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TOUCH ASSISTS

(Compiled from a lecture by L. Ron Hubbard
given 3 Oct. 1968)

The Touch Assist is a form of Dianetic Assist. It is given to an injured person. A Contact Assist as written up elsewhere is faster than a touch assist but is not always possible.

It is done by having the injured person close his eyes and giving the command "feel my finger". You touch him with your finger and he is supposed to feel the finger. Don't articulate the command more than you have to. The PC gets the idea very quickly. After a few commands you will find he will give you a blink or a nod. You then knock off the verbalization. You wait for him to acknowledge after touching his body each time.

The most difficult area to do an assist on is the head. The head and nerve system of the body is a pain absorption cushion. With an electric or impact shock you will find there is a wave of shock or pain goes through the body. In the case of a hit head you will find a wave of shock that went all the way down the nerve channels, through the spine to the extremities of the body. You will normally find somebody who has had a head injury has something wrong with his spine afterwards. The shock wave is locked up in his spine. So the touch assist should include going from the head to the extremities of the body. You are just trying to get him back onto his feet as later on you will run it out as an engram.

The touch assist is not just in the area of the head or injured part. You have to approach the injury, go away from the injury, approach closer, go away further from the injury and so on until you gradually get to where you can touch the injured part.

When going away and coming up you try to follow the nerve channels of the body which includes the spine and the limbs. There are certain relay points like the knees and the elbows and the finger tips. These are the points you head for. These are all points the pain can get locked up in.

What you are trying to do is to get the communication again flowing through the body because the shock of injury stopped it.

If you do anything on the right side of the body you also

do it on the left side of the body. If you do a touch assist on an injured hand you go further away from the body and closer to the injury and touch and pass the injury. Then you do exactly the same thing on the opposite side of the body.

If the fellow is bleeding from an artery and is going to bleed to death in the next few minutes you first apply a tourniquet to stop the bleeding and then proceed with the touch assist. When you have got him somewhat up the line and off the assist and let the Medicos have their day setting any bones, patching him up, Morphine etc.

Try to minimise conversation around the injured person. Conversation just puts content into the engram.

When the structural trouble is patched up and he is somewhat recovered a day or two later, or as soon after as possible, you give him a session that runs out the engram.

This is the Touch Assist. If done in the standard way as described it produces miraculous results and greatly speeds up healing time.

The End Phenomena of the Touch Assist is Pain Gone and Cognition.

Following the assist, the pc should be taken to the Examiner and a report must be written up of what occurred.

Extracted by Special Project

for

L. RON HUEBARD
FOUNDER

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