

Speculative Realms

WEDNESDAY, JUNE 29, 2011

DREAM SCREAMS: Secrets of Success for the Traumatic Artist, Back-Engineering Alien Abduction Hypnosis Technology

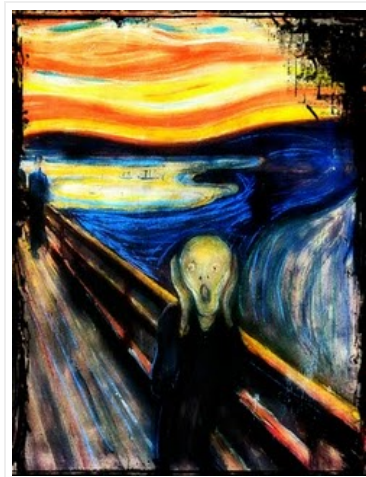
The Memory Hybridization Process Crossing Real-Life Abuse Histories with Narratives of Alien Abduction

by Gary Haden

Fear is the cheapest room in the house. I would like to see you living in better conditions.

--- Hafiz

Since I'm on record as contending that injuries occurring in alien abduction "experiences", especially those beginning in bed and ending in bed, are from those self-inflicted in dream enactments attendant to sleep disorder behavior, a question begged from that declaration is: Since we've been implicating alien abduction hypnosis in crimes of falsification, how does anyone know that alien abduction hypnosis effects our dreams?



I'd also promised a friend some time ago I would cover neuroscience on the blog. Neuroscience doesn't just have a lot to offer inquiries into alien abductions, it has the potential to say some pretty decisive things about it.

This is going to be very simplified from research findings, so much so that undoubtedly the simplification will produce error in some areas. But you've been warned.

According to some, memory consolidation is one of the functions of dreaming. This we know from sleep researchers, cognitive neuroscientists, memory and learning theorists, and psychiatrists.

Memory consolidation is responsible for our ability to learn from and augment into existing memory our day to day experiences.

The brain structure most involved seems to be the hippocampus. The hippocampus is kind of like the random-access memory chip of the brain. New info gets streamed into it and processed and then passed on to other parts of the brain, the hard drive, for permanent storage. Sleep and dreaming, some researchers say, is part of that process.

But what also happens is memory reconsolidation: *Old info* also gets called up into the hippocampus when we are processing new info about the old info. Say, somebody has come out with *yet another* biography of Abraham Lincoln. The old info, say Carl Sandburg's *Lincoln*, previously stable, becomes unstable, changeable, or labile, when its memory traces are activated by the coming of new info with regard to it. So we have to do something with claims that Lincoln was a closeted homosexual, a manic depressive, or had an unusually high-pitched voice.

RESEARCH RESOURCES

- Anomalist
- Crankdotnet
- Emma Woods's Website
- Fact Check Dot Org
- False Memory Syndrome Foundation
- Federation of American Scientists
- FindArticles.com
- Glossarist Dictionaries
- Independent Investigations Group
- Joe Nickell
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- Law.com's Law Dictionary
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- Rhine Research Center
- Scientific Review of Mental Health Practice
- Skeptic's Dictionary
- Sleep and Hypnosis: An International Journal
- Sleep Paralysis Page
- SUNlite
- The Trickster Book by George Hansen
- The Word Nerds
- Trickster's Way Online Journal
- When Healers Harm

THE LATEST

Annie Jacobsen Kepler Space Telescope
Libya NATO Fukushima Syria

[Recommended Reads: A History of Area 51](#)
Patch.com

Then along came Annie Jacobsen who managed to gain interviews with men who worked at the base. These men, now in their senior years, provided information on the site and allowed her access to military and intelligence personnel, scientists, pilots, ...

[Dubious Book: Area 51 by Annie Jacobsen](#)
Left Eye On Books

Dwayne A. Day, writing at The Space Review, notes that he does not have additional sources confirming this, but: many of the elements that Annie Jacobsen's source used in her Roswell story are there in [science fiction writer James] Blish's short story ...

['Area 51' expose by investigative reporter](#)
Plain Dealer

The real Area 51, as depicted in investigative journalist Annie Jacobsen's often fascinating, ultimately exasperating expose, is, on the whole, less spooky than its Hollywood persona. Ultra-secret, yes, but more "Dr. Strangelove" than "The X-Files" ...

[The United States of conspiracy: Why more](#)
New York Daily News

BY Annie Jacobsen The truth, many Americans insist, is not what it seems. On the verge of the 10th anniversary of the 9/11 attacks, about 15% of your fellow citizens still believe that the attacks were the result of a clandestine "controlled demolition" ...

The new info *modifies* the old info. In order for the updated info to take, it has to undergo consolidation *again*.

So, according to some, we dream about it. Sometimes it is obvious we do. Sometimes it is not. Dream amnesia undoubtedly plays a role in detecting whether we've dreamt about new info or not. So sometimes we'll be able to see this process in action. Sometimes we won't.

Another interesting brain structure is the amygdala. It is the place where traumatic memories are engraved. Once those memories are stored there, according to researchers Hobson and Leonard, see below, they are there more or less permanently. It is important because during REM Sleep, the sleep stage most commonly associated with dreams, the amygdala is activated. Some research identifies the purpose of REM Sleep as "fear extinction." Meaning fear is processed and eliminated.

This is why one critic of memory consolidation isolates traumatic memories as exclusions when discounting the possibility that dreams are memories. It is in the amygdala's programming to activate dreams about threats. This is also how sleep research is able to diagnose history of abuse in their patients. REM Sleep Behavior Disorder, an affliction the "abductee" Emma Woods was investigating, is one sleep disorder that is regularly tied to abuse in the literature. Not all the literature, but some.

This is probably the prime suspect. If we're looking for a neurological guarantor that abduction traumas rehearsed in hypnosis will get dreamt of, the amygdala is probably the captain of the brain function that would give us that guarantee. The brain sees the events rehearsed in hypnosis as trauma, engraves it as such in the amygdala, and the "abductee" dreams about it. Enactment of those dreams produce "evidence" of alien abduction in self-injury.

Researchers have also done experiments where they train the brain to do a memory task just before sleep and have been able to stimulate their subjects to dream about the information they learned shortly before sleep-onset.

Alien abduction hypnotists, then, specifically those whose narrative features sexually and physically abusive aliens, have discovered a way, whether they realized it or not, to influence dream content, infiltrating memory consolidation processes in sleep by "training" the brain on a memory task, using the state dependent memory procedures in hypnotic regression to seed consolidation processes with narratives of alien abduction.

This works best when the subject has a *prior history of sexual/physical abuse*. The old memories are reactivated during hypnosis—all it would take would be the hypnotist's use of words like "sexual assault", "abuse," etc., which would call up memory traces of abuse in the brain, residing in the amygdala—and are reconstituted, reframed, or renovated by new information. The new information is the abduction narrative the hypnotist specializes in. Emotional and psychological memories of trauma are relived in the hypnosis and magnified in dream/nightmare activity that attend it in memory reconsolidation. This is also a replication. Meaning, the old memory is intact but in addition its offspring, fabricated alien abduction experiences, are stored as new traumatic experiences.

It's a good bet false abduction memories are stored *permanently* in the brain, so a mistake in authenticity is likely to be pretty costly.

In some subjects, particularly those with a history of abuse or sleep disorder, these dreams/nightmares can be acted out. With enough exposure, abductees with *no abuse history* could conceivably acquire symptoms of PTSD. There were 37 sessions in the Woods Hypnosis, some lasting five hours. Some psychological artifacts of PTSD include, among other things, extraordinarily vivid nightmares and night terrors.

In the Emma Woods Case, for instance, Alien Abduction Hypnotist David Jacobs reported 50 abduction events. Replaying traumatic events is a classic feature of PTSD.

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There is reason to suspect, then, that subjects with histories of sexual and/or physical abuse are ideal candidates for abduction hypnosis. First, their history of sexual/physical abuse by humans is *portable* neuropsychologically to sexual/physical abuse by aliens by reactivating the old memory trace and revising it in hypnosis. Mainstream hypnotherapists do this in attempting to help clients reframe past traumas. *Their goal*, however, is attenuation of relived experience, not increased repetition of relived experience.

Second, the sense of an external locus of control in abuse victims means that "standard" moral or ethical boundaries don't exist or are extremely "thin." Hypnotists often offer the disclaimer that they cannot get subjects to do things they don't want to do or object to on moral grounds. Abuse victims, for existential reasons, develop thin moral boundaries as a matter of survival. They are wired to view themselves as helpless. This dispenses with the hypnotist's disclaimer.

To state it differently, the cognitive survival strategy of an external locus of control wires persons with abuse histories in such a way as to make it difficult for them the question authority figures, cognates of perpetrators, especially authority figures performing questionable procedures upon them. (Note how the hypnotist is also a cognate of the alien here.) They aren't necessarily going to have trouble complying with a suggestion that they have, for instance, multiple personality disorder because, in the past, they could not protest and survive.

To a significant degree, then, the hypnosis, in abduction narratives featuring sexual and physical abuse, is a return, or rerun, of the subject's abuse history, the recurrence of which infantilizes the hypnotic subject, psychologically shrinking him morally and existentially to child status; not just to child status, but to *abused child* status. In the hypnotically achieved psychological status of an abused child, the subject cannot protest to the adult perpetrator, a role played here by the hypnotist, for fear of his life.

It is time to anticipate some objections of so-called "trauma" critics.

Though abused children may not possess enough moral sophistication to adequately understand and/or find offense in their sexual abuse by adults, they certainly seem to understand the moral objections to physical abuse. They certainly understand, and I'm certain that that understanding is part of traumatic experience, that they are powerless to stop physical abuse. This brutally reinforced learned helplessness is incredibly destructive psychologically. What is infantilized, therefore, in hypnotic reactivation of the external locus of control, is agency. The point is to relocate the subject psychohistorically to a position where she is helpless to do anything to stop the abuse.

It is interesting to note that parapsychologists have noted a relationship between external locus of control and belief in the paranormal.

As an aside to trauma critics, though a child may not comprehend the significance of what is being done to her in sexual abuse, the status of the child's moral intelligence changes. She grows into an adult. Somewhere along the way in the maturation process, she will inevitably encounter ethical indictments of people who have sex with children. The adult version of the child, then, comes to understand full well the significance of sexual abuse. This causes problems. The idea that childhood naiveté nullifies the problem of childhood abuse is a form of wishing those problems away.

It's not that easy.

Abuse victims are prime candidates for abduction hypnosis, as well, because their sense of an **external locus of control** is a comfortable fit with paranoid theologies circulating in the paranormal community. It is easy for abuse victims to readily apprehend the notion of evil external forces controlling everything, i.e., the Illuminati, the Bilderbergers, Reptilian Royals. In "externality," as researchers call it, we're at the mercy of, and can do nothing about, controlling external forces, much the way an abused child can do nothing about an abusive parent.

The mind-controlling alien is the *poster adult for external locus of control*.

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From all this, it seems prudent to hypothesize that alien abductions, for some, are dreams. Sleep research suggests that some of these dreams are acted out; that some are nightmares indicative of replay of trauma, as happens in dreamscapes of PTSD sufferers, and that some of those nightmares are also acted out.

This is a self-referential psychological process. The hypnosis both creates and recalls these dreams. The infamous lack of recall for abduction events, due to the proposed intervention of mind-controlling aliens, is actually, here, common, everyday, ordinary, nonpathological dream amnesia. No spooky actions from a distance.

This idea isn't new. To the world at large or to the "Community."

What is new is that now we have means to test these theories and professional disciplines expert in them to provide illumination on what is going on. These disciplines were in rudimentary development at the time of the advent of alien abduction narratives.



PROPERTIES OF MEMORY

So when we look at our dreams, and in analyzing them, we should always keep in mind that they are doing work for us we need to have done. Learning theory and memory theory assist us in analyzing dreams and both disciplines, according to Hobson and Leonard, cited below, are going to have to have a seat at the table of the new psychology which eventually will emerge from the current swamp.

By swamp is meant that psychiatry/psychology, according to J. Allan Hobson and Jonathan Leonard, like abduction research, is in crisis itself. It has been beset by the memory wars for

instance and savage disputes over the true nature of "trauma" and whether it is pathogenic—psychologically sickening—or not. The prevailing view seems to be that sometimes trauma is pathogenic and sometimes it isn't. But this crisis impacts evaluation of the alien abduction phenomenon directly.

Alien abduction is a microcosmic case study of the trauma debate in psychiatry.

Since memory and learning theory is going to play a role in any new synthesis of psychological knowledge, this means we have to contemplate such concepts as [pattern recognition](#), [summed similarity](#), and [source confusion](#), among others. Also, we're going to need to be familiar with ideas like *state dependent memory* and *context-dependent memory*.

The goal here is to contemplate these concepts with the idea in mind of constructing a blueprint for a technology of alien abduction hypnotism because such a notion will help detect in the long run what alien-abduction hypnotists are up to and how it is they came to be so successful at what they've done.

Alien abduction hypnotism *is* a technology. It is used to create "alien abduction" experiences. These "abduction" experiences are actually experiences of abuse. Alien abduction hypnotism creates abuse victims. This is why some abductees suffer psychological decline. The brain does not psychologically conceive a difference between abduction trauma and real trauma and codes abduction experiences as though they are real. I believe this is the summed similarity process at work.

In order to justify the psychological costs of abduction trauma, conclusive proof of the reality of extraterrestrials must be demonstrated. It has not been. Therefore, alien abduction hypnotism which specially feature sexual and physical abuse, is ethically unjustifiable and amounts to cruel experimentation with the human brain.

Aside from basic brain behavior such as dreaming and memory consolidation,

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It is a tie
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what is the core component of alien abduction hypnotism?

This is not a review of the space brother hypnotists. These are folks who essentially take “abductees” on hypnotic magic carpet rides to enlightenment, featuring space brothers, a.k.a. aliens, as fantasy Zen masters. Here, the motherboard component might be the fantasy prone personality or deep religious yearning. I don't see how such entertainments can be traumatic or harmful. It depends on how streamlined you like your humans to be. If you think humans should engage in no imaginative activity at all, these benign delusions might be upsetting to you, in the same way some benign delusions in religious behavior seem to upset hardline skeptics.

This basically applies to alien abduction hypnotists who champion trauma narratives. The reader should keep in mind, my focus has been on one hypnotist in particular and only on a handful of his cases. Those cases share commonalities which leads me to suspect that the entire population of the clients attended to were subjected to similar treatment. In two of these cases, a history of sexual abuse plays a role. I would not be delving this deep into the concern if I hadn't been exposed to that information.

I've speculated elsewhere that abuse victims are “targets” of the trauma-based alien abduction hypnotists. That stems from recognition of a pattern. But because, as above, abuse victims can tend to gravitate to the paranormal, there are complicating factors in trying to investigate how many of them end up in an abduction hypnotist's office.

Therefore, only a complete decanting of the transcripts from the entire corpus of the hypnotists' work can reveal the total picture. This applies to every practitioner who reports abuse. This means transcripts of every session with every client, redacted, of course, for anonymity. Of course, audio from those sessions would be even better.

Publication of psychosocial histories is also important. Understand how serious this is: If alien beings are not perpetrating the trauma reported in alien abduction hypnotism, responsibility for that trauma defaults to the hypnotist.

Of course, the retort will be that most abductees function well and that the alien narrative might be adaptive for them where other remedies were not. I'm unconcerned about resilient abductees. I'm concerned for those not faring very well. Like the homeless, we don't see them as clearly as we do the “star” abductees.

But we know enough from Alien Abduction Hypnotist David Jacobs's published work to suggest that the core component of the technology apparent in that work, for at least some of his clients, is sexual abuse, or some variation thereof, preferentially co-occurring with some form of sleep disorder.

Now, this is not saying all Jacobs clients are abuse victims, though an argument can be made, on medical ethical grounds, that Jacobs's hypnotic narrative *itself* is abuse and that even if his subjects weren't abuse victims before consulting him, they became abuse victims after consultation. Perhaps studying the psychodynamics of abuse is some sort of subproject he's doing for his psychoanalytic friends. Perhaps the test was to see if reframing earthly abuse in an abduction narrative helped people move past the trauma.

This, of course, begs the question: Was anyone else involved? There's an enlightening juxtaposition one can make of the chess pieces in that regard. According to Jacobs himself, there were others involved.

“What is [Emma Woods's] goal?” Jacobs asks in his online post entitled *The Defamation Campaign*, “Why is she deliberately trying to discredit me? To find an answer to these questions, I've consulted confidentially with a variety of psychologists, psychiatrists, and therapists.”

In the back channels of UFO message boards and forums, information was circulated that Jacobs had consulted 9 psychiatric professionals about the Emma Woods case and that, as a result, the judgment from that Star Chamber Psychiatric Supreme Court was that Emma Woods suffered from, in addition to “alien abduction,” borderline personality disorder.

- [Review of "Gaslighting, the Double Whammy, Interrogation, and other Methods of Covert Control in Psychotherapy and Analysis" by Theo Dorpat \(1996\).](#)
- ["Who's Afraid of Virginia Woolf?"](#)
- [An Introduction to "Prisoners of Childhood" by Alice Miller \(1981\)](#)
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One of the historical pathogens of BPD, as cited in the literature, is sexual abuse.

One of the historical pathogens of Multiple Personality Disorder (MPD) is sexual abuse. Jacobs gave Woods a hypnotic suggestion that she was afflicted with MPD.

The literature from the heyday of MPD is replete with horror stories of Satanic Ritual Abuse as its pathogen, a perpetrator toolbox which included sexual abuse.

One of the grandfathers of multiple personality disorder, instrumental in getting it adopted into the Diagnostic and Statistical Manual, qualifying it for insurance reimbursement, was Richard Kluff, who matriculates or matriculated as psychiatry professor at Temple University. He was also a program advisor for the recently canceled television series *The United States of Tara*, featuring a housewife suffering from MPD.

Kluff maintained, and still maintains, that Satanic Ritual Abuse is a genuine phenomenon. His theoretical broken record is that severe sexual abuse splits the personality. Jacobs's use of the MPD tactic on Woods and his attempted nullification of her by reason of insanity using the BPD diagnosis has Kluff's analytical fingerprints all over it.

Miss Woods complained to the Federal Office of Human Research Protections about her experience with Jacobs. She received a reply that stated among other things that "OHRP has jurisdiction only if the allegations involve human subject research (a) conducted or supported by HHS [Health and Human Services], or (b) conducted at an institution holding an applicable Assurance of Compliance with the HHS regulations."

"However," Woods was told, "as we discussed, OHRP can forward your allegations to Temple University and ask them to investigate."

The research institution is responsible for maintaining Assurance of Compliance with HHS regulations requirements. This means Human Subjects Protection law applies when and where the research institution decides it will apply, not where and when the HHS decides it applies. Temple University, "investigating" the matter, determined that, apparently as respects subparagraph (a) above, David Jacobs was not conducting research. He was merely taking oral histories.

However, the respondent to Woods's Complaint was Richard C. Throm, Director for the Office for Human Subject Protections, Institutional Review Board Coordinator and Acting Research Integrity Officer. A mistake appears to have been made administratively. If Jacobs was not conducting research, there was no need for the Research Integrity Officer to make a reply to Miss Woods. The History Chair would have been more appropriate.

As regards subparagraph (B) of OHRP's letter to Woods, the letterhead of Strom's decision letter to Woods lists three review boards, Medical Intervention Committees A1 and A2 and Social and Behavioral Committee B. These review boards have current Assurance Compliances with the HHS. The database at HHS does not support investigating histories of compliance. Determining whether these boards were current in 2008 is problematic. No response was made to inquiries to HHS by this writer concerning researching those compliances.

However, Temple's Office for Human Subject Protections was established in 2004. Said establishment could not have been effected, theoretically, if its review boards were not in compliance with HHS regulations. If Mr. Jacobs were conducting oral history research, why would that necessitate review by Medical Intervention Committees or Social and Behavioral Committees?

The inquiry to be made here is whether membership on these committees dovetails with membership in the mysterious Star Chamber of psychiatrists said to be advising Jacobs.

If there is a "conspiracy" in other words, it involves these Star Chamber shrinks. But does the "devil made me do it" argument absolve David Jacobs?

- Chronicles of the Dark Side (1)
- Couter-transference (1)
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- Dan Burisch (1)
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- David Jacobs (21)
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- Girl Who Saved Her Own Life (2)
- Grays (2)
- Ham and Egger Review (6)
- Human Subjects Research (2)
- Humanity Plus (1)
- Hybridization-Dehumanization (1)
- Hyperbolic Chamber (2)
- Hypnosis (7)
- hypnotic regression fraud (4)
- Immigration Laws (1)
- Jeff Ritzman (1)
- Jeremy Vaeni (1)
- Jungian Compensation Theory (2)
- Karl Marx (1)
- Madonna Complex (1)
- Mary Magdalene (1)
- mass hypnosis (1)
- Matt Graeber (10)
- MILABs (1)
- Miracle Man (2)
- MMORPG (1)
- Moderation policy (1)
- monkey trial (1)
- moon anomalies (1)
- MPD (3)
- Multiple Personality Disorder (4)
- Munchausen Syndrome By

The concern here would be whether purposeful systematic application of traumatic scenarios was made in order to create psychological symptoms or induce certain brain behaviors that would lead people to suspect they had been abducted and sexually molested by aliens, regardless of psychological history.

The connection between sexual abuse and alien abduction has been made before by researchers outside of as well as within the “community.” Sleep research has detected abuse history in the dream enactments of its patients and in some cases located the source of sleep dysfunction in the patient’s abuse history.

This is not particularly disturbing to Jacobs. He simply states memories of sexual abuse can be screen memories of alien abduction. He has to do this if he is to take advantage of the summed similarity process and induce source confusion in his subject.

The motherboard, in other words, won’t boot up and the alien abduction hypnotism technology won’t work, if Jacobs can’t get people, those watching him work, to look past sexual abuse. It looks as if he’s dismissing it. He’s not. He’s using it. He’s helping himself to it.

Because without it the abduction scenario won’t boot up.

PRESENCE OF ABUSE VICTIMS IN JACOBS’S SUBJECT SAMPLE

The first place to look for the evidence for this is in Jacobs’s books.

“One of the most popular explanations for abductions in recent years,” explains David Jacobs, in his book *Secret Life*, on page 285, “has been that the accounts are ‘screen’ memories masking the repression of sexual and/or physical abuse. This theory postulates that the victims are so traumatized by abuse they suffered as children that they forced the incidents out of their conscious memory; now, years later, the painful memories have resurfaced in disguised form.”

Jacobs notably cites no authorities for his evaluation of screen theory. Mr. Jacobs is not a psychologist, psychoanalyst, or psychiatrist. He is, however, often in consultation with them. As you can tell, Jacobs doesn’t think much of screen memories in the above paragraph. But, below, he changes his tune.

“Often the abductee forms ‘screen’ memories that mask the beginning of an abduction event. For example, one abductee said she saw a wolf in her *bedroom* one night. The wolf was standing squarely on her bed looking her in the eyes. She clearly remembered its fur, fangs, and eyes. Other abductees have claimed to have seen monkeys, owls, deer, and other animals. Some say they have seen an ‘angel’ or a ‘devil.’ Through the *use of hypnosis* to recover the details of these events, *each of these cases turned out to be the beginning of an abduction sequence.*”

That was from *Secret Life*, page 50. The emphasis was supplied.

While Jacobs is unwilling to grant psychological professionals the application of screen memory theory, he indulges in said application himself. Obviously, valid application of screen memory theory for David Jacobs depends upon whether you are using it to propose the existence of sexually and physically abusive extraterrestrials. If so, the theory is a go. If not, trash it.

“Therapists have seized upon this explanation more than any other to get at the root of abduction memories for two reasons,” he states on page 285 of *Secret Life*, “First, memories of abuse will suddenly be triggered in adulthood in *much the same way as abduction memories*. Second, abuse victims suffer many of the symptoms found in Post-Abduction Syndrome.” The emphasis was supplied.

This is summing similarities. It’s a case of summing similarity using abuse as a logical equality. This is how Jacobs gains access to abuse victims and also how he confuses his readers. It is also Exhibit One in making the case that abuse victims are preferred clientele for these procedures.

Jacobs’s unsubstantiated assertion—remember, the existence of aliens hasn’t

- Proxy (1)
- Music (1)
- Nazi Super Race Fantasy (1)
- New Normal (1)
- Night Terror (2)
- Nora D’Amico (1)
- Paracast (3)
- Paranoid Pomo (1)
- Paratopia (2)
- Perspectivalism (1)
- Psychosocial Hypothesis (1)
- Ray Kurzweil (1)
- Regan Lee (1)
- Reptilians (1)
- Repto-Religionists (1)
- Satan Shrinks of Texas (2)
- Satanic Ritual Abuse (2)
- Saucers of Mass Destruction (1)
- Science Fiction (1)
- scientific egomania (2)
- Scopes Trial (1)
- Second Skin (1)
- Self-Injury (1)
- Sideways Worlds (2)
- Singularity (1)
- skepticism (1)
- skeptics (3)
- Sleep Disorders (1)
- Source A (1)
- Special Compartment in Hell (4)
- Spooky Chronister (1)
- Spring Shadows Glen (1)
- SRA (1)
- Starlost (1)
- Super Bowl Predictions (1)
- Survival of the Fittest (1)
- T-Rex Reptilians (1)
- The Final Solution (1)
- The Pickeringings (1)
- Thugs of the Universe (1)
- Toxic Slop (1)
- Transhumans (2)
- TV Horror Hosts (1)
- UFO Papacy (1)
- UFO Religion (1)
- Ufology (1)
- UFOLOGY (2)
- Virginia Creepers (1)
- World War III (1)

been conclusively proven—stakes a claim in the population of abuse victims for alien abduction narratives. Jacobs is abducting actual trauma to flesh out science-fictional trauma.

But the difference between psychological propounders of screen memory and alien-abduction propounders of screen memory is that we know for certain human child abusers and rapists exist but we do not know for certain alien child abusers and rapists exist.

There is no legitimate basis, for instance, to insist that “recovered” memories of alien-perpetrated abuse be any less “evidence-based” than recovered memories of human-perpetrated abuse. Fantasticality increases evidentiary burden; it doesn’t relieve it.

This is a copy of the God is Great argument for the existence of the divine being. He is so BIG, so much bigger than our small minds can grasp, so beyond conception, there is no need to prove He exists because we couldn’t understand Him anyway. Aliens receive the same worship.

But by simple comparison, using intellectual economy of motion principles, for instance, humans can be found in abundance. And they’re available at your local grocer. Aliens not so much. You have to order out. Way out. And the shipping is murder.

Jacobs below successfully forecloses on childhood trauma:

“To complicate matters, while the aliens are performing their procedures,” notes Jacobs, “young boys and girls sometimes see naked adults being examined and probed on other tables. Children watch as the aliens perform procedures on sometimes-erect male genitals. They see naked women enduring gynecological procedures. Children see their parents being subjected to gynecological and urological examinations.”

Those words were from pages 251, 252 of *Secret Life*.

There are two sides to this coin. Either there is abuse perpetrated by humans or abuse perpetrated by aliens. For both to be possible, both must be conclusively proven. One has been.

We have registries naming human sexual perpetrators. In America, you can see where they live.

The other population of perpetrators hasn’t been proven to exist. We’ve got the Hubble Telescope but no sightings as of yet, so no registry is ready. There are plenty videos on YouTube, however, but one must consider the source.

You can dispute recovered memories of abuse by humans, but no one disputes that children have been abused, exploited, and killed throughout human history. I assure you, we have evidence of this and it hasn’t been collected by hypnotic regression.

The task of any “therapy,” ostensibly, is to orient the client to *reality*. What reality suggests is that sexual trauma is most probably inflicted by humans. If David Jacobs is in consultation with professional psychiatrists, as he claims, what does it say about *their* ethical standards with regard to their support of his work? If trauma-based alien abduction hypnotism *creates* abuse victims, clinical support of its practice by psychiatric professionals is ethically suspect if not ethically contemptible.

What does it say about their professional acumen if psychiatrists clinically support the work of a trauma-based alien abduction hypnotist? Does that bode well for their ability to orient their clients to reality? *Were they orienting David Jacobs to reality?*

Mental health consumers should be wary.

But Jacobs continues.

“The problems are made incalculably worse by the bonding and sexual-arousal

procedures performed on all abductees,” Jacobs states on page 252 of *Secret Life*. “When the alien performs bonding on a *young child* who is lying naked on a table, the rush of pleasurable emotions in her is irresistible. She is completely defenseless. This is even more injurious when the Taller Being (‘male’ or ‘female’) elicits intense sexual arousal feelings and even orgasm. Then, while bonding and/or sexual feelings are at a peak, the Being begins the gynecological or urological procedures and physically intrudes into her genitals or mechanically extracts his sperm.” The emphasis was supplied.

What is this scenario if David Jacobs and his psychiatric advisors are incorrect? Who is perpetrating the abuse of a young child if the asserted aliens don’t exist? Why wasn’t notification of the authorities or child protective services contemplated? There were protective services available for children even then. Why didn’t it occur to Jacobs he may need to avail himself of their assistance? Obviously, his version of screen theory entails a great deal of risk.

For instance, what are the psychological ramifications of creating false memories of alien-perpetrated sexual abuse in children? Apparently, Jacobs narrowly escaped finding out.

“Although I have purposely not conducted hypnosis with children—not enough is known about how their knowledge of being abducted would affect their personal development—from time to time worried parents will either tell me about what is happening to their children or bring them to talk to me. I find this to be the most heartrending and frustrating aspect of the abduction phenomenon. Although the parents usually do not discuss abductions in front of them, children *as young as two years old* will talk about ‘egg-men’ coming in through their windows at night and taking them places. ‘Bad doctors’ come into their rooms and ‘hurt’ them.”

That was from *Secret Life*, page 286. The emphasis was supplied.

Shouldn’t alien abduction hypnotists, those whose base narrative features sexually and physically abusive goblins from another world, stay away from children? In fact, shouldn’t that be prohibited by force of law? Arguably, they should stay away from everyone, history of abuse extant or not. But especially they should stay away from children.

Jacobs covered the topic again in his book *The Threat*.

“Before false memory syndrome came to prominence, therapists assumed that abduction accounts were due to repressed memories of sexual abuse in childhood. They postulated that because the abuse was so traumatic, the victim unconsciously transposed the abuse into an abduction account. To cope with the terror, the person lived with the more ‘acceptable’ trauma of being kidnapped by aliens.”

“There is no evidence for this explanation. There are no instances on record of an abduction account being a ‘screen memory’ of sexual abuse. In fact, the opposite is true. There is a great deal of evidence that people ‘remember’ being sexually abused when in reality they were victimized by the abduction phenomenon.” (*The Threat*, p. 40.)

This is a public declaration that abuse victims are a target population of trauma-based abduction hypnotists. It is Exhibit Two.

But reports I’ve received indicate this is false. Reports of sexual abuse should always be taken seriously. Nullifying the report for the sake of creating an abduction myth is reprehensible.

With no citation to scholarly authority, the above amounts to little more than a papal encyclical, but Jacobs has never produced conclusive proof of any kind of the existence of extraterrestrials. This would seem to be a prerequisite.

If there are no abductors there can’t have been any abductions. Yet we know human sexual predators exist. That’s been proven. It has been proven without recourse to hypnotic intervention. Screen theory was not needed.

A way to measure Jacobs's contention here is to ask if any of his clients were genuine abuse victims or if any of them volunteered to him in prescreens that they had been abused and that they knew this without recourse to hypnosis. Then the debate is not centered on hypnosis.

Then the issue is why a hypnotist who specializes in sexually and physically abusive alien abductions would ever agree to accept as a client a person who was an abuse victim.

A way to back into this investigational parking space would be to inquire into Jacobs's use of the post-hypnotic suggestion that Emma Woods suffered from multiple personality disorder (MPD) ([unedited transcription here](#)). Multiple personality disorder is generated, as such MPD luminaries as Temple Psychiatrist Richard Kluft contend, by severe sexual or physical abuse. It's co-morbid compatriot, Borderline Personality Disorder, a condition Jacobs has publicly tried to strap on to Emma Woods, also is said to be generated by sexual abuse.

If Jacobs is wrong about screen memory, and he is, then the clients referred to in *Secret Life* and *The Threat*, some of them evidently children, are possible victims of sexual abuse. Jacobs did not publish psychosocial histories of his clients in his books and his quotations from recordings are excerpts that probably redact any instructional activity on his part, judging from what has been released in the Emma Woods recordings. The questions are: How many of his clients were sexual abuse victims? How many received a suggestion they had MPD? How many suffer from MPD? Would they even be capable of reporting they received such a suggestion, given the fact, we know from the released recordings, that Emma Woods was administered post-hypnotic memory wipes after certain sessions that have proved embarrassing to Jacobs?

Analytically circling the wagons, the impression that sexual abuse is the core component of Jacobs's project cannot be got away from.

This apparently poses no problem for Jacobs. To him, he's not subjecting the client to retraumatization. All he does is say the real-life trauma is misremembered alien abduction. He can count on support from true believers. They're not going to let ethics get in the way of a good time. They run ethicists out of town. It's too Victorian. They want to hear the freaky stories. Perhaps a part of them wants to get turned on.

But for people who have worked with real-life abuse victims this is a deadly serious issue. It proves once and for all that people who have abuse histories should never come within sixty-four galaxies of an alien-abduction hypnotist, especially one who promises a replay of trauma on a cosmic scale.

Is there any mystery as to why some "abductees" suffer severely socioeconomically?

SECRETS OF SUCCESS FOR THE TRAUMATIC ARTIST: USING THE PROPERTIES OF MEMORY

So, let's be an alien abduction hypnotist and use this technology to create abductees. Let's put some of these components together and create a system.



Summed similarity is the calculation we make where things are so similar we lump them together. This is a hopelessly simple and imprecise definition, but I'm not attempting to satisfy faculty advisors in an Artificial Intelligence dissertation.

Summed similarity gives way to source confusion. If two sources are sufficiently

similar, not necessarily identical, they can be confused for one another. Or, in the case of alien abduction and sexual abuse, they can be transposed.

If I am a trauma-based alien-abduction hypnotic technologist, I need the psyches of trauma victims to work with if I'm to induce any believability for the narrative I'm creating. I need to ground my abduction narrative, which I plan to implant in my clients, in real life trauma. I need to create in the hypnosis traumatic scenarios which look similar enough to the abuse history of my client that he will mistake the reality of one for the reality of the other. He must confuse his actual history with my revisionist history.

You can sort of see here how a historian might find this technology seductive.

Well, I can't do this, can I? In hypnosis, you're not supposed to be able to get people to do things they have moral objections to.

Unless they've been tortured, or abused, or have suffered some kind of trauma.

In other words, if they've come from an abusive background, they're trained on some level to accept abuse. Without accepting abuse on some level as inevitable, of course, the victim never survives childhood. Because an abused child cannot fight back and live.

Now, clients are going to get tortured and abused, at least by the aliens I create. What I need in my client is a sufficient enough amount of masochism to allow for ingress of morally objectionable concepts. Childhood abuse has already beaten into my client the fact that she can't fight back when something bad is happening to her. This breaks down the traditionally asserted moral boundary that exists in a hypnotist's client.

That's an assertion hypnotists make to defray liability and distract attention from their practices. It is also a way to place responsibility squarely on the client for anything that goes wrong.

So it helps if my client is afflicted with an *external locus of control*. This is part of the package that comes with abuse victims. They've been beaten up so much they literally feel as though they're at the mercy of external forces.

If I'm to produce vivid enough narratives, convincing both to audience and client, I need to reinvok in my subject that feeling of helplessness. The client needs to be absolutely convinced they're at the mercy of my alien beings. They need to have an *aptitude* for helplessness. That aptitude is a pre-existing condition in clients with a history of sexual and/or physical abuse.

Keep in mind, at every turn, in this technology, we have to make sure that the audience is as confused about sources as the subject is. Because sexual abuse by aliens and sexual abuse by humans is still lump-sum sexual abuse, I can use the apparent similarity to assert a distinction. This is one of the secrets of my success.

Because of this, you don't need to place your audience under hypnosis to get them to call up and revise old memories. They *WILL* get confused. All by their lonesome.

But there has to be proof in the pudding, doesn't there?

Memory consolidation spoons the proof out of the pudding for us. And to ensure memory consolidation gets going, we ideally ought to have some kind of memory training going on.

That's essentially what alien abduction hypnosis does. It trains memory. But we also have to keep in mind that triggers are not necessarily required to dream about the events of the day. Some theorists say dreaming about events of the day happens as a matter of course. We just don't remember all of it. So hypnotic events are already invited to the party. They don't necessarily have to crash it.

What's more, if the brain perceives abduction scenarios hashed out in hypnosis as significant threats, REM Sleep will deal with the threats during activation of the amygdala the night of the session as part of its *regulation* of fear. This is why some researchers feel dreams are an archaic brain function concerned with dealing with

nocturnal predators.

Hypervigilance from the sheer terror of going to bed at night expecting to be abducted is probably going to involve the amygdala in the proceedings.

The Threat, in other words, is a dream trigger based on sheer fear alone. You can literally psychologically terrorize someone into dreaming they were abducted!

But if we have to have more, is there a wire we trip, some threshold of exposure we cross, that causes us to dream about something we experience during the day? Is novelty that wire? Shouldn't novelty ignite a dream if our dreams are a regulatory process that integrates new information into existing memory? The novelty of being abducted by aliens ought to generate dreams about it. Yet, wouldn't that novelty, in and of itself, cancel out summed similarity by virtue of its being, well, novel? Novelty would then authenticate the abduction experience.

Perhaps.

Or would novelty create it?

What if the trip wire were the sheer length of exposure? We might not dream, for instance, about a five-minute taxi ride, absent an encounter with an exceptionally quirky taxi driver. But mightn't we dream about a five-hour hypnosis session?

Can we teach someone, as alien abduction technologists, to dream enact an alien abduction? Because if we can, we can ground the experience in physical symptoms which double as physical evidence.

And if we're lucky enough to have abuse victims for clients, we can conceivably get them to consolidate—through dreams—novel material, abduction by aliens, with their abuse history via equation of abduction abuse with real-life sexual abuse.

This not only invokes the reality of past trauma but invokes past traumatic *experience* as well, as amplified in the hypnosis and role-played in dream enactments resulting in, if we're lucky, personal injuries; injuries that, the clients report, are the result of abuse by aliens but which in all probability are self-inflicted.

The goal is to sum the similarity, during memory consolidation in dreaming, between alien and human sexual abuse, thereby procuring the artifacts of that psychological hybridization, manifesting in emotionally traumatic dream enactments, as physical evidence of alien abduction. The embedded psychological trauma guarantees repeat performances as PTSD reboots or is *created* from repeated hypnosis sessions.

To explain it in memory or learning theoretical terms, we *retroactively interfere* with memories of actual trauma to confuse the client regarding the source of those memories while at the same time trusting that the novelty of the new memories we create in the hypnosis will be *proactively interfered* with by memories of real-life abuse—thereby, imbuing new material with a *powerful sense of reality*.

With enough exposure, we can get this interferential dynamic to play out in dreams, drawing past psychological trauma in to the fray and *breeding it* with the day's hypnotic material. If we have controlled the client sample by self-selecting abuse victims and/or sleep-disordered individuals, two populations that can mix, one sometimes comes with the other, the clients will dream about and, ideally, *dream-enact* alien abduction scenarios.

This will work with "abductees" with no abuse history. The system is catalyzed in the first hypnosis session with the trauma-based hypnosis practitioner.

This is the true hybridization program.

To back up a few steps: In layman's terms, *retroactive interference* is where new information interferes with recalling old information. *Proactive interference*, a problem that surfaces in aging, is where old information interferes with learning new information. Memory and learning, while not necessarily the same thing, clearly interact.

And we do not necessarily need to strike gold. Dream enactment, in other words, is gravy—because I can use Freudian Disguise Theory (remembering that Jacobs has access to psychoanalytically trained psychiatrists) to characterize *any* dream that occurs as a disguised abduction memory. *I can even use memory consolidation to bolster the validity of that approach.*

I can merely state that if the amygdala is activating a dream about the abduction trauma, it is because the abduction is real. Even though there is no conclusive proof aliens exist. Because I've revised the actual trauma and created a repetition of it and through hypnosis simply given it a mask to wear. Laughably, psychiatrists will see my "mask" as a screen for sexual abuse.

That's because it is! But I can simply retort that sometimes an Egg Man is an Egg Man.

The congregation of believers don't see it as a mask. I don't have to worry about anyone outside the congregation. The congregation buys the books. They come to conferences and group therapy. The skeptics don't. I'm not catering to skeptics.

In other words, I am home free.

I hit the jackpot when on occasion the client dream enacts the abuse and cuts himself or bruises himself or soils himself or lapses into **dissociative fugue** and ends up outside beneath the lamp post.

He's not going to remember how he got there. Dream amnesia, remember, is alien mind control. It's all stuff I can pass off to the audience as evidence for alien abduction.

What's more he's going to assume he was put there by alien beings. In actuality, I put him there. I'm the perpetrator.

I'm a revisionist psycho-historian. I take real life histories of abuse and revise those histories, using hypnosis and natural brain processes like memory consolidation, taking advantage of the function of brain structures such as the hippocampus, and transforming real life trauma into alien abduction experiences, experiences that achieve separate but equal status through **fear conditioning's** carving of the events into the subject's poor amygdala. That piece of brain matter will activate dreams composed of *RAW FEAR; NIGHTMARISH, TRAUMATIC, AND REPETITIVE.*

Simply because the brain's trying to prevent the client from dying of terror!

This is how you make an abductee scream.

END

FOLLOW-UPS, NOTES, SOURCES, ABSTRACTS AND QUOTATIONS FROM AUTHORITIES

Images from Wikipedia Creative Commons

David Michael Jacobs. *The UFO Controversy in America: Mass Hysteria, The Sightings of Weather Balloons, St.Elmo's Fire- or Extraterrestrial Visitations?*

Quotations from David Michael Jacobs, *The Threat*. Fireside, Simon and Schuster, New York: 1998.

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The Defamation Campaign. David Jacobs. Retrieved 2-17-2011.

The Amygdala, The Hippocampus, and Memory "Reorganization" in Hobsonian Thought

“Brain scientists commonly talk about two basic kinds of memory,” writes J. Allan Hobson and Jonathan A. Leonard. “One kind, called ‘procedural’ or ‘implicit’ memory, tells us unconsciously how to walk, talk, play a piano, drive a car, serve a tennis ball, and so on. . . . The other kind of memory, known as ‘declarative’ or ‘explicit’ memory, allows us to recall all sorts of things—where we went yesterday, the sound of a parent’s voice, how our car looks, or what we must know to pass a test. . . . [I]t allows us to compare our current situation with all sorts of anxiety-generating circumstances, and so it is intimately connected with the amygdala’s work and with anxiety.”

“Interestingly,” Hobson and Leonard continue, “the heart of our explicit memory system lies not in the cerebral cortex but in a pair of curved structures (one in each cerebral hemisphere) hunkered down deep in the cerebrum near the thalamus and amygdala. Known jointly as the hippocampus (‘sea horse’ in Latin), they play a vital role in explicit [declarative] memory processing. We know this because damage to the hippocampus interferes with memory. Indeed, it interferes with memory so much that one famous patient, a man with the initials ‘H.M.’, entered a time warp worthy of the *Twilight Zone* when his two hippocampal structures were removed surgically, together with portions of his temporal lobe, in an effort to quell his epilepsy.” Emphasis in original.

“The epilepsy was quelled, all right,” the authors write, “but H.M. lost his ability to create new memories. He could recall old memories—things that happened before the operation—just fine. But he could only hold new memories of the explicit sort in head for a few minutes. So if you met him, he might seem fairly normal. *But if you left the room and returned a few minutes later, he would not know who you were.*” Emphasis supplied.

J. Allan Hobson & Jonathan A. Leonard. *Out of its Mind: Psychiatry in Crisis—A Call for Reform*. Perseus Publishing, Cambridge, Mass., 2001, pp. 141-142.

So the hippocampus is a kind of temporary storehouse for new info much like the RAM in a computer. There is a process the new info must go through to get saved to the hard drive, i.e., the rest of the Brain.

“What seems to be happening is this[],” Hobson and Leonard explain. “The hippocampus coordinates sensory and associative (interconnected) information received from many different parts of the cerebral cortex, and it stores that information. In this way broad, multisense memories (people’s faces and voices; the look and aroma of a banana; the sights, sounds, and excitement of a circus) are stored in the hippocampus. Then, during sleep, portions of these hippocampal memories (like pieces of a jigsaw puzzle) are filed in various parts of the cerebral cortex and elsewhere, and ties between the hippocampal memories and these cortex memory pieces are created or strengthened. In this way, information gained during the last waking period is consolidated with previously stored cortex information of the same sort, making it easier for you to come up with new ideas and to work with this consolidated pool of information in the morning. Indeed, it seems likely that a prime purpose of sleep is to consolidate and file new information within the brain’s vast data storage system and that *dreams are an incidental by-product of this process.*” *Out of its Mind*, p. 142. Emphasis supplied.

Dreams then, according to Hobson and Leonard, are the psychological poop resulting from the memory digestion process. Stool samples, however, are valuable.

Regarding the amygdala, Hobson and Leonard observe that “[t]he fact that the amygdala generates responses designed to *save its owner* explains why the amygdala is so much more hard-wired than most other brain regions. For you don’t want flexibility here. You don’t want to forget. You don’t want to act neutrally or wonder what is happening when your life is threatened. You want to act. So the amygdala is set up to respond to progressively more sophisticated danger signals sent in by the thalamus, the sensory cortex, and the hippocampus. *But it is not set up to be deprogrammed. It is not set up to forget.* Nature has recognized the worth of remembering life-threatening experiences. *So once some stressful situation has engraved a conditioned memory trace in the amygdala, that memory trace, in all probability, is there to stay.*” *Out of its Mind*, p. 144. Emphasis supplied.

"[T]he reason why dreaming is commonly characterized by anxiety," say the authors, "is because the *amygdala is activated in REM sleep*. [T]he reason why dreaming exhibits discontinuities, incongruities, limited self-awareness, and failure to direct thought is because the dorsolateral prefrontal cortex is deactivated in REM sleep. [F]unctions of dreaming suggested by these findings include maintaining the capacity to *generate adaptive anxiety, consolidating recent learning, and reorganizing memory*."

Out of its Mind, p. 235.

Alien abduction then, for subjects with abuse history, would be traumatic memory of principally childhood sexual abuse reorganized and replicated through dreaming into memories of sexual abuse by aliens.

"Memory consolidation and reconsolidation reflect molecular, cellular and systems-level processes that convert labile memory representations into more permanent ones, available for continued reactivation and recall over extended periods of time. Here, we discuss the complexities of consolidation and reconsolidation, and suggest they should be viewed not as all-or-none phenomena, but as a continuing series of biological adjustments that enhance both the efficiency and the utility of stored memories over time and in response to changing needs of the organism. As such, consolidation and reconsolidation might be better thought of as memory organization and reorganization. A rapidly growing body of evidence suggests that many of these processes are optimally engaged during sleep." P. 408. Robert Stickgold and Matthew P. Walker. *Memory consolidation and reconsolidation: What is the role of sleep?* *TRENDS in Neurosciences Vol.28 No.8 August 2005 (PDF)*, pp. 408-415.

"Nightmares are common, occurring weekly in 4%-10% of the population, and are associated with female gender, younger age, increased stress, psychopathology, and dispositional traits. Nightmare pathogenesis remains unexplained, as do differences between nontraumatic and posttraumatic nightmares (for those with or without posttraumatic stress disorder) and relations with waking functioning. No models adequately explain nightmares nor have they been reconciled with recent developments in cognitive neuroscience, fear acquisition, and emotional memory. The authors review the recent literature and propose a conceptual framework for understanding a spectrum of dysphoric dreaming. Central to this is the notion that variations in nightmare prevalence, frequency, severity, and psychopathological comorbidity reflect the influence of both *affect load*, a consequence of daily variations in emotional pressure, and *affect distress*, a disposition to experience events with distressing, highly reactive emotions. In a cross-state, multilevel model of dream function and nightmare production, the authors integrate findings on emotional memory structures and the brain correlates of emotion." Ross Levin & Tore A. Nielsen. *Disturbed Dreaming, Posttraumatic Stress Disorder, and Affect Distress: A Review and Neurocognitive Model*, p. 482. *Psychological Bulletin*, 2007, Vol. 133, No. 3 (PDF), pp. 482-528.

"Memory reconsolidation is the process of previously consolidated memories being recalled and actively consolidated.[2] It is a distinct process that serves to maintain, strengthen and modify memories that are already stored in the longterm memory. Once memories undergo the process of consolidation and become part of longterm memory, they are thought of as stable. *However, the retrieval of a memory trace can cause another labile phase that then requires an active process to make the memory stable after retrieval is complete.*[2] It is believed that postretrieval stabilization is different and distinct from consolidation, despite its overlap in function (e.g. storage) and its mechanisms (e.g. protein synthesis). Memory modification needs to be demonstrated in the retrieval in order for this independent process to be valid.[2]" *Memory Consolidation, Wikipedia*. Citing [2] Tronson, N. C. & Taylor, J. R. (2007). *Molecular mechanisms of memory reconsolidation*. *Nature Reviews Neuroscience*, 8, 262-275.

[Memory Consolidation](#) at *The Human Memory*

[NOVA's What are Dreams?](#) The program is being rebroadcast this week in some

parts of the United States.

Gianluca Ficca & Piero Salzarulo. *ReviewArticle: What in Sleep is for Memory? Sleep Medicine*, 5 (2004), 225-230.

“Relative to cognition, surprisingly less research attention has been given to the interaction between sleep and affective brain function, despite the prominent cooccurrence [sic] of abnormal sleep in almost all clinical mood disorders. Nevertheless, recent work has begun to describe a clarifying role for sleep in emotion regulation, vignettes of which I review below, followed by a proposed REM sleep hypothesis of emotional brain homeostasis.” Matthew P. Walker, *REM, Dreams and Emotional Brain Homeostasis* (PDF), *Frontiers in Neuroscience*, December 2009, Volume 3, Issue 3, pp. 442, 443.

“[I]t has long been noted that, *with the exception of trauma memories*, dreams often do not represent coherent episodic memories; the deconstruction of memories in isolated elements or basic units is considered by most dream and sleep researchers to be a cardinal phenomenal feature of dreaming.” p. 85. Emphasis supplied. Levin & Nielsen, *Nightmares, Bad Dreams, and Emotion Dysregulation: A Review and New Cognitive Model of Dreaming*. *Current Directions in Psychological Science*, Volume 18, No. 2, 2009, (PDF) pp. 84-88.

With regard to disturbed dreaming, Levin & Nielsen continue: “We suggest that engagement of . . . fear-extinction processes may be the default function of REM sleep, with dreaming representing the experienced result of these mechanisms. Representation of specific memorial components in dream content is then determined by ongoing daytime demands on the emotional-memory system—in other words, *we dream about what we are emotionally preoccupied by in waking*.” *Ibid*, p. 85.

For contraindications, see Robert P. Vertes. *Memory Consolidation in Sleep: Dream or Reality? Neuron*, Vol. 44, 135–148, September 30, 2004. (PDF) “We discuss several lines of evidence refuting the hypothesis that procedural or declarative memories are processed/consolidated in sleep. One of the strongest arguments against a role for sleep in declarative memory involves the demonstration that the marked suppression or elimination of REM sleep in subjects on antidepressant drugs or with brainstem lesions produces no detrimental effects on cognition. Procedural memory, like declarative memory, undergoes a slow, time-dependent period of consolidation. A process has recently been described wherein performance on some procedural tasks improves with the mere passage of time and has been termed ‘enhancement.’ Some studies, but not others, have reported that the consolidation/enhancement of perceptual and motor skills is dependent on sleep. We suggest that consolidation or enhancement, initiated in waking with task acquisition, could in some instances extend to sleep, but sleep would serve no unique role in these processes. In sum, there is no compelling evidence to support a relationship between sleep and memory consolidation.” P. 135.

This is in conflict with studies which find that REM Sleep disruption impairs memory.

Ernest L. Rossi. *The Memory Trace Reactivation and Reconstruction Theory of Therapeutic Hypnosis: The Creative Replaying of Gene Expression and Brain Plasticity in Stroke Rehabilitation*. (PDF) *Hypnos*, Vol. XXXII No. 1 – 2005

Potter, J.B. *Internal versus External Locus of Control Reinforcement: A Case History of A Variable*. (PDF)

The Scream. Edvard Munch.

The Nightmare. John Henry Fuseli

“Do our memories remain static during sleep, or do they change? We argue here that memory change is not only a natural result of sleep cognition, but further, that such change constitutes a fundamental characteristic of declarative memories. In

general, declarative memories change due to retrieval events at various times after initial learning and due to the formation and elaboration of associations with other memories, including memories formed after the initial learning episode. We propose that declarative memories change both during waking and during sleep, and that such change contributes to enhancing binding of the distinct representational components of some memories, and thus to a gradual process of cross-cortical consolidation. As a result of this special form of consolidation, declarative memories can become more cohesive and also more thoroughly integrated with other stored information. Further benefits of this memory reprocessing can include developing complex networks of interrelated memories, aligning memories with long-term strategies and goals, and generating insights based on novel combinations of memory fragments. A variety of research findings are consistent with the hypothesis that cross-cortical consolidation can progress during sleep, although further support is needed, and we suggest some potentially fruitful research directions. Determining how processing during sleep can facilitate memory storage will be an exciting focus of research in the coming years.”

–*Memory reactivation and consolidation during sleep*, Ken A. Paller and Joel L.Voss.

“Winson (1985) suggests that not only does this REM/dream association offer the best opportunity to understand the stable underlying strategies that guide behavior but these can best be observed in the continuity of dream themes across the night. This sequence of dreams reveals the way new experience is being related to older memories.” *The role of sleep in changing our minds: A psychologist’s discussion of papers on memory reactivation and consolidation in sleep*, Rosalind D. Cartwright, www.learnmem.org, citing Winson, J. 1985. *Brain and psyche: The biology of the unconscious*. Anchor Press, New York.

“Behavioral and neuroimaging studies in humans substantiate the notion that memory representations are reactivated and are reorganized during post-learning sleep; these reorganizations may account for the beneficial effects of sleep on behavioral performance.” Abstract. Hennevin, E. et al., *Neural representations during sleep: From sensory processing to memory traces*, *Neurobiology of Learning and Memory* (2006), doi:10.1016/j.nlm.2006.10.006.

“At least in part, processing of presleep stimuli seems to be active—that is under the subject’s control. This control is exerted in an implicit manner (that is, without awareness and volition), through the subject’s concern with particular knowledge items. Substantial continuities have been found between *dream contents and emotional concerns induced in previous waking* ([Hoelscher et al. *Incorporation of concern-and nonconcern-related verbal stimuli into dream content*. *J. Abnor. Psychol.*, 1981, 90: 88-91; Nikles et al. *The effects of current-concern and nonconcern-related waking suggestions on nocturnal dream content*. *J. Person. Soc. Psychol.*, 1998, 75:242-255; Riemann and McNally, *Cognitive processing of personally relevant information*. *Cogn. Emot.*, 1995, 9: 325-430; Walker and Johnson, *The influence of presleep suggestions on dream content: evidence and methodological problems*. *Psychol. Bull.*, 1974, 81: 362-370].” C. Cipolli, R. Bolzani, G. Tuozi, and I. Fagioli, *Active processing of declarative knowledge during REM-sleep Dreaming*. *J. Sleep Res.* (2001) 10, 278. Emphasis supplied.

Cipolli et. al continue: “[D]uring REM sleep, access to and processing of recently acquired declarative knowledge can be actively guided by the cognitive concern induced by a recall task to be completed after the following awakening. Such a *Zeigarnik (1927) effect* demonstrates that cognitive concerns, as well as emotional ones, remain operative in different conditions of vigilance.” *J. Sleep Res.* (2001) 10, 282.

Bessel A. van der Kolk, MD. *The Compulsion to Repeat the Trauma: Re-enactment, Revictimization, and Masochism*. *Psychiatric Clinics of North America*, Volume 12, Number 2, Pages 389-411, June 1989.

Harvey J. Irwin. *Reality Testing and the Formation of Paranormal Beliefs: A Constructive Replication*. *Journal of the Society for Psychical Research*, Vol. 68.3, No. 876, pp. 143-152.


“Previous research has suggested that paranormal beliefs and experiences are

associated with thinner mental boundaries and traumas during childhood. This paper examines more thoroughly the relationship between paranormal experiences, mental health and boundaries, and psi abilities. One hundred and sixty two participants completed questionnaires about paranormal experiences (AEI), mental health (MHI-17), mental boundaries (BQ-Sh), traumas during childhood (CATS) and life-changing events (LES). A controlled psi experiment was also conducted. Significant correlations were found between paranormal experiences and mental boundaries, traumas and negative life events. The overall results were non-significant for the psi task and no significant correlation was found between psychological variables and psi results. These findings suggest that mainly mental boundaries concerning unusual experiences and childlikeness are associated with paranormal experiences. They also highlight the importance of association between emotional abuse and paranormal experiences, and that paranormal experiences occur especially frequently after negative life events.” Rabeyron, T., & Watt, C. *Paranormal experiences, mental health and mental boundaries, and psi. Personality and Individual Differences* (2009), doi:10.1016/j.paid.2009.11.029, article in press.

Charles D. Nikles II, David L. Brecht, Eric Klinger, and Amy L. Bursell. *The Effects of Current-Concern- and Nonconcern-Related Waking Suggestions on Nocturnal Dream Content.* *Journal of Personality and Social Psychology*, 1998, Vol. 75, No. 1, 242-255. (PDF)

Tore Nielsen, Ross Levin. *Nightmares: A new neurocognitive model.* *Sleep Medicine Reviews* (2007) 11, 295–310. (PDF)

The October 28th, 2008 Letter to Emma Woods from Richard C. Throm (posted by permission of the Recipient)



TEMPLE UNIVERSITY
A Commonwealth University

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Medical Intervention Committees A1 & A2
Social and Behavioral Committee B

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Delivered Via Private E-Mail

To: [name]
From: Richard C. Throm
Director, Office for Human Subject Protections
Institutional Review Board Coordinator
Acting Research Integrity Officer
Date: October 28, 2008
Distribution: Larry F. Lemanski, PhD
Senior Vice President for Research and Strategic Initiatives
Stephana Colbert, Esq.
Associate University Counsel
Verbal Report: David M. Jacobs, PhD
File
RE: Subject complaint regarding David M. Jacobs, PhD


After a thorough review and inquiry into the matter of breach of confidentiality and misconduct as stated in your emails and conversations, the following finding is provided as the final outcome regarding the complaint:

The inquiry involving the investigator [redacted] as outlined in your complaint concluded that no breach of confidentiality regarding you/your family identity (other than the self-disclosed information revealed to one of the individuals named in the complaint [redacted] to any other person or agency or group was made by the investigator. Further, there is no forthcoming book, manuscript or publishing deal at this time. Any further actions by the investigator will not reveal you/your family identity in any way or form. Your withdrawal of permission for the use of any and all information gathered or in the possession of Dr. Jacobs has been reviewed and will be honored to the best of the ability under the control of Dr. Jacobs. Further, Dr. Jacobs will take necessary actions to the best of his ability to inform his webmaster to maintain any information they may have come to learn in a confidential manner. This inquiry is now complete and no further action is required or planned in this matter.

1

Identifying information of third parties is blanked out.

Magnification of the Letterhead of from the Throm Letter



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Posted by Gary Haden at 7:55 AM 

13 comments:

 Gary Haden said...

Multiple Personality Disorder

Mr. Jacobs was aware of the etiology of Multiple Personality Disorder as far back as nineteen years ago. In SECRET LIFE, cited above, he wrote: "In spite of the lack of evidence for mental disease, some critics have said that the serious illness of dissociated personalities, or 'multiple personalities,' may have a bearing on the abduction phenomenon. The people who suffer from this unusual disorder may have one or more personalities separate from their dominant one, and they may or may not know about the others. The alternate personalities may engage in antisocial, immoral, or just different behavior from the other personalities."

"In no case," Jacobs ironically states, "has an abduction researcher uncovered an individual who exhibited traits of multiple personality disorder. No abductee has spontaneously shifted into another personality during a hypnosis session, as if the abduction were happening to someone else. Nor has an abductee displayed other personalities independent of the regression session. When an abductee remembers the abduction, it is fully integrated into the structure of her life without resistance; it would not be if it were another person's problem."

"Generally, people with multiple personality disorder come from backgrounds filled with severe and prolonged sexual abuse. Their dissociated personalities can be understood as a psychological attempt to escape from the traumas of their 'real' existence."

Jacobs both confesses and downplays the confession in the next sentence: "Although some abductees have been sexually abused, [here Exhibit 3 in supporting the target population theory above] we have no evidence to suggest that the frequency of abuse is any higher among abductees than among the general population. Moreover, the abductees' accounts of abductions do not occur in response to the abuse and are exactly the same as those made by people with no known history of sexual abuse. Thus multiple personality disorder does not seem to be a likely candidate as the causative factor in the reports of abductees."

We have no evidence the frequency of abuse is higher in abductees because Jacobs did not keep or compile or publish psychosocial/historical demographics to assist in making that determination. Since he did not make that measure, on purpose it is here contended, he cannot claim authority for his statement. Some of the research bearing upon the issue did not exist at the time of Jacobs's publication of Secret Life. I've shown above that abduction accounts can most certainly occur in response to abuse.

There is reason to suspect the second paragraph above is false. Since this tract is from 1992, this means, in investigating whether Jacobs gave posthypnotic suggestions of Multiple Personality Disorder to more than one client, his entire corpus should be decanted of its transcripts and audio files, not just the Emma Woods Case. This would not just be in the interest of determining wrongdoing, but in doing needed demographic and statistical analyses to properly analyze Jacobs's results. This work apparently needs doing in Mr. Hopkins's case as well. If they have nothing to hide, the benefit to their projects should seem obvious.

The other investigative track would be to determine if Jacobs were deliberately creating MPD case histories in under the table research activities for psychiatrists who offered expert review of his work or other amenities in exchange.

June 30, 2011 7:32 AM

 Gary Haden said...

Multiple Personality Disorder II

Most not true believers in the abduction phenomenon seriously question Jacobs's contention he administered the MPD suggestion to Miss Woods to evade capture of his

person by psychic mind-controlling aliens. In suggesting he was creating MPD case histories for his psychiatric advisors, the attempt is made at a down-to-earth explanation.

Human guinea pig status, however, isn't any more palatable than human shield status.

June 30, 2011 7:38 AM

B Gary Haden said...

MANCHURIAN ALIEN-HUMAN HYBRIDS: THE ROLE OF FABRICATED MULTIPLE PERSONALITY DISORDER AND FALSIFIED CORROBORATION

An interesting idea would be to split the subject's personality up, hypnotically train them to role play the assorted personalities, including that of alien-human hybrid, and play subjects off one another in real life. Thus, a subject who is a multiple can transition into his alien alter and contact or even assault another subject still in her host personality. And forget all about it afterward. Per above, persons with abuse histories would have morally broken wills, and have little internal resistance to mount to such suggestions.

This, of course, provides the "abductee" with conclusive proof hybrids exist. I mean, there he stands. And since the "abductee" has been pre-indoctrinated regarding the fact that, in their latest incarnation, alien-human hybrids are indistinguishable from humans, the abductee will not be bothered by the human appearance. So this should suffice for physical evidence purposes.

The heyday for this type of thing is fast concluding with the advancement of neuroscience. There won't be any place for a rogue hypnotist like the one hypothesized here to hide.

July 1, 2011 6:23 AM

B Gary Haden said...

Post-Hypnotically Suggested Dreams

"Research has demonstrated that nocturnal dreams and thoughts can be influenced by presleep suggestions. Stoyva (1965) found that a posthypnotic suggestion, administered just before sleep onset, to dream about a certain topic influenced the content of the REM dreams reported by highly hypnotizable participants. Half of these participants, after a posthypnotic suggestion to dream about a narrative that had been played during the trance, reported relevant dream content (Tart, 1967). In a similar study, approximately two thirds of all dream reports incorporated elements of the suggested narrative (Tart & Dick, 1970)." Charles D. Nikles II, David L. Brecht, Eric Klinger, and Amy L. Bursell, The Effects of Current-Concern- and Nonconcern-Related Waking Suggestions on Nocturnal Dream Content. *Journal of Personality and Social Psychology*, 1998, Vol. 75, No. 1, 243; citing Stoyva, J. M. (1965), Posthypnotically suggested dreams and the sleep cycle. *Archives of General Psychiatry*, 12, 287-294; Tart, C. T. (1967), The control of nocturnal dreaming by means of posthypnotic suggestion, *Parapsychology*, 18(4), 184-189.

"Barber, Walker, and Hahn (1973) showed further that suggestions affected nocturnal thoughts (reported mostly from NREM periods) as well as dreams and that for suggestions to have an effect, participants needed to be neither highly hypnotizable nor hypnotized. The greatest effects on dreams were obtained when authoritatively worded suggestions ('You will dream about . . .') were used with hypnotized participants and permissively worded suggestions ('Try to dream about . . .') were used with un hypnotized participants." Nikles et al at 243; citing Barber, T. X., Walker, P. C., & Hahn, K. W. (1973). Effects of hypnotic induction and suggestions on nocturnal dreaming and thinking. *Journal of Abnormal Psychology*, 82, 414-427.

"Which properties of suggestions determine how much they affect dreams? Stoyva (1965) instructed participants to dream about simple action sequences, such as 'climbing a tree' and 'rowing a boat.' Tart (1967) played a recorded narrative that placed the participant in a threatening situation. Tart and Dick (1970) played narratives selected to be 'detailed, interesting, pleasant, and emotionally involving' (p. 305). Barber et al. (1973) instructed participants to dream about the assassination of President Kennedy, which had occurred less than a year before the study was conducted. Thus, all participants in each of these studies received either identical suggestions or suggestions of the same general type. In each instance, the suggested dream topics were emotionally evocative, but whether this or other properties of the suggestions contributed to their effectiveness cannot be determined from these data." Page 243.

July 1, 2011 6:24 AM

B Gary Haden said...

THE BACK-ENGINEERED ALIEN HUMAN HYBRID PURPLE ROSE OF CAIRO

A paper was published in Temple Psychiatrist Richard Kluff's journal *DISSOCIATION* which postulated that dream characters were prototypes for "alter" personalities.

"This article describes similarities of the states of dreaming and MPD, including amnesia and other alterations of memory. It suggests that the dream character, as an hallucinated projection of aspects of the self, can be seen as a prototype for the MPD alter. Dreaming may even be a more literal precursor whose physiologic mechanisms for amnesia and the manufacture of alternate identities are recruited in the development of MPD."

"There are constellations of cognitive and personality processes which operate outside conscious awareness and normally are observable primarily in dreams. Extreme early trauma may mutate or overdevelop these dissociated parts and call upon them to 'wake up'

and function in the external world. We will describe how that [sic] this dream model parallels the observed phenomena of MPD more directly than do explanations relying on waking fantasy processes." Deirdre Barrett, Ph.D., The Dream Character as Prototype for the Multiple Personality Ater, Dissociation, Vol. VIII, No. 1, March, 1995 (abstract), p. 61.

So the Manchurian Process might seem a credible cycle to psychoanalyst-advised alien abductionists. The dream characters are created in hypnosis. An attempt to split the personality is made by giving the subject a posthypnotic suggestion he has multiple personality disorder. Progress is assessed by the appearance of the characters in the dreams of the abductee. Dream enactments is a sign of dissociation, the eventual separation of the character from the unconscious. Dream enactments then evolve into dissociated waking enactments, similar to cutting behavior, constituting another boundary violation, this time the sleep-wake boundary. With one of the roles played that of abductionist-career verifying alien-human hybrid.

July 2, 2011 6:38 AM



Emma@ufoalienabductee.com said...

Gary, thank you so much for the amazing work that you are doing in researching the various aspects, and possible implications, of this issue, and for asking the difficult questions. You have given me a lot to think about.

I personally have serious questions about the alleged group of psychiatric professionals that Dr. Jacobs consulted about me (if they exist as he claims.)

What mental health professional in their right mind would ever support a man who implanted hypnotic suggestions in the mind of his research subject that they had Multiple Personality Disorder, ostensibly to evade capture by alien hybrids? No competent mental health professional would ever condone that. They would know immediately that Dr. Jacobs' actions towards me were reprehensible.

Not only that, but I believe that most ethical mental health professionals who knew the facts of the case would know exactly why I made that abuse public. My current therapist is supporting me in making it known as a matter of public interest.

I am aware of a number of other research subjects of Dr. Jacobs who may have been harmed by him as well.

I think that there are many serious unanswered questions about what has gone on in Dr. Jacobs' research. Thank you again for going into this area.

July 2, 2011 2:53 PM

Gary Haden said...

THE THREAT

"Several theories claim that dreaming is a random by-product of REM sleep physiology and that it does not serve any natural function. Phenomenal dream content, however, is not as disorganized as such views imply. The form and content of dreams is not random but organized and selective: during dreaming, the brain constructs a complex model of the world in which certain types of elements, when compared to waking life, are underrepresented whereas others are over represented. Furthermore, dream content is consistently and powerfully modulated by certain types of waking experiences. On the basis of this evidence, I put forward the hypothesis that the biological function of dreaming is to simulate threatening events, and to rehearse threat perception and threat avoidance. To evaluate

this hypothesis, we need to consider the original evolutionary context of dreaming and the possible traces it has left in the dream content of the present human population. In the ancestral environment human life was short and full of threats. Any behavioral advantage in dealing with highly dangerous events would have increased the probability of reproductive success. A dream-production mechanism that tends to select threatening waking events and simulate them over and over again in various combinations would have been valuable for the development and maintenance of threat-avoidance skills. Empirical evidence from normative dream content, children's dreams, recurrent dreams, nightmares, post-traumatic dreams, and the dreams of hunter-gatherers indicates that our dream-production mechanisms are in fact specialized in the simulation of threatening events, and thus provides support to the threat simulation hypothesis of the function of dreaming." Antti Revonsuo, The reinterpretation of dreams: An evolutionary hypothesis of the function of dreaming. BEHAVIORAL AND BRAIN SCIENCES (2000) 23, 793-1121 (abstract).

"If the essence of dreaming is threat simulation, then we should find that the brain areas active during REM sleep are ones involved in generating emotional and perceptual experience. According to Hobson (1999a) PGO waves are believed to be the neural generators of the internal stimulation that results in dream phenomenology. They occur as bursts of waves during REM sleep, activating, in particular, the thalamocortical circuits involved in vision, but also radiating to the limbic lobe and amygdala. In the waking state PGO waves are triggered by strong, novel stimuli and are associated with surprise and fear. 'PGO waves prepare us for fight or flight should these prove necessary. The startle reactions provoked in us by real or imaginary intruders are mediated by PGO-like signals' (Hobson 1999a, p. 169). Thus, the function of PGO waves during waking is clearly consistent with internal threat simulation during dreaming." Revonsuo at p. 886.

"Research on emotionally charged memories and memory under stress has recently come up with the idea that there is a separable 'hot' amygdala-centered emotional system distinct from the 'cool' hippocampally centered episodic memory system (for a review, see Metcalfe & Jacobs 1998). The two systems work in cooperation, the 'hot' system highlighting those

species-specific or learned elements of memory traces that are highly emotional by nature. The 'hot' system is believed to have a role in releasing species-specific behaviors such as fear or defensive responses to emotionally charged stimuli. As the stress levels of the organism increase, the 'hot' memory system becomes increasingly activated." Ibid, page 886.

"Recent functional brain-imaging studies of sleep show that brain areas involved in the processing of emotionally charged memories are strongly activated during REM sleep and dreaming. The dream-production mechanisms thus seem to be in close interaction with the primitive 'hot' memory system, preferably selecting memory traces with high emotional charge." Id., at page 887.

July 5, 2011 7:53 AM

Gary Haden said...

SEPARATING THE "ABDUCTION" FROM THE REST OF THE PERSONALITY

"If one views spontaneous self-hypnosis as a major etiologic mechanism of MPD, one may be inferring cause from looking at an effect (the high hypnotizability and autohypnotic defensive response of MPD patients). There is now increasing evidence that repeated trauma increases hypnotizability (J. Hilgard, 1970; Nash, Lynn, & Givens, 1984) by reinforcing the ability to dissociate. The high hypnotizability of MPD patients may involve both their ability to dissociate and their degree of absorption and imaginative involvement, all of which may be increased by trauma. The intense stimulation of the trauma and the need to escape psychically may lead to an altered (dissociative) state which may facilitate a regressive mode of processing. Severe trauma is known to lead to dissociative states (Putnam, 1985, 1989) in which hallucinations (Horowitz, 1986), regression (Clinker & Spiegel, 1945), and amnesia occur. These same processes occur in the dream mode, in deep hypnosis, and in MPD. Thus, it may be that the increased hypnotizability of MPD patients resulting from trauma reflects an increased facility to access and use these processes in altered states of consciousness."

"The ability to enter dissociative states may be a defensive response in which MPD patients have learned to use regressive modes of thought to create personalities in an attempt to cope with, wall off, and master the traumas. This process enables them to create an alternate reality in the face of trauma and separates the trauma from the rest of the personality." Jean Franklin, DREAMLIKE THOUGHT AND DREAMMODE PROCESSES IN THE FORMATION OF PERSONALITIES IN MPD, DISSOCIATION, Vol. III, No.2: June 1990, p. 76.

July 5, 2011 7:59 AM

Gary Haden said...

THE HALLUCINATED DOUBLING OF A PERSON

"In both the dream and deep hypnotic states, there is a relative absence of logical cause-and-effect reasoning and logical categorization and an uncritical acceptance of things that are inappropriate, incongruent, or impossible. In hypnosis, this is called TRANCE LOGIC (Orme, 1959), a form of "logic" in which there is an acceptance of incompatible mental experiences, such as accepting as real the HALLUCINATED DOUBLING OF A PERSON. In dreams, a similar form of "logic" occurs. In dream logic, seemingly impossible fusions, combinations, and mergings occur. A person can be merged with someone else; past experiences can appear to occur in the present; one can be any age, in any place, or experience oneself as someone else. Similar cognitive distortions and ways of processing occur in MPD patients, whose alters experience the past as the present, who have child and adult alters who exist at the same time, insist that their alters do not inhabit the same body and have different appearances, and who relive past traumas in the present, all of which reflect the logic of dreams." Jean Franklin, DREAMLIKE THOUGHT AND DREAMMODE PROCESSES IN THE FORMATION OF PERSONALITIES IN MPD, DISSOCIATION, Vol. III, No.2: June 1990, p. 74; citing Orme, M.T. (1959), THE NATURE OF HYPNOSIS: AN ARTIFACT AND ESSENCE. Journal of Abnormal and Social Psychology, 58, 277-299.

July 5, 2011 8:02 AM

Gary Haden said...

DREAMS AS PERSONALITY FACTORIES

"When using hypnosis with highly hypnotizable MPD patients, one may actually be using a technique which enables one to observe and assist the mind in its capacity to use and reorganize its different processes on the continuum from waking through dreaming. Many of the mental processes in the deep hypnotic state are not specific to that state and are indistinguishable from some of the processes in dream state. When observing some of these processes in hypnosis and in MPD patients, one may really be looking at mental processes drawn from a common source—the dream mode of mental processing."

...

"The concept that MPD involves dreamlike developmental elements and dream mode processes and the capacity for dissociation has direct implications for a broader understanding of its treatment. An understanding of the similarities and overlap between dream mode and deep hypnotic processes further establishes a rationale for the formal hypnotic techniques used by many therapists to treat these patients (Bliss, 1986; Braun, 1980, 1984b; Kluft, 1982, 1986, 1989). The high hypnotic capacity of these patients facilitates hypnotic interactions even when formal hypnosis is not used in their treatment (Kluft, 1989)."

...

"In conclusion, developmental dreamlike thought and dream mode processing provide a useful paradigm for a broader understanding of the etiology, dynamics, and treatment of MPD. Since many of the essential features of MPD are similar to the mental processes and patterns found in early childhood development and in dreams, it is proposed that these

processes must be activated in the context of altered states of consciousness for the initial formation of the personalities and personality states found in MPD." Jean Franklin, DREAMLIKE THOUGHT AND DREAMMODE PROCESSES IN THE FORMATION OF PERSONALITIES IN MPD, DISSOCIATION, Vol. III, No.2: June 1990, p. 77; citing Bliss, E.L. (1986), Multiple personality, allied disorders, and hypnosis, New York: Oxford University Press; Braun, B.G. (1980). Hypnosis for multiple personalities, in H. Wain (Ed.), Clinical hypnosis in medicine, Chicago: Year Book Medical Publishers; Braun, B.G. (1984b), Uses of hypnosis with multiple personalities, Psychiatric Annals, 14, 34-40; Kluff, R.P. (1982), Varieties of hypnotic interventions in the treatment of multiple personality, American Journal of Clinical Hypnosis, 24, 230-240; Kluff, R.P. (1986), Preliminary observations of age regression in multiple personality disorder patients before and after integration, American Journal of Clinical Hypnosis, 28, 147-156; Kluff, R.P. (1989), Playing for time: Temporizing techniques in the treatment of multiple personality disorder, American Journal of Clinical Hypnosis, 28, 147-156.

July 5, 2011 8:06 AM

Paul said...

Gary,

Thank you for taking what must be no small amount of your personal time to put together such detailed analysis. As Emma alluded to above, you have left much for us to ponder.

Emma, I hope you are in good health and spirits. You are often in my thoughts and it is always a pleasure to hear from you.

July 6, 2011 3:27 AM



Emma@ufoalienabductee.com said...

Thank you Paul. It is much appreciated.

July 7, 2011 10:30 PM

Gary Haden said...

AROUSAL DISORDER

"[R]osalind Cartwright," wrote Andrea Rock in THE MIND AT NIGHT, "is supplementing her studies of dreaming's role in emotional processing by analyzing what occurs in people who suffer from a form of parasomnia known as AROUSAL DISORDER. In recent years, she has frequently been called in as a consultant to examine those who have the disorder. Rather than progressing smoothly from slow-wave sleep into dreaming during REM, parasomniacs abort the first dream opportunity by getting out of bed while still in deep sleep and engaging in activities ranging from compulsive eating to violent behavior, including murder—NONE OF WHICH THEY REMEMBER WHEN AWAKENED. . . ."

"Since the disorder RUNS IN FAMILIES, [Cartwright] says," wrote Rock, "it appears to be caused by a genetic flaw. . . ."

"... [K]enneth Parks of Toronto fell asleep on the couch one night in May of 1987, arose while still in deep sleep, and DROVE NEARLY FIFTEEN MILES to the house of his in-laws, whom he was planning to visit the next day. When he entered their house in the middle of the night, he fatally stabbed his mother-in-law with the knife she grabbed to defend herself when she heard what she feared was an intruder in the house."

"Parasomniacs with arousal disorder can navigate through space," [Cartwright] says, "but they have no visual recognition of faces, they can't hear screams, nor do they feel pain themselves. Ken Park's hands were BADLY CUT in the struggle with his mother-in-law, yet he didn't awaken."

Andrea Rock. THE MIND AT NIGHT. New York: Basic Books, 2004, pp. 191-193.
Capitalization emphasis supplied.

Cartwright reported to Rock that aggression, anger, appetite, and sex are all drives that "are highly activated" in parasomniacs.

Interestingly, these are also features, excepting perhaps appetite, of the behavior patterns of alien-human hybrids, according to trauma-based alien-abductionists.

It is also important to note the hereditary factor in this sleep disorder. "Abductees" are often cited in the literature as contending their parents had also been abducted. Also note how arousal disorder sufferers DON'T REMEMBER what happened to them when they awaken. Forgetfulness is a feature of alien abduction—it factors heavily in "missing time"—and is often the justification given for hypnotic therapeutic intervention, a version of recovered memory practices some researchers have dubbed "traumatic therapy."

Given that dream content can be manipulated deliberately, the mixture of an "abductee" who has arousal disorder with an alien abductionist touting traumatic experiences would undoubtedly produce explosive results.

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