

DYNAMIC PSYCHOLOGY
LESSON IX
APPLICATION OF THE REMEDY

One of the greatest injustices being perpetrated in our modern society is the wholesale denial of the right of the individual to himself and the fruits of his own labor. More and more the private rights of the person are being invaded and taken away from him. The rise of the philosophy of socialism, with its denial of individual rights and the assertion of the superior right of the State or society has all but made sincere individualists apologetic in putting forth their ideas and there does not seem to be any more strong arguments in favor of the liberal, democratic and progressive society.

This trend toward socialist thinking has also been felt in the psychological sphere as well as in the other fields we usually associate with political reform. The psychosocial doctrine which is most in accord with the ideas of socialism are those which emanate from the school of psychologic thought I mentioned earlier, The Psychology of Adjustment. In this doctrine, the norm to which the individual should conform is that of society. According to this way of thinking, the highest aspirations any man can have is to "go along with the group" or to "obey the present set of man-made laws". Criticism of the norms of society or advocacy of basic reform is enough to brand a man as an "anti-social" character.

All too many of the psychotherapies mentioned before seek to probe into the inner recesses of the human mind, not for the purpose of freeing the psyche from the indoctrinations, hypnoses, and brainwashing its has been subjected to, but to uncover more trauma, expose more guilt feelings and diminish self determination and make the person more and more dependent upon an all-knowing, all-deciding therapist. Most therapists justify their interference in the lives of their patients or clients by saying that the person in treatment is incapable of making an intelligent and sensible decision, so a responsible

person must make his decisions for him. Although many pay lip service to restoring a person's self reliance and ability to make decisions, in practice few really accomplish this aim.

Such abuses of the therapeutic process arise because the therapist has no deep understanding of the meaning of a free psyche and the rights of the individual as opposed to others of society. Perhaps it would help to state at this point the basic principle of human rights and freedom. This is that every man is entitled to do that which he thinks is right, providing that in so doing he does not infringe on the equal rights of others to the same freedom.

Since basically the problem of freeing the psyche is one of increasing voluntary communication and control by the psyche over its internal resources and communication pathways, let us examine some of the ways in which these channels to the Unconscious and sunconscious can be brought under greater volitional control. When another person gives us suggestions while we are in the lower levels of awareness, close to or below the Margin of Awareness, he can cause our minds and bodies to perform tremendous feats of concentration and strength as well as memory and recall.

Hypnosis has long been used by therapists to effect cures and relief of crippling symptoms as well as to restore various abilities to people who had lost them temporarily or hysterically. It is a method which is a reliable one in the hands of an experienced operator, but only a rather limited number of persons are in the hypnotizable class. Besides, there is a great responsibility on the hypnotist as he is in exclusive control of another person's psyche. Mistakes have sometimes been made and they have occasionally been rather costly. Not only is a person's self-determinism impaired, but a dependency relationship often develops which is as "sticky" for the hypnotist as it is sometimes for the subject. Besides mere symptom removal, which a lot of hypnotherapy involves is not lasting, and frequently leads to a substitute symptom showing up in place of

the original symptom. So, while hypnosis is a good research tool and much has been uncovered about the operation of the mind through its use, it is too limited to warrant its extension to the use we want to develop.

According to the the Freudian analysts, dream interpretation can also open up pathways to the Unconscious and this technique forms a large part of psychoanalytic therapy. But perhaps the technique used by a French Dr. Dessoilles which he calls "La reve eveille" or the waking dream, is closer to what I had in mind. In this form of psychotherapy, the subject lies down in a quiet room and is told to "day-dream". This "dream" is then analysed and interpreted in terms of the manifest or obvious content, and the latent or perhaps hidden or symbolic meaning.

As mentioned earlier, there is another technique of dream management which is a tribal custom of the Senoi natives of the Malay peninsular as described by Stewart. This particular tribe teach their children as they are growing up to handle and manipulate the dream process. No matter how terrible their childish nightmares are, they are assured that nothing can harm them in their dream world, but on the contrary, they should confront, question and otherwise control the dream characters. In this way, their children grow up with a great ability to face life and its problems without fear or superstitious beliefs interfering with thier decisions.

The most recent of the mind-stimulating drugs, those which are called hallucinogens or "consciousness expanders", such as LSD, Psilocybin, mescaline and others, can also open up pathways to the Unconscious mind and release all kinds of mental phenomenon which had only rarely been observed before. In some ways the person taking these drugs behaves as though the were mentally deranged, but in other ways they can respond to the situation and in many cases be aware of where they are and what is happening and yet be caught up in a fantastic series of sights, sounds, feelings and images which put verbal discription in an inadequate category to convey all that is taking place in the person's psyche.

The chief objection to the use of drugs for doing anything including relief of symptoms and exploring the psyche, is that it is difficult to assess the long-term effects of a drug until many years have been spent in testing its action on the body. Hardly any of the drugs in present use have been tried for at least twenty years so that all short and long term effects can be known. If anything, the trend in the drug industry is to quickly introduce a new drug, and then as soon as its actions are shown to be toxic, this drug is withdrawn and a new one substituted until its effects are ascertained and is in turn replaced by still another "new" potion. This is an almost endless process and is hardly a good policy for finding a reliable, well-researched drug.

Besides, the very philosophy of chemotherapy as far the use of drugs is concerned makes it almost impossible for a really effective drug to be found. The greatest successes of chemotherapy have been in the field of antibiotics or chemicals that kill toxic germs invading the body. But almost no work is being done on strengthening the body's own defenses against invasion as a preventive treatment. Chemotherapy has also been of use in the deficiency diseases in which some necessary chemical is not being manufactured by the body in sufficient quantity to meet the body's needs. Once the deficiency has been determined, and a substance is available which can serve this purpose, all one has to do is to administer this drug. Examples of this kind of treatment are the vitamin deficiencies, insulin in diabetes and thyroid extract in goiter. The drawbacks to this treatment are permanent dependence upon a supply of drug, high long term cost and attacking the symptom not the cause.

Drugs for the treatment of the mentally upset or emotionally disturbed have been of two general types, the shock or knock out kind or the quiet down or tranquilize kind. Shock therapy of all kinds, from electric to insulin, from cold showers to spin tables have been used to restore sanity to the insane. And presto !, like kicking a TV set may sometimes restore a loose connection, so, too, shocking a person may jar him loose from whatever is wrong, but one must admit that success gained in

this fashion is due to chance and not to any knowledge of the cause of the disorder. But because it "works" it is still used fairly extensively in mental institutions. Tranquilizers are also very popular with the psychiatrist because they have revolutionized the care of the severely disturbed. From being a very hazardous occupation requiring locked wards and vigilance at all times, the tranquilizers have quieted down even the most violent and made them "amenable" to regular treatment and routine care.

Another treatment which aims at symptoms and not at the cause of mental malfunction are those surgical operations which destroy tissue, not because it is tumorous or diseased but because the doctor wishes to interrupt communication pathways from one part of the brain to another. Under this heading we find, lobotomies, leucotomies, and others. Needless to say, such treatments should be only as a last resort and even then, regretfully.

Everyone has available to him, if he wishes to use it, a facility which is seldom used in our culture that makes it possible for one to explore the content of the Unconscious without becoming swamped or over-powered by the highly charged and painful recordings that are stored there. This facility of recall playback is closest to the surface and hence to awareness when we are in the transitional stage between waking and sleeping. Here is the real frontier of the mind, the region between awareness with self-control and awareness limited to watching and feeling as the scenes unfold in a dream. Unlike the Senoi and a few other primitive tribes, most civilized people are purely passive observers of the dream imagery and could not if they tried influence the course of their dreams in any way.

In the course of several years of research on myself, I have devised all sorts of devices to signal my awareness of the precise moment when I lose consciousness just as I am going to sleep. After much trial and error, I found that the type of signal which is ideal for staying the maximum length of time in the transition stage is one which starts very gradually and builds up slowly to a strong enough signal to awaken me if I go too deep.

By this means I can zig-zag in and out of the twilight zone or the Threshold of Consciousness. In this region the conscious mind is closest to tapping the vast stores of the sub and unconscious minds.

Because all of life has been in effect one big long hypnotic session, in which at various times, some of what was said, implied or commanded in our presence was able to sort of sneak in through the back way, it became implanted so deeply and unconsciously that it masquerades as being our own thought, idea or desire. And just as in hypnosis, telling a person that some phrase or command is acting upon his conscious mind from this implanted level will not convince or change this person's idea that the idea is his own. The only way a person can come to realize that he is the victim of an implant is by either hypnotizing him and sending him back to the original time when the implant took place so that he can hear for himself the implantation or one can ask the victim to imagine he is a hypnotist who wants to implant a suggestion in the unconscious mind of his subject. What phrases, commands, suggestions would he use that would produce the desired effect?

This process of trying to put the victim in the shoes of the suggestor is called Dehypnosis. It could also be called Desuggestion, in that we are seeking to make a person aware of certain actions, inabilities or blocks as being due to an inadvertant hypnotic phrase that was able to by-pass the normal monitor circuits and go directly into the Unconscious. When the victim is able to dig out the original phrases used by the unintentional hypnotist, a lot of the command power of the original suggestion is lost, and if enough of these can be found and de-energized, a person can regain a lot of the abilities that we all possess but which are shut off by similar suggestions, commands and prohibitions.

The strongest and most obeyed hypnotists in our lives were undoubtedly our parents. Even though much of what they told us and had us do has worn off or has

lost a lot of its command power, still there are no doubt many phrases lying around loose in our unconscious minds which become activated by something that someone says or does and we react without thinking in obedience to this long-dormant phrase.

When a person is playing back, like a recording some stereotyped phrase or action, he is usually dramatizing or acting out some past incident which was important in some way to the unconscious mind. In fact, one can get quick clues to the phrases which are influencing the unconscious mind all out of proportion to their real importance by just listening to a person's speech and noticing the words most repeated, usually for no good reason or that are brought into almost every other sentence without the slightest hesitation as though they belonged there.

Because of space limitations, a more detailed explanation of the details of Dehypnosis, Dream character control, Desuggestion and several other allied techniques such as paradoxical intention, negative practice and emotional expression control, must await either another book or an appendix to this one. The basic principle behind all these various and different-seeming applications is to get a person to do deliberately that which the Subconscious or Unconscious mind are dictating compulsively or to block deliberately that which these same two areas are blocking against our own volitional control.

In comparing the various psychotherapies available today, we should have some standard or criteria to which an ideal treatment can be compared and its value determined. Since people have limited time and funds a method which economized on these two items would be welcome. In addition it should not require a very highly trained person to administer it, or if this is unavoidable, this person should be able to handle a lot of people at the same time without interaction or violation of privacy rights. Also if the technique is not difficult, it can be quickly taught to fairly intelligent persons, but it should not require many years of preparation.

If the treatment is very slow or time consuming, it

should only be considered as a last resort, and neither can it be very economic. As far as ethical considerations are concerned, there must be respect of a person's right of privacy and self-determinism. Nor should a therapist take on some one he is fairly sure he cannot help. There should be complete disclosure of what is to be done and no secret or underhanded means of extracting information should be used.

In summary the ideal therapy would be cheap and easy to apply, it would be long-lasting and reliable in its results, accomplishing the goals of the patient, not those of the therapist, which are generally assumed, and incorrectly, to be those of the client. It should be just and equitable, which means the therapist should not obtain his fees under false pretenses or misrepresent his capabilities. In addition, it should be quick and sure in its action, not taking years of expensive effort and individual sacrifice.

Almost none of the therapies in use today make any attempt to apply the above standards of treatment. In practice, they seem to out-vie each other in how long they can hold their patients in therapy. Ten and twelve year analyses are not uncommon and two or three years is considered average but not as being sufficient. Most psychotherapists charge very high fees, promise no or at least not symptomatic relief, as if merely relieving symptoms was beneath them. No! They must search the underlying causes of the symptom, and that can take a long time. Nor does finding the underlying core of the illness mean that the symptom will disappear, on the contrary it may even get worse.

The time is ripe for a new type of treatment, one which conforms as closely as possible to the criteria outlined above, and which can be applied by persons needing only a short course of training to qualify and who will be ethical and effective in administering this treatment. Surely a lot to ask and perhaps an impossible goal. Maybe some day.