideration.

It is one of the problems of working with psychotics, that the people who are most genuinely interested in the condition of the preclear are least able to help directly

in the process. Nevertheless, it can be done. A member of a psychotic's family can successfully process the psychotic, and can achieve remarkable results. It has been done. It is being done.

ACCESSIBILITY

The major problem in processing a psychotic is accessibility. There is, at present, no established procedure for accomplishing this. It has been a recognized problem for many years, and a number of techniques have been devised, but this is one area in which the auditor must rely on his own improvisations. One factor works in favor of the auditor. He knows the anatomy of the engram, and knowing this, is able to understand many types of behavior that are utterly incomprehensible to persons who do not have this knowledge.

In addition, the degree of accessibility required for dianetic processing is much smaller than that of many other ways of dealing with a psychotic. An auditor who has once gained the attention of a psychotic for ten minutes should be able to accomplish enough in that ten minutes to make the problem of accessibility much simpler from then on. One of the most gratifying things about dealing with a psychotic is the rapidity with which he responds to processing. Even if the amount of attention released to a psychotic seems incredibly small (one yawn, a few tears) the resulting stabilization of his behavior in present time may be astonishing.

There are many tricks in gaining accessibility, but one principle underlies all of them. Get into communication with basic personality through affinity.

The simple assumption by an auditor that the psychotic is not some strange, non-human form of life, but is a reasonable human being who is operating from a frame of reference somewhere in his past life rather than in present time will do a very great deal toward establishing this affinity. Until an auditor has had sufficient experience in Dianetics to understand this thoroughly, it is not recommended that he attempt work on a psychotic.

The approach which Homer Lane used on occasion, remarking to some homicidal maniac, "I understand you can help me!" may be found useful.

Sometimes simply taking a long walk with a psychotic, giving him exercise until he is very tired, will help you in gaining the few minutes of communication you must have with him.

It is of utmost importance that an auditor should have full confidence that something can be done for the psychotic. This point again underscores the importance of a genuine, firsthand acquaintance with the way engrams aberrate. Once the simple, mechanical point is grasped emotionally as well as intellectually that **ALL ABERRATION IS DUE TO ENGRAMS** it follows irrefutably that something can be done with any person who can be induced to recount his engram to a person who is in communication with him. A dianetic auditor, understanding why the psychotic acts the way he does and says the things he does, is in a position to be in communication with the psychotic. A person whose sole attempt is to try to force present-time reality on a person who is caught in a past-time event, is in no such position.

A point of note in the gaining of accessibility is that intelligence varies greatly during the day, or during a week, or during a month. This is well recognized already, and it will be possible to check this cycle with an intelligent nurse or doctor. One psychotic, for instance, was kept in a wet pack in the mornings, but in the afternoons displayed much more intelligence. This was, of course, a response to an engramic command, and once the command was lifted the wet pack in the morning was discontinued. Pick your preclear up at the highest point of his rationality and work with him at those times.

There are four types of treatment which will *not* help and should be avoided at all costs.

1. Never be a taskmaster. A psychotic is like a child in that you must deal very gently with the good reactions you get from him. He cannot be forced, and will react badly to any suggestion that processing will be forced on him. Most psychotics have

had too much forced on them already. They will yield to gentle persuasion backed with genuine affinity.

2. Never, never, never punish. Nobody was ever cured of anything by swearing or beating. Nor was anyone ever cured by the more modern method of hosing down. Surely there has been enough of this in the history of mankind. Dianetics is a tool which can be used to make punishment unnecessary.

3. Do not attempt to appeal directly to the rationalizing portion of a psychotic's mind. "Now, George, you know that what you are saying just couldn't be true!" is in direct opposition to what George *knows* to be true. The words and the situations he is describing are more real to him than present time. They *are* true, but merely displaced in time. Explaining phobias never alleviated them. Reliving the incident which caused the phobia a sufficient number of times and with a sufficient part of the attention focused on the event will automatically "explain" the phobia to the individual who had it, to such an extent that any further explanation by any other individual, no matter how learned, is not only superfluous, but laughable.

4. Do not use hypnotics or depressants or attempt to work with a person under their influence. Dianetics wakes people up. It does not put them to sleep. Engrams may be contacted when a person is under the influence of a depressant, but they will not reduce or erase without the greatest difficulty.

If an auditor can secure the cooperation of a medical doctor it may be found useful to use stimulants. Follow the doctor's advice about what stimulants to try and about dosages. In the absence of a physician, strong black coffee is sometimes of assistance in waking up the analyzer enough to establish communication.

When a psychotic has reached the point where he does not talk at all, or does not hear when spoken to, other measures may have to be taken to attract attention. A strong, steady light, a flashing light, a steady monotonous noise have been found useful. Again, these are matters which require individual initiative on the part of an auditor, and, whenever possible, should be left for a Hubbard Dianetic Auditor who has had experience with other, milder types of psychosis.

PROCESSING TECHNIQUES

Psychotics run very much like an ordinary case with all the stops out. Once in reverie, there is a marked difference in the way a psychotic runs, but the difference is one of degree rather than of kind. A psychotic will frequently have every engram in the bank open and yelling for reduction. The difficulty is frequently not one of scarcity of material, but control of the huge amounts of material which present themselves. This is also true of the person who is near a psychotic break.

Once Basic Personality has been contacted, an auditor can count on a high necessity-level drive for getting rid of engrams from a psychotic. Sometimes there will be very bad tangles in the time track, but these can be handled through the ordinary techniques of running out groupers and misdirectors. In addition, the effects of the treatment of psychotics often thoroughly mix up the person in the chronological filing of the events of his life. This is always true of electric shock and insulin shock. Psychoanalysis sometimes seems to loosen up the entire bank, and a person who has been exposed to long series of psychoanalytical treatment is often an incipient psychotic who will try to run everything in the reactive bank at the same time.

Most psychotics have a tendency toward rather violent reliving. With an ordinary person it is sometimes an effort to teach the habit of allowing enough attention to go back into past events to contact the event fully enough for erasure. This problem is reversed with a psychotic. It is frequently an effort to keep enough attention in present time to cause an erasure. This should be evident from the description given of the nature of psychosis. One thing is in favor of the auditor on this score. When any attention, no matter how small, is released from its eternal circling through one engram in a psychotic, that attention is eagerly grabbed up by "I", the awareness of awareness, and immediately goes to work to stabilize the person in present time.

A psychotic who has reached the stage where present-time communication is

impossible, but who is still trying to communicate some past event does not offer a serious problem in establishing communication. One technique used is based on the principle of "button pushing". Simply listen to this muttering of disconnected words and phrases long enough to catch one of the recurring patterns. Those words are your button. Push the button over and over again by repeating the words to the psychotic. This will probably draw his attention to you. In time he may get angry, cry a little, and then shrug as though those words had no more significance for him. They don't for the moment. They have lost part of their charge, and what they have lost has gone into the analytical mind, and will from that moment work for you rather than against you.

One psychotic was started on the road to recovery when an auditor discovered her talking about how no one loved her, and discovered that she had often been left alone as a child. "Poor Mary, all alone. No one loves you," brought a flood of tears and the beginning of a new life to one near-hopeless psychotic.

WORKING NEAR THE BREAK

Most auditors will be faced with the problem of working with a person who has never been classed as a psychotic, but who is very near a psychotic break. This is a ticklish situation, and should be entered only in a circumstance where the utmost care can be exercised. The working rules which are outlined below, apply equally well to a psychotic and to a near-psychotic. To work with either class of persons late at night is to ask for trouble. It is much better to place a near-psychotic in an unrestimulative environment, and to give him plenty of rest and food before beginning processing. It is not the time to work when he has started down the dwindling spiral. After his necessity level has reacted and he is trying to fight his way back up is the perfect time for processing.

One aspect of changing the environment of a person near a psychotic break needs special emphasis. Not only is a person near a break usually tired and improperly fed, he usually has too many people making too many demands on him. His communication lines are strained. Do not place an additional strain on his attention by giving him one more person to try to fit into the switchboard. Take him away from too many people.

GENERAL WORKING RULES

The following working rules apply to all processing, but especially to processing psychotics or near-psychotics.

1. Do not work when you are too tired. It is better not to audit when you are below a tone three.
2. Do not work when your preclear is too tired. This is especially dangerous in a near-psychotic.
3. Do not change auditors when it is at all possible to avoid the change.
4. Do not mix any other form of treatment with Dianetics. This is especially dangerous in an institutionalized psychotic. One preclear who had neared the point of release from a hospital was thrown into a temporary spin when one of the doctors used the probing, "you're responsible" type of questioning all too common in mental institutions.
5. Keep your courage no matter how violent your preclear is. If he picks up a chair and starts to hit you over the head, simply say in an even voice, "Go back to the beginning of that, please!" Most of the time he will do so. Remember that your preclear is acting sanely within the framework of the engram he is caught in. Of course you must defend yourself, but do so with your wits and you will accomplish something by it.
6. Remember that there is only one good way out of an engram, and that is through it.
7. Get Basic Personality on your side and work with it. You will like Basic Personality, and it will like you. No human being is basically not likable. Build affinity with your preclear.

8. Never give up. Something can be done.

9. Work with a physician whenever possible. Nothing in Dianetics is at variance with the best medical thought, and Dianetics has no quarrel with the medical profession. Enlist the aid of a doctor whenever possible, always specifying that no technique other than Dianetics is to be used on the preclear. Normally, a doctor will be actually very interested in what you are doing, even though he may scoff officially. When you obtain results, he may become openly interested.

10. Do not work with severely neurotic or psychotic persons until you have had some experience with more normal preclears. Under no circumstances try a *part* of Dianetics on a psychotic or near-psychotic person. Unless you understand the simple, basic principle that engrams cause aberration, you should not process anybody, and especially psychotic or near-psychotic persons.

11. DO NOT ATTEMPT TO WORK A PSYCHOTIC WHO IS UNDER SEDATION. A psychotic has very little attention in present time even under the best of circumstances. He must be caught at his best moments, when he is most awake, in order to bring the attention loosened up by processing back into present time. Sedation will destroy the opportunity for this. Even persons who have most of their attention in present time do not work well under sedation (some sedatives make processing completely impossible), and this is even more true for the psychotic than for the normal or above-normal person.

STRAIGHT LINE MEMORY

The beginning of processing in a psychotic will be almost exclusively in straight line memory. It is unwise to attempt to do anything at all with prenatal engrams until after the psychotic has already become stable. This is not a rule which must be followed in every case, but it should be followed unless the prenatais are forced on the auditor by the file clerk.

The problem with a psychotic is one of getting enough attention units stabilized in present time so that he can begin real processing. The psychotic with attention units permanently in present time is no longer a psychotic, but a neurotic, and he will be able to live like a normal person while continuing his processing.

To work a psychotic through prenatal engrams would be merely to cause him to be stuck in more places on the time track than he had been before. All work must be directed toward getting attention into present time, and there will be more than enough attention tied up in locks to bring any psychotic back up to the current norm.

Occasionally a psychotic will go immediately to a grief incident, and this, of course, should be followed up and encouraged. More often, the auditor will have to work for some time getting small amounts of attention off irritated areas by straight line memory before the psychotic can stabilize enough for more than minor grief engrams. In almost all cases a grief engram is the only type of engram which should be attempted while a person is still psychotic.

In the psychotic as well as in other persons, the greatest amount of release of attention will normally come from the removal of grief, and after one major grief discharge, a psychotic may stabilize out of that classification. This has already happened in one case.

There are nineteen million persons in the United States who have been institutionalized for one reason or another. Dianetics offers a hope to these and to millions of others who have nearly reached the point of breaking under the dwindling spiral of aberration which has already set in, in this civilization. To ignore Dianetics without giving it an honest trial, to overlook any possibility it may contain for halting the downward spiral at this critical point in man's history, is like a drowning man refusing to climb into a lifeboat when nothing else is in sight which offers the slightest hope of saving him.