



December 23, 2014

Dear Friend of the ACO:

This image captures the delight of a baby basking in its mother's love and the contact with her. Both light up in each other's presence. The genuine emotional and energetic connection between a baby and mother embodies the most vitally important experience of our early years. The holiday season always reminds us of children, and pictures such as this especially evoke the iconic image of mother Mary and baby Jesus.

### **Light and Dark in the Christmas Season**

Although celebrated as the time of Jesus' birth, Christmas actually coincides with Roman and other pagan festivals of lights following the shortest day of the year that marked the return of light to the world in winter. The story of the birth of Jesus and its aftermath grabs us on a deep unconscious level because it expresses basic, universal themes of human life, both light and dark.

In a world darkened by human emotional sickness and destructiveness, nothing can possibly bring more hope than the light of a healthy, innocent newborn and the glow of the connection between mother and baby. When Mary gave birth to Jesus in a stable, what mattered was that she had a place to give birth and that she attended to her baby with love while his father, Joseph, stood by to watch over and protect them. It also can't be an accident that the story depicts this extraordinary baby coming into the world surrounded by the natural presence of animals rather than the human occupants of the inn.

The story, however, doesn't end with the luminous event of the birth of a baby. The narrative goes on to show us the age-old problem of human destruction of innocent life. King Herod feared this child would threaten his brutal rule over his kingdom. After bearing gifts to Jesus, the wise men—suspecting Herod's malignant motives—decided not to follow Herod's instructions to report Jesus' exact location on their return. Herod resolved to eliminate the threat to his rule and sent men to kill all children under the age of two in Bethlehem and the surrounding area. Jesus' father, Joseph, sensed danger—the bible reports the awareness came to him in a dream. Before Herod's men arrived, Joseph had already fled his home country with Mary and baby Jesus, escaping to Egypt beyond the reach of the evil king.

The story of Jesus has moved millions upon millions of people, young and old alike, and created a major religion. In the realm of contemporary pop culture, the Harry Potter stories—the craze for which captured a whole generation of young people—has also affected millions with similar themes. In Harry's "nativity scene" the author tells us that, although Harry's mother died when he was still a baby, his brief experience of intense mother love engendered his inherent goodness and special magical

powers. Harry's very existence enraged the Evil One. Voldemort's rage at his own lack of such love drove him to go to great lengths in his attempts to track down and destroy Harry.

I believe both the Jesus and Harry Potter narratives touch us so deeply because they both represent examples, albeit extreme, of everyday occurrences throughout the armored human world. Lively, glowing infants and children with remarkable potential for life and creativity suffer daily from lack of genuine emotional contact. Furthermore, by incurring the wrath of adults who cannot tolerate their unique, healthy spontaneity, children often are subjected to experiences that destroy the natural spirit within them.

### **The Murder of Christ**

Wilhelm Reich called this daily destruction of the natural and the good, "the murder of Christ" in each of us.<sup>1</sup> His groundbreaking discovery of the emotional plague—the social, destructive manifestations of human emotional sickness—helps us make sense of and hopefully take steps to prevent this uniquely human, senseless attack on life.

### **The Power of Health**

A puzzle lies hidden in the Christmas story, however. How could a child threaten a king and his rule? Think about that for a moment. Is it possible that one healthy child could have more potential life power in him than a despotic king? Herod apparently thought so. In fact, we know health is always stronger than sickness even though at any particular moment, out of its pent up energy, sickness can become more vicious toward and apparently the victor over health.

### **Children of the Future**

Supporting and protecting the children of the future was a central theme throughout Reich's work, from his psychoanalytic days in the 1920s and 30s to his establishment of the Orgonomic Infant Research Center in the 1940s. In the latter, the object was for scientists to have the opportunity to directly observe the nature of health right from the beginning. Beyond his death, Reich wanted to ensure support for the health and happiness of infants and children as the legacy of his work.<sup>2</sup>

### **The Vast Continent of Nature to Explore**

Reich compared his discoveries about natural functions to Columbus' discovery of "a part of a seacoast that up to that time was unknown to European man."<sup>3</sup> Reich, who himself described the "too muchness" of his work, tells us that, in fact, he discovered only "a coastal stretch from which everything else" could develop. He tells us that, likewise, Columbus "did not discover, did not build or work out...in detail...all that has become 'North America.'" Beyond the narrow strip of the coastline of Reich's discoveries lies an immense continent of unexplored nature on which we can develop a body of functional knowledge about how nature truly functions.

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<sup>1</sup> Reich, W. 1953. *The Murder of Christ: The Emotional Plague of Mankind, Volume 2*. New York: Farrar, Straus & Giroux.

<sup>2</sup> Reich left the bulk of his estate to the Wilhelm Infant Trust Fund to "...express in some manner my thanks for that love bestowed upon me by my little friends..." (from Section 3.g of Reich's "[Last Will and Testament](#)")

<sup>3</sup> Reich, W. 1949. *Ether, God and Devil*. Rangeley, ME: Orgone Institute Press, page 6.

### **A Home for Functional Knowledge**

A few years ago, Dr. Charles Konia, in an editorial for the *Journal of Orgonomy*, carried Reich's analogy further by comparing the American College of Orgonomy and those who work in it to early American colonists.<sup>4</sup> From this perspective, those of us working in and with the ACO are functional thinkers building a home for functional knowledge and a new way of life that stems from it. We have landed on the shores of an immense, natural world open for development but already inhabited by conventional thinkers who tend to see the universe either mechanistically as a complicated machine that has to be made to move or mystically as a miraculous, magical and unknowable static Oneness.

Functional thinking is *not* a third alternative on a par with mechanistic and mystical thinking, both manifestations of armored humans. From the moment of birth, in fact and obviously, every baby is a functional organism, living and thinking as nature functions. To give a simple, concrete example, a baby learns to stand and walk even while struggling with gravity, which inevitably brings him back down to earth. The child, however, feels his way back to the standing position and figures out how to consistently live in accord with this natural law.

A child eventually learns to navigate such physical laws. All too often, however, the human armored condition results in the child's diminished contact with basic, natural, emotional laws. Without full use of his spontaneous, healthy nature to guide him, his ability to think and live functionally wanes and he compensates with conventional attitudes to manage in the world.

### **Who Stands Up for the Healthy Core of Human Life?**

In a forest of conventional approaches that represent either the secondary destructive layer or the superficial façade of human life, the ACO provides a beacon of light of functional knowledge amidst the world's doom and gloom.<sup>5</sup> Ours is an all too rare voice crying out in the wilderness for the primary, healthy core life functions of love, work and knowledge. Our beacon can guide wayfarers on the high seas that want to find their way to the rocky shores of the limitless continent of the natural world yet to be explored. We must keep the beacon of functional knowledge alight and ensure that people know of the ACO and what we have to offer.

### **The ACO is a Miracle of Nature**

We lack the words to adequately describe the wondrous processes inherent in nature's capacity for spontaneous perception, contact, and organization. To make up for this, I'll use the colloquial expression of "miracle" to talk about the current state of the ACO.

It is a miracle that Reich discovered all of what he discovered. It is a miracle that he then found even one person who grasped the significance of his work and kept it alive after his death in 1957. It is another miracle that the one person, Dr. Elsworth Baker, preserved orgonomic knowledge in undistorted form and gathered a few co-workers to plan a home for orgonomy, founding the ACO in 1967. It is still another miracle that unlike many organizations that disband after the death of the founder, the ACO remained alive past Baker's death. It is also a miracle that not only did we survive, we had sufficient support to buy property and establish our physical home in 1986. It is a miracle that not only do we

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<sup>4</sup> Konia, C. 2011. Editorial, "[Securing a Beachhead](#)" *Journal of Orgonomy*, 44 (2).

<sup>5</sup> See a discussion of "doom and gloom" in my [President's 2010 Holiday Appeal and Annual Report](#)

continue to exist, but that for decades we have continued to develop and teach this knowledge at our home. Finally, it is a miracle that we bustle with such activity in 2014.

### **The Treasure Trove of Functional Knowledge**

We now have a treasure trove of functional knowledge about natural processes that lie at the base of all of nature, including all productive work and genuine love. The ACO has done well at keeping this knowledge alive and developing it further but it will do no one any good if we can't share it. This knowledge is a gift we can give the world that outshines any material gift of gold, frankincense or myrrh that the Magi brought the baby Jesus. We now face the challenge of how to bring this treasure to a world that often either knows nothing of it or views it as a foreign language or as something crazy or strange. Ultimately, we must connect with the world with this knowledge to fulfill our most important core function of making a difference through the functional knowledge of organomy.

In *The Hobbit* by J.R.R. Tolkien, the character Gollum came into possession of a ring endowed with special powers. In fear of someone stealing it from him, he grew grotesque hiding under the mountain guarding the ring, compulsively intoning a sibilant, "My precious." We don't want to be the Gollum of functional knowledge.

### **Gaining a Foothold in the New World**

We also don't want to suffer the fate of the 1580s "Lost Colony of Roanoke Island" in Virginia that disappeared with hardly a trace by the time supply ships from England—delayed by foreign wars and storms at sea—finally arrived after three years. Did hostile tribes wipe them out? Did local indigenous tribes assimilate them? Did they succumb to a plague? To this day, despite a great deal of research, no one knows what happened to them.

Pursuing the analogy with the American colonists mentioned earlier, Dr. Konia points out, "...establishing contact and cooperation with this alien world is an essential goal of the College."<sup>6</sup> American colonists could not have survived in the New World without learning about and discovering—often from the indigenous people—how to use the resources of their new land.

Dr. Konia continues, "...the survival of the College depends entirely on its ability to have sustained contact with a sufficient number of people of the New World. This remains the only hope for the science of organomy to secure a permanent foothold in the world."

We know that some people cannot tolerate the truths our light will illuminate.<sup>7</sup> Some will even attack us because of this. Rather than remaining behind the stockade of a little colony that clings to a rocky coastline, however, our true safety lies in establishing a significant "beachhead" or "foothold." This can be accomplished using our ability to communicate with and share our knowledge with conventional thinkers so that functional thinking can exist and thrive in the broader social realm.

### **We Need New Contacts**

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<sup>6</sup> Ibid, Konia editorial.

<sup>7</sup> See a discussion of truth and truth-tellers in my President's [2013 Holiday Appeal and Annual Report](#)

Our very survival depends on finding a wide range of new people interested in our work. Some will visit, enjoy the sights and return home. Others will become settlers and live their lives in our world, with some becoming productive members of the ACO as doctors, teachers and scientists. Others will settle nearby in the equivalent of our countryside and make productive use of our work as they “till their fields.”

Some will become adept at learning the language of conventional thinkers and find a common ground with those we can teach our language to. Some of these will become traders who can market our offerings and engage in mutually profitable trade with the conventional world.

Others from among our group will become adept at identifying those who we can cooperate with, distinguishing them from those inimical and potentially destructive to us. Some will become skilled at fending off attacks and protecting our home from such outside threats. Others will become skilled biosocial psychiatrists recognizing infections in society that could turn into biosocial plagues either in society at large or among our own people that could kill from within. With experience, these specialists can gain expertise not only in identifying such contagions, but also in how to treat them.

### **If We Had a Foothold**

The founding of America evidenced a remarkable period of functional thinking in the sociopolitical realm that gave birth to a nation that, for more than two centuries, became the beacon of hope, freedom and opportunity for the whole world. Sadly, many of the qualities that made the U.S. so great have eroded leaving a breakdown in the free market, increased bureaucratization, political correctness and threats of terrorism.

If the trove of functional knowledge had a secure foothold, the public could use this knowledge to help identify and combat the biosocial virus of the emotional plague of human destructiveness that infects much of the world, eats away at our social fabric and undermines everyone’s capacity for life, liberty and the pursuit of happiness.

If the ACO had enough standing in the world, the beacon of our knowledge could draw conventional thinkers attracted to a new, more functional way of looking and help them clarify what they already sense and see. We must find and ally ourselves with such people to help reverse the retreat from the functional sociopolitical gains made at the founding of America.

In their Declaration of Independence the American founders proclaimed, “[Men] are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness.” Look again at the image of the baby. It’s right there as she radiates such life, freedom of expression and happiness in her face. We have come full circle. The American founders held that such rights are inherent and not granted by the king. So, too, every baby is born with the capacity to live and think functionally.

We at the ACO don’t need to “convert” people to our way of thinking and living. It’s already in them. We “merely” need to protect and support the development of an infant’s natural birthright. We also need high quality therapy to help children and adults regain their natural abilities to think and live as nature functions if they have lost this capacity.

These two vital subjects, the newborn period and the value of therapy, deserve our ongoing emphasis. Over the past century each area has seen both major advances and disheartening retreats.

The decades from the 1960s to the 90s saw enlightened progress in treating newborns manifested by increased interest in natural childbirth, breastfeeding and greater acceptance of infants rooming in with the mother right from birth. We also observed a decline in male circumcision rates in the U.S. between 1979 and 2010.

In recent decades, however, we've witnessed a skyrocketing rate of highly mechanistic, surgical instead of natural deliveries. Now, nearly one third (32.2%) of all births in the U.S. occur by Caesarean section—as high as 70% in some hospitals—up from a national average of only 4.5% in 1965. Also, citing new rationales, the U.S. government, for the first time ever, entered the fray on the subject of circumcision. The draft guidelines released December 2, 2014 by the U.S. Centers for Disease Control and Prevention, now recommend that doctors counsel parents and uncircumcised males on the health benefits of circumcision, based largely on studies of HIV and AIDS rates in Africa.

If only functional knowledge of the natural birth process and the emotional needs of the newborn had a significant public foothold, we could more visibly combat these retreats as an increasingly mechanical approach that has infected the most vulnerable, early days of life.

Treatment of psychological and emotional problems has also seen a disturbing retreat as the functional humanistic approach introduced by Freud in the early 1900s gave way to the mechanistic biochemical treatment that became the convention by the end of the 20<sup>th</sup> century. Again, if only functional knowledge about the bio-emotional basis of emotional problems had a solid foothold in the public eye to show a fundamentally different way to look at how humans actually function.

### **We Need Your Backing**

For years, early in their history, the American colonists remained dependent on their motherland for new settlers, supplies and ongoing financial support. The ACO, as we build our base, follows a similar pattern in its dependence on outside support.

Some colonial founders spent significant time in the New World establishing colonies. Other backers, believing in the profitability of colonies on the North American continent, lent financial support, sending supplies and settlers without ever setting foot in the New World themselves.

Like the backers of early American colonies some of you have direct personal involvement with us, others visit regularly, while still others, who we rarely or never see face-to-face, hail from distant shores. That is as it should be. We need you all, close or far, to support us with contributions small or large.

### **Thank You for Your Support**

Each of you who understands the importance of establishing a home for functional knowledge and the significance of our core function has helped maintain our precarious foothold in the world. We thank you from the bottom of our hearts. With your ongoing support you can help strengthen our footing and make our base more solid. With your help we can develop toward self-sustaining independence.

## **A Physical Home for the ACO**

The American colonists needed to establish a physical home before they could make productive use of the wealth of natural resources on this continent and before they had any chance of making sustained contact with the indigenous people.

Dr. Baker, the founder of the ACO, understood the necessity of establishing a foothold in the world. In the early 1980s he envisioned a physical home for the College from which it could carry on its activities to further oronomy. Fortunately, we weren't subject to the limitations faced by the backers of the early American colonies who needed monarchical approval from the reigning king or queen to receive royal charters laying out the terms of their enterprise, whether for religious, commercial or other purposes. In 1986, a year after Baker's death, with generous financial support from donors like you we purchased our tract of land without having to answer to anyone other than ourselves.

We fulfilled Dr. Baker's wish that we create a headquarters roughly halfway between the major population centers of New York and Philadelphia.<sup>8</sup> Interestingly, our purchase of the current property situates us on the old Kings Highway that during American colonial times ran between the same two major settlements of that era.

## **Clearing the Land**

The American colonists could not raise crops until they had cleared the land. Likewise, several years ago we undertook the Property Improvement Project (PIP) to create a more welcoming home,<sup>9</sup> which I've since reported on.<sup>10</sup> We've now completed more than 90% of Phase-I that entailed clearing the property of "detractors." In the process, as we've prepared for Phase-II of adding "attractors," we've come to better appreciate our property's assets. We've also seen more clearly its limitations and have even considered relocating, but are not financially or organizationally in a position to do so.

It's worth remembering, however, that neither the Plymouth Colony, their ship blown by a storm to a barren bit of coastline in Massachusetts, nor the Jamestown Colony located on a stretch of sandy shore in Virginia had ideal land. The people and how they live, not the real estate, ultimately determine the success of a colony.

Many visitors to the ACO since Phase-I of PIP have commented on the new, open, more expansive feeling of the property. As the PIP has improved our "look," the work itself has also sparked a renewed sense of ownership in and a positive feeling about the ACO's physical home. Concurrently, we have seen a reinvigoration of our ongoing activities and interest in developing new initiatives and creative projects proposed by ACO members, clinical associates and others connected with the College.

See our [latest PIP update](#) for details about 2014 PIP progress.

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<sup>8</sup> As described in my [2011 President's Holiday Appeal and Annual Report](#)

<sup>9</sup> My [President's 2011 Holiday Appeal and Annual Report](#)

<sup>10</sup> My [2012 Summer Update and Appeal](#), [President's 2012 Holiday Appeal and Annual Report](#), [2013 Summer Update and Appeal](#) and my [President's 2013 Annual Report and Holiday Appeal](#)

Meanwhile, before we can proceed much further with Phase-II of our PIP, we need to raise the remaining \$160,000 required for the ambitious plans we announced in [our last PIP-focused appeal](#) in the summer of 2013.

### **A Bustling ACO in 2014**

In 2014 the ACO undertook more activities and events than at any time in its history. Some of these, developed over the past few years, especially coinciding with the initiation of the Property Improvement Project in 2011, came to fruition this year. This year we have also undertaken several new efforts at increased promotion of our events.

Our activities fall primarily into training, education and publications. Medicine and social sciences represent the two most well-developed and elaborated bodies of functional knowledge out of the four key realms of orgonomic science (medical, social, biological and physical).

Our two training programs in medical and social orgonomy reflect this fact. The most purchased books offered by the ACO Press also focus on these two fields: *Man in the Trap* and *Me and the Orgone* representing medical orgonomy, *The Emotional Plague* and *Neither Left Nor Right* representing social orgonomy.

Medical and social orgonomy are also the only two practical applications of orgonomic functional knowledge with which someone can earn a living in the conventional world. A medical orgonomist can treat patients while a social orgonomist can work profitably in a number of fields including individual therapy, family/couples therapy or functional business consulting.

*ACO Training Programs:* The medical and social orgonomy training programs for professionals in each of these fields often don't receive the acknowledgement they deserve. Our trainees frequently express their appreciation. Beyond our students, however, these programs remain largely out of public awareness.

The monthly clinical seminars in the medical orgonomy training program generate high-quality case discussions. Few are aware that the Elsworth F. Baker Advanced Technical Seminar continues in a direct line from the Psychoanalytic Technical Seminar which Reich assumed leadership of in 1924. Much like that early seminar, all ACO seminars serve the purpose of teaching, advancing and refining therapeutic technique.

The case presentation seminar in the social orgonomy program provides advanced social orgonomy trainees the opportunity to present cases related to their work to help them apply social orgonomic principles in the full range of their discipline. The current session of our introductory didactic course for both training programs has gelled into a cohesive work group consisting of one medical trainee and seven social trainees, two of whom travel four times a year from Oregon to attend. With the current three-year course now well into its final year, we look forward to recruiting a new group for the next didactic course.

*Reduced Fee Referral Service for Young People:* We recently instituted a referral service to provide affordable therapy for young people who do not otherwise have the financial means to pursue therapy. We had several inquires and a few potential patients evaluated and referred to ACO-trained orgonomists

willing to give deserving young people the opportunity to start therapy they could not otherwise afford. The disappointing small response is part of what prompts our efforts to improve how we present therapy, something I will discuss below under “The Language Barrier.”

*ACO Public Social Orgonomy Presentation Series:* December 2014 marks the eighth consecutive year of at least four or more presentations a year in our social orgonomy public presentation series. We continue to have a good turnout averaging 40 attendees per presentation and a total of 37 new participants for the year, several of whom attended subsequent ACO events. The series has also inspired new speakers to come forward to give talks.

We kicked off the year with “Right from the Start: Pregnancy, Birth and Emotions,” on February 1<sup>st</sup> presented by Drs. Theodota Chasapi and Susan Marcel expressing our ongoing dedication to disseminating functional knowledge to improve this vital early period of life.<sup>11</sup> The series continued with my open discussion, “Are You Satisfied With Your Work Relationships?” on April 5<sup>th</sup> and concluded on September 27<sup>th</sup> with Dr. Dee Apple’s “The Sexual Struggle of Youth.” We specifically devoted our May 31<sup>st</sup> presentation to medical orgonomy, “There Must Be More to Life,” with Drs. Philip Heller and Dale Rosin, in order to give this important subject a more public presence.

We have scheduled the first three [social orgonomy presentations for 2015](#) covering a compelling lineup of topics. At the next event, I will conduct an audience-participation discussion on “Negotiating Work Politics,” Saturday, January 31, 2015. The next two presentations grew out of lectures in the new ACO Sociopolitical Orgonomy Course. On Saturday, April 11, 2015, Edward Chastka, M.D. will present “Armored Culture, Armored People.” Alberto Foglia, M.D. and Virginia Whitener, Ph.D. will then explore “The French Revolution: An Example of the Emotional Plague” on Saturday, June 6, 2015.

*The Sociopolitical Orgonomy Course:* This year we inaugurated a new course on sociopolitical orgonomy, representing a specific aspect of the broader realm of social orgonomy. Open to the public by application, the course began in September 2014 to an enthusiastic response from the full complement of 17 students. Nine medical orgonomists, including some who have not previously taught at the ACO, make up the faculty for the twelve lectures.

*ACO Movie Night:* In November, our ACO Movie Night completed its second full year, with three to four events a year. It continues to draw a lively audience of 15 to 20 people who engage in an interesting, often entertaining, unique post-film discussion with various orgonomists.

*A Special Event:* In November 2014 the ACO also produced an entirely new venture, a staged reading of Dr. Konia’s *On the Shoulders of a Giant: Fictional Conversations Between Sigmund Freud and Wilhelm Reich* performed by professional actors. We attracted a full house in Princeton with over 70 tickets sold including a number of attendees new to our events and a few entirely new to the ACO.

*ACO Laboratory Workshop in Orgone Science:* This year in June the ACO also held another fully subscribed session of the combined introductory and advanced laboratory workshops in orgone science. Participants came from as far away as California, Canada and Greece.

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<sup>11</sup> The image used in the flyer for that presentation is so remarkable that we decided to use it in this letter.

*ACO Publications: The Journal of Orgonomy* has been published twice a year since 1967. Articles focus on a range of topics, with particular interest in the realms of medical and social orgonomy. As mentioned above, our consistent best sellers include books in these two realms. Dr. Ola Raknes' *Wilhelm Reich and Orgonomy* is also popular as a good general introduction to orgonomy.

### **Trade with the Conventional World**

We have struggled for some time with how to present our “products” to new markets. We have much to learn about how to convey the value of our goods and services to conventional thinkers who do not yet know the value of what we produce, let alone speak our language. We also have much to learn about the wealth of resources developed by them that we could use in fruitful ways to market our unique perspective.

### **The Language Barrier**

In order to establish a self-sufficient home for functional knowledge, we must find those among the conventional thinkers with whom we can begin to communicate and establish friendly relations. Konia notes in the editorial we've referenced, “. . .important difference[s] in the ways of thinking and living of the two groups functions like an insurmountable language barrier.” The American colonists did, however, learn to communicate with the indigenous people of North America. Likewise, the ACO can and must learn to communicate with conventional thinkers.

We would do well first to observe and listen to conventional thinkers to understand their language. In addition to learning the language of our neighbors and finding common ground, we have the more difficult task of trying to teach them our language. The ACO has already begun eliminating jargon from our public presentations and publications. Our familiar use of orgonomic words and terms can either confuse our new contacts or end up being distorted by them when interpreted through their conventional lens. We certainly must do more to communicate more effectively with people "where they are."

To discuss cosmic orgone energy or even talk about the biophysical basis of emotions in an interaction with someone unfamiliar with our way of thinking is the equivalent of the Pilgrims opening a conversation with the Indians by discussing the Holy Trinity of God or telling them how to build a sailing ship. As of now, we don't yet have the language, perhaps the equivalent of a sign language, that would prove useful in establishing a common ground, but we must find a way to develop it. There are those in the conventional world who think quite functionally even if they do not use the same words. We must seek them out.

One of our supporters has engaged in such a project. He and a friend are working on identifying conventional thinkers who come closest to the way we look at things. These two are also developing a way to present orgonomic, functional knowledge in stepwise fashion, much like the colored belt system of a martial arts discipline. Certainly, one would not ask someone with a white belt to perform the skills of someone with a black belt without first achieving each intervening step along the way.

### **The Expressive Language of the Living**

Nearly everyone who has become involved with, been productive in or is a supporter of the ACO first experienced a beneficial change in themselves and their life through medical orgone therapy. Medical orgonomists possess the knowledge and skill to help people regain their functional capacities. This includes the capacity to communicate through the language of emotional expression. This deep

“expressive language of the living” goes far beyond words as a universal human language.<sup>12</sup> Anyone who truly “speaks” it is in a much better position to grasp the functional basis of the ACO’s work.

### **The Need for Bioemotional Psychiatrists**

The very survival of the ACO depends on access to medical organomists’ ability to help people regain their capacity for functional living and thinking. We have to discover the best way to present medical orgone therapy to those who know nothing about it. For one thing, as soon as we mention “orgone” or any of its derivatives, we have introduced “black belt” material. Suggestions have been made to use more immediately understandable words without introducing “orgone.” We might call practitioners “bioemotional psychiatrists” and the therapy “bioemotional therapy.” We have formed a brainstorming group to consider such “language” problems in order to sort out how to better present medical orgone therapy to the conventional world.

This past year we received a \$10,000 donation to fund experimental outreach projects. We now need to develop a variety of experiments that we can use to improve our public communication skills and outreach.

As has been said, the process from first contact with therapy to practicing organomist takes a total of 15 to 20 years.<sup>13</sup> The essential knowledge of a bioemotional psychiatrist is deeper than the realm of words. It, therefore, must be conveyed and taught, essentially like an apprenticeship, by direct experience, observation and training with actual patients. Some knowledge can be preserved and conveyed in written form through articles and books but we need practicing organomists to teach each succeeding generation of organomists.

### **Our Financial/Life Blood Report for 2014**

The biosocial organizational model I presented previously spelled out the functional equivalence of the arms and organs of an organization with those of an individual organism.<sup>14</sup> I described how the ACO organs have not yet developed to the point of independent functioning with which they are able to generate enough life blood (income) on their own to sustain the ACO as an independent organization.

With close oversight by the executive committee and the business advisory board and the hard work of Executive Director Debra Sansanelli and Office Assistant Rose Littlefield, we managed to keep our 2014 expenses at approximately the same level as previous years. The only exceptions included several specific advertising initiatives and new outreach efforts.

Over the years I have described that the ACO's ongoing moneymaking activities of training, education and publications cover between a third and a half of our expenses. Recent years have seen approximately the same ratio in a total annual budget of roughly \$270,000, including 2014. Our budget, therefore, still leaves between \$120,000 to \$170,000 each year that we need to fund with donations from you.

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<sup>12</sup> Reich, W. 1949. *The Expressive Language of the Living. Character Analysis*, (Translated by Wolf, T.). New York: Farrar, Straus & Giroux, chapter XV, pages 357-397.

<sup>13</sup> My [President’s 2013 Holiday Appeal and Annual Report](#)

<sup>14</sup> My [President’s 2013 Holiday Appeal and Annual Report](#) and [President’s 2012 Holiday Appeal and Annual Report](#)

Meanwhile, in 2014 the ACO continued to receive generous investments from our major supporters such that contributions overall increased along the recent positive trend line. We were pleased, for example, to receive a \$10,000 unsolicited donation from an overseas supporter—far more than his previous contributions. With increased financial support we continued to breathe more easily, expanded our core activities, tried new outreach projects and even socked some money away in our “rainy day fund.”

Such good news encourages us about the future of the ACO. More than ever, we have become a bustling home for orgonomy. At the same time, however, we must not blind ourselves to the reality that our organization has a long way to go before it can function self-sufficiently, our goal.

### **Assessing Our Development**

Functional equivalency exists in the stages of development in several different realms, which became clear during my preparations to teach a section of the new ACO sociopolitical orgonomy course.<sup>15</sup> The American colonies progressed through stages of sociopolitical development much like the socio-emotional stages of work organizations,<sup>16</sup> which in turn follow a progression remarkably equivalent to an individual’s stages of psychosexual development.<sup>17</sup>

Like the infant in the image at the beginning of this letter, we glow more than ever in the contact with you, our supporters. The intense activity, dedication and incredible productivity of the small number of individuals working at the ACO can easily obscure the awareness of our true level of maturity. Just as the American colonies in their early stages remained dependent on their motherlands, the infant, in its development, needs its mother. We, too, remain highly dependent on you, our supporters. We have begun to crawl but cannot yet stand independently on our own feet. Just as an infant needs support to develop and grow, the ACO as an infant organization needs your support.

### **Let’s Celebrate True Miracles that Offer Hope for the Future**

In this holiday season as we find light in the darkness of the winter season let’s celebrate the miracle of an infant baby and the miracle of our infant organization. Who knows the true potential and power of the spontaneous, creative expressions of a child unencumbered by the chronic contractions and defenses of the typical human? We don’t need to mystify it as happened with Jesus or portray it as magical as in the Harry Potter stories. Also, who knows the strength and creative potential of a developing organization spontaneously organized around knowledge of fundamental principles of nature and guided by incredibly dedicated people?

### **Help us Continue to Establish a Foothold in the World.**

We must establish a secure foothold in the world from which we can become an independent, self-sustaining presence to carry on our work, bring our gifts to the public and explore the vast continent of nature. We especially need your financial support to help us find those among the conventional thinkers with whom we can communicate and who may become interested in our work, more involved, even

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<sup>15</sup> Crist, P. 2014. The Exception that Proves the Rule: The Natural Organization of America. ACO Sociopolitical Orgonomy Course, Lecture 5. Kingston, NJ, November 15.

<sup>16</sup> Goldberg, M. 1989. Work Energy and the Character of Organizations, Part II. *Journal of Orgonomy* 23 (2).

<sup>17</sup> Baker, E. 2000. *Man in the Trap*. Princeton, NJ: ACO Press, pages 16-25.

more invested.<sup>18</sup> Building such a home for functional knowledge has been and will continue to be a huge undertaking, requiring generations.

### **A Great Investment In a Hopeful Future**

The real hope for the future of humanity lies in securing the natural birthright of children by supporting their health right from conception through birth, and raising them in a way that keeps alive their capacities for love, pleasure and satisfying work. Go back to the image of the infant at the beginning of this letter and take a few moments to recognize the special nature of your support for and investment in the American College of Orgonomy: an organization dedicated to championing the functional knowledge of nature and of life, bringing that knowledge to the public, and training practitioners in its practical application to make a difference in people's lives. If we secure a place for functional knowledge we are working toward a world that protects and supports babies and children so that they can grow up to live, love, work and learn spontaneously, without unnatural constraint.

Your contribution supports our efforts to create and sustain a home for functional knowledge and the programs that keep it alive. I hope you will join with us by continuing your financial support to insure our success in this historic venture. With the enclosed card or on-line at [www.orgonomy.org](http://www.orgonomy.org), please send your donation or sign up as a member-donor so that we can count on a steady income stream to sustain us in the coming months and years ahead. And if you are not already on our e-mail list, please help us make contact with you more quickly by [joining our mailing list online](#).

From all of us at the ACO, I thank you for your support and generosity. I wish you and yours a happy Holiday Season and a healthy New Year, and I hope to see you in the near future at one of our events at our Princeton home.

Sincerely,



Peter A. Crist, M.D., President

**[Please support the ACO today.](#)**

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<sup>18</sup> The three "I"s as discussed in my [President's 2013 Holiday Appeal and Annual Report](#)