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UFO UpDates Mailing List

Re: 'Backlash'

From: "Business to Business Magazine (Michael Malone)" <btbmag@ro.com>
Date: Thu, 9 Jan 1997 19:04:54 -0600 (CST)
Fwd Date: Fri, 10 Jan 1997 12:53:21 -0500
Subject: Re: 'Backlash'

> From: rfsignal@sprynet.com <cathy johnson
> Date: Wed, 8 Jan 1997 18:38:16 -0800
> Subject: 'Backlash'
> To: updates@globalserve.net

> >Date: Tue, 7 Jan 1997 14:17:52 -0600 (CST)
> >From: "Business to Business Magazine (Michael Malone)"
> ><btbmag@ro.com>
> >To: UFO UpDates - Toronto <updates@globalserve.net>
> >Subject: Re: UFO UpDate: Re: 'Backlash'

> >> Date: Sun, 05 Jan 1997 14:44:34 -0500
> >> From: Greg Sandow <GSANDOW@prodigy.net>
> >> To: UFO UpDates - Toronto <updates@globalserve.net>
> >> Subject: Re: UFO UpDate: Re: 'Backlash'

> >> Michael Malone writes:

> > > it is absolutely unthinkable and a black mark on those
> > > scientifically and ethically interested in UFOs that there are
> > > self-claimed abduction researchers (Yes, Greg, I mean that in a
> > > negative sense) who are using their knowledge of psychology and
> > > therapy, either hypno-therapy or otherwise, to gain knowledge
> > > about an alleged experience, and then will report on that alleged
> > > experience without attempting to verify the experience physically.

> While it is always idealistic to assume that the personal
> qualifications and motivation of any MHP is oriented in favour of the
> 'patient', such is not reality. Certainly there have been serious
> mistakes and there remains a serious deficiency in the overall picture
> of practical, available care and standards of MHP while dealing with
> any experiencers or abductees. On a world-wide scale, the standards
> of care and qualifications of such MHP's is virtually non-existent.

Like I have already said, MHP's and researchers should first deal with
"abductees," "contactees," and "Experiencers" as patients, not at
ACE (Greg, that is my new word for them. ACE, like it?) If you definition
of good MHPs is defined in relation to how they treat someone as an ACE,
then it is you with the problem, and not them.

> >I would like to say that the auxillary agencies would be a group such
> >as MUFON, but I think most people on this list knows how I feel about
> >them. Ideally, it would be a group of researchers willing and able
> >to perform the associated physical research and verification.
> >Depending on the needs of the patient (Remember when we were talking
> >about what to call abductees? I think the therapist should ALWAYS
> >remember that they are patients first. It might be advisable for a
> >private investigator to be hired. While many can't afford this
> >solution, there are a number of research groups who want verification

> >of alien abduction who should be willing to help with the physical
> >verification.

> This all sounds so prim and proper. Actually it is so far
> removed from the truth. Literally, for most experiencers/abductees,
> there is not a lot that can help them in any way. People living in
> small towns or rural areas have a hard enough time getting decent
> medical care let alone for something as controversial as troubles that
> directly result from bad abduction experiences. For the most part
> they are left to their own devices.

Not true. There is plenty of literature available from dealing with
ritual satanic abuses cases that greatly resemble alien abduction cases,
most notably in the lack of physical evidence. Any responsible MHP has
the resources available to him to find help for ACEs in dealing with their
mental trauma. At the very least, any responsible MHP can test the ACE
for examples of organic mental health problems. Even rural MHP have
access to testing tools.

> After fifty or so years of ongoing abductions, experiences and
> the lot, that the esteemed MHP community would have set up some kind
> of realistic avenue for dealing with the whole subject of experiencers
> and abductees. Yet, in the Capital city of Canada (like most other
> cities in Canada) there is a definite lack of both professional and
> grassroots organizations or any other kinds of support groups.

The subject of ACE isn't within the purview of the MHP. The subject of
physical trauma is. Again, as long as you continue to judge MHPs in
relationship to their acceptance of ACE as reality, then you will never
find a MHP that is valuable. The mental health of the patient is the
concern of the MHP, not the ACE.

> Bud Hopkins is only one man. Yet he has had an overload of
> calls and mail for his services. He is only one example of many
> concerned and capable professionals who operate virtually alone and
> without vital support in trying to help some of the more desperate
> kinds of cases. But, Bud is not alone, there are so many others like
> him who would try to do something if he could. Sheer numbers of his
> caseloads are snowing him under an avalanche of desperation. He needs
> help just as much as anyone else does to properly conduct realistic
> approaches to a supposedly non-existent myth.

He had no problem finding MHP help when he started. For a recent story
I've been writing for the local newspaper, I asked several different MHPs
and MHP groups if they would be willing to help ACEs. None of them stated
that they would NOT help an ACE. In fact, the local MH Center reported
that they had already helped patients whose mental trauma came from ACE.
The reality or non-reality of ACE is irrelevant to the MHP, at least at
first. What is important is the mental reaction and processes. And
helping the PATIENT deal with them properly, in a healthy manner, and
while returning the patient to a high level of functioning. The reality
of ACE isn't a question any MHP is capable of answering AS AN MHP.

> That, sadly, is the average response from the very limited MHP
> resources available. The few MHP's that lend their ear soon find it
> bent out of its previous shape. On the one hand, there are so many
> desperate people with outlandish problems and on the other, a vast
> community of professionals who have neither time nor place for any
> sort of association with a few rogue doctors.

In my experience, and in the experience of several local MHP
professionals, the ACE doesn't want to deal with the trauma at all.
Instead, they want recognition and details of their event. Instead of
seeking help, they are seeking at least local fame. MHPs are guides,
trainers, and aides. Not mirical workers. The ACE has to want help, not
unqualified acceptance.

> >In the case of implants, alien pregnancies, and the like, the obvious
> >agency is a doctor. I've run into several female "abductees" who
> >claim to have given birth to alien fetuses onboard alien craft, but
> >have never been to a doctor to have those pregnancies verified. All
> >these women were under the care of an psychologically based alien
> >researcher, and the researcher never suggested the medical
> >verification.

> Do you realize that those 'claims' could have been anything
> more than just 'claims'? Since you can't be obvious enough to
> believe any of the supposed 'claims' then there must surely be
> supporting evidences. Evidence? What Evidence! Lack of evidence is
> not evidence of absence. Believe that the evidences are to be found.

You have no right to assume anything about what I believe. The issue here isn't Belief, it's evidence. I don't think I've ever referred to a lack of evidence as evidence of absence. In fact, this entire thread between myself and the highly esteemed, at least by me, John Powel, has been exactly about how absence of evidence could very well be evidence of presence. Accusing me of such a "belief" is a severe detour from reality.

So basically, it's time for those with the claims to put up. This hasn't happened yet.

> *There is such a shortage of MHP's who are willing enough to deal with the mundane problems of the world that there is literally no one left to go to for the abstract and controversial subjects. No average doctor, psychiatrist or any other kind of MHP has the time nor the inclination to shoot down his own career in the name of UFOology or any other kind of 'ungodly' enterprise. Just doesn't happen very often at all. So, being that there is no one to go to see, the lineups are non-existent for all to see. If you don't deal with the problem, it doesn't exist, right?*

Again, the career destroy for a MHP is a malpractice suit, or a discrimination suit, for not being willing to treat a patient. I have yet to find a MHP that would be unwilling to help, or find help, for an ACE AS A PATIENT.

> *>Then, if we have a patient who is either no longer, or has never, exhibited any severe trauma, who is currently stable, and cannot explain the abduction experience any other terms, it's time to start the physical investigation. Turn to local forensic groups, here in Huntsville there is a forensic science explorer post. Try interesting a private investigator, or learn basic monitoring techniques yourself. Apply a systematic, documented method to verify that the abduction is occurring, using any and all means you can obtain.*

> *Bin dere, done dat, no t-shirts left. What if...?*

Then please share with us the protocol you used to monitor these patients. And tell us the results of that monitoring. Tell us how the results were replicated, what equipment you used, how it was designed.

> *>After all, how many more "stories" do we really need? How many more "interpretations" can we use? Isn't it time we started the physical aspect of this investigation.*

> *I keep repeating what no one here seems to remember. There is over fifty years of abduction experiences available to draw any kind of conclusions from. Literally, what you believe in is just what you will find to believe in.*

It's not a matter of belief, it's a matter of evidence. And there is none. Fifty years of nothing is still nothing.

There is over 5 centuries of leprechan experiences, 10 centuries of unicorn experiences, and dozens of centuries of various other kinds of phenomena that have NO evidence behind them. So they STAY MYTHS.

We keep repeating that we want to develop evidence, and you don't seem to remember.

> *In conclusion, it starts right here. We will try to accomplish something worthwhile or not, right here. There are many other places to go to, but at the moment, we are still right here. Nothing is all that much different than fifty years ago. Sure, there are better toys to play with, but the mindset of everyone is not any more advanced for all of that. Yet, that's the important start. The mindset of people as a species has to change for the better.*

This is not a problem with the species, it's a problem of inadequate scientific application and protocols. The mindset of the species is irrelevant to the physical reality.

This whole "advancedment of the species" is too much like a religion, and not enough like a science, for me.

Michael Malone
KF4MYX

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