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PSYCHOSIS

Through a slight change of procedure on certain preclears I have been able to view the underlining motives and mechanisms of psychosis.

Very possibly this is the first time the mechanisms which bring about insanity have been fully viewed. I must say that it requires a bit of confronting.

The alleviation of the condition of insanity has also been accomplished now and the footnote in "Dianetics the Modern Science of Mental Health" concerning future research into this field can be considered fulfilled.

The things a C/S should know about insanity are as follows:

Higher Percent

About 15% to 20% of the human race apparently is insane or certainly a much higher percent than was estimated.

The truly insane do not necessarily act insane visibly. They are not the psychiatric obvious cases who go rigid for years or scream for days. This is observed only in the last stages or during temporary stress.

Under apparent social behaviour the continual crimes knowingly committed by the insane are much more vicious than ever has been catalogued in psychiatric texts.

The actions of the insane are not "unconscious". They are completely aware of what they are doing.

All insane actions are entirely justified and seem wholly rational to them. As they have no reality on the harmful and irrational nature of their conduct it does not often register on an E-Meter.

The product of their post duties is destructive but is excused as ignorance or errors.

As cases in normal processing they roller coaster continually.

They nearly always have a fixed emotional tone. It does not vary in nearly all insane people. In a very few it is cyclic, high then low.

All characteristics classified as those of the "suppressive person" are in fact those of an insane person.

The easiest ways for a C/S to detect the insane are:

1. Pretending to do a post or duties, the real consistent result is destructive to the group in terms of breakage, lost items, injured business etc.
2. The case is no case gain or roller coaster and is covered under "PTS symptoms".
3. They are usually chronically physically ill.
4. They have a deep but carefully masked hatred of anyone who seeks to help them.

5. The result of their "help" is actually injurious.
6. They often seek transfers or wish to leave.
7. They are involved in warfare with conflicts around them which are invisible to others. One wonders how they can be so involved or get so involved in so much hostility.

Types

The German psychiatric 1500 or so "different types of insanity" are just different symptoms of the same cause. There is only one insanity and from it springs different manifestations. Psychiatry erred in calling these different types and trying to invent different treatments.

Definition

Insanity can now be precisely defined.

The definition is:

INSANITY IS THE OVERT OR COVERT BUT ALWAYS COMPLEX AND CONTINUOUS DETERMINATION TO HARM OR DESTROY.

Possibly the only frightening thing about it is the cleverness with which it can be hidden.

Whereas a sane person can become angry or upset and a bit destructive for short periods, he or she recovers. The insane mask it, are misemotional continuously and do not recover. (Except by modern processing.)

The Nature of Man

Man is basically good. This is obvious. For when he begins to do evil he seeks to destroy his memory in order to change and seeks to destroy his body. He seeks to check his evil impulses by inhibiting his own skill and strength.

He can act in a very evil fashion but his basic nature then makes it mandatory that he lessens himself in many ways.

The towering "strength" of a madman is a rarity and is compensated by efforts at self destruction.

Man's mortality, his "one life" fixation, all stem from his efforts to check himself, obliterate his memory in a fruitless effort to change his conduct and his self-destructive habits and impulses and losses of skills and abilities.

As this rationale proves out completely in processing and fits all cases observed, we have for the first time proof of his actual nature.

As only around 20% are insane, and as those who previously worked in the mental field were themselves mainly insane, Man as a whole has been assigned an evil repute. Governments, where such personalities exist, listen to the opinion of the insane and apply the characteristic of 20% to the entire hundred percent.

This gives an 80% wrong diagnosis. Which is why mental science itself was destructive when used by states.

Techniques

The only technique available at this writing which will benefit the insane is contained in all the overt-motivator sequences and Grade II technology.

At Flag at this writing new improvement on this exists but it is so powerful that slight errors in use can cause a psychotic break in the insane. It therefore will only be exported for use by specially trained persons and this programming will require quite a while.

MEANWHILE it helps the C/S to know and use these firm rules:

ALWAYS RUN DIANETIC TRIPLES.

Never run singles. The overt side (Flow 2) is vital. If you only run Flow I Motivators, the pc will not recover fully. Further running Flow I (Motivator only) any psychotic being processed will not recover but may even trigger into a psychotic break. If one never ran anything but motivators, psychotic manifestations would not erase.

DEPEND ON EXPANDED GRADE II TECHNOLOGY TO EASE OFF OR HANDLE THE INSANE.

Don't keep asking what's been done to him as he'll trigger.

A new discovery on this is that when you run out the motivator the person gets a higher reality on his overts. If you ran out all his motivators he would have no reason for his overts. If these are not then run out he might cave himself in.

Pattern of Behaviour

The APPARENT pattern of insane behaviour is to come in (ask for processing, go on staff etc.) with the advertised intention of being helped or helping, then mess up either as a pc or on post, then state how bad it all is and leave. It looks obvious enough. He came, found it bad, left.

That is only the APPARENT behaviour. APPARENT REASONS.

Based on numerous cases, this is the real cycle. Hearing of something good that might help these hateful awful rotten nasty people, the psycho comes in, wrecks this, upsets that, caves in this one, chops up that one and WHEN SOMEBODY SAYS "NO!" the psychotic either

- (a) Caves himself in physically or
- (b) Runs away.

The psychotic is motivated by intent to harm.

If he realizes he is harming things he shouldn't he caves himself in. If he is afraid he will be found out, he runs.

In the psychotic the impulse is quite conscious.

Conclusion

None of this is very nice. It is hard to confront. Even I find it so.

Freud thought all men had a hidden monster in them for he dealt mainly with the psychotic and their behaviour was what he saw.

All men are not like this. The percentage that are is greater than I supposed but is a long way from all men.

Sometimes one only becomes aware of these when things are getting worked on and improved. They stay on as long as it can be made bad or there is hope it can be destroyed. Then when attention is given to improvement they blow.

Artists, writers often have these types hanging around them as there is someone or something there to be destroyed. When success or failure to destroy or possible detection appears on the scene they blow, often as destructively as possible.

Orgs are subjected to a lot of this. A psychotic sometimes succeeds in blowing off good staff. And then sooner or later realizes how evil he is acting and sickens or leaves.

The society is not geared to any of this at all. The insane walk around wrecking the place and decent people think its "human nature" or "inevitable" or a "bad childhood".

As of this writing the insane can be handled. The proof of any pudding is the processing. And this is successful. It is also rather swift. But as I say it is so swift the special technique has to be done by the specially trained flubless auditor.

For a long while I've realized that we would have to be able to handle insane people as the psychiatrist is fading. I have had opportunity to work on the problem. And have it handled. Until it is fully released, the C/S will benefit greatly from knowing the above as these come on his lines far more often than he has suspected.

The insane can be helped. They are not hopeless.

I trust this data will be of use.

L. RON HUBBARD
FOUNDER

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