

## AUDITOR'S SKILL PART II

A lecture given on  
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### Handling Painful Emotion

If you can get painful emotion off a case, you have obtained at that moment a more lasting release than you will get in the same amount of time in any other way. Getting emotion off a case is important. If we can get off the case a death, a departure of an ally, or a great disappointment in life, we have in some degree proofed the case against a slump or a break. If we can get all the painful emotion off a case right at the beginning of it, we will have a stable case which will work easily and well.

Painful emotion occludes the basic area. It is a very interesting mechanism which comes into being, exists, persists and aberrates only because it depends on lower physical pain engrams. The physical pain engram is picked up and recharged by painful emotion. When you have painful emotion on a case, you have charged circuits.

A person can get along fine for years, having no trouble, and then suddenly somebody dies, after which they go into a constant state of anxiety, their illnesses kick in and their life goes wrong for them.

If we can reverse the process by pulling up the painful emotion of that death, we have knocked out the basic hold-down of the anxiety and brought into view very aberrative early physical pain engrams. Therefore painful emotion is of very great importance. There was some speculation about it in the Handbook, but we have more material than we had then, and a better picture of it has evolved.

You will find that whenever you go in for painful emotion and discharge it, you will discover a physical pain engram ready to be picked up immediately under it. If you discharge it thoroughly, you may not be able to discover instantly that physical pain engram, but in some cases enough of it is available to warrant your looking.

As soon as you fully discharge the painful emotion as an engram, go early to find what this was sitting on. When you contact it, the preclear will start to run out a physical pain engram which will then reduce.

Sometimes the painful emotion engram sits on a physical pain engram early in the bank. The physical pain engram says, "Don't cry, don't be so emotional, control yourself. After all, you know all is for the best in this best of all possible worlds," and you have not been able to get any painful emotion off the case. All you have been able to run are a few prenatal Suddenly you find yourself with Grandpa's death, right there, available.

Any time that you release painful emotion and it doesn't come up to at least a great carelessness about it—not necessarily laughter, but if the person still recounts it sadly—there is more emotion repressed somewhere else.

There is painful emotion in the prenatal area. Don't overlook this fact. Don't think that painful emotion is always in late life. Papa may have died while little Willie was on the way and now death becomes a very strange thing to this person. It will all sit on a physical pain engram which has painful emotion in it and in this case you really have a sorry mess. But you can clean it up. You can reach that death and discharge it, or reach some later death and then discharge the earlier one. The painful emotion seems to go from the top down and physical pain from the bottom up.

When you are treating psychotics or severely neurotic people, the best way you can guarantee a release on that person is by discharging the painful emotion on the case. I would never certify any severely neurotic or psychotic person who had not discharged any painful emotion. I would consider that person a liability until painful emotion was discharged off the case.

The importance of painful emotion is very great. You must try to discharge it as early as possible. You will get more sudden advance in the general aspect of a case by discharging painful emotion than by any other single action.

The handling of painful emotion engrams is one place where team auditing, in which you have two auditors working on a case, comes very much into play. If you have two auditors running one case, the tacit consent problem breaks down, because one auditor may spot something the other one is avoiding in a case, and vice versa.

So, when a case is overloaded with painful emotion, two auditors should be used if either of them has any painful emotion on his own case.

In one situation, one auditor knew that all he had to do was just shift valence on the preclear and coax him a little bit more because it was right there on the brink, and he would have gotten a painful emotion discharge. But he started to sheer off from the engram. He gave an order to move the person off it. The other auditor said, "Shift his valence," and the first auditor with a beaten look finally put the preclear back into the engram again. But he was handling it so diffidently that the other auditor took over, kicked through and said to the preclear "Go back to the beginning of it now, let's roll it again," and we got an emotional discharge off the case, because the person's valence was shifted. Just the command to shift valence released the painful emotion in this particular case, which won't always happen.

Tacit consent occurs. One case was a paranoid. He was practically leaking charge, it was ready to stream out of him like fireworks. He was complaining that he and his wife weren't getting anyplace. He was quite jealous. He was afraid to find out. He wouldn't audit his wife and his wife was afraid of him, afraid that he would explode in her face. She was very well apprised of the exact line which, if used by repeater technique, would break his case down; yet she wouldn't do it, and neither would he, and so both of them got mad at me and Dianetics!

I'm willing, where I'm trying to release somebody who is asthmatic, for instance, to spend ten hours if necessary knocking the person's birth out. If birth can be run on the case you run it. You get all the perceptics out of it and you run it and run it and run it and run it. If you haven't been back in the prenatal area maybe you will get one prenatal which will reduce in such a case, but you run birth.

Then you bring the person up to present time with birth reduced, and you run birth in present time on the patient, and you run it and run it and run it. By that time his asthma will be gone and you will have a release. And if you have also gotten some painful emotion off this release, you will have a release which will stay stable.

Now, that's not the same technique. You are taking great care not to stir up anything in the case that you will have to put in time resolving. You are going in straight.

But painful emotion is what you go after, and if you have to solve something in order to get the painful emotion available, do it. Releasing painful emotion will really pay dividends.

When you are going for a release you want to get rid of the birth engram, otherwise it is liable to sag in about three days. The way you get away from it sagging is to bring the whole incident up to present time and run it. It seems to run it on a different part of the track. You want the thing to stay flat and not sag, so you bring it up to present time and run it four or five times until it's gone and doesn't worry the preclear anymore.

The painful emotion engram is called an engram so that people will run it as an engram. We could also call it a “zut” or a “plakle,” but when you call it anything else but an engram, people won’t run it. If you expect a painful emotion engram to disappear as a real physical pain engram will, it won’t do it. So we don’t speak really of erasing a painful emotion engram. The entire content remains but it has no charge on it, and what you are doing is bleeding it. By taking all the charge off it, you never have to come back to it. It never sags, it stays dead. It doesn’t behave precisely like a real physical pain engram. We call it an engram because it has got to be handled like an engram. It gathers locks like an engram, and you have to start at the beginning and run it and run it and run it and run it.

The first time or two that you run a painful emotion engram, you will sometimes find that it has the characteristic of the person being outside himself watching himself, but he will be in this painful emotion. In any case which has a great deal of exteriorization of self, there is emotion on this case as well as valence shifts, because it is the emotion which locks in a valence.

That is the other thing that painful emotion does. It charges up a valence and makes it sharp. You can watch the patient shift across these valences, even though he doesn’t roll up in a ball and scream in one valence and then in the other in different voice tones.

I have handled painful emotion and gotten it to discharge by saying, “All right. How would you tell a little kid about Mama’s death?”

“Well, I guess I’d just come in and start telling her.”

“What would you say?”

“Well, I’d walk in and say, ‘Your ma’s dead, you’re out of luck.’”

“All right. Where would you be standing when you told the little kid about it?” You haven’t told him to be Papa and tell. You haven’t artificialized it.

In handling physical pain, you can do anything you want to; but in handling painful emotion, it is one phase that requires a very artistic approach.

If you go through the mechanical rigamarole of putting the person in reverie, sometimes you won’t get painful emotion. But start talking to the person in present time about somebody’s death, and you can see their eyes widen up and the emotion start in on it. However, don’t now say, “Ah, boy, we can get this one right away. Now close your eyes. Let’s go back to the incident,” because too many times I have seen that approach shut off emotion. Instead say, “Well, how did he look? Where was he lying? What was the doctor saying?” and suddenly the preclear will be running the engram—he is returned into it. Once he is there you can stiffen up the approach and say, “Well, look at his face again. How does it look? What is the nurse saying?” The person goes through and by that time he has got the incident turned on full blast and you are getting the emotion off it. But beware of introducing any artificial factor that he is in therapy and not there in the incident. Make it as real as you can, because it rests in the engram bank as being unreal enough.

You have to judge whether or not painful emotion is ready. You can pull out a circuit such as, “Control yourself,” or “Don’t cry,” and then take a dive at painful emotion.

Painful emotion is less approachable mechanically than basic-basic. Painful emotion is tough. The file clerk and somatic strip will very often sheer right off painful emotion. They don’t seem to be able to penetrate it. That doesn’t mean they are not working, it merely means they won’t respond on command to going there.

Painful emotion is something you have to keep your eye on. Keep your eyes open for and keep yourself working toward running a solid painful emotion discharge. You also have to keep

your mind open for beginning the erasure. These two things are extremely important, but the most important of the two is going for basic-basic. That is the key to the case.

There are lots of computations on this. The file clerk wants him in the basic area, but I have never seen a file clerk volunteer painful emotion yet. The way circuits get charged up is with painful emotion. When a person is out of valence, with a heavily charged circuit, it is very difficult to reach painful emotion.

So these circuits exist because painful emotion exists, and painful emotion can't be gotten off the case because these circuits exist. You have got one against the other. But if you know this, you are going to get the painful emotion sooner or later because you are going to go from the painful emotion to the circuit to the valence and so on.

Just play them back and forth until you have finally gotten the "Don't cry, you've got to get a grip on yourself," or "Now don't show your emotions, get a grip on your emotions. Now you mustn't let yourself go all to pieces." Of course nobody wants himself to go all to pieces!

Then there is the person who says, "Well, I spent three years in psychoanalysis getting rid of my husband's death and we have it very nicely under control now. It was so bad that for the first three years after his death I did nothing but cry. But we've gotten rid of all that. We needn't go back to it."

The auditor is a fool if he lets that statement stand, because it is wrong. It was the most baffling thing to one lady who had spent exactly three years in psychoanalysis laying the ghost of her husband's death to be told in Dianetics to go back to her husband's death.

She sat up on the couch and started to argue with me about it. She didn't know anything about Dianetics but she argued, "There is no reason to go back to my husband's death. After all, we took care of all this, and as a matter of fact I have sublimated the whole thing and it is now really the reason why I am doing so well and trying to help others and therefore we mustn't disturb this thing." It was a sacred portal that one just wouldn't dare enter.

I took her straight back and said, "Let's go back to the moment you heard about your husband's death. All right. What are the first words?"

And immediately we got painful emotion off this case which ran for three sessions and about a whole box of Kleenex! This person had been very sick with psychosomatic illnesses. After the discharge of that painful emotion, the illnesses went, and the whole thing keyed out. So, never permit yourself to be fooled by such a computation, because it is probably going to confront you.

There is some Reichian method of producing a convulsion in order to get a catharsis which would do something or other. Of course we know mechanically that if we induce emotion on the basis of getting a person restimulated by having him start himself crying, and then we ease him back, as he is crying, into an incident where he was crying, we might be able to release it. If we go right on handling it as an engram, we will get somewhere with it. But if we just let him cry, it doesn't matter how many tears he sheds when he is not on the site of the engram, he will not get any real release. So, when we get someone saying, "Well, I played over all his favorite records, and I sat there and I relived all the moments when we had been together," we know in Dianetics that it wasn't those moments when they were together that produced painful emotion, it was the moment he said, "Well, good-bye Kate, we had a nice time." One must run it on the site as it happened.

How you get the person into it is something else. You may be able to restimulate an emotional mood with music and get him up to a point where he is feeling very sorry about the whole thing, and then ghost him gently into the incident and run it as an engram, even though you don't appear to be doing so, and you will get the painful emotion off the case and the patient will stay stable.

You have to run a few. It's on this order: If this page were a blank sheet, would there be a picture on it? It's just that certain. You will make no mistake on painful emotion; it turns on, the person cries it out, he goes over and over it. The first two or three times over a painful emotion incident he may get nothing, but then all of a sudden he goes into his own valence and starts crying. He cries it out, and runs the engram. Each time there are less tears and finally there are practically no tears on it. Then the person becomes bored with it. You run it a couple more times and he's perfectly cheerful.

If you got ahold of a painful emotion charge and then left it just because it was late, you would encyst the remainder of the charge. So, "Ride him, cowboy."

Different periods of a death can be handled in separate sessions. For instance, in one case, the first period had to do with the receipt of a telegram saying the preclear's husband had been killed. The next one had to do with her parents suddenly phoning in from somewhere and talking to her about it. The next one had to do with them sending his clothes and effects home. These were months apart. But each one of them said, "He's dead."

Loss of an antagonist doesn't mean painful emotion. Loss of an ally does. And sometimes you will find: "Well, that's Aunt Gertie, yah, she's dead."

"When did she die?"

"Oh, she died last year." "Well, how did you feel when she died?"

"Oh, after all, it's Aunt Gertie. For heaven's sakes, scrawny old maid. She didn't do anybody any good in the world."

"Okay. Well, let's see if we can tap it." And you will get a painful emotion discharge on it if Aunt Gertie was the childhood ally, and there was a rupture in the relationship later. This means that the preclear's present day computation on Aunt Gertie is that she was a scrawny old maid. But she is actually, in the childhood sector, life itself and there is painful emotion on this.

For example, there was a case whose grandfather died. It didn't excite him at all. But it was a strange coincidence that everything went wrong after this. Because his grandfather's death didn't apparently excite or worry the preclear, he didn't have much of an inkling about it.

I went over this incident with him in a couple of sessions. There was no discharge on it. But long afterwards when we opened up a bunch of "control yourself" circuits and blew those and were just casually going up the track, we happened to clip on an incident which preceded this and he found himself carried along on a tide right straight into this painful emotion and that was the real boom! on the case.

He had always thought his grandmother was his ally. His grandfather was a rough, tough, drinking son of a gun who had been greatly run down by the rest of the family. And it contained the real charge. So the personal opinion of the person with regard to this is invalid. What is valuable is examination of the bank—whose words were aberrative? That is the ally.

A person's present time opinion is extremely colored by the whole engram bank computation. Something else that could well startle you sometimes is when the person says, "I hate my father, I don't like him," and you find out that father's words are not aberrative.

There is something which has been oversimplified with the label "ambivalence." The first ambivalent person I run into I'm really going to shake him by the hand because he will be the first one I have found. I've never found only two valences in an individual.

Here is Grandma treating a sick child. She's one person. Here is Grandma making the child eat—another person—just in the normal course of discipline. Here is Grandma arguing with Mama—a different person again, this time a very bitter, mean person.

So, as you go down the line, you will find that usually Papa and Mama are ambivalent toward the child. And it so happens that their own valences will get shifted by various experiences. Therefore they will go through as many valences as they have around the child, and one of those valences in Papa, for instance, may be very tough on the idea of having a child.

All through the prenatal bank we may find Papa being a bum. He may be a partner in a mutual AA, and so the preclear hates Papa. But we move up into a sector postpartum and find out that every time the child got sick, every time he had something wrong in his life, there was only one person who really stood by him, and that was Papa.

Papa worried when he got sick. Papa tried to take care of the kid. Papa had a sense of the fact that he had done something wrong and he was trying to make up for it. He was a pretty nice guy. He would go out and help the kid fly kites, and he would play catch with him and this and that.

But because of the existing earlier area, all of this goes out of sight. So there is a lurking ally in the case and that is Papa's ally valence, but that is never as strong as a 100 percent ally, somebody who is always out for the kid. That one is really strong. Nevertheless, Papa in his ally valence and Mama in her ally valence are very strong allies. You mustn't overlook this just because the patient says, "I didn't like Papa or Mama." Don't take that as the final datum.

An ally is somebody who has aligned himself with the survival dynamics of the individual. Because the body, the brain and the nervous system work in affinity with the rest of mankind, you will find that pain, antagonism, let us say months and months of cruelty, may have made no great impression, but ten minutes of kindness will leave a lasting impression for life.

Somebody must have stood up for the kid, some way or another. Somebody somehow insinuated himself into being part of a survival computation of the child.

It could even have been the dog. I found a dog ally one time that every time somebody tried to lay a hand on the child, this great big mastiff used to plant himself right in front of the kid. And if somebody tried to grab the kid out from behind the mastiff he would show them the most beautiful set of teeth. The dog would very often back the kid up in a corner and lie down when he figured the kid was in trouble, and this kid was always in trouble. So, this dog was an ally amongst allies. And when this person was being very kind or funny, he would show his teeth or snarl or laugh like a dog! There was a dog valence there, and all through the bank there would be "That damn dog." Even when the baby was sick and they were talking about "that damn dog, he's no good," this had absolutely no effect upon the child, even though he was lying there unconscious. It just got kicked right out of the bank, because that dog was really a friend. If the child got sick, the dog would sit around very calmly and wait. If the child started crying, the dog would lick his face. It was very amusing running this case because we had to run out dog incidents, one after another. The dog would go and pester Mama whenever the baby got in trouble. This dog was a nurse; it was being Mama and Papa! And there are a lot of dogs who will do that.

Deintensify incidents. That is why you shouldn't start in on a long one. You should take it out sectionally. If you think you are going into a very long sequence and you are short of time, take a section of it out and you will be better off, rather than restimulate the whole thing; because you can make a person extremely ill, particularly if he is fairly neurotic, by leaving an incident that is not wholly deintensified.

If your own time is pushed and you have got the preclear running more or less pianola on that particular engram, turn it over to somebody else, but make them run it out until it is flat.

A person auditing professionally who hasn't got an understudy is going to waste a lot of time, because cases are hard to crack and easy to run. As a professional you ought to bring it up to a level where you are cracking cases, not grinding away on them.

In six months, you might be able to process 20, 30 people through to clear, working very hard, whereas you have around you people who are very anxious to learn what you are doing and to study with you. If you don't use their services, you are going to be wasting your time, energy and skill. The more cases you break, the more you are going to know about them. You can always check back and ask, "Did it reduce all right?"

If it's going fine, that's all you have to know. Perhaps it will only take you half an hour of diagnosis and maybe 10, 15 minutes of searching, and all of a sudden you will have the engram running. You run it through once, take the main tension out of it, then turn it over to somebody else and let him run it. In this way we will get lots of Dianetic clears in the world.