

Being and Time - a Revisit, Part II

by

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In this paper, the male pronoun will apply to either gender.

The nominal pronoun will apply to the first author.

The plural pronoun will apply to both authors.

Spelling is in British English.

We would like to begin this paper by reiterating this quote from Part I of this article:

From my reading of *Being and Time*, I did get one singular gem.

It is the explication of the phenomenon as to how it is that Medicine and especially Psychiatry and certainly Psychology have no interest in Ontology. When one seriously reflects on this, it is truly amazing that these disciplines simply do not see the need to explore the fabric or structure of human subjective reality.

Heidegger pointed out the questions about human ontology seemed to have been answered by the Christian Theological stance that man is not just a thinking lump of living flesh. He is a transcendental being. Given the power of the Church, it seemed there was no warrant for anyone to question this canon, certainly if one did not wish to suffer the same fate as Galileo Galilei. The second was Renee Descartes assertion, *cogito ergo sum*¹. With this assertion, the matter about possible questions concerning human ontology all seemed to dissipate into a void.

Finally, came the assertion from out of nowhere, that the phenomena of *Being* were self-evident? We believe that Medicine, Psychiatry and Psychology are hooked onto this belief. The result is that when a person comes to a doctor with a set of psychological complaints his condition is immediately and intuitively deemed self-evident. This means that without examination by any objective scientific criteria the clinician declares his diagnosis.

There is significant evidence that not a few psychotherapist and hypnotherapist also hold this same view that *Being* is self-evident. We showed in Part I of this paper how this position is simply untenable and unbelievable. Any *Being*, anywhere and any time has a fabric or structure; and more critically it has a meta structure and meta-meta structure to it. The meta and/or meta-meta structure for a given ontology determines:

1. the form the ontology or *Being* is to take

¹ *cogito ergo sum* is Latin for, I think, therefore, I am.

2. when the ontology is to be manifest.

However, in spite all this that we have indexed that:

Being is NOT self-evident

the FANTAST BELIEF that it is, is a very powerful semantic anchor. It is so powerful² that the clinician who is able to see and acknowledge this truth that Being is not self-evident, will in next moment, act on the unquestioned assumption that:

Being IS SELF-EVIDENT.

What is also NOT true is that, under normal conditions we are in control of our ontology and our expressions of it. Every cigarette smoker, pot smoker, alcoholic, nail biter, road rager, obsessive compulsive, tricholomanic, chronic depressive, flight phobic, social phobic, road rager will confirm that they have no will over their ongoing ontology and their expressions of it. They have no control over the critical domain of their life that most concerns.

From the above examples, we conclude that it is an illusion that we live fully in control over all domains of our lives. We say, that it only appears that we have control. It only appears so because we are happy and in accord with the ontologies that are served to us by the embedded structures in us. The problem unfolds when our embedded structures serves us an ontology and its concordant expression that we do not want. Then we grasp how powerless we are. We feel that we can assume that you have never had such an experience. All your life, you have you always had thoughts and feelings that were in accord with you values, societal norms, ethics, morality, sense of Law and Culture. So you probably may not know what we are writing about and what we mean.

Well, think on this. I had a very finely suited middle class young man in his mid twenties who came to see me. His problem was that every morning when he was shaving in front of the mirror, he could see an image of the act of fellatio. No matter what he tried to do, he could not override this thought. As you may have noticed it never happened at any other time of the day. It was always in the morning when he was shaving³.

Then I had this very successful businessman. He came to us in distress because he was plagued with thoughts of killing his entire family. It was very offensive and distressing to him because he loved his wife and children. He tried every manoeuvre he could think of and read every book he could find on the subject. However, he remained stuck with this problem⁴.

² its semantic anchor is so powerful that it entails the consequences that hardly anyone after reading what we have indexed here will bother to research NSP. They will not even think if there is any merit to find out if NSP truly offers new and powerful ways to understand the fabric of human subjective reality and how to modify an ontology that is ill-formed. For this, therefore, Psychiatrist will go on prescribing their pills for their labels to the continuing enrichment of drug companies into their \$billions^N and Psychologists go on with testing and testing their clients and talking and talking to them.

³ It was always in the morning when he was shaving can only mean that the event is a function of some internal embedded structure that operates only under the conditions as cited. Recently we had a case of premature ejaculation that only occurred about 2 minutes following intromission.

⁴ stuck with this problem:

Clearly, Medicine and the pharmaceutical industry, today₂₀₀₉, do NOT have a pill to “cure” this person of this problem. In fact, we know that Medicine and the pharmaceutical industry is bereft of an untold number of chemicals to undo an incredibly vast number of thinking anomalies that human kind is replete with. The

The evidence is that whilst we think that in life we are always saying what we want to say, this is clearly is an illusion too. We say what we say because we are in automatic accord with what is served up to us to say. It is only on those rare occasions when just as we are about to say the words served up to us and are now at the very tip of our tongues that we suddenly realize that if we were to utter them that there would be horrendous consequences. Now, under this condition we have to jam on the breaks, bite our tongue and finally think and decide what we really need to say and then to utter it. It is the only time we have to take control of our bus⁵.

Finally, have you ever fell head over heels for someone? You pursued and wooed her. However, she would have none of it. Then, a moment comes when the ontology is served up to you:

Pull back. Do nothing. Give her some space.

Do you remember how killing it was to fight doing nothing when, all you wanted to do was to continue to woo and court her. You were barely able to be in charge of your ontology.

So, for the last time we repeat:

Being is NOT self-evident⁶.

In fact it has always been a traditional and standing position held by everyone that *Being* is an unfathomable mystery. If this true, then how is it that, suddenly, it is a self-evident phenomenon. And for some mythic and mystical basis it is self-evident only to doctors of psychiatry and psychology and to those in the therapies and social work.

Today²⁰⁰⁹, in Psychotherapy and Hypnotherapy, the clinician is best to have the know-how to unravel:

1. what is the structure of a given ontology
2. what is its meta-structure and meta-meta structure.

pharmaceutical industry has an incredible opportunity to generate not trillions but quadrillions of dollars if NSP indexed to it the deviant ontologies that it could chemical against.

⁵ take control of the bus was turn of language that was first put to us by Richard Bandler. It referred to the way people are. Each is like a bus and as the owner we are never in the driver's seat. We leave it to the bus to take us wherever it sees and feels fit to do. In our languaging and being we are never in charge. We just leave it to the embedded structure to determine what and how things are to be.

⁶ *Being* is NOT self-evident.

In saying this we know it will cut you. Now you will have to accept that you do not have any legitimacy of logic to conclude what a diagnosis of a case is just from what linguists describe as - the surface structures of language. The surface structures of language are the sounds of language that are articulated to you by a client.

If the student accepts this, the question that he now has is:

Where and what books am I best to read to learn
how to explore the issues relating to the nature of Being?

Where do I go to learn how to unravel the mystery of Being?

We now know that the premier field that will give the answers to these questions is the field study of Neuro-Semantic Programming. This field study is so named because all ontology is about:

1. its semantics, cognitive and analogical.
2. the neurology by which it unfolds.

We commend the reader to visit the site: <http://www.neuro-semanticprogramming.com/>.

If the clinician can do this he can:

1. infract across the ontology and end it
2. end the possibility of its recrudescence.

We shall explore these very critical and interesting considerations in Part III.
In doing so we shall introduce you to the field of:
Neuro-Semantic Programming, NSP.