

TACTILE COMMUNICATION

A lecture given on
20 September 1951

Special Processing of Psychotics

There is something I want to explain: Affinity, communication and reality are very valid. There is nothing wrong with you as an auditor putting your own aligned effort along with the preclear's effort in the most solid way you possibly can.

Take, for instance, a preclear who is pretty far out of line. You can work for a long time trying to establish ARC verbally because you are trying to establish it with symbols—the words.

I want you to observe something: The tone scale is a tone scale of muscular tension. You can take any individual and find out how much tension or pain there is on the conduit lines which go into the mind's switchboard, and that will tell you his position on the tone scale.

Therefore you can bring the preclear up artificially for the moment or you can bring him up by processing him. And if you get an individual to relax by talking to him, of course you are putting him into former areas of apathy. That is what a hypnotist does.

So what you want to do is communicate with him on the most intimate level possible, which is tactile. This applies especially to very bad cases, cases that are really sour. And I think we will be handling more of those than anything else.

Now, it may sound like osteopathy to you and it may sound like chiropractic, but remember that these things have some small validity. There isn't any reason why we shouldn't pick up a bit of it.

There are twelve nerves that go down the back. And you will find out that the area up around the shoulders and back of the neck is often very tense and people like to have it relaxed; ordinarily they like to have it relaxed if you are very quiet about the whole thing. So, if you take a bad case and you want to go into communication with him, this is the most natural thing in the world for you to do. People don't know any mechanism about this; they do know, however, that it is very nice and kind and sometimes they like to have their back rubbed or something of the sort. Rub this person's shoulders. Get him to sit in a chair with his arms relaxed at his side and rub his shoulders and the back of his neck and talk to him.

You are going in on an assist valence. If this person hasn't any "I" to play around with, if he hasn't any "I" that will face anything, you can at least give him a late-life ally which does the same thing as Mama did when she was picking him up away from a growling dog. It was very valid that that baby had to get away from the dog, regardless of any aberrative effect of Mama doing it. That was valid at the moment.

In just this way, in the processing of psychotics it is perfectly valid to impinge one's personality on the psychotic so long as one does not impinge it on the life directional line—as you would if you were telling him "You eat now," "You do this," "You walk here," "You go there," and so on. You are careful to allow him all the freedom of motion in the world.

So you can infiltrate him with tactile communication. This is one of the skills in auditing psychotics. There are many skills that you have to have to process them, of course. If you can do this, you can infiltrate just to this point, and it is saying "You have a right to do what you please." Maybe he can't talk to you or anything of the sort, but if you rub a psychotic's shoulders—as wild as psychotics sometimes are—and just be soothing to him without invalidating him, you will be able to go into communication. You may find at first he will sometimes try to jerk away from you, he won't want you there and he will be very suspicious

of the whole thing. Or in the case of some poor aberrated girl, she may want nothing but coitus or something of the sort; this tactile she will permit but that is all. Leave those alone! But if you can just get in toward the center motor nerves of the motor control system with your hands, you will have bypassed all of the work that you would have to do vocally otherwise.

You have gone into communication with this person. You are strong, you can do things. He may have the concept that you have become part of him. And what you have done is just kneaded a little bit more communication into the line.

You are working with the motor control units when you are working with these nerves along the back of the neck and on both sides of the spine. The motor controls are very intimate to these areas, and in those two cords is where you will find the greatest external manifestation of randomness (as I have been calling it). If you can take the tension out of those cords you can put your alignment into the psychotic's mind. In other words, you will have gone into communication with the psychotic.

So, here is another case of effort. This psychotic is making random efforts in all directions about this, about that, about something or other. The first thing that you do is smooth out the manifestation of that effort. If you did just that—smoothed out some of the manifestation of that effort—you would have an ally in the psychotic every time. Let me show you how this works.

LRH: Come here, Bill. Would you sit down there just for a second and I will tell you

PC: Please, don't do anything that's rough.

LRH: I'm not going to do anything rough.

[to audience] He's not a psycho. If the amount of randomness and the tension is there . .

[to pc] That's very interesting.

PC: (laughs) Surprise?

LRH: If you want to mesmerise . . .

[from audience] Is this test always accurate?

LRH: It doesn't seem to me to be. (LRH, pc and audience laugh)

PC: Just wait! Just wait!

LRH: All right. Here are the two areas . . .

PC: Want me to make it tense in there? Going through birth it gets very tense.

LRH: Yeah, I imagine.

[to audience] You see, because of the amount of effort which a man performs with his hands, it supposedly has the biggest registry area in the brain structure. In other words, a man has an enormous tongue and an enormous hand on his recording. A lot of his skill, his effort, is put out through his hand and arm.

[to pc] All right, let's take the areas which lead to the hands and arms. And we take these two here and if you just touch a psychotic . . .

PC: Hm-hm.

LRH: . . . like this: one, two—just like this . . .

PC: Makes me smile.

LRH: So it makes you smile!

PC: Yes. I was thinking about the guy who lifts weights and gets muscle-bound.

LRH: Yeah. You keep that up for a little while and . . .

PC: My wife likes to have me rub there.

LRH: . . . you'll find out if you pinch yourself—and, boy, this is a weird one—you pinch yourself without the psychotic seeing you and he'll jump.

PC: Without him seeing you.

LRH: That's mesmerism. It's interesting, isn't it?

[to audience] In other words, what you have got is an energy. You are handling an energy which is to some degree pervasive, which will take a facsimile one place and transfer it to another place without much trouble once you have gotten a close connection on the thing. That is why auditing psychotics is contagious. But he's nice and tense through this area.

[to pc] That hurt?

PC: Yeah, I've got a pain over on this one.

LRH: Hm-hm. Well, I'm not trying to

PC: Just raising an arm and holding for a while hurts—against gravity . . . physical pain. I think almost anyone has experienced that.

Now, one point I'm trying to make here is that this is a definite point on the tone scale. I mean, tension through this area can be spotted on the tone scale. And the other thing I am calling to your attention is something you knew already—that the most intimate communication you can get is tactile!

So if you want to get into communication with a psychotic, try it on a tactile line. And the most intimate area I know of to get that communication through to is from the hand to the shoulder cord or the back of the neck.

You will find that nearly every psychotic has lumps on the cords that go up from the back of the neck. They have heavy ones, big ones. The knots are corded in there. If you want to position a person on the tone scale rapidly, just reach right back there and see how many bumps and lumps he has in the back.

Jack: Where are they, Ron?

LRH: Right along the side of the vertebrae. Come here. (pause)

[from audience] This sure soothes my wife's neck and back when I do something like this to her.

Right here, those cords right there.

Jack: The tendon.

LRH: Yeah, those tendons. They are not tendons, though, they are nerve conduit lines.

[from audience] If you've ever had a back or neck injury there are vertical bumps right along the side of the vertebrae.

Yeah, and you also hit a guy in the jaw and he'll get a lump there.

What I am trying to explain now, as long as we are on the theory of effort and randomness, is that we had better give the physical body a little looking over. When you are processing an individual you want to make this test.