

DEEPER INSIGHTS INTO THE ILLUMINATI FORMULA by  
Fritz Springmeier and Cisco Wheeler

PODCAST 24

HOW HELP COMES ABOUT FOR MIND CONTROL  
VICTIMS

[Note: This part is primarily by Cisco Wheeler]

Contents

INTRODUCTION THE HARVEST OF WEEPING An  
overview of what the support team faces ACCESSING  
BOUNDARIES & ROLES COMMUNICATIONS ISSUES  
DENIAL, how to deal with the therapists or ministers  
DEPRESSION (initial client complaint) DETECTION OF  
MIND-CONTROL EATING DISORDERS (as an Initial  
problem, and as a Deeper Issue) AN INTRODUCTION  
WHEN MIND-CONTROL VICTIMS WITH EATING  
DISORDERS FIRST COME IN CONTACT WITH  
THERAPISTS EVALUATION FORMS PURPOSE &  
SHORTCOMINGS SAMPLE QUESTIONS IN AREAS OF  
INQUIRY EARLY WORK FEAR, how to handle FEAR, what  
fear issues do victims have? (fear is an initial issue for  
victims) PROBLEMS FEAR CREATES: HOPE Multiplicity,  
understanding Panic attacks, suggestions Understanding  
programming START WITH THE CORRECT ATTITUDES  
REMAIN FLEXIBLE TAKE NOTE OF WHAT TYPE OF  
VICTIM YOU HAVE HOW THE MIND CREATES A  
PROGRAMMED REALITY THE VICTIM'S POWER ENDS

WHERE FEAR BEGINS GIVING THE VICTIM HIS OR HER IDENTITY BACK TYPICALLY A VICTIM HAS PROGRAMS:  
Protection, spiritual

When our system first began doing collages as therapy, the third collage we did of our system was this one of the Gems, the Grand Druid Council hierarchy, the daisy chains and the fairy, and yet it was one of the last to be understood. When our deeper alters got done with the collage, our front alters didn't understand what they had done. It took several years to learn what all the pieces in the collage meant. What the picture shows are the deeper workings of the system, which are run by early splits. In the background is a veil. In front of it are gems, and diamonds. There are two kinds of gems. One are the gems which link to the computers, and the other are the diamonds in the rough, the clean slate alters which have yet to be programmed. A diamond in the system (pyramid) acts as a radio crystal to receive direction and energy from Satan. The energy is then distributed via the crystal and the gems to the system. This diamond is encapsulated within a gold womb-shaped crystal.

The gems in the system (ruby, diamond, topaz, onyx, emerald, sapphire, opal, amethyst, obsidian, turquoise, etc.) are linked to the book of Revelation's Heavenly City. The 12 gems send out signals according to their color coding, which are then transmitted by the correct color of ribbon to the correct colored coded alters. Their messages, the scripts, are acted out on the stage of life, which is portrayed behind the erect gold or platinum statue (AntiChrist figure). Gold represents divinity in the Illuminati. In front of that is the clock with the hierarchy. The clock is a crystal pyramid representing the pyramid in the middle of the Grand Druid Council (aka Executive Control Board). It's 12 hours are the 12 positions of the

Grand Druid Council which link to their 12 job responsibilities or characteristics and the 12 colors. The 13th number is Satan's, and it is color coded platinum. The Grand Druid Council like the Knights of the Round Table sit around a circular table. The pyramid is meant to have 13 stairs to it. The daisy chains were used to link our early parts to their master. Our Daddy would make daisy chains for us.

Most people would never suspect something like this being mind-control reinforcement. These daisy chains were delicate and very sensitive to touch. We were not to break or touch the daisy chains. Our internal daisy chains link to small 3 year old child alters. The daisy chains represent soul ties and the artificial programmed love they wanted us to have toward our master. A severe pain in our head, like a hole being drilled into our head, was refrained by the programmers as being a hole for the sun to shine through to raise daisy flowers for Daddy. Flowers are important family links in the programming.. The bud protects a daughter. The root and stem the mother figure. The soil ceremony protects the grandparents, and is grounded in the earth. The Fairy alters are involved in the hour glass and are the creative force within the system. Here Whisper (Tinkerbell figure) sprinkles Star dust on the light side. The yellow brick road, like a whirlwind that pulls the vehicle, leads to divinity, a mother goddess figure. A gold crown rests upon this stone statue. A tree runs through the entire situation. Those who are familiar with the trees in the system, realize that they are used to hang all the programming. The willow and oak roots run through the collage. Although it is somewhat difficult to notice, off to the right side of Satan are 9 chambers, which represent the various chambers on the Cabalistic tree of life. Interconnected bubbles are interconnected worlds and

galaxies in the system. The numerous butterflies are a ring of light that lay at the base of the neck.

picture

### The Daisy World

We have a special world of devotion to our master called the daisy world. An entire world of alters who love him make up this world. The picture looks some what reminiscent of some of the Fantasia scenes. The unicorn takes us into this magic world. The waterfall cleans our minds of the trauma memories.

A BOXED, SINKING DISCOURAGED SENSE ABOUT LIFE.  
picture box.jpg

One of the traumas is to take a child, put him in a trunk and dump him into water. The trunk fills up and the child passes out, and then is rescued in the nick of time before it dies. This is a common programming trauma. It is this type of trauma that is attached to programming. Feelings come in all shapes and sizes, and it is O.K. to have feelings. When the system did this an alter wrote, "The way I feel, locked and sinking, red sails in the moonlight."

The ROLE of a BETA-DELTA TEAM OF ALTERS. picture beta-delta.jpg

The hour glass controls the system. It's balance in relation to the clock and compass is crucial. The robots stand in military ranks ready to serve their national leaders. The piano cords at the left are codes for some alters. Maybe the reader will be able to figure out what some of the images mean on their own.

picture warning.jpg

## INTRODUCTION

WHY should we bother struggling to save victims of mind-control?

Why should we bother with working with victims of mind-control? We can think of a number of excellent reasons. First, if we as a people do not stand up to the World Order's mind-control, then we are giving them a green light, a free ticket to keep on doing it. And if victims of mind-control do not see people wanting to rescue them, then they will not fight the mind-control, and if they do not fight it they will not get free. It's that simple. Each of us by only trying to rescue one or two persons is opening the door to freedom for all victims of mind-control. Do we want the door left open, or the door to freedom shut? It is our choice.

Second, the person you save from mind-control may have been someone who would have been used in some secret operation to seriously hurt someone else or to seriously damage the fabric of a free society by smuggling guns, or dope or laundering money. By helping victims of mind-control you are making life a better place.

Third, by helping a mind-control victim you will learn who you are, what gifts God has placed within you, how the human mind functions, as well as having your own weaknesses exposed so that they can be worked on. There is nothing more powerful than watching God Almighty answer prayers of desperation with miracles. Bottom line, you will be a better person for helping those who are in such desperate need. Fourth, by learning how the mind-control operates and exhibits itself you will be able to prevent others from infiltration by damage agents, and to prevent parents from unwittingly allowing a day-care

center or other institution to program their children. In other words, we will be in a better position to prevent the myriads of harm that come from the wide-spread customs of mind-control. Intellectual awareness of how the mind-control is done is not the total solution, but it does act as a buffer to help us fight this mind-control madness.

We still have much to learn, but we hope to pass on what we have learned to others that we might all make the soonest use of the best help available for mind-control victims. If you know Almighty God, then you know that His strength is perfected in our weakness. He will take our few loaves of understanding, and multiply it.

## THE HARVEST OF WEEPING

'Be not deceived: God is not mocked: for whatsoever a man soweth, that shall he also reap. For he that soweth to his flesh shall of the flesh reap corruption; but he that soweth to the Spirit shall of the Spirit reap life everlasting."  
Galatians 6:7-8

The mind-control that has been carried out secretly in this 20th century on such a vast scale has left us with a harvest of weeping. The children of this dispensation cry after the virtues and the oneness within the family unit. Their hearts have become broken through the lack of knowledge, and instability of not knowing the security of a father's love. Within this rising generation, many children walk in a famished land where there is no real love. They receive only the remnant of broken homes and relationships, and overworked parents.

When the heart has gone out of the family, broken lives become as fragments of broken glass. For many children feel as though their hearts have been washed away in the

silent tears of their incompleteness. Having no voice within the kingdom to say “peace be still” they suffer from the scars of emotional abandonment. In bondage they are unable to see their way through the journey of life. Where do they go when they feel there’s no place to turn? Who do they talk to, when there’s nobody who wants to listen? Who do they lean on when there’s no stable foundation?

The Spirit of Darkness soon covers this generation with shattered dreams. In this pool of contamination, parents rise against parents. Brothers and sister become pulled between their loyalties within the family, causing a severing within the heart of the family unit. In the turmoil of confusion and uncertainty comes a brokenness within the hearts of the offspring, which causes the soul to bleed with the emotion of inner loneliness. Through a grieving process, the scars of neglect turn in rebellion, screaming with a voice of ‘PLEASE SOMEBODY LOVE ME.’ In planting of a bad harvest, come the reward of “I looked that I should bring forth grapes, but I brought it forth with wild grapes.” For when the kingdom has fallen and the hedge is gone, the harvest will be overtaken and trodden down. The landscaping and cultivation will be a thing of the past. There will be briars and thorns in the vineyard and the harvest will cease to produce fruit of quality. Woe unto the man that has rewarded evil unto his children. As the extortioner is in the land, so the young will turn in sorrow and in anger and know him not. He made me not, he had no understanding, I do not love him. As the children of yesterday and today were overthrown in the wilderness, so will come the weeping for the fathers, for man’s glory becomes his shame. Our leaders have planted pain and sorrow, and now we have a harvest of weeping. We think of the countless child victims who waited for the parents to come, who waited for love and acceptance, but were never good enough for the programmers. I want to weep for the

humaness that has been stolen from so many child victims of mind control. I weep for every scream that was never allowed, and for each child that could no longer fight for themselves or their own mind. I weep for the silent tears that were not allowed. And I grieve when I think of how grieved Almighty God must be. I grieve that the cycle continues, and that there is no voice for the new cycle of victims, the new generation of victims who are receiving sophisticated high-tech mind-control that has been perfected over centuries and in the Nazi concentration camps, universities, hospitals, labs, and secret underground facilities. This book is meant to be a voice for those victims who have no voice.

But this book is not only concerned about what has been stolen from the victims of mind-control, but also about the sacrifices that sincere therapists and support persons have endured. This next section is written in hopes that it will help therapists in their struggles. We make no claims that this information will work for therapists, we are merely passing on what we have learned from one friend to another friend. Best wishes, and may God bless your work

An overview of what the support team faces

When the victim first comes into therapy it will typically be for some other problem, such as an eating disorder. An astute therapist will notice the clues which signal that mind-control is very probable, & then will follow up. There are four areas of therapy that should not be neglected:

- a. safety issues
- b. helping the victim get to know themselves,
- c. building positives such as love, care, the Word of God into the recovering victim's life.



- d. dismantling the PDE (the primal dissociative experience), along with the programming foundations.

As a little method to remember these things, we came up with the word S-I-N-C-E-R-E, which stands for Safety, Information, and, Creating positives, Ejecting, erasing, expelling, the PDE & internal computers, R realizing, Emancipation. Each of these areas are essential for success. What do we mean Realizing Emancipation? When we are talking about mind-control, freedom is a state of mind. The victim must free their mind from the control of the world and realize who they are as God intended and planned. It is not enough to erase the bad, one must realize one's identity and birthright in God that was stolen. In fact, as our book points out, a mind-control victim will not let loose of their mind-control unless something better is adopted. We sincerely pray that those victims who want out will find Jesus Christ, and realize the emancipation that is found in Christ Jesus. Let us recap the four essential areas of work. If the victim is not totally SAFE, then very little work of substance will take place, even though the client might display a great healing (which is a cover program.) If the victim, does not get to know who they are, what has happened to them, and what mind-control is all about, they will likely go into denial and leave therapy.

If the programming is not worked on, and dismantled, it will torment the person until they are too beat down and too tormented & intimidated to continue. If the victim is not given positives and positive reasons to live, if they do not experience love, they will not value themselves, and will not be motivated to work through the horrendous work that must be done. They need to have positive worthwhile goals to work toward. This book is not the final word on this subject. This book will give the reader the most indepth look into the therapy of trauma-based mind-control to date.

There are only a few therapists who have worked with PDEs. These are dangerous, & it is hard to present the successful techniques on how to break the deeper programming without giving the other side the knowledge on how to prevent such therapeutic work. May God grant the strength & courage you need.

## ACCESSING

Before the support team and the victim can work on accessing issues, they need to understand HOW a mind-control slave can be accessed. Allow us to give a summary of some of the more usual methods of accessing, that is making contact with a mind-control slave. (In fact almost all of these were standard methods used on the author.):

**MEDIA:** access codes/colors/story schemes/pictures in the newspapers, television, Christian television, ads, radio, and news events that are broadcast in all fashions.

**PERSON TO PERSON:** Eye winks, eye blinks, hand signals, body gestures, clothing, colors, words, karaoke song selections sung, other victims of mind control, taps such as 3 taps, and the arrival of particular persons, one's children, one's boss, one's relatives.

**TECHNOLOGICAL:** Sounds in morse code, break lights done in code, head light flashes, gunshots in area such as 3 gunshots, blank telephone calls, recorded messages left on answering machine, telephone tones, late calls from master, airplanes flying certain patterns in area, helicopters flying certain patterns, and lights on helicopters.

**ITEMS:** Keys, business cards, certain tokens or certain bills, letters such as chain letters, colors on cars, statues at sites, signs, houses, and colors on houses, buttons.

SPIRITUAL: Astral projection, telepathy.

(Students can refer to our other books for more information on accessing methods and codes.)

As the casual reader of the above will realize, it is almost impossible for a victim of mind-control to be isolated from being accessed. This is why it is essential to remove the victim from their ordinary environment and get them to a safe place where they are secure and can be worked with, without interference. Up to now, only a handful of victims in history have ever received this, and then only temporarily.

Because it is so difficult to isolate the victim from everything that might be a code, a few knowledgeable sincere therapists have resorted to desensitizing the codes, and putting safety mechanisms that cause the victim to get angry if someone tries to access them, and allows them to block out the codes. However, this is only part of the answer, because if they physically get a hold of an ex-victim, they can traumatize that part of the mind that is resisting the codes and destroy it so that they break the safety mechanisms.

The first step in desensitizing the codes is to look at them with the alters, to go over it consciously and know that it is a trigger. Once the conscious mind knows something is a trigger, it is harder for it to work. Most of the triggers, codes and cues work at the subconscious (or unconscious mind). I write unconscious—because they hit the mind at a very deep level. These codes are not something sitting close to the front of the mind. A skilled victim that is undergoing therapy, may want to play along with the abusers so that the Illuminati do not have a clear idea of where the system is rather than bucking the system cold

turkey. Again each situation for each victim is unique & calls for some clever responses. Running from the abusers rather than confronting them when they publicly try to secretly access the victim may send the wrong signal that the victim fears the abusers. The abusers love to see fear; fear only encourages them. Hopefully, the support team can develop their own strategies, without us having to spell it all out, & then having someone mechanically “do it by the book.” As a final note, we encourage readers who want to understand the subject of accessing better to review various related parts in our books. For instance, there is also some information in our twinning article that might be helpful.

## BOUNDARIES & ROLES

Because the therapists speak a special language, and are recognized as experts, they have exercised a monopoly on providing information on mind-control. People want to believe that the experts have answers, and therapists have played the part. The public may have underestimated how much they have wanted their image of their therapists to be true, and how reluctant they are to admit the shortcomings of their experts. We are calling for a re-evaluation of the treatment of programmed multiples, and suggesting the formation of support teams to assist programmed multiples in gaining their freedom from mind-control.

Dr. Frank Putnam, one of the most famous psychiatrists who is recognized as an expert by the psychiatric community and who worked as part of the DSM-IV Work Group on Dissociative Disorders, wrote in his book *Diagnosis & Treatment of Multiple Personality Disorder*, (1989, pp. 133-134) “Very few of us have had any formal training in the diagnosis and treatment of MPD. Although

some therapists become ‘instant experts’ upon seeing their first case, most feel that they do not have the skills necessary to treat these patients.”

While having self-doubts about their abilities, the professional therapists have been very resistant to admitting to non-professionals their shortcomings. For instance, in 1995, one of the leading professionals told our co-author, who wanted to share the material of our Vol. 2 and this book with the therapeutic community that “you have absolutely nothing to teach us.” Maybe a good place for all of us to start is with humility and a spirit of teachableness.

It is probably safe to assume that if you are reading this book, you already have the desire to learn. We believe that the climate for learning has changed, and that the initial frosty reception that our material received many years ago will not be repeated by those who are sincerely interested in helping victims. This section contains some valuable suggestions on how to begin working with a programmed multiple. Some therapists/ministers are under the misconception that they do not have to work with “alter personalities” to help these victims of mind-control. What they do not comprehend is that the person they know and see (who is the host alter) IS also only an alter. They generally work under the misperception that the host personality IS the person, and that other alters are “the alters” (which these misguided therapists/ministers perceive as “the problem”). So rather than work with any alters, they work with the host alter. Their misperception, which leads to such unwitting contradictory behavior on the therapists’ part, would be hilariously funny, if it were not for the gravity of the situation.

Host alters can be extremely resistant in admitting that they are multiples. In fact, rather than argue and debate the issue with host alters, skilled therapists come in the back door, by simply relating matter of fact, what all the other alters have been doing during therapy. The accumulation of evidence over a long period of time will eventually convince the host alter through the back door that they are part of a multiple system. On the flip side, many less visible alters may carry anger toward the host for the host alter's denial of their existence. Do not expect straightforward evidence of a transcript of a session where several alters of a multiple appear, or a camcorder tape of a session showing different alters to automatically convince a host alter that he/or she is a multiple. Host alters will often study the available literature about DID (MPD), and will often challenge the therapist to debates to prove to the therapist that they are not a multiple.

Even though the therapist has witnessed the multiplicity, it will be hard to "prove" anything to the doubting host alter. Remember the doubting philosopher who after long thought finally realized "I think, therefore I am"-if a person is emotionally invested in doubting something, the mind has an amazing ability to think up reasons to doubt obvious facts. The support team for a multiple will need to be skilled in getting the multiple to see things via "back door" techniques rather than head-on debates. It is a traditional therapeutic practice to establish contracts with Multiple Systems. Generally, therapists attempt to establish a contract with as many alters as possible. They will endeavor to explain in the language that the child alters understand what is being agreed upon when a contract is negotiated between the child alter and the therapist.

The primary area that the therapist is concerned with is "hurt" by the Multiple to anyone else or the Multiple

System's own body. The American Psychiatric Association's contract reads at one point, "I will not hurt or kill myself or hurt or kill anyone else, internal or external, on purpose or accidentally, now or in the future." The other major area of concern is setting limits regarding the treatment.

Traditionally, the therapists have limited the client's time to their help, the number of phone calls they are allowed to make, etc. This works fine for the therapists. However, the therapeutic community is in denial or under its own delusions that it is making significant progress with the programmed multiples that are coming in for therapy. By and large, the therapists are simply working with the front worlds of very deep and complex systems of alters. The cults are continuing their use of essentially all slaves that are undergoing therapy today. The time has come to turn that situation around and get genuine help for these suffering slaves.

The therapist will become the parent image for a mind-control victim's alters. Is this good or bad? Should the therapist fight this transference issue? Please understand the dynamics. 99% of the alters in an Illuminati system are child alters. Granted, that some professionals report working with alter systems that they claim are 100% adults, but this only shows the limits of their understanding of their client's alter system.

These child alters have NEVER had a parent. They have had cult figures who oversaw their mind-control. They have had big giant adults in their life who have manipulated and used them, but they have not had a genuine parent. The therapist can and needs to perform the role of a loving parent for these child alters so they can grow to maturity. The intense desire of many therapists/ministers to integrate all alters again shows their limited understanding of the situation. Hopefully this book (along with our other

books), by providing the details of what is going on, will encourage relatives and outsiders to have more patience with therapists who are not coming up with instant microwave-speed answers.

Most of the heavy programming traumas are done to the victim when they were a child. Obviously, thousands of dissociated pieces of the mind which have had no chance to experience life day-to-day as the host alter(s) has, have had no chance to grow up. Integration of an entire system of child alters who have not grown up is only asking for problems. Integration of the real core with child alters is asking for problems. The overall situation that trauma-based mind-control places the victim and therapist in, is extremely complex and difficult. The victim will transfer their feelings for their abusers to the therapist and support team. What else can they do? As past traumas are uncovered, the victim may even hallucinate during a drug memory abreaction and see the therapist as the programmer.

The therapist may say or wear things that also trigger transference. Depending upon how the various alters handled abuse, may determine how the different alters then act when they perceive the therapist as another abusive person. Again, this presents another reason why support teams are worthwhile.

Traditionally, therapists have set spoken and unspoken limits to the time they will give the victim. Therapists have limited time in two ways, one is the amount of time per week, and the other is the length of treatment that the therapist will devote to the victim before dropping him/her as a client. If the client perceives that the overall treatment time is limited, they will not raise the deeper issues. Because most clients with mind-control only see their



therapists for short periods of time, they also can get by with letting the therapist only work on surface issues.

After having interacted with numerous mind-control victims and therapists, the authors of this book have seen firsthand that most therapists do not see a clear picture of what they are dealing with DURING THE THERAPY TIME. Putnam admits in his book *Diagnosis & Treatment of Multiple Personality Disorder*, (1989, p. 149), "I have discovered, much to my chagrin, that many of my patients are very different out in the world than they appear in my office." In fact, the real secret sides of their clients are far more profoundly shocking than most therapists up to now have been willing to imagine. The therapists encourage the superficial approach mentioned above, because many of the best professional therapists will not deal with anything except the issues that the host or presenting alter brings up in the therapy session.

In other words, many professional therapists REFUSE to guide the therapy. The client is then double-binded. The client is somehow supposed to know the issues that they are programmed not to know. It's a "patient-diagnose-and-heal-yourself approach". Amazing results do occur, because the mind doesn't want to face its problems. The mind comes up with superficial solutions, declares itself better and moves on. (Unfortunately, the mind-control continues, only now it is simply better hidden.)

A great deal has been written about how clients sabotage therapy and double-bind their therapists. The books that have covered this subject have not even begun to cover this subject. Books could be written about this. But an even less understood problem, is how the traditional therapeutic methods double-bind the client. The traditional

therapeutic/& ministerial methods are double-binding the clients from escaping the mind-control.

For instance within the Christian deliverance approach, if a client fails to get an instant miraculous healing during a deliverance, then they are told they lack faith, and they are told that without faith they cannot heal. In other words, they must deny the problem if they want the solution. Are the therapists (or support teams) willing to put as much effort & attention into the victim as the Illuminati or other programming cult? Except for minor exceptions, therapists have NOT been willing to spend the same amount of time as the cult spends.

The Illuminati have Grande Dames that continue ongoing guidance for the adult slaves. They also are willing to have their best programmers fly in from Europe and other locations to reprogram a slave with the best equipment and technology available. The commitment level by the Illuminati to their slaves has up to now been many times greater than any of the professionals. Don't kid yourself that the slaves don't recognize this. That is why only superficial issues are being dealt with. That is why so many slaves appear to be getting better from the professionals, but the professionals are not being eliminated from practicing.

The original Mother-of-darkness who works as a programming assistant with the head male programmer is putting in trees internally that are designed to last for the entire life of the slave. That's a long term commitment on the part of the programmers and their programming. The fruit (programs) that are placed upon the trees (which are used as programming file systems), are to last the life of the slave. The slave knows that the fruit has been given his internal worlds for his lifetime.

An example of a healthy productive role the therapist can take would be the following: The therapist assures the mind-control victim that they will have as much commitment to examining and taking off the fruit, as the other side has of keeping the fruit in place. The victim doesn't know what the issues are, so the therapist uses the back-door approach to let the victim learn about themselves. The therapist asks, "What do you think about trees? Would you spend the next week(s) drawing trees, talking to me about trees, and going out and talking to trees. Please journal what you talk to the trees about." The client may come back and say, "Trees are very important to me. I don't want to talk to anyone about trees. Trees are very sacred to me, and they are deeply rooted in my mind, I am their caretaker?" Then the therapist continues the backdoor exploration, "What do you mean you are their caretaker?" Eventually, the mind begins to unravel. The journaling can be an important vehicle to track the unravelling of the mind.

Due to the heavy infiltration within the therapeutic community, some disinformation has been assimilated into the beliefs of therapists. One of these is that victims of mind control (who they call "survivors") shouldn't spend time together. Actually victims are able to understand each other and trigger important information. They can be very helpful to each other, once the host alter has done some basic stabilizing.

Another myth that the therapists hold to, is that the therapist will be perceived as a benevolent caretaker by the victim and the Illuminati will be perceived as abusers. Generally, it is quite the opposite. The Illuminati have the ability to give pain, but they have the ability to take it away. The therapist has the ability to give pain, but seldom the ability nor the time to take the pain away. There often is

little closure to the mess therapists start, and most victims are very silent about the struggles they go through, in part because they blame themselves for problems. The master or handler is generally seen as a benevolent dictator, a wonderful god, and a friend all rolled up into one. The therapist, in order to maintain their aloof therapeutic role, does not want to be a friend to the victim. They like to stay emotionally distant, perhaps puffing on their pipe. The therapists are still missing an obvious given, which is that most multiple personalities have parents who are multiples.

## COMMUNICATIONS ISSUES

Communication issues come in all shapes and sizes. The first that must be dealt with, and which will never fade away, are the issues between the victim and their therapist. The victim and therapist do not start this marathon to communicate at the starting point. They must work hard just to get to where most people begin. This is because the victim has been betrayed by every important person in their life. Trust is the foundation for communication, and before the therapist can establish a shaky trust in the victim's mind, little deep communication will occur. The victim must establish internal communication lines. This is equivalent to trying to get a city of people to all like and talk to each other. The answers to how a multiple can communicate with so many diverse people should be used to help society at large. The same answers that multiples have been discovering for their internal work, could help society at large.

Along with developing better internal communication is the task of developing common goals and learning how to control a system's internal switching. Common goals and control over one's switching are major positive steps. Initially, an alter system will not have these. To develop

cooperation in switching will also relieve some of the tension that comes from alters competing for the body.

The next area of communication problems is in the area of what alters present themselves when the therapist wants to work, and which alters does the therapist work with. The temptation is to get rid of troublemaking alters, but sometimes the troublemaking alters are the ones the therapists really needs to work with. The standard hour-long therapeutic session does not promote communication with an alter session. Traditionally, alters will appear as the session is closing, perhaps subconsciously hoping that their important appearance will force the therapist to extend the therapy time. Many therapists stick to their time schedules, and simply advise the alter to appear at the next session.

Many opportunities to develop lines of communication are lost due to the limitations of the traditional one hour session. Many alters only show up at special occasions, so a support person who is around the system for long periods of time is in a strategic position to really facilitate some good communication developing. The programmed multiple's system will almost overwhelm the therapist when they find out that they have a listening ear. The therapist will have an entire city of people wanting to give their opinions and to voice their concerns. The needs of the alter system are so great, that it is no wonder that many therapists have terminated their clients because they feel overwhelmed at the system's need to be heard. What is breaking is a dam that has held back in silence decades of severe abuse. In the best interest of the overwhelmed therapist and the overwhelmed victim, we suggest support teams deal with programmed multiples, because the issues really demand that much help.

DENIAL, how to deal with the therapists or ministers

A popular question with ministers who have not worked in the area of programmed DID's is, "Why doesn't God have an instant miracle for these people?" There are many parts to the answer, but before getting into the answer, perhaps these ministers should ask Almighty God why he has not chosen simplistic answers to so many things in life. If a room full of smokers are prayed for by any minister, how many will no longer be smoking in a month's time? Smoking is a trivial mild addiction compared to the programmed of a complex programmed multiple. Those ministers who ask this question need to ask themselves if God is so powerful and they know how to pray, why haven't they themselves cleared out this nation's hospitals.

The traumas that have put people in hospitals are generally mild compared to the programming traumas. While most licensed therapists are in denial that the systematic programming of thousands of infants is going on in this nation, and that SRA exists, if they look at history every element of the programming has been carried out and historically documented. Should we automatically dismiss any suggestion that those in authority may occasionally conspire to obfuscate the truth?

Consider this, most people can barely make it through the day at work without engaging in what are effectively low grade conspiracies. Perhaps they tacitly agree with another coworker not to report the co-workers misbehavior to the boss. So why should we expect things to be different in the corridors of power? (addresses and locations) and think to ourselves how many millions of people are practicing witchcraft today-doesn't it seem incredible that the FBI doesn't believe any of these witches are capable of killing someone for their religious beliefs. Christians, Moslems, and Jews are capable of killing for their religious beliefs,

but somehow the FBI thinks witches are incapable? Doesn't that smack of a cover-up?

The victim doesn't have time to deal with bull-headed counselors who are in denial. The denial could be a sign that the therapist are mixed up in the world-wide satanic conspiracy him or herself. The victim should not try to convince the therapist about what is happening, the victim should find a listening ear, and take their needs for help somewhere where they will get real attention. Every major and most minor religious group in history have had members that have killed other humans. And yet the FBI officially claims that SRA doesn't exist. If we look at the list of thousands of covens (and our co-author Fritz has many of their

#### DEPRESSION (initial client complaint)

Depression is mentioned, because the original complaint of many victims of total mind-control is a depression that they can't figure out. Depression comes in different types. What the therapist wants to identify is a. what kind of depression is occurring and b. what are the causes of the depression and c. what kind of treatment modalities can be applied.

Often depression will be experienced as a feeling of defeat, or a feeling of a loss, or a feeling of no hope. Sometimes depression is a symptom of programming going off of a total mind-controlled slave. If this is the case, unless the client is well into therapy for his or her DID (MPD), the client will rarely have a clue about the real source. Some drugs have the effect or side-effect of causing depression. These include codeine, high-blood pressure medicines, indomethacin, steroids, and tranquilizers. The client should mention what medicine they are taking, and the side-effects of these noticed.

Sometimes clients with depression can get involved in physical activities and get involved with others and this will clear up a depression. Sometimes clients can determine the underlying spiritual problems and significantly help their depression by working on root spiritual problems or doing a deliverance. A few proper questions will soon discover if there are root spiritual problems causing the depression.

If the person had a breakdown of communication with their parents, this will eventually, if not corrected, lead to open rebellion, and then several steps later this will lead to a suicidal depression. The original sequence of events was created by the lack of trustworthy communication by the person's parents and needs to be addressed at that level to pull it out by the roots.

Sometimes depression is simply a reaction to a sad event. This is not likely to cause someone to come to a therapist, but such a triggering event should be ruled out if other causes are to be treated. One of the most effective ways of dealing with depression is to realize how it is a lack of faith and a selfish self-focus and a sin toward God, who will provide just what we need in life. If the client is open to seeing that depression is a sin, then this sin can be confessed, and all spirits attached to it delivered from the person.

If the client is a total mind-controlled slave, the front alters may get some relief from such a miniature deliverance, but will still need to address the deeper problems. The therapist can administer to the client a dissociation test, to determine if the client may have been a candidate for total mind-control. If the client tests positive, then the therapist will need to do follow up work. Causes for this depression may be very deep rooted & take some serious long term investigation and work. The therapist can also serve in the



role of listener. If the client gets some of his pent-up emotions & problems out, he may feel some relief. If the client sees that someone cares, that can also have a positive effect. The client can also be encouraged to talk about the situation to another trusted person. The therapist will want to find out what kind of support system (team) can be used to help the client.

picture depression.jpg

## DETECTION OF MIND-CONTROL

The therapist, the victim and others have several avenues they can use to detect mind-control. One avenue in diagnosing mind-control which has not been touched upon by the professional psychiatric literature is to look at the subject's role in life. The reason that the professional literature is unable to discuss this avenue, is because the professionals have had very little understanding about how the World Order is constructed and ran. In fact we were thankful that God brought into our life, one of the few outsiders that had a grasp of how the Illuminati controls the world.

An understanding of how the Illuminati uses front organizations, what those organizations are, how they interlock, and how control over the various sectors of life is managed by the Illuminati would greatly help therapists identify people who have to be Illuminati members. It is an extremely high chance that Illuminati members are multiples, and an even higher chance that they are under some form of mind-control. Even John DuPont, who recently was head of the DuPont family, was plagued by implants.

To identify people under mind-control see if they are people with specialized training. Next, identify if they are in a

highly structured job, where there is no room for grey—everything is black or white. Multiples do very well in positions that call for black or white, structured thinking. Look for educators in principal positions, reform schools, catholic and military schools, boy and girl schools. These are places that the Illuminati control in order to use them for auxiliary programming centers.

Many of your porn stars, some of your movie actors, almost all of your brain surgeons, some of your CPAs, many of your politicians, all of your C I A field agents, and most of your religious leaders are under trauma-based mind-control. If you actually have the subject come in for an interview, ask questions about the person's personal history. The host alters of multiples have some very typical methods of handling personal history questions. Don't expect the host to make it easy for you to determine that they are a multiple. What you can expect is that you will have a difficult time with most multiples of getting a coherent history of their life. You may discover contradictory information in what they tell you.

For instance, one multiple that we interviewed said his father was a. a nazi submarine captain, b. a jewish scientist that worked on the Montauk project from 1941 onwards. The information was obviously contradictory and contradicted what his ex-wife said about his father. The personal history contradictions of many multiples won't be this dramatic, but they might be.

When the host personality remembers the details of their life they may say, "they tell me that... Frequently, a person won't remember if a detail happened before or after another event in their childhood. If you find chronological problems and frequent inconsistencies, then you can highly suspect DID. But you must continue. The MPD really is

apparent, when there are lots of specific differences between the therapist and the subject in how they remember what the client has said. The different episodes are hard for the multiple to remember although they are confident of their perception of the event. The dissociative thinking makes it very difficult for the multiple to see the differences, and they will be very convinced that the therapist is trying to deceive them. The experience can be frustrating for both parties, but it is one more red flag that indicates that mind-control is likely present.

Multiples will frequently explain their lack of detailed memories on having a “poor memory”. They will often say, “I don’t remember”, which is truthful, and is better than the occasional situation where some multiples try to invent something to say to hide their lack of personal information, or to placate the wishes of the interviewer. They are also great at saying nothing but sounding like they have said something, and another trick multiples have is saying something that appears to be one thing but is another. Some multiples have figured out their multiplicity, but are secret about it, in fear that others will think that they are crazy.

Over the years, probably many more times than not the professional psychiatrists and psychologists have misdiagnosed MPD. Some of their favorite disorders to use when misdiagnosing are: Adjustment, Affective, Anxiety, Bi-Polar Affective, Borderline, Drug Abuse, Eating, Histrionic, Organic Mental, Paranoid Schizophrenia, PTS, Psychosis, Schizoaffective, Somatization, and Transient Amnesia.

When multiples takes an M M P I, they have historically answered the same way a schizophrenic answers on items 156 & 251. (At least 3 studies have documented this.) These two questions elevate the Sc scale which has been

taken to indicate schizophrenia. Some of the tipoffs that a person is misdiagnosed in a mental hospital is that they interact a lot with the staff, but have erratic behavior, that generally leads to the staff being upset. They may be responsible for a while and then surprise everyone by not being able to function or handle a responsibility.

Typical questions that help the therapist expose the programmed DID include questions about whether their school grades were erratic, whether they have gaps in their memories of school days, if they remember getting test results on tests that they don't remember taking, and a grade-by-grade year-by-year history of their life. Bear in mind, that the programmers are trying to fine-tune the programming by layering in cover memories. Still an experienced therapist should be able to see through the shallowness and the confusion of cover memories.

Mind-control comes in many appearances. With the more recent victims, implants are being used to distract victims from realizing their D I D (M P D). The detection of M P D (D I D) underneath the incessant manipulations and voices of the implants is a challenge. The "noise" created by the implants is a strong dissociating mechanism.

There are strong natural defenses of the mind that the programmers count on to keep the mind-control hidden. For instance, the victim has been bonded to the programmer/master. To admit mind-control is to experience abandonment, and even death (because many alters' self-identity is wrapped up with the perpetrator.) It is not easy to kill oneself, which is often the mind's perception of what admitting mind-control is.

Detection of trauma-based mind-control by the therapist will usually encounter strong denial mechanisms by the

victim. The therapist should ask about flashbacks. If the client reports flashbacks that are not drug-related flashbacks that is a good sign that MPD may be present. However, most flashbacks do not begin surfacing until the programming and dissociation begins crumbling. Some undetected adult victims of mind-control, when they are having sex with their spouses get intrusive flashbacks and images that scare them. This is another red-flag that the person may be a victim of mind-control.

Victims of mind-control will often have all kinds of issues around relationships and sex. Another red flag is when a person reports abilities or information that they have no idea where it has come from. For instance, all of a sudden one day they could understand someone speaking German, or all of a sudden they got the words to a song, or all of a sudden they just intuitively knew how to play a piano, etc.

The opposite of this also hits D I D mind-control victims. They may have an ability that somehow strangely disappears. It takes time to realize that these are co-conscious alters. Victims of mind-control have great survival mechanisms. They are experts at changing the conversation to hide what they don't want to talk about. If the therapist has the skill at being gently but firmly assertive in getting what they want, the ability to be gently persistent can pay off.

The therapist needs to become acquainted with detecting alter switches. This involves eye shape changes, eye color changes, eye movement changes, blinks, body posture changes, voice pitch changes, word usage changes, perception and value changes, mood changes, etc. Upon detection of this, the therapist may gently ask, "Do you ever feel that there is another part of yourself that comes out and does things that you would not do?" "Do you ever

feel that when you are alone, someone else or some other part of you is watching you?" Any answer except a definite "no" is a red flag, that reconfirms the switching clues, and other clues that the therapist has assembled. Not all victims of mind-control have extensive alter systems. In our previous books, we have covered situations when this does not occur.

Another way that therapists can determine mind-control would be to interview people close to the victim, and to visit the victim's work place and home. Some victims of mind-control surround themselves with objects that pertain to their programming. For instance, the therapist may find a man who has a passion for Mickey Mouse objects, or a woman who loves white rabbit figurines or star trek objects.

EATING DISORDERS (as an Initial problem, and as a Deeper Issue)

## AN INTRODUCTION

Eating disorders exhibit themselves as initial problems for victims coming in for therapy. For instance, they may find themselves having an irresistible urge to overeating followed by vomiting or purging, or they may be starving themselves, or have phobias around certain foods.

Eating disorders also may develop as problems as the system of alters work through their memories and programming. These eating problems do have the possibility of becoming life-threatening. Many victims of mind-control suffer from eating disorders. There are certainly many factors which cause mind-control victims eating disorders. The more difficult disorders which resist treatment are often created by multiple factors. This

section will make an attempt to provide the therapist some of important factors behind eating disorders of mind-control victims.

Eating disorders are not limited to victims of mind-control. However, many individuals who are referred or on their own come in to therapists for bulimia or anorexia, are actually suffering from the severe effects of trauma-based total mind-control. For some therapists, the first primary complaint of mind-control victims will be their eating disorder. They will be totally oblivious that anything else could be wrong. Researchers who like to work with statistics have noticed that there is a high incidence of people with eating disorders who have problems with abuse, depression, and self-identity. Since mind-control will bring with it abuse, depression and self-identity problems it is a given that the mind-control victim will have some eating problems at some level of their being.

Modern American culture as well as many of the slave handlers are obsessed with females being thin. The pressure that females feel from society and their handlers that they are “a dog” unless they....” makes many slaves identify thinness with overcoming their self-esteem problems. Unfortunately, if the host pursues starvation thinking that it will overcome low-self esteem, they almost always are disappointed that it doesn't help, and if anything, starvation, only exacerbates the original low self-esteem. On the flip side, in order for the host alter to feel that she has some control over just one thing in her life, she may resort to starving herself to regain some sense of power over her own body.

When striving for freedom, the mind may think that starvation gives at least a fraction of power over their body, after it has been stripped of choice, beaten, and raped, and

electroshocked. One reason why some bulimics and anorexics have eating disorders is that they have difficulty identifying their feelings, and have little confidence in their ability in relationships. They feel they must do the right thing to avoid disapproval and rejection. They have an artificial idealized image of what they should be. For instance, one teenage girl was frightened that she was changing from a girl to a woman. Others due to their abuse have a hatred of their body, as well as a fear. There are some young altars that may not want to have breasts and hips. Another person felt that they were naughty if they ate, and she became increasingly disgusted with herself as she ate.

#### WHEN MIND-CONTROL VICTIMS WITH EATING DISORDERS FIRST COME IN CONTACT WITH THERAPISTS

One way victims come in to therapy is that they are referred by someone for their eating disorder. Anyone who gets a referral should explain clearly why the person is in for a consultation. If the client is living at home, it goes almost without saying that the support team should explore with the client the possibility of someone supportive from the family participating in the consultation phase of things, so that a more complete evaluation can be obtained.

Another frequent scenario is when a female mind-control victim is raped during the normal course of life and it triggers their mind to remember previous sexual trauma. This may kick off an eating disorder, which may drive the person to come in for therapy. Because the problem is not really an eating disorder, the person doesn't have a clue as to what they are stepping into by asking for therapy.



If someone is trying to trick a person into coming in for treatment, experience shows the tricking will quite consistently backfire in the long run. Rather, than scheming behind the victim's back, the therapist should see if there are good support groups in the area. After the victim or the victim & their family experience a support group, they are often more willing to come into therapy. Depending on the situation, getting the victim in to work on their eating disorder may even be perceived by the slave's handler as a positive, rather than a threat to his control, because it may be helping to stabilize a problem within the slave. The patient with an eating disorder is often going to be resistant, embarrassed, and apprehensive. The therapist can establish rapport by being warm, acceptable, honest, empathetic, and interested. Different people will click with different therapists, for instance, teenage girls often prefer female therapists.

This is where teams are beneficial, where one person can act more as a consultant, which the therapist who has rapport can deal with the person on a longer basis. (Therapists can establish rapport by using the language of the person, mirroring where they are at, etc.) If the therapist is going to try dealing with only the eating disorder, there are several approaches that can be taken. However, whichever path the therapist goes down, it would be advisable to gather an understanding of what is going on. Whether it is bulimia or anorexia, the therapist will ask the person to describe their eating patterns both during the week and the weekend.

There are ways to get information from people which use the "back-door" so-to-speak. For instance, if the person has been referred for binge eating but won't openly discuss it, the therapist might ask, "When people go on a diet to lose weight, they sometimes feel so hungry that they are

tempted to eat a whole lot. Have you experienced that?" If the person is not forthcoming about vomiting, a gentle back-door approach might be, "Have you ever tried to lose weight by any other means?" It is important to track the details around the episodes—such as how often, when, the most common times they occur, how long they last and the types and amounts of food eaten. It is also important to note what thoughts and feelings were attached to the various episodes. Don't be surprised if the person doesn't say, "I don't know why I did it."

The therapist can ask, "How do you view that particular food?" It could be that the cool-aid triggers the mind to think of blood. It could be that raw meat triggers the person's mind to think of sacrifices. It could be that certain smells relate to certain traumas. Vomiting may have a cleansing effect on the mind of person coming in for therapy.

The therapist may also ask the person about their thoughts and feelings related to sex, and whether they are interested in sex. This may provide some significant clues as to what one is really dealing with.

What is the image of the person concerning her or his body? Later, as one deals with more than the host personality, this will continue to be an issue. With initial clients suffering mind-control, the therapist will need to ask the full range of questions, such as asking about symptoms of depression, low motivation, panic attacks, sleep problems, feelings of suicide and hopelessness, and feelings of being trapped or worthless. The full range of initial intake questions will need to be dealt with such as levels of dissociation, compulsive behaviors, addictions, psychotic thoughts, etc. Therapists can save time if they want by using some of the standard evaluations that other

professionals have developed for interviews. For eating disorders there are for instance:

· Garner & Garfunkel's Eating Attitudes Test, · Johnson's Diagnostic Survey for Eating Disorders · Structure Clinical Interview according to the DSM's section on eating disorders. Therapists may also want to use such interviews as · Diagnostic Interview Schedule for Children by Costello et. al. · Beck's Depression Inventory

It almost goes without saying that Eating Disorders come from a complex array of factors, including such possible problems like structural brain illness, an infection, or endocrine malfunction. It is not possible for this book to provide detailed information on these other possible causes. The therapist needs to get a feel for what is happening, for what the therapist is qualified to do, and if need be, get the client to someone who specializes in what the client needs help in. What this section can help with is in providing insights into eating disorders as they relate to mind-control victims, and their programming, their programming-traumas, memories, and the general side-effects of a life-time of abuse.

