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One never achieves the high mark without finding something else on the way up.

. We have resolved healing.

BPI

Clearing, of course, resolves it, and we can clear. There is however a lower level of resolution of sickness which any trained HCA/HPA can do easily. Indeed it is about the easiest Auditing that any auditor ever did. The entire technical run-down on it is contained in HCO Bulletin of July 30, 1962. "A Smooth HGC 25-hour Intensive". I will be writing other bulletins on this. When this was first released reports began to come in from various quarters, that it was extremely successful. Further research reveals that, with the new series of buttons (HCO Bulletin of August 30, 1962) this is an easily applied solution to chronic somatics. Without exaggeration, this address to healing, is the resolution of illness at lower technical levels when properly done. Fifty to two-hundred hours can be devoted to a case, using this, as well as twenty-five. Do not confuse this with the 1961 Problems Intensive. It has similarities but is new.

Central Organizations, Centres and Field Auditors should begin an immediate programme on this. By healing you can graduate a pc up to clearing interest and thus we have a lower level feeder line, capable of successful accomplish ment with normal HCA/HPA training.

This programme has the following thought major:

MAYBE YOU'RE NOT SICK

MAYBE YOU'RE JUST SUPPRESSED

SEE US AND FIND OUT

The phrasing can be more elegant, the message remains the same.

Legally, this permits us to heal without engaging in healing as, in actual fact, we address no illnesses and indeed, deny people are ill--they are only suppressed. Sickness occurs, we say where suppression has been too great.

The arguement is -- have you been sick? Did you go to doctors to be cured? Did they cure it? Then (as they didn't) maybe you're not sick, maybe you're just suppressed. So take some processing and find out.

And the person gets well! We use on him the exact button he came to us on. So he's never dismayed at any change of tack on our part. Then we interest him in clearing.

This, I am sure, is the long sought gradient. This, used right, will build our new buildings, use our Academy Graduates and give us a chance to train up auditors to clearing.

Therefore, I recommend you get versions of this on cards for students and staff to hand out, retail or public literature handouts, and even get ads as we can in papers and street bus ads. Many promotion ideas leap to mind on this.

The legal arguement is simple, we don't believe in sickness, we do not address illness, we do not diagnose, we believe that freeing the human spirit also incidentally prevents sickness. We are doing prevention. We also find people do not have to be crazy to be suppressed, that nearly everybedy is suppressed. We do send acutely ill people to doctors. We advertise to cure no diseases! That last is important legally. We only infer that people who think they are sick are really not but only suppressed.

Technically we train up our staffs to handle, in addition to other skills, this new Problems Intensive and we use it in the HGC at all times except when we are actually clearingand we use CCHs only to prepare to deliver a Problems Intensive.

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The Problems Intensive can be many Intensives,

This I recommend. Don't downgrade it. It's a suddenly emerged major tool.

We have at this writing these valid processes:

CCHs--HCA/HPA The New Problems Intensive - HCA/HPA Goals Listing--HCA/HPA Goals Finding--Sthil Grads Item Listing--HCA/HPA

So let's use our reserves of good HCA's and HPA's and wipe out illness while waiting for enough auditors to clear them all.

L. RON HUBBARD

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