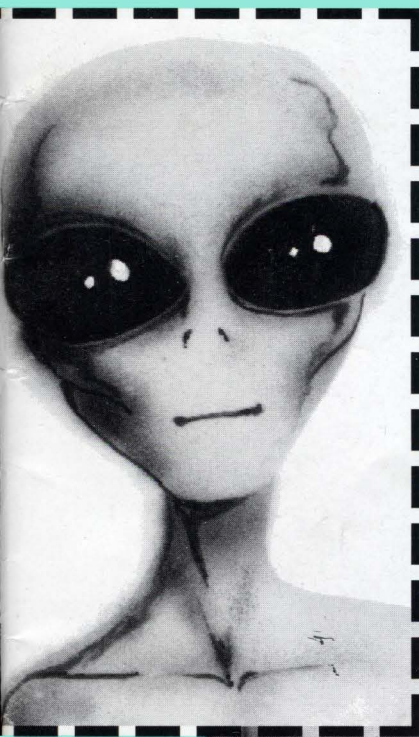


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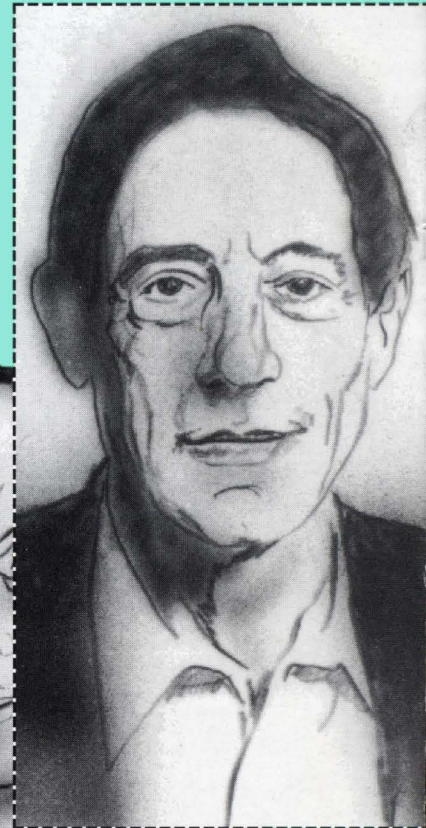
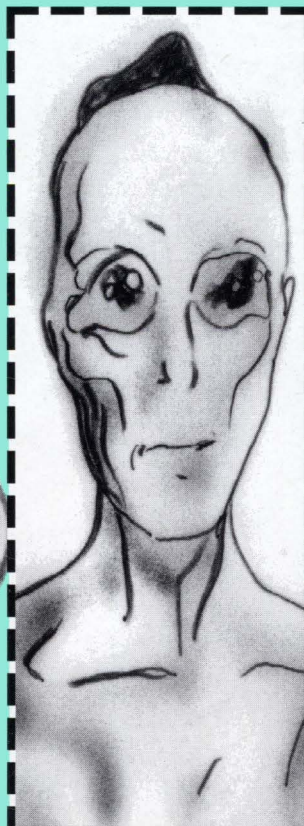
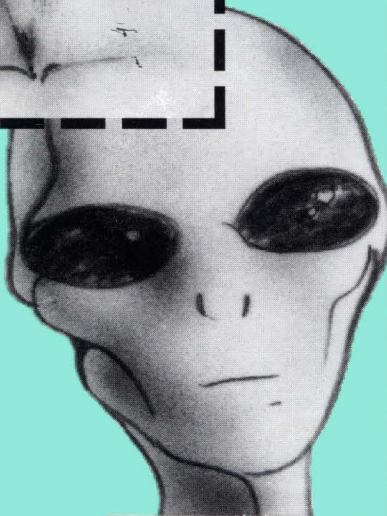
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TRANSFORMING 'CONSCIOUSNESS':

How Dr. John Mack is Changing The Face of Abduction Research



PLUS:
Psychologists Sound Off
Hypnosis Deconstructed
New Roswell Witness



Explaining The 'Consciousness' Perspective

Q&A: JOHN MACK, M.D. by Richard Cutting

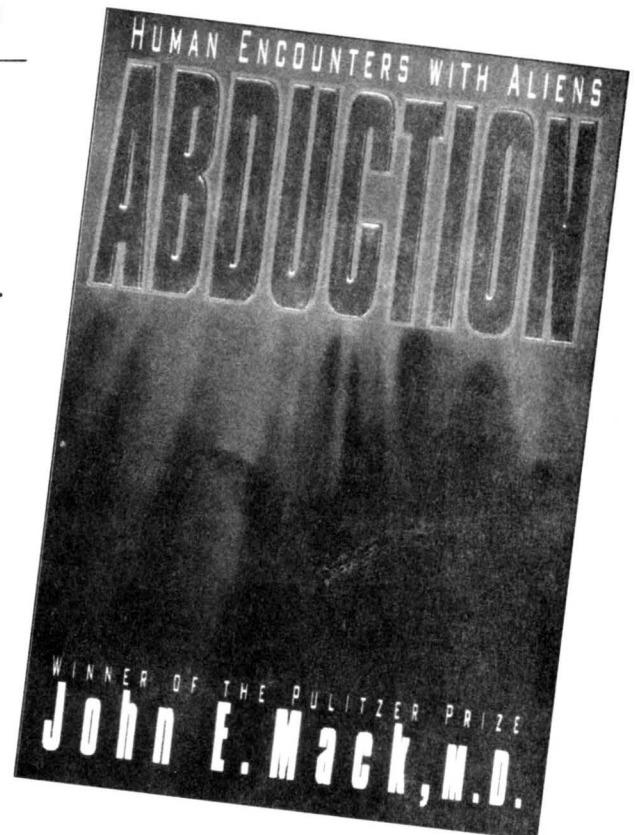
*It would be hard to find a humanist psychiatrist with more impressive credentials than Dr. John Mack. Besides his rank at Harvard's Cambridge Hospital, he is a founding director of the Center for Psychological Studies in the Nuclear Age, now named Center for Psychology and Social Change—a leader in exploring the dynamics of the "us vs. them" mentality. Long before **Abduction**, Dr. Mack authored the classic **Nightmares and Human Conflict** and of course the Pulitzer-winning **A Prince of Our Disorder**. In his career, he's dared to go where few other doctors of his stature would, at one time serving on EST's board of directors. He openly values Eastern spirituality and uses "transpersonal" approaches in his clinical work—this in an environment steeped in Freudian psychoanalysis. Many of his colleagues are puzzled, some suspicious. Now he's really got them going. Since his immersion in abduction research, a relentless press has followed Dr. Mack's every move. They gleefully—and Mack avers, not accurately—publicized an apparent "sting" by one of his clients, Donna Bassett, a woman who claims to have infiltrated Mack's clique of experiencers with outrageously false tales that Dr. Mack uncritically swallowed. (Through an assistant, Dr. Mack requested the chance to "clarify" the Bassett thing in the following interview.) Despite the slings and arrows, Dr. Mack continues his work. Last year, with money donated by C.B. Scott Jones' Human Potential Foundation, he founded Program for Extraordinary Experience Research (PEER), aimed squarely at alien abduction. Supplying the following questions, **UFO** sent writer Richard Cutting to meet with Dr. Mack at Cambridge Hospital.*

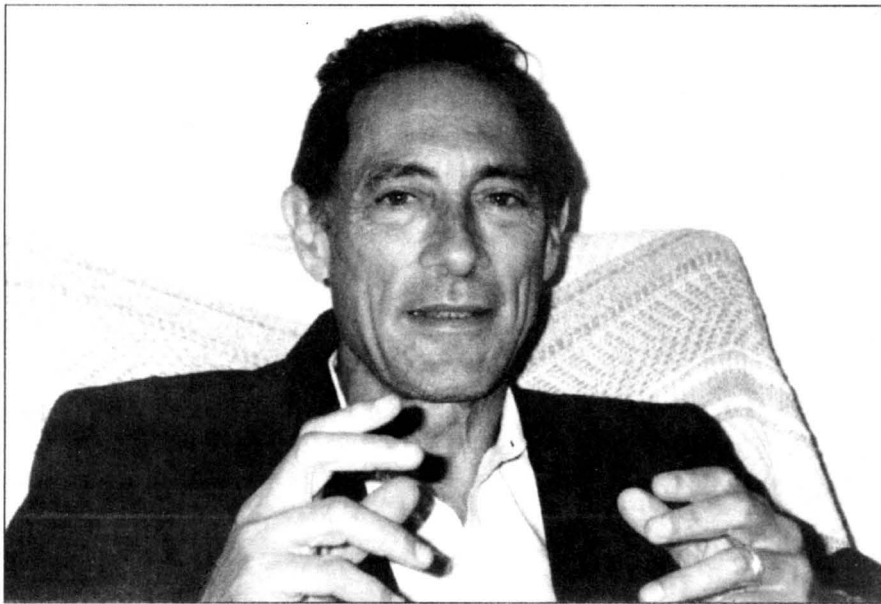
John Mack Interview, July 19, 1994

How many purported abductees have you worked with up until now?

I've seen 90 to 100 people who fulfill the criteria that I use to put somebody in the category of authentic abductee or experiencer, which are:

Does the person, with or without the use of an altered state, hypnosis, modified hypnosis, or relaxation exercise; experience contact with humanoid beings? And do these beings take them by some force into an enclosure and subject them to various procedures? And is this reported with emotion appropriate to what they are talking about, and is there no





TRUTH OR CARE—Dr. Mack says his 'co-creative' therapeutic process demands a degree of openness and receptivity to the material.

psychiatric condition, as far as I can see, to explain this?

Are all hypnotized?

Not all are hypnotically regressed. Nearly 60 of the people have done one to ten hypnosis or relaxation exercises. When I establish with somebody, in my own mind at least, that they're an abductee, there's a choice to be made. Do they want to go further in exploring the phenomenon? It has to do with my time and their availability and interest in going further. It's remarkable to me how many people do want to go further. They feel that a large part of their lives has been cut off from their awareness and they can't access it. Even though they know that the recovery of these experiences is going to be disturbing to them, the majority do want to go further.

What psychiatric/psychological tests have they been subject to?

Four of the people that I've seen have had a battery of tests by a Ph.D. psychologist. The full bat-

tery of psychological tests is very expensive and is not routinely done when you do a psychiatric work-up.

But I had four people tested, three of whom came out high-functional, healthy, normal range. One young man was quite troubled. His tests revealed psychological disturbances, although those disturbances did not explain his abduction experiences.

You have suggested that therapy for experiencers is, from your clinical standpoint, a co-creative process. Could you expound on this idea?

People who do work in this field, who do work with abductees, have differing ways of looking at the phenomenon. And they have very strong opinions about that. My sense is that there are many selective processes going on here. Who people turn to—will the person they meet with be receptive to their experiences? In order to gain the trust of abductees, you need to convey a sense of openness and be willing to listen to what they say and

make a connection with them.

This is not a matter of being like an instrument coldly or distantly, as subject examining a person as the object. You enter into a deep connection with that person and what that person brings forth is, in part, a product of what the facilitator can hear, or can tolerate to hear. The person will bring forth what they feel the psychological atmosphere in the interview will tolerate—which isn't to say that they say what the interviewer wants to hear. It's not that at all. It's misinterpreted that way. You don't lead the person. I don't get a sense they're trying to please me by what they come up with. On the contrary, people are very troubled to have had these experiences. It's troubling to have the experiences recalled, and it's also troubling to have the fact that they've had the experiences affirmed. In other words, they would prefer it not to be true, and often say they wish there was a pill to make it go away.

So what I mean by co-creative is that there has to be an openness and receptivity to the material, whatever it may be. It's striking that some investigators will get mainly the material about examinations and the hybrid project. I get that, but I also get a great deal about the destruction of the earth's ecology which is conveyed by the beings. And I get that in case after case. That may have to do not so much with my values necessarily, which I've been criticized for—everybody has ecological values—but it's that I, for some reason, have an openness to hear material which is more earth-related or more transcendent or ecological, spiritual, I don't know what to call it. There may be something in my consciousness which creates the possibility that those dimensions of the experience can be brought forth, whereas other investigators might not hear that material. In fact, they *don't* hear that material. I think that the receptivity of the

investigator has something to do with the material that's brought forth. But I want to stress that that doesn't mean that it's brought forth to please the interviewer. It means it can be heard.

What I mean by co-creative is that there is this connecting of two peoples' consciousnesses and that will affect what material the person brings forth.

It seems one of your messages to your colleagues and the general public concerns the need for a completely different paradigm in dealing with the alien abduction phenomenon. Can you please elaborate?

The most definitive distinction between the old and the new paradigm has to do with the relationship between our reality and what might be called the spirit world, the unseen world, the world behind the veil, parallel universe—there are all kinds of terms. In this culture, that realm has been the province of folklorists or students of comparative religion, anthropologists—it's been kept quite separate from science. What appears to be happening with the abduction phenomenon is that these beings,

the parallel universe, but they cross over and manifest in the physical world. They are not of one or the other. The Western Newtonian-Cartesian paradigm has no way to deal with that. And this gets into the methodologies. When you're dealing with the physical world *per se*, as though abductions were purely a phenomenon in the physical world and *only* in the material-physical world, then you would look primarily for evidence in the sensory empirical mode. Physical evidence that you could put your hands on, touch, smell, feel, bite, etc.

But with a phenomenon that crosses over between the unseen world, if that is what it is, then it may be that the ways we know, study and learn may have to change if the reality we're studying is different. So the paradigm change includes both the ontological and the epistemological shift.

As far as I can tell, this is such a phenomenon. It does seem to come from this other realm but it crosses over and manifests in the physical world and there are physical findings. So the methodology

then is not either-or. It can be both. My specialty is not as a physical scientist but as a psychiatrist-

psychologist. That's what I do. So I tended to play my strong suit, which is the assessment of mental states.

In the hundreds, getting to thousands, of hours that I've now spent with abductees, the phenomenon doesn't act like anything other



than actual experience. Which means it doesn't act like a form of mental illness. It would be much more individualized. These accounts are so consistent, down to the smallest details. It doesn't act like dream or fantasy, which are very individual, nor mass psychology or hysteria or psychosis because there's no mass phenomenon here, no contagion, no group phenomenon. Abductees tend to be quite separated from each other unless they are brought together in a support group or by becoming friends.

So that leaves only real experience. The next question then, is, is it any other kind of real experience? Like sexual trauma, or other kind of trauma. But it doesn't act like anything else. First of all, the experiences: the traumas are only one dimension of them. There are visions on the ships of ecological

entities, or whatever they are; seem to not respect that barrier.

These entities seem to belong in



destruction, there are journeys on the ships, around them, children and adults are shown different quarters of the ships sometimes.

There are conversations that go on telepathically between abductees and the alien beings that are quite complex and sometimes involve Zen-like cryptic messages; all of which are part of the whole phenomenon. So the intrusive procedures—being paralyzed and

evidence. I'm on most solid ground when I stay with the psychological evidence. This acts like a real experience that's not something else. Since this is a phenomenon which perhaps comes from another dimension, and enters into our physical world, and people are sometimes observed to be missing and physical things happen to them, it is important to gather physical evidence. I think the

'The phenomenon may help overcome some of the collective egocentrism of our species.'

taken against one's will, and the reproductive/sexual element—are the traumatic ones. But they are only some of the many other elements that occur as part of the whole phenomenon on the ships.

On the matter of sexual abuse, one thing that argues against this theory is that the majority of the experiencers have *not* been sexually abused. You can always say "Maybe you didn't go far enough. . ." and maybe they were sexual abuse victims anyway. But it was also clear in the cases where there *has* been sexual abuse—when they've had *both* experiences—the abductees are quite able to distinguish the dimensions of trauma that come from sexual abuse versus those which are alien-related. The most convincing argument is that some of these people are very solid, healthy, sometimes prominent, well-put-together people, who upon examination do not give evidence of having any other kind of trauma.

One is left with the only logical conclusion, as a psychiatrist—that it is what it is. That it isn't something else. That there appears to be an intrusion of some sort of intelligence into our world.

This gets back to the question of

physical evidence is important. My job, however, is to assess mental states. That's what I do.

Much criticism has been levelled at your research methodologies—which some have claimed fail to adhere to scientific standards. You in fact have stressed the need for a consistent, sound set of principles to apply to the phenomenon. What would those principles be, in a nutshell?

This phenomenon is so complex. There are so many potential disciplines. What I've stressed is what I know best—how to best evaluate these cases as a psychiatrist. The appropriate methodology for someone like me would be to use my psychological acuity and capacities to assess mental states and map out the terrain of this phenomenon by the case study method. Interviewing people and establishing that these are experiences that can't be explained by other psychiatric or psychosocial means. That has been the methodology.

Through PEER (Program for Extraordinary Experience Research), we are now embarking on a research project which will

hypothesize that careful psychological testing and questionnaires and eventually interviews will not come up with some pathology or dynamic explanation that could account for this phenomenon. I think that kind of formal research should be done, for sure.

In this early stage I believe that the methodology which I've used, which is a time honored one when you're trying to establish a new field in psychology and psychiatry, is to use narrative and case study method. To explore individual cases in some depth, and then see how they compare, how the phenomena repeat themselves and how that consistency is established. As a psychiatrist who knows the history of my field, I don't have any problems defending that methodology.

Now if the criticism is that I should have spent more time on the physical evidence, what I would say to that is that that's a whole field in itself. That should be done by physicians, who have been woefully neglectful, by the way, in taking it on. There are a few, like Richard Neal and John Miller and John Altschuler who have studied this and have described, appropriately, what they know best—according to their medical specialties.

Altschuler's a pathologist, and he's studied the pathology of people's lesions. Miller's an internist who knows surgery too, who has looked at the medical reports and the instruments that abductees report, and has shown that they are not the kinds of medical surgical instruments we use here on earth. I don't know of a dermatologist who's looked at these scoop marks, cuts, whatever.

But I'd point out that for me to take that on—taking pictures of little scoop marks and cuts and trying to demonstrate that there are these physical findings—I would be a ready target within the medical profession. Because a derma-

tologist, say, who doesn't know this field and doesn't know that this evidence ought to be used, in my view, *corroboratively*, to the psychological material I've been talking about; would simply say, "What is this? Someone stuck their fingernail in there and hurt themselves in the night. How can you establish this by itself?"

In my book I do summarize the physical findings, but I don't argue for them. I don't set myself up as being able to defend it as a physician on medical-surgical grounds. I make reference to it. People are so hasty, they don't stop to think. They say I'm too relaxed about the physical evidence. They don't consider that I have special problems as a physician in arguing for physical evidence that does not stand up by itself but is corroborative.

Now it's fine for Budd Hopkins, and people who are not psychiatrists or any other kind of physicians to be generalists and talk about the phenomenon; hybrids, skin lesions, missing pregnancies and one thing or another. And I have tremendous respect for their work. But I can't go around talking about these things with authority because one cannot establish that those medical-surgical reports are not caused by something else, or that the pregnancies are truly proven to be missing or caused by aliens. If I start, as a physician among physicians, talking about the cuts and scoop marks and getting serious about them, and start taking pictures of them and stuff, I would be very vulnerable.

But when I speak about my psychological findings among psychiatrists and psychologists, they're troubled because they know I know my stuff. They may have some theory in mind, say sexual abuse, before they go into the meetings—but when they hear the material, and particularly when they see the abductees, they have no alternative explanations.

I think the methodology I've

used is appropriate for a psychiatrist investigating a new phenomenon or syndrome. It should be followed up by more standardized tests. Although you wouldn't know what kind of standardized tests to give if you didn't know what the basic findings of the field were.

How has your involvement with alternative therapies and consciousness studies influenced your work with experiencers? For instance, how are you using your EST training and knowledge of holotropic breathing?

These modalities represent part of an effort to expand human self-knowledge and consciousness. What EST and Werner Erhard set out to do is to question the way we see things. To question the basic assumptions, psychological, cultural, etc., to open ourselves to the possibilities that there are other realities. I can't say how I specifically apply these things. Grof breath work is kind of like an energized meditation. The principal thing I've learned from that is to be open to the transpersonal realm—that capacity of our consciousness to identify beyond ourselves all kinds of native spirits or mythic beings. It's a powerful identification with entities. It's that consciousness can travel beyond the brain and communicate with beings that are beyond everyday reality. It doesn't mean that those entities are given physical reality in the physical world as we know it. But there's a power in that identification that's not the same as imagining. Being trained in this method of transpersonal psychology creates for one's own psyche a greater openness, an expanded consciousness beyond that which is material, which can be touched to experience one's consciousness as a projection of the brain.

I was an intense skeptic when I first heard about the possibility of

people being abducted. I don't think I would have given it the time of day if I hadn't already had some opening to transpersonal psychology. This whole phenomenon of UFOs and abduction is looked at in transpersonal psychology. It goes a step further, though, because it says that there is this crossover possibility. That there is this entity, that ought to be only mythic, that can come back the other way and manifest physically. So that's one of the ways that the Grof consciousness expansion work has affected me. It made it possible for me to consider the phenomenon.

The second way was that when I work with people I don't do classic hypnosis. I use a mild trance induction, and I use the breath to help people integrate, re-center themselves, and when they get anxious, go back inside in order to slow down and pull themselves back together before they go on to re-live other experiences. The breathing is pretty normal breathing, deep, slow breathing, but I have them concentrate on their breath. This is very centering and part of the process of taking attention away from, say, attending to the interviewer, for example.

It has been stated that you have been in a number of positions where you were associated with mind control experimentation financed by the Law Enforcement Assistance Administration under the Nixon administration, which purportedly funnelled some six billion dollars since its inception into behavior modification research. It has been alleged that you have continued to be involved in such projects sponsored by the government. Is this true? Please comment.

I don't know where that came from. There's absolutely nothing to that at all. I've had nothing to do with any government agency or

law enforcement agency. They haven't even shown interest. It's completely untrue.

Since the recent publicity concerning you and your book, have you started to observe any new trends or conditions in the abduction scenario which you feel need further exploration?

There are two. One is that the experiencers seem to be more focused than before on the conditions under which they can summon the beings, bring the beings to them, set the conditions under which the abduction phenomenon occurs. To not be helpless victims, but to demand or invite a more reciprocal relationship with the beings.

I think there is also more interest in the field with transcendent and transpersonal elements. Past life phenomena, the dual-identity phenomenon where the abductee feels, in the altered state, that they also have an alien identity. Also powerful spiritual openings when people feel they are connected through the beings to some source or divinity. It's hard to separate out my own interests from trends in the field, however.

I think it's important to look at ourselves in relationship to this phenomenon more intensely. A lot of discussion around what it means, and spirituality, has to do with whether the aliens treat us well or not—that if they treat us roughly, or seemingly inconsiderately, this argues against the transcendent or spiritual nature of the phenomenon. But that's, I think, a misunderstanding of what is meant by spiritual.

A Zen teacher strikes a student to get his attention. From the student's point of view it hurts. But it doesn't mean it isn't part of his enlightenment. And I'm not saying the purpose of the aliens is to enlighten us. I'm not saying that at all. But the phenomenon, by open-

ing us up to the existence of beings, consciousness, intelligences beyond ourselves or beyond the earth may, by its very nature, help overcome some of the collective egocentrism of our species. Again, it doesn't mean that's the purpose of this. The whole idea that this can be looked at from the standpoint of human motivation and humanism versus alien motivation and purpose may be wrong, too, as we don't know what the intelligence is that *we* operate by. We don't know what's behind that. We act as if the aliens themselves are choosing what they are doing. We don't know what intelligence is at work in the cosmos as a whole that is behind them.

This is an interest of mine. From the point of view of history or philosophy or science this is very important. We've kept spirituality and science so far apart. This work almost demands that we look at how they are interrelated.

Recent court cases and issues of "false memory syndrome" have brought into question the validity of hypnosis as a tool for retrieving accurate ("really real") memories. What is your perspective on this?

I am continually struck by how near the surface these experiences are. There's a lot of talk in the hypnosis literature about hypnotizability. The term hardly applies in abduction work. In my experience the abduction experiences are so near the surface, so pressing to be communicated, that sometimes the person just lies back and the experiences begin to be re-lived right away.

There is intensity of feeling and body movement and stress. Sometimes they cry out from different aspects of the experience. It's extremely powerful from an affective and energetic point of view. I want to stress this because the idea

that you somehow elicit this through hypnosis is really false. It hardly requires it. I've had people sitting here with no hypnosis—they just start to talk about the experiences, and their body begins to tremble and the memories flood back. It doesn't necessarily even require trance induction. Eddie Bullard and others have shown that something like 30 percent of the experiences are recalled with no relaxation exercises at all. Minimal relaxation exercises will bring back a flood of feelings and a re-living of the experiences.

There are two other issues. One has to do with language categories. The whole question of did these abduction events really happen in our material reality has to be questioned. For example, when an abductee is brought to see a hybrid baby in a UFO. Is that witnessing occurring in our physical reality as we know it? Maybe not. Maybe they've been brought into another dimension. Many abductees feel that their experiences are occurring in some other space time dimension.

What the abductees are describing is powerful from an experiential point of view, and non-delusional. But the question is whether they are accurately reporting exactly what happened or not. Or is this some kind of experiential re-living in a domain that we don't understand, one which may not be literally happening in our physical world? The whole question of literal accuracy of memory may not even apply to these experiences because that term linguistically relates to the literal physical world. And if it's not in that world to begin with altogether, then the whole question of literal accuracy may not be the right language.

Number two, the inaccuracies attributed to hypnosis in court cases have to do with situations where what is being recalled was

not of vital or central importance to the person. In other words, if they were a peripheral witness in an accident case, and they're asked to recall under hypnosis, they may not recall accurately. They may be asked to come up with something, but that something is not of vital importance to their lives. There is not evidence, according to the literature that I've been reading, where when there is a matter of core importance to the person's very existence that the recall is inaccurate.

Again we can't speak of what's literally happened in this phenomenon. But as far as hypnosis goes, generally speaking, its inaccuracy occurs either in court cases as I've described, or in cases where they try to experimentally plant memories as in Elizabeth Loftus' case of children who were told they were lost or separated from their mothers. Something is suggested to them, and the authority of the suggestor may override the actual memory of what happened. I don't know of any evidence where somebody is re-living something that is of central, vital power for them—and hypnosis helps to do that—that they recall inaccurately in hypnosis. Dan Brown reviewed all that literature, and I reviewed it with him. There are not studies that show evidence that hypnosis is inaccurate in situations which are of central or core importance to the person's mind.

Do you have any comments, questions, counter-assertions regarding the allegations of Donna Bassett in the recent *Time* magazine article?

I am constrained by patient confidentiality. I'm not free to speak about what her motives were or the details of the case when she came to me. I saw Donna Bassett in good faith several times. If in fact she did fool me, which could happen—it's not impossible—then she was lying

to me consistently. That would follow certainly from her claim that she hoaxed me. If, in fact, she has established herself as an effective and thorough-going liar, then how can she be considered an authority on matters of integrity regarding my work, methodology, patient-client and physician relationship?

The assumption is that she fooled me into using her material as part of my database. The fact is I didn't use one word she had to say in my book. Does that mean I

'I think the physical evidence is important. My job, however, is to assess mental states. That's what I do.'

didn't trust her, or that I didn't think she was telling the truth? I guess in some intuitive way I kept a certain distance. But I don't think that's because she's necessarily not an abductee. This is hard to know—it gets close to getting into what I know about her from my clinical work with her, which I'm unwilling to do.

I can only say how someone like this might work hypothetically. She moved to North Carolina sometime, oh a year or so ago, and I lost connection with her. She continued to call, and she also, when she began to turn against me, began to try and enlist other members of the support group, experiencers, in that effort. She got them quite stirred up. But eventually they didn't want any part of it. After a while they wouldn't return her phone calls and she became quite isolated. It's possible, and I'm not saying this is what happened, that a person becoming so alienated from their supporters could become very troubled and turn on someone who's trying to help them. That happens a lot. The other experiencers who knew her well don't believe her story, that she's hoaxing me. They believe

she's an abductee who became disturbed and couldn't deal with her experiences. I'm not saying that I believe that, but others do. So it isn't clear. I tend to credit that as a possibility, given that I know what my sessions with her were like, even though I'm not free to talk about what they were like. I think that's consistent with the sessions.

What I found troubling with the *Time* Magazine article was that the writer—who I guess had a connection with Donna's husband, Ed

Bassett, a journalist—took this story on face value and used it to discredit me. The things Donna Bassett says about me and my work are not accurate. They are not true. He did not go to the 50 or 60 other abductees who would have supported my work, who found it helpful, useful, positive—he went with the one person, an admitted liar, or liar claimant, and made *that* the story.

What's interesting here is why *Time* Magazine would go to such lengths to put aside any other positive material to create a story to slander me. What would be the motivation of that writer and that organization to discredit the work on the basis of somebody whose chief claim is that they lied to me consistently? The writer never indicated that he would build the story on a person who was not an abductee, by her own claim, and who would lie her way into our confidence. *Time*, in a little squib, a few weeks later said they'd received a lot of letters supporting John Mack's work and admitted something must be going on here that they hadn't acknowledged in their article. By that time the damage was done. 