



December 31, 2017

Dear Friend of the ACO:

Like the children in the picture, the American College of Orgonomy has a load of gifts, gifts the world desperately needs. We've been working tirelessly to haul them uphill and over many obstacles to bring them to those who can use them. Ours is a serious project requiring hard work, but like the children, we, too can have fun and enjoy sharing our gifts.

2017 a Year of Success

Each year we take this opportunity through these Annual Reports and Holiday Appeals to let you know the state of our efforts and how you can help us move the load of gifts forward. We have been remarkably busy in the past year with many signs of unprecedented success. Several factors—some spontaneous, some serendipitous and some intentional—came together to weave a complex tapestry of new forays into the world and successful contact with a variety of new people this year. What we accomplish with our limited staff and barebones budget is miraculous. None of it would be possible without your ongoing generous gifts that help us bring ours to the world.

A Crucial Theme Emerged in 2017

The first of our ongoing Social Orgonomy Public Presentation series for the year, "A Functional Look at Alcohol & Drug Addiction," presented by Edward Chastka, M.D. on Saturday, February 4, 2017, at the Paul Robson Arts Center in Princeton, gave a new way of looking at this crucial subject, including a functional perspective about the basis of twelve-step programs. The talk was well received and attracted several new people.

The ACO Movie Night showing of *28 Days* on March 18, 2017 followed the same theme. The open discussion led by Raymond Mero, D.O. and Susan Marcel, D.O. provided an opportunity to use this dramatic comedy starring Sandra Bullock to take a serious look at substance abuse and its consequences.

Our final Social Orgonomy Series presentation of the year, “Legalized Pot: What Are the Consequences?,” given by Dr. Dee Apple on October 7, 2017 at Aaron Burr Hall on the Princeton University campus, continued the theme of drug and alcohol use, abuse and addiction. Dr. Apple’s talk brought contact with several like-minded outside groups involving parents concerned about the epidemic of marijuana use among teenagers. They provided promotion on their websites for our event, a first for the ACO. This talk generated one of our highest percentages of new attendees from those beyond our mailing list. It also brought an anonymous donation from a follower of one of the parents’ groups who attended the event. Our presentation also prompted attendance by a pro-legalization lobbyist with whom Dr. Apple had productive interactions. Remaining respectful and collegial he and the lobbyist engaged in a heated discussion that stirred up controversy.

Our 2017 focus on drug-related problems evolved spontaneously. The social orgonomy training committee thought that presentations about drug addiction and the consequences of legalized marijuana might connect with and benefit new people because so many young people, parents and adults in general are dealing with the ramifications of drug use.

Where Do We Go from Here?

We need to follow up and solidify the ongoing success of this past year’s events that addressed a functional approach to drug-related problems. Dr. Apple’s October presentation about the consequences of legalized marijuana was the first time we’ve had someone seek out one of our talks specifically to come and challenge what was presented thrusting us into the public arena in an unprecedented way. Rather than shy away from these controversial subjects, we will meet them head-on because the intense feelings on both sides indicate that we’ve broken through the usual contactless deadness so prevalent in the world and in our interactions with other groups.

We plan to continue our focus on this subject as a way to educate the public about a vitally important topic with far-reaching individual and social consequences. It has proven to be an entrée to groups of like-minded people willing to engage with us and provides an opening to educate people about several key functional concepts.

Why Should the ACO Focus on Drug Related Problems?

Educating the public about drugs and their related problems is a direct expression of the core function of the ACO as an organization. We are about helping people live in greater contact with their health—individually and as a society. Contact is at the heart of health and the goal of medical orgone therapy. Genuine contact between people is at the heart of healthy social functioning. Our work as orgonomists in either the medical/psychiatric realm or the social realm is to overcome obstacles and address whatever interferes with such spontaneous, genuine contact. Whatever interferes with that is worthy of our notice and needs to be tackled.

What is Genuine Contact?

A simple clear understanding of the nature of genuine contact is one of the greatest gifts of functional knowledge that we can offer.¹ Individual contact, in its deepest sense, occurs with the spontaneous integration and accurate perception of our energy excitation. Likewise, genuine social contact occurs between individuals with the accurate perception of each other's excitation. This simple theoretical understanding has many practical applications.

Drugs Affect Contact

Drugs of any kind, without exception, alter excitation, perception or both and as a result affect contact at its most basic level. This is true whether the drug is legal or illegal, prescription or not. In fact, this mechanism is the basis for how prescription and over-the-counter drugs work to treat symptoms. Anti-depressants and anti-anxiety medications reduce contact with intolerable emotions. Painkillers block intolerable sensations.

The effects on excitation and perception are also the basis for the appeal of alcohol, marijuana and other illicit drugs.

It is not possible, however, to block contact with disturbing sensations and emotions without affecting all of them. Our sensory and emotional feelings act as life-preserving signals. If someone has a nail in their foot and takes morphine to kill the pain, they no longer are interested in removing the nail. If someone is afraid or anxious and takes marijuana to dull those feelings, everything is "cool," leaving that person with no motivation to address and face the danger that prompted the fear or the situation that led to the anxiety.

Emotions vs. Sensations

One of marijuana's specific effects on contact is that it transforms *emotional* perceptions to *sensory* perceptions. At least initially, and until the user becomes accustomed to the drug, this can lead to intense sensory experiences. The heightened visual, auditory, touch and taste responses to marijuana are well known and are the basis for its appeal for many people.

The other aspect of that effect is that marijuana dulls emotional perceptions. That, too, is why people use it, to reduce unpleasant emotions, in particular anxiety. Clarifying the relationship between sensation and emotion in relation to marijuana provides an opportunity to educate the public about this key functional distinction between types of perception that is not well understood without the benefit of organomic functional knowledge.

The Function of Drug Use

Abusive or additive use of drugs, like any other automatic or compulsive defensive reaction, serves the function of quelling intolerable emotions. In treating any problem, the character analytic therapist must address the patient's defenses from the most superficial to the deepest to help the patient develop the capacity to experience increasingly intense feelings.

Drug use as a defense lies closest to the surface as the one most recently developed. If therapy is successful, it will bring to the surface anxieties that have not previously been handled by the patient.

¹ See the "What is Genuine Contact?" section on pages 3-4 of my 2013 President's Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/2013_ACO_Presidents_Holiday_Appeal.pdf]

Before we can make progress in helping patients face anxieties and other problems on any deeper level, they must first overcome the tendency to automatically turn to drugs or alcohol to handle their emotions. As long as the patient has a drug to return to, exposing deeper anxiety that is bound to come up in therapy will only stimulate the need for the drug as a defense.

Addressing Contactlessness

Drug abuse is but one manifestation of the essential human problem of contactlessness. The many names—contactlessness, cluelessness, obliviousness or denial—all refer to the same thing, a basic state of avoiding intolerable feelings. And as we've said, it must be addressed before any other emotional problems can be tackled.

Overcoming Social Armor

In his October talk, Dr. Apple outlined a series of myths about marijuana. These represent a social armor of contactlessness about marijuana that must be overcome. Marijuana myths interfere with objectively assessing the situation. Marijuana has become a political issue and as noted by Dr. Apple, much of the “scientific” research is colored by sociopolitical attitudes and motivations.

Such myths perpetuated in society are the social equivalent of individual contactlessness or denial. We can use the gift of functional knowledge gained in the realm of individual therapy and apply it to developing a practical, systematic approach to these problems in the social realm. Just as in individual therapy, we must start on the surface. We cannot hope to deal with deeper social problems until we overcome social contactlessness and perceptual distortions on the surface. Specifically, we cannot address the epidemic of drug-related problems without first addressing the denial that drugs *are* a problem. Educational activities such as the presentations we've held in the past year that expose the myths, are essential.

An Overlooked Danger of Marijuana

Dr. Apple identified that one of the myths about marijuana is that it is harmless. People often dismiss it as “just a weed that can grow along the highway.” But marijuana, more than most drugs, subtly affects the very self-perceptions required for the user to see he or she has a problem. This effect of inducing cluelessness about the problem is but one aspect that marks marijuana as a more serious and potentially harmful drug than usually realized.

Drugs are Not a Moral Issue

A moralistic approach that regards drugs, both legal and illegal, as bad in and of themselves, doesn't work. The functional approach that we have to offer, in contrast, looks at the *effect* of the drug—what works, what doesn't, what's productive and what's destructive.

Our goal is to help individual patients handle their emotions without the need to rely on drugs. But we also recognize that there are times when an individual is overwhelmed and may need to take medications to reduce emotional contact to help them cope.

Meeting the World Where It Is

A good charter analytic therapist meets the patient where they are. A good social ergonomist must meet society where it is. Drug use and abuse is epidemic in our society. We cannot address other problems of contactlessness until we have addressed the more immediate chemically-induced manifestations of it.

The ACO must also meet society where it is and start with the social manifestations of drugs before we can address other deeper problems in society.

Many people are suffering with anxiety and depression. Others are suffering but oblivious about what lurks in their emotional depths. Others are trying to become oblivious with some drug, prescribed or otherwise. No wonder we are experiencing an epidemic of drug problems. Cluelessness, characterological and chemically-induced, is where too much of the world is.

Contactlessness is also a serious social problem that must be addressed. The editorial staff of ACO Press is working on Dr. Charles Konio's upcoming book, *Clueless*, which covers many aspects of this subject as it addresses the problems resulting from people's lack of awareness of themselves as well as of others and the world. We are hoping to publish this book some time in 2018.

A Focused Plan for 2018 and Beyond

We are already scheduled to continue the discussion of drug-related problems with our next ACO Movie Night on Saturday, March 24, 2018. Drs. Marcel and Apple will lead an open discussion following a showing of *Generation Found*. This documentary shows Archway Academy, an alternative recovery high school built around sobriety for teens so they have a chance of not returning to the peer pressure and drug abuse in their traditional high schools.

Plans are also underway to organize a public conference to present clinical case histories in which patients were helped to overcome their drug problems through their experiences in medical orgone therapy. The cases will be particularly focused on teenagers and marijuana. Tentatively scheduled for October, this will likely be held off-site in Princeton.

In addition, we are looking into organizing discussion groups for parents to help them handle their children who are using marijuana. Stay tuned for additional announcements as we develop these new events and programs.

Supporting Health

Another especially exciting project under development are educational presentations and discussion groups for young people who do *not* use drugs. Surrounded by those who do, they experience trouble finding love relationships with partners capable of genuine contact, and at work or school, often struggle to find excitement and satisfaction in a world of fellow students, teachers or co-workers, employees and bosses who are stoned or under the influence.

It is far easier to support health that is already manifest than to try to recover it when it's become side-tracked and buried. I'm not aware of any program elsewhere that specifically addresses supporting non-users in a context broader than the family of a user such as Al-Anon. What we envision would address the problem from a larger social perspective. Such a ground-breaking project would be a direct expression of the ACO's core function of supporting health in a troubled world.

A Clear-eyed Approach

We need to look clearly at the effects of drugs on society. We must recognize and inform the public about their detrimental effects on people's ability to live their lives fully. But abstinence cannot work unless the individual and society have alternatives for handling intolerable emotions without

deadening them. A key gift we have to offer is knowledge of the existence of medical orgone therapy as just such an alternative for rationally handling emotions. We must bring this information to public awareness.

Therapy is Key to All Orgonomic Work

Medical orgone therapy can help people improve their capacity for emotional contact so that they can tolerate and handle them at a greater intensity and depth. With that capacity also comes the possibility for deeper satisfaction. We need therapists who can help patients accomplish that.

The long-term future of any aspect of work in orgonomy and the ACO's future, therefore, depends on finding new people qualified to train as medical orgonomists.² That necessity lingers in the background of everything we do. In December 2016, the medical orgonomy trainee who finished the Introductory Didactic Course in 2015 was accepted and advanced into the medical orgonomy clinical training seminars. In his mid-thirties, he represents a new generation of medical orgonomists and is a constant reminder of our need to bring more young people into training.

We've been exploring various ways to do that. Most of our medical orgonomists learned about orgonomy through experiencing their own therapy prior to going to medical school. Educating the public about the benefits of our approach to therapy will help many people individually but will also increase our chances of finding potential new trainees.

This year, more than in the past, several people new to ACO events contacted the orgonomist who gave the presentation to ask about possible therapy. This certainly indicates improved contact with the public about therapy.

A New Therapy-Only Website

This year we have continued work on a separate website where interested people can go directly to find information about therapy alone. The full range of information about all aspects of functional knowledge presented on the ACO main website can be overwhelming. We wanted to reduce distractions or confusion in people's first contact with us and are still in the process of creating content for this website.

We've accomplished a great deal for this endeavor—developed a clear concept for the initial approach for connecting with people, drafted a text and began to assemble it. Using the tag line, “a different kind of psychiatry,” we envision the website as a portal for those interested in therapy offered by our orgonomists as well as those who might want to train to become a different kind of psychiatrist. We will let you know when the website will be available.

Celebrating 50 years of the *Journal of Orgonomy*

Articles about medical orgonomy and therapy case histories published in the *Journal of Orgonomy* have always been an important resource for educating the public about this key aspect of orgonomic knowledge. To celebrate 2017 as the 50th year of its continuous publication, we are publishing a special anniversary volume of the *Journal of Orgonomy*. Divided into two books entirely devoted to clinical cases, Number One will focus on parenting, pregnancy and medical orgone therapy of

² See page 6 of my President's 2015 Annual Report and Holiday Appeal.
[http://www.orgonomy.org/temp/ACO_2015_Holiday_Appeal.pdf]

children and adolescents and Number Two on medical orgone therapy of adults including somatic biopathies, orgonomic first aid and establishing health. These volumes will be available soon.

A New ACO Activity in the Sociopolitical Realm

We started 2017 in reaction to the upheavals surrounding the election of 2016 with an expanded New Year's appeal and annual report comprised of an extensive survey of functional knowledge in the realm of sociopolitics.³ This became the basis for the ACO Post-Election Sociopolitical Discussion Group, "Moving Forward as a Functional Citizen," which held its first meeting in February 2017. This group included past members of the ACO Sociopolitical Orgonomy Course, ACO clinical associates, members of our social orgonomy training program and other invitees.

This entirely new activity for the ACO formed and grew spontaneously and quickly in response to public events—a first for us. Led by Drs. Edward Chastka and Peter A. Crist, the group met at the ACO from 11AM to 1PM on seven Saturdays in 2017. The initial focus on post-election reactions evolved into the application of functional principles of communication in the discussion of sociopolitical affairs. The inclusion of participants new to the ACO has provided exciting fresh perspectives and helped us avoid a tendency to become insular and caught up in jargon.

Improved genuine communication within the group opened the door for more fruitful exploration of specific sociopolitical issues. The next group meeting in January 2018, for example, will consider, "Is healthcare a right?" We will explore this subject as a vehicle for delving into a functional approach to broader, basic questions about the origins of rights and the rational role of government as a means for looking into the roots of some of the current confusion on the political scene.

With sustained interest by a core group, the sociopolitical discussion groups have become established as an ongoing new ACO offering that will continue to meet every other month. The structure and approach in this group may serve as a model for new ACO activities on a variety of subjects to connect with new people, including the proposed drug discussion groups.

Building on Our Strengths

We need to continue to solidify the foundation of our knowledge in medical orgonomy and social orgonomy—the two best developed areas of the whole body of orgonomy.⁴ We will continue to do that through our training programs, therapy website and public presentations. And as we've said, for 2018 and beyond, we will focus on the medical and social aspects of drug-related problems.

The "Too-muchness" of Orgonomy: Turning Liability to Asset

But functional knowledge is not limited to medical and social sciences. It applies to every aspect of nature with limitless potential in the full range of disciplines. Reich described the problem of the

³ See my President's 2017 New Year's Appeal and Sociopolitical Overview.

[http://www.orgonomy.org/temp/2017_ACO_President_NewYears_Sociopolitical.pdf]

⁴ See the "Promises of Sociopolitical and Therapeutic Knowledge" section on pages 3-4 of my President's 2015 Annual Report and Holiday Appeal.

[http://www.orgonomy.org/temp/ACO_2015_Holiday_Appeal.pdf]

“too-muchness” of the breadth and depth of orgonomic knowledge,⁵ but rather than a liability, the broad range can work in our favor. Its richness potentially contains something for everyone. A couple of years ago we wrote of finding “digestible bites of orgonomy.”⁶ In 2017, we’ve done just that and have begun to engage new people by presenting functional approaches to disciplines new to the ACO.

Digestible Orgonomy

Our first offering of a bite-sized portion of the full rich meal was in the field of voice training. On May 20, 2017, voice teacher and mezzo-soprano, Donna Reid offered a special event, “A Master Class in Functional Singing,” at the ACO campus. With centuries of pedagogic history, the field of voice training has a variety of schools of thought, some more functional than others. Our event attracted Princeton University voice students, local band members and numerous individuals interested in learning a more functional approach to enrich their artistic vocal expression supported by improved natural technique. This event also represents a model for future presentations on the practical application of functional thinking to a specific area that may appeal to people from diverse disciplines. In fact, its success prompted us to ask Ms. Reid to conduct another such class scheduled for Saturday, April 7, 2018.

Orgonomic Science Hors d'oeuvres

For years, our laboratory courses have consistently connected with new people that aren’t drawn to our other events but interested in exploring the deeper realms of orgonomic biology and physics. On June 3, 2017, we offered a Half-Day Introductory Laboratory course as a follow-up to our successful two-hour, June 2016 ACO Lab Open House. This contrasted with our usual two-day, introductory and four-day advanced courses that require a significant commitment of time for the students and major investment of resources on our part.

We modified the half-day course from the longer courses to focus primarily on direct observation and hands-on work. Instead of covering didactic material in lectures during the course, we gave assigned readings and offered a preliminary on-line course. To keep the lab course staff focused, they were directed to imagine we were offering orgonomic hors d'oeuvres to whet the students’ appetites for a full-course meal of our two or four day courses in the future. This year’s half-day course also brought in some new people, including the teen-aged son of one of the participants.

The success of the course prompted us to plan another half-day course for June 2, 2018, specifically covering the Reich Blood Test. Of all the material in our lab courses over the years, the participants have consistently been most moved by observing living human blood through the microscope. A focus on one subject will also serve as an additional model for future presentations by limiting the scope to a digestible portion of orgonomic knowledge.

⁵ For a discussion of the “too muchness” of orgonomy see, Reich, W. 1949. *Ether, God and Devil*. Rangeley, ME: Orgone Institute Press, page 6. Also see page 2 of my President’s 2014 Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/2014_ACO_holiday_appeal.pdf]

⁶ For a discussion of the benefits and dangers of “Digestible Bites of Orgonomy” see page 5 of my President’s 2015 Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/ACO_2015_Holiday_Appeal.pdf]

Special Readings Event

Some years ago, I began writing stories about my medical training reflecting the challenges of remaining open and human as a physician in the face of patients' pain and suffering. Writing from those memories soon triggered others from experiences in childhood, adolescence and many areas of my personal and professional life. I was honored when members of the College and the Social Orgonomy Training Committee encouraged me to read pieces from my work to be followed by discussion of the personal and social implications of each. *All People Great and Small*, readings by Peter A. Crist, M.D. on Saturday, February 3, 2018, 4:00PM to 6:00PM on the ACO Campus, is scheduled as a special event—the next in our Social Orgonomy Public Presentation Series. I believe it also represents another example of finding different approaches to connect with new people.

Finding a Common Language

The process of writing has also shown me many aspects of how the ACO may better communicate with those outside our usual circle. After working on my memoir stories for several years, I began attending writers' critique groups to help me sense how readers, outside of my close friends and family, might respond. It was invaluable to me as an artist but has also helped me develop a language to connect with people unfamiliar with orgonomy.

Early in the writers' group, I decided not to talk about orgonomy because I wanted to keep the reactions to my stories focused on what I'd written and not about concepts or assumptions and potential misinformation regarding who I am and what I do. I've been working on telling simple emotional truths through stories or images rather than through concepts.

Nevertheless, I've learned many eye-opening lessons about how easily jargon can creep in without knowing it. For example, in one of my stories I referred to a medical student's "character."

The group's comments included, "Character means the person is good or bad. Doesn't sound like that's what you mean."

"Don't you mean her personality?"

"Her temperament? Or her nature?"

The lack of clarity about the different words for that idea didn't surprise me but the moralistic connotations immediately attributed to "character" did. For an orgonomist, "character" refers to a key aspect of someone's emotional structure. In fact, I'd written a paper defining the meaning of words to distinguish character from personality and nature.⁷ It didn't dawn on me that the word "character" with its precise definition to me, was jargon to them.⁸

I'd tried hard to avoid psychiatric, medical and orgonomic jargon, but there it was. We cannot entirely avoid misconceptions, but a heightened awareness gained from the experiences in the writers' group has informed my approach to many of the ACO's recent communications with the general public.

Such an attempt to drop orgonomic jargon and express what we have to say in commonly understood language that will connect with people unfamiliar with orgonomy was the basis for the piece,

⁷ Crist, P. 1993, "Nature, Character and Personality," *Journal of Orgonomy* 27(1) pp. 48-60.

⁸ The standard definition of jargon: "gibberish or chatter" that results from "phraseology peculiar to a sect or profession," certainly applied. <https://www.etymonline.com/word/jargon>.

“American College of Orgonomy: A Different Kind of Psychiatrist,” that we submitted to US1 for National Doctors Day.⁹ We also used the same approach for the text we are developing for the new therapy website.

People Love Stories

The writing group experiences have also taught a great deal about what does work to communicate. In Frank Delaney’s novel, *Ireland*, the itinerant story teller says, “People love stories. And they love stories about other people.”

The clinical cases in the *Journal of Orgonomy* consistently are described as one of its most popular features—each case a compelling story about a person. At the ACO we have also consistently encouraged our public speakers to include stories, including ones that will bring scientific data alive.

As an example, several people have commented about the “take-homes” from Dr. Apple’s talk on marijuana. The first was the story about the young man who went psychotic and suffered lasting effects following his first use of pot, after being pressured into it. The second was Dr. Apple’s story about his own experience with a visit to a marijuana dispensary in Colorado.

A Story for Everyone

The need for the ACO to offer variety as we are doing with our activities, also came home to me in reactions to my memoir stories, which each has its own effect. In the writers’ groups, I’ve discovered that the more action-oriented stories of my medical training generally have universal appeal and connect well with an extroverted, action-oriented person. The stories from childhood, on the other hand, receive mixed reviews. A sensitive introverted reader tends to love them while a more extroverted one may not relate to such experiences or, depending on their tolerance for sensitivity and vulnerability, may be contemptuous of the feelings they bring up.

The differences in responses do not deter, but instead, encourage my presenting the full range of stories. There is a story for everyone. My desire to connect with the full range of people is expressed in the working title of my book, *All People Great and Small*.

Likewise, the ACO can use the full range of subject matter within functional knowledge to connect with people of many different temperaments and characters in a wide spectrum of disciplines of those who may be interested.

Revealing Ourselves and Sharing our Gifts in the World

We never know what may come of connections we make. Recently the leader of one of my writers’ groups asked, “Can I ask a favor of you?” As a journalist for the on-line magazine, *CBS Money Watch*, he wanted some quotes from a psychiatrist for a piece about the effects of elementary school lock-down drills on children. Initially I was going to turn him down because I don’t have direct knowledge of children’s experience with such drills. But I realized I do have experience helping adults and children deal with frightening situations. I agreed to talk with him and he included a brief

⁹ See the on-line version at:

<http://www.princetoninfo.com/index.php/component/us1more/?Itemid=6&key=3-29-17aco>.

quote in his piece.¹⁰ I think we may not give ourselves enough credit as orgonomists for our knowledge that allows us to look more functionally at all sorts of situations.

An even more significant experience occurred in another writers' group I attend. A few months after one of the women joined, she took me aside and said, "From your stories, it sounds like you have a different approach to psychiatry. Would you be willing to see my 24-year-old son?"

I believe every orgonomist has had such experiences in which a potential patient has asked for help because of a quality they sensed in how we listen, how we talk and what we talk about. Revealing who we are and what we do in simple, human terms, is crucial to bringing our gifts to the world.

Finding a Language Beyond Words

We've talked about the need to find a language to communicate with conventional thinkers.¹¹ If a picture is worth a thousand words, a video is worth a thousand pictures. In 2017, the ACO started creating videos, which began with Dr. Marcel's enthusiasm for creating new ways to promote our Movie Night events. In October, we extended the project to promotional pieces for Dr. Apple's recent presentation on marijuana. Our videos have been so compelling as a new way for the ACO to show what we do that in November we decided to improve their quality and hired a professional video production company.

We've also begun filming a collection of short clinical vignettes. These represent more gifts to share for eventual use on our therapy website or to create a greater internet presence for the ACO through YouTube.

Recently, after recording a brief clinical vignette about helping a young man address his attention problems without medications, the owner of the video company said, "Sounds like my son. I haven't heard of this approach before."

A simple story without jargon that caught the attention of a new person outside our usual group and spoke to her in a language she understood.

A Home for Orgonomy

In 1986, we purchased our current property as a physical base for our training and administrative functions. Its immeasurable value has been previously described in detail.¹² In 2006, we expanded our activities when we began holding our public social orgonomy presentation series at our home.

¹⁰ Leefeldt, E., November 30, 2017, 5:00 AM, "Are Active Shooter Drills Too Scary for Schoolchildren?" CBS Money Watch. [<https://www.cbsnews.com/news/active-shooter-drills-lockdowns-too-scary-for-schoolchildren/>]

¹¹ See the "Language Barrier" section on page 10 of my President's 2014 Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/2014_ACO_holiday_appeal.pdf]

¹² In particular, see the "A Home for Orgonomy" section on pages 1-2 of my President's 2011 Annual Report and Holiday Appeal. [<http://www.orgonomy.org/temp/2011HolidayFundraiser.pdf>]

Improvements to Our Land and Property

In recent years, the greater use of our property for our smaller educational events at our campus including ACO Movie Night, the new sociopolitical discussion groups, the half-day lab course, and the voice training class in 2017, has fulfilled our predictions of increased use of our home.

This increased public traffic to our property has highlighted the importance of making it more welcoming. We first announced our Property Improvement Project (PIP) in 2011.¹³ The next summer we laid out more detailed plans and identified Phase I as removing “detractors,” and Phase II as adding “attractors.”¹⁴ We’ve completed Phase I, and this year made significant progress on Phase II.

We thank all of you for your support of our “Keeping Cool” summer fundraiser to offset the expenses we incurred for installing air-conditioning/heating units. Your gifts meant that between July 31 and November 9, 2017 we raised \$14,245, which was 63% of our goal of \$22,606. All the activities at our home, including public events, training seminars, organizational committee meetings and administrative staff work have been enhanced by the improved comfort of temperature-controlled rooms without the distraction of noisy air conditioners.

This year we also set up the “Living Campus Project” to plant new trees on our property. In the past year, we had to remove four shade trees that had come to the end of their natural life span or had succumbed to disease. We are thrilled with the support we’ve received to complete the initial phase of this project. We now have the full \$4,905 to purchase and plant four shade trees to replace those we lost, plus three attractive new flowering trees to enhance the beauty of our property. We’ve also received a generous donation of \$1,000 plus several smaller ones to cover additional costs. Those contributions will also help us enter the next phase of the project, which may include understory plantings of shrubs and small ornamentals, as well as foundation plantings to landscape around the building. Beyond that, we envision additional shade trees and other trees to provide points of interest.

Improving our Image and Façade

As we’ve attracted new members of the public to our events at home, we want to ensure we convey an image commensurate with the quality of the work we do.¹⁵ Our living campus project is one step in that direction. In addition, we’ve maintained our driveway, improved our parking, lighted our new sign at the entrance to the property and installed an awning as shelter over the main entrance to the building. Additional plans to make improvements to the entry have led to the conclusion we should engage an architect to help us develop an integrated look that reflects the image we want to convey to the public on their first encounter with us.

¹³ See my President’s 2011 Annual Report and Holiday Appeal. [<http://www.orgonomy.org/temp/2011HolidayFundraiser.pdf>]

¹⁴ See pages 5-12 of my President’s 2012 Summer Update and Appeal. [http://www.orgonomy.org/temp/media_president_summer_2012.pdf]

¹⁵ See the “Our Image is Important” section on pages 5-6 of my President’s 2012 Summer Update and Appeal. [http://www.orgonomy.org/temp/media_president_summer_2012.pdf]

Nomads or Settlers of a Colony?

In the past, we've described the ACO as the functional equivalent of a colony on the broad continent of knowledge of nature, much of which is already occupied by conventional thinkers.¹⁶ Such a colony needs a physical home from which to grow, gain strength and establish a foothold. We've increased the number of events on our campus. Those are going well but we still need larger venues for others, such as our Social Orgonomy Presentation Series. The attendance at both those events in 2017 exceeded the 30-person capacity in our event room at our ACO campus.

In 2009, when the attendance at our public presentations first outgrew our home, we started holding events in Princeton. Due to a series of scheduling problems or changes in administrative policies or staff, we've occupied four different venues over the years. We've often needed to scramble to find a new place or have had to quickly change our policies, such as when one site forbid charging for events or selling our publications.

This past October we tried out Arron Burr Hall on the Princeton University campus for Dr. Apple's presentation. Convenient, with a pleasant classroom setting and a good price, we had thought we'd use it again in October 2018. We recently learned, however, that at some point after we were there in October, they instituted a new policy that outside groups must have their presentations approved to ensure they match the goals of the University. We have not yet been told exactly what that entails.

We must depend on using off-site venues for our larger public presentations but finding suitable ones has become increasingly difficult. We've become like a landless, nomadic tribe that, at the last minute, must find safe shelter from the elements and from competing tribes.

We need to have a place to do our work where we can maintain our independence and have the freedom to present our views and knowledge, without distortion or outside interference. Until we've established a solid foothold in society among conventional thinkers, we need to be especially careful about maintaining full authority over what we say and how we say it.

To change our nomadic existence and become true settlers, we ideally need to build our own meeting hall on our property. We've already begun discussions with an architect about designing improvements to the façade of our current building and will confer with him about the cost of constructing a new building.

Our Plans for Major Foundational Property Improvements

In August 2013, we announced major property development plans that included a new property entrance, driveway and parking area, in addition to a new septic system.¹⁷ At that time the vision included a new building only as hypothetical in the distant future. We had planned to temporize on all aspects of those plans while the demands for the activities on our campus developed organically. The recent increase in our activity, however, has moved us in the direction of acting on those plans, regardless of if or when we might build a new building.

¹⁶ See the "A Home for Functional Knowledge" section on page 3 of my President's 2014 Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/2014_ACO_holiday_appeal.pdf]

¹⁷ See page 3 of my President's 2013 Summer Update and Appeal. [http://www.orgonomy.org/temp/2013_summer_appeal.pdf]

Costly Improvements Needed in 2018

Our antiquated septic system was in such poor condition by the fall of 2017 that we could no longer put off needed repairs. The county health board turned down our application for permits for the needed repairs and have required us to build a new system because the existing one is inadequate and otherwise not up to code. They are allowing us to continue in operation solely based on our good faith pursuit of and progress on installing the new system.

Circumstances have pushed us to undertake this major part of our original 2013 plans before we had wanted to. We've engaged a company to engineer and build a new septic system. They located a suitable site, designed the system, and drew up plans, which we've submitted to the township and county health board. Depending on weather conditions, construction should begin shortly and be completed by spring. At a cost that will exceed \$40,000, this is by far the largest expenditure for any improvement on our property to date.

Thank You Again for Your Property Improvement Donations Over the Years

The generous contributions received from our original Property Improvement Project fundraisers leave us enough to cover this unexpected and mandatory expenditure but will leave us far short of the funds needed to complete the rest of our planned improvements. Regardless of our long-term plans, especially regarding a new building, we need your help to replenish the PIP funds we are spending now on the new septic system. After our discussions with the architect, we will report to you more precisely about projected costs to construct a new building for our larger public events.

The ACO is a Miracle

Every year I sit down to write the annual letter with some form of the same thought in my mind. *There's not a lot to say. This ought to be simple. I'll just tell them how we're doing, what we've done in the last year, and ask them to help us continue this work that matters so much.* Then I start looking at the College and am hit once again by the reality that the very existence of the ACO is a miracle.¹⁸ And every year as I review the past 12 months, I'm astounded by what we accomplish with our limited resources. You'd think I'd learn, but one thing leads to another and I have more to say than space to say it.

Beyond being a miracle, the ACO is a remarkable organization on a simple practical level. We have one full-time administrative staff person, Debra Sansanelli, supported by one full-time administrative assistant, Rose Littlefield, without both of whom we could not do what we do. We also have independent contracts with a bookkeeper and accountant and maintain a nine-acre property and its main building and laboratory. Everything else, our Board of Regents, committees, teaching, publications, public speaking, email-blast and PR editing, is performed entirely by volunteer efforts. We do all of this on a budget of little more than a quarter of a million dollars with more than \$150,000 of that regularly coming from the generous contributions of supporters like you. Every time you consider what we do to survive, grow, develop organomic knowledge and bring it to the world, please remember you are an essential part of the ACO miracle.

¹⁸ See the "The ACO is a Miracle of Nature" section on page 3 of my President's 2014 Annual Report and Holiday Appeal. [http://orgonomy.org/temp/2014_ACO_holiday_appeal.pdf]

Swimming Against the Tide

The ACO is not where most of the world is. We are swimming against the tide of the mass of humanity. But that is nothing new for functional knowledge. We are seeking out the clean, clear currents in a polluted ocean. We are in the company of great men who sought the same.

Most people avoid looking into their depths.¹⁹ It feels dangerous. Many great men who have asked people to do that in any significant way, including Christ, Freud and Reich, have been misunderstood, mystified or crucified. To follow Christ, the people had to crucify and mystify him rather than simply look into their hearts. To accept Freud, people had to intellectualize his work and remove the basic humanness of it.²⁰ People still don't truly grasp his basic concept that man has an unconscious mind that drives our behavior for good or ill. More than a hundred years after many of his key discoveries, they still cannot leave Freud alone and continue to find ways to denigrate him and his work. Wilhelm Reich's work has been misunderstood, distorted and outright ignored as has been well documented in the organomic literature.

Establishing a Foothold for Functional Knowledge.

Reich's work and the body of functional knowledge that he originated and called organomy, has not yet found a standing in society. The fact that we are the ones who need to establish a foothold for functional knowledge is testament to that fact. The ACO is about accomplishing that daunting task a step at a time.²¹

Daily Miracles

Every day medical organomists see little miracles in their work with patients. With the use of brief videos, we are beginning to document, in order to present to the world, those stories told by the therapists. We have memoir stories of an organomist that will be publically read about how to be human as a physician. We show several movies a year with discussions not heard anywhere else. We publish a journal in its 50th year of continuous publication. We are publishing a new book on human contactlessness. We have someone with knowledge of improved vocal expression to attract and work with people new to us. We will offer a course where people can observe living human blood. We have an ongoing group where people can explore how they see sociopolitical affairs. Bringing this treasure trove of gifts to the world makes all the effort worth it.

Gaining Momentum

For the first time in a long time it feels like we've overcome some inertia and are gaining momentum. It's like children with a sled. When standing still and loaded down, it feels as if it's frozen to the ground and won't budge. But with continued pulling on the rope, there comes a moment when the sled finally starts to move and slides on its own. It feels like we're near that point. If we keep things moving, it will begin to feel effortless.

¹⁹ See page 1 of my President's 2015 Annual Report and Holiday Appeal.

[http://www.orgonomy.org/temp/ACO_2015_Holiday_Appeal.pdf]

²⁰ See the "Attacks on Our Tradition" section on page 8 of my President's 2015 Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/ACO_2015_Holiday_Appeal.pdf]

²¹ See the "Gaining a Foothold in the New World" section on page 4 of my President's 2014 Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/2014_ACO_holiday_appeal.pdf]

Uncertain Times

These are uncertain economic times in people's lives and the world. Many are struggling economically. We have been incredibly fortunate to have the generosity of donors like you. Your support has grown in recent years and allowed us to maintain our operations and activities as well as expand our endeavors in so many ways in the successes of 2017.

Just as we've embarked on new ventures, however, our total contributions have taken a dip from the past two years. I sincerely hope it's only a fluke and not because any of our donors assume from the apparent ease that has come with us gaining momentum that we don't need the help. We are bustling with activity, but the reality is that we are still like a child that needs ongoing support and nourishment.²²

Finding and Nourishing Our Legs

For an organization, whether in the form of a whole colony or an educational institution like the ACO, money is the functional equivalent of blood in an individual organism.²³ The ACO is just developing legs and finding its stride. Our legs need blood to supply the developing muscles until they are functioning well enough to achieve the independence that will come from more students enrolling in our training programs, and more people attending our presentations and buying our books and journals.

We Remain Dependent on Supporters Like You

In the meantime, our very existence depends on the generosity of supporters like you. Now more than ever, we must not let up. We need your gifts to help us keep up the momentum and find our stride so we can bring our gifts of functional knowledge to the world that so desperately needs them. We have armloads to be carried by the few hands we have available at this time. Once received and opened, these gifts will excite more people and add new hands to help us continue to haul even more gifts for future generations.

Our Promise for the Future

We have a clear focus and are developing plans to shed the light of functional thinking on the problem of drugs that affect millions of young people. Adolescence is the make or break time in everyone's life. It can be when a young person gives up and accommodates to their problems or it can be a true "do over" when they face their limitations and attempt to overcome them and come into adulthood.

²² In the "Assessing our Development" section on page 12 of my President's 2014 Annual Report and Holiday Appeal, [http://orgonomy.org/temp/2014_ACO_holiday_appeal.pdf], I compared the ACO's stage of development to that of an infant able to crawl but not yet stand on its own feet. In January 2017, on page 11 of my President's 2017 New Year's Appeal and Sociopolitical Overview, [http://www.orgonomy.org/temp/2017_ACO_President_NewYears_Sociopolitical.pdf], I still placed our development there. But now at year's end, after our successes of 2017, I see us as a toddler, gaining our feet, just able to stand and learning to walk. But at this stage a child still needs support and nourishment, perhaps more than ever.

²³ See the "Money is the Lifeblood" section on page 10 of my President's 2012 Annual Report and Holiday Appeal. [http://www.orgonomy.org/temp/media_president_winter_2012.pdf]

Ask anyone who was fortunate enough to have found medical orgone therapy in their late teens or twenties how they think their lives might have turned out otherwise. If we can help young people come out of the fog of drug use, they will have a chance to deal with their lives in a constructive way and we will have changed the course of the future of their emotional health.

A Great Investment in a Hopeful Future

Where else can you invest in the future of the core values of genuine satisfaction in love, work and knowledge on such a real and profound level? We need your ongoing support to help us have a chance to continue this vital task. Your contributions support our efforts to create and sustain a home for functional knowledge and the programs that keep it alive. They will also provide the means for our ongoing outreach to establish a foothold in the world.

Join Us

I hope you will join with us by continuing your financial support to help us maintain our momentum and insure our success in bringing the gifts of functional knowledge to the world that so desperately needs them. Please use the enclosed card to send in your contribution or donate online at www.orgonomy.org, where you can make a single gift 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.

Thank You for Your Generosity

From all of us at the ACO, I thank you for your support and generosity. Let us once again follow in the footsteps of the American founders who, in taking on what seemed the impossible task of declaring their independence from the motherland, said, "We pledge our lives, our fortunes, and our sacred honor." In their Declaration of Independence, they also said, we are endowed by our "...Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness."

In his well-known statement, "Love, work and knowledge are the well-springs of life. They should also govern it," Reich spelled out the basic core life functions, in a way that, without contradicting the founders list of unalienable rights, further refined them.

With that in mind, I wish you and yours a healthy life, freedom of expression, and satisfaction in your pursuit of happiness in the new year. We hope to see you in the near future at one of our events at our Princeton home or a public venue nearby.

Sincerely,



Peter A. Crist, M.D., President

Please [support the ACO](http://orgonomy.org/support.html) today.

<http://orgonomy.org/support.html>