Metamorphosis
Robert St. John

The name Metamorphosis is Greek and very ancient. It has many meanings and is used in many ways and in connection with many schools of thought and sciences.

In the Oxford English Dictionary one of the meanings given is “A complete change in the appearance, circumstance, condition and character of a person.”

In my experience of the treatment of retarded children, either Autistic or Down syndrome, this description is wonderfully accurate. The word Metamorphosis describes what takes place perfectly: but I would alter the word “change” to the word “create” because what takes place in this work is something that is a creation.

A “creation” is the production of something that has not existed before: “change” is the alteration of the order of things.

In Metamorphosis that which takes place is something that is the child’s (person’s) own inner healing principle, the child’s (person’s) own desire to assume normality. The child (person) is the healer, not the practitioner. And through the medium of Metamorphosis it is not only the child (person) who assumes normality but the principle of inheritance. In the use of Metamorphosis, whether it be for the treatment of a retarded child or that of an adult who wishes to find a new way of living, it is the genetic “line” that is healed.

Whatever the age of the subject, the process of Metamorphosis reaches the very basis of healing in our lives, it is not only the child that becomes normal but all members of the same genetic line, the parents and grandparents. In the case of an adult, the children all experience this creation of normality; and this from the treatment of one member only.

Metamorphosis heals at the most primary level, that of the principle of life within us. Metamorphosis does not “cure”; it enables us to create a different attitude towards life, and it is this, which alters our troubles, we cease to create illness.

This is why the use of the word Metamorphosis is so appropriate to this work.

In visiting Greece and talking to people there about the meaning of the word Metamorphosis, I was told that the modern understanding of the word is “A transmutation into a higher substance.” I feel that this is even more appropriate than the dictionary meaning.

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Deep within us is a centre, a nucleus, from which we have the potential of complete and absolute intelligence and functional ability. This nucleus is the individual consciousness that gave us independent life from our mother at the moment of conception. It is all that, in previous times we have attributed to God, from the various points of view of the religious concepts of the world. It is a great deal more than this, because in those days we were looking at the principle of God through the structure of a religion which, however well founded, became distorted and warped by the social and political practices which have always been present.

Today we have an advantage over the patterns of the past; the nature of life has changed in a subtle way. Although the principle of God is the same as it always has been, the way in which we approach it has changed, a difference in our attitude of mind, of the way in which we direct our thoughts and feelings. For generations God, or the image of God that we created in our process of thought, has been outside of our structure, now it is not only inside, but it is the centre of our structure. That which is the consciousness of life within us is the principle of God and this is an integral part of our structure. The real difference is that formerly God was a concept apart; now this principle is the quality of our own life, not a separate part, and, if we are to function at all, must be used in the ordinary way in which we use our arms and legs, our lives or our heart. If we fail to use it in the ordinary way of life we are in considerable trouble because it is now a part of our structure.

The principle of Metamorphosis is the ability to be able to “tune in” to this centre in the ordinary practice of life. We don’t use much of it because we are a mass of diversionary “blocks” which act as alternative centres of consciousness and which are only as intelligent as the blocks of which they are composed. These blocks are genetic, karmic or various other forms of fixing and holding our attention in times which are other than the present moment. If we could function from our own centre of consciousness the block ceases to exist because it is only a product of thought, and if the block ceases to exist we “become” our own centre of consciousness and function accordingly.

All of this may sound too simple; we are used to profound processes of thought with much explanation and ritual in Metamorphosis there is little or none of this. It is possible to analyze the pattern of the functions of life from the point of view of Metamorphosis and it is very interesting to do so, but it is not necessary from a practical point of view. The quality of life, consciousness, is in all of us; we are consciousness if we are alive at all, and if we are standing up or sitting here we must be alive. The potential of this principle is a normal part of our structure and can be used normally.

Although Metamorphosis is an attitude of mind and very simple to use, we have been indoctrinated over the centuries by structures of thought in religion, philosophy and education in such a way that our ability to think and function from the level of thought is tied to these same structures and we are not free to “think” from our own inner intelligence. We need some ritual to “unthink” this structure. That, in principle, is what Metamorphosis is. What physical practice there is in Metamorphosis is a symbol for the mind to change all of the indoctrination of the past and to “be come” the present.
Motive
Robert St. John

When someone comes to see you about their troubles, their motive is these troubles: and your motive is to do whatever is necessary to help the subject to be able to get rid of these troubles.

In the practice of Metamorphosis we are supposed to be free of motives. We are supposed to have a freedom from the limiting factors of a motive.

To have a motive, such as a reputation for healing or of removing pain, or a motive or reputation for charging very high fees, or, for that matter, not charging at all because true healing is said to be the work of God, and that is supposed to be above monetary rewards: to have such a motive is a limiting factor in the principle of Metamorphosis.

A motive of some sort is inevitable: to try to get rid of it by meditation, prayer or any form of ‘up-liftment’ produces a motive for motiveless-ness, a type of double negative: but there are two types of practitioners and they both approach this matter from opposite sides. These two types are the afferently orientated person and the efferently orientated person.

The Afferent person approaches life from the most abstract and unconnected point of view; and the Efferent person approaches life from the very factual and dogmatic point of view. They are both very genuine in their approaches but they have diametrically opposite ideas about their motivation in Metamorphosis, in their way of handling the situation.

This is due to their Afferent or Efferent orientation and not to a perversity of opinion. Afference is the spirit of life and Efference is the action of life – two completely different themes – but two halves of the whole, the two united in balance become the perfect ‘Being’.

Afference, being totally Abstract, has a totally abstract motivation concerning the subject’s troubles: and Efference, being totally ‘concrete’, has a totally ‘concrete’ motivation. The degree of the abstraction or concreteness will vary from one extreme to the other, but it is the relationship that we are concerned with.

The abstractness of the motive of Afference provides a non-personal, non-identified attitude, and the concreteness of Efference provides a fully personal and identified attitude.

As the principle of Metamorphosis requires a freedom from the limitations of motiveness, the Afferent person will be well set in the matter, but the Efferent person is the opposite and needs some form of release from motivation. In the ideal situation of a good balance of Afference and Efference there is no questions about either having to do anything about it.

In the practice of Metamorphosis there is a directing of the attention of thought on the part of the practitioner towards the subject, or to the respective reflex area. The process of thought being thought occurs at the point of balance between Afference and Efference and there tends to be a freedom from identification in the practice: but, if the practitioner is Afferent there will be a leaning in this direction, and if Efferent it will be in the other direction. A balance between Afference and Efference avoids the necessity of thinking of motivation.
Symbols
Robert St. John

In the study of a subject such as Afference and Efference it is necessary to understand what symbols are. Anything that has no physical existence and yet has a fundamental influence in our life has to be defined in terms of the form of a symbol, a work or design which represents this state.

All through religious doctrines these symbols exist, in science they are used in the place of long explanations which occur so frequently in their work. The symbol is a form of shorthand for the explanation of a non-physical state such as occurs in religion.

The name “Afference” is a symbol of the principle of life, of which we are aware in our daily existence. We are conscious of being alive but find no ability to explain what this element may be. In religious doctrine it is explained by the work “God”: but in Metamorphosis we use the word Afference. Another form of symbols is in the words Yin and Yang. But the words God, Afference, and Yin & Yang have differences in their meaning and therefore are not interchangeable; one symbol does not necessarily mean the same as the other.

In this work I make no attempt to explain the words God or Yin and Yang; but the word Afference is fundamental to this work as an explanation of the non-physical influences on our lives. The word used as an expression of the counterpart to Afference is Efference. Afference is a word-symbol for the non-physical element and the word Efference for the physical element.

Get used to these two symbols as they are the fundamental principle of Metamorphosis; Afference and Efference are the life and the substances of our existence in the terms of Metamorphosis.
The Importance of Abnormal Behavior
Robert St. John

Because life depends on a fulfillment of the flow of consciousness into action, a communication of inner awareness with the actions of life, the structure of the channel of that flow must inevitably dictate the nature of the action, because this channel is also the pattern of the ‘blockages’ of the gestation period.

This means that if there is a predisposition towards stress, tension or disturbing behavior, an expression of this characteristic must take place as a ‘normal’ fulfillment. The alternative is inhibition of action.

There is no doubt that it is the action of life that is of paramount importance and not the inhibition of action. If the action contains patterns of behavior that are considered abnormal, accept the action as the natural expression of the person’s pattern of life, but, if they wish to change or if their behavior is such as to cause trouble, then tackle the problem at the source, at the inner motivation of the subject and he will not require discipline or enforcement to make the change, he will do so simply because he no longer has the need to express himself in that particular way.

Examples of this are smoking, the drinking of stimulants such as coffee, tea and alcohol, an abnormally constructed diet, sexual malpractice’s and many other things that are the usual pattern of the average person. Smoking produces a ‘screen’ between the whole consciousness and the functional self; it prevents the division of the mind that blocks produce, from becoming too much an aggravating factor. As long as there is a need of this sort the subject actually benefits by smoking: once the block has been removed smoking produces a poisonous effect, but, usually, the subject just spontaneously gives up smoking. It is interesting to observe that as long as there is a need for smoking it is not a poison, it has a purpose in the whole pattern.

Coffee has a similar effect. When there is a strong pre-birth trauma, when action is inhibited, a small quantity of coffee, preferably black, tips the balance into action of both mind and body. Once the birth trauma has been cleared coffee becomes a poison. The stronger the block, the greater the need for more and more coffee. Coffee is a stimulator of the mind but tea stimulates the muscular actions. The bodily urge to act is helped by tea. Alcohol is a stimulator of the pre-conceptual block on action and is related to the pre-birth trauma. Sexual malpractice is an expression of ‘alternative’ action and is largely related to the post-conceptual period. Each of these conditions becomes an addiction, such as alcoholism, when the motivation changes from an expression of life to the enjoyment of sensation.

Avoid telling your patient what you think he should be doing, however abnormal or unpleasant his behavior; just get on with the treatment and he will make the changes from within himself. In this way the change is easy, spontaneous and natural, and there is no tendency to revert.

This principle also applies to the behavior of the mentally abnormal. The way in which they are behaving is normal to all that they are at the time; they cannot naturally express themselves in any other way and to enforce change on them is to further complicate the pattern of their abnormality.
Phenomena
Robert St. John

There are various “expressions” which take place as a result of the Metamorphosis treatment. We can class them in two categories, (1) physical reactions or responses, and (2) psychological and psychic phenomena.

Of these two categories we can, again, divide them into a further two classes: (3) methods which produce phenomena and are valued by the degree of this phenomena; and (4) methods which produce a minimum of phenomena or no phenomena at all.

The second class, (3) and (4), are best discussed first.

I am tempted to say that number (3) is symptom treatment, a treatment with the aim of relieving the symptom. This, as we know, is bad Metamorphosis because, although the symptom will be modified or disappear, the cause is still there and there is no permanency in the treatment; but it is very frequently used because it is so spectacular.

But the frequent source of this level of treatment, (3), is to regard the cause of the symptom from the point of view of philosophical origin, a plan of reasoning based on the philosophy of possible causes or attitudes of mind: this source of reasoning being from the same level of origin as the symptom, although it may be the philosophy of the wisdom of the past.

It is because of this pattern of events that I say that Metamorphosis should stand on its own - in its own field of reasoning. The wisdom of the past, and there is a great deal of it, opens up ways of regarding our patterns of stress of both mind and body, and has shown great success in its own field; but it is not Metamorphosis. This does not say that these revelations are inferior or wrong, they are not, but each stands on its own foot and has its own point of view: each forms its own attitude of mind in the patient or student, and one attitude of mind is not the same as another and they should not be mixed.

The method of treatment used for Metamorphosis can be used for other purposes, for Reflexology for instance, but it ceases to be Metamorphosis. Metamorphosis is based on the reasoning of the history of its structure. For this I have used two words “Afference” and “Efference” to describe the original structure of the principle of Metamorphosis, and to which we are returning.

The history of these events is the “philosophy” of Metamorphosis, and it is this history in the mind of the practitioner or student which guides the direction of what takes place, creating rather than changing, producing a state of a new conception, rather than effecting a change of that which exists.

Metamorphosis used with other philosophies will produce phenomena, because the primary guiding structure of the practitioner is based on another way of thinking and not that of Metamorphosis. The structure of the history of Metamorphosis is the way of thinking of the practitioner of this system.

Avoid thinking in terms of “higher” and “lower” levels of consciousness. This is not what is taking place in what I have been saying: it is the mixing of ways of thinking that causes the trouble.

It is mixing that produces the phenomena, (3), because it is using the wrong way of thinking. Using the history of Metamorphosis, (4), produces little or no phenomena.

Even whilst using the history of Metamorphosis we can “step into” the realm of phenomena by treating the symptom level, by short circuiting the process for the sake of a quick result. Sometimes when there is considerable stress, it may seem reasonable to do this, but in the long run it only causes trouble.

In a nutshell - (3) and (4) define the right way of handling Metamorphosis and the wrong way. I would venture to say that we very seldom succeed completely in number (4). It requires perfect balance of Affereence and Efference. Perhaps this is where the creation hand symbol scores.

Now for numbers (1) and (2). This is a very mundane aspect of Metamorphosis, but it does reveal the students aptitude and ability of the teacher of Metamorphosis to wean them into the right approach.

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When I first started teaching this work - many years ago - and I knew nothing at all about the history of Metamorphosis, I observed, and experienced, these most disturbing phenomena; they are burping, yawning, stomach noises, flatulence and stretching. The average student yawned most of the time and in various degrees, manifested all the others.

These phenomena are evidence of using Metamorphosis with a wrong idea of its nature. The practice of symptom treatment is characteristic, (3). They do not occur when Metamorphosis is used correctly, (4).

There is a very noticeable relationship in Afference and Efference in this connection. The afferently orientated person catches on to the right way of using Metamorphosis more easily than the Efferent. This is because the Afferent person is orientated to the more abstract approach to life and the Efferent to a relative lack of inner guidance.

There is another phenomenon which mainly occurs in the right way of using Metamorphosis, (4); this is peeing (urinating). When a deeply karmic or genetic theme is being worked through (morphed) there is a very considerable increase in the frequency of peeing. It is quite possible to produce a bladder full every ten minutes. Needless to say this is somewhat embarrassing but it becomes quite understandable.

The reason for this phenomena is that every cell of the body becomes a storehouse for all the stresses and negative memories of the past; not only of one's own life, but of karmic and genetic aspects. The nature of Metamorphosis treatment is that, in the process of creation, all aspects that are not compatible are cleaned out. These elements become “poisons” in the system; and poisons are picked up by the lymph and blood and conveyed to the kidneys.
Afference & Efference
by Robert St. John

As long ago as before the war I was practicing the Bates System of Eyesight Training. There are primarily only two conditions to be considered in this work, Hypermetropia and Myopia, or long sight and short sight. All other forms of stress or ailments are derived from these two when looked at from this point of view. Hypermetropia is the inability to focus at the near point and Myopia is the inability to focus at the far point.

Within a relatively short time I had realized that these two conditions were created in the mind of the subject and the physical condition was a manifestation of the mental attitude.

The way in which we use our mind becomes the way in which we use our body and the attitudes of mind of these two conditions creates its own manifestation in the function of the muscles of the eyes. In other words, through the use of the eyes we created the stress in them.

I realized that the attitude of mind that created Hypermetropia was one of a compulsive withdrawing or retreating, and that of Myopia was one of a compulsive outgoing: Hypermetropia was a pulling away from the action of seeing and Myopia was a forcing forward. The result of these two forms of compulsive action was to create a pulling back of the eyeball in the Hypermetropic and a forcing forward of the eyeball in the Myopic, producing, respectively, a foreshortening of the eyeball in the first case and an elongation in the second.

It became obvious that to be able to change this condition it was necessary to alter the attitudes of mind and then the condition of the eyes would change spontaneously. At that time I did not know what to do about this, I saw that it was necessary to effect this change and I realized that it had to be done at an absolutely fundamental level, and so I resolved to find an approach which would function in this very primary way. The change had to come from within the subject and not the acceptance of the will of another. Many years later I realized the answer to this when I evolved the method which I called Prenatal Therapy, and later, Metamorphosis.

In the meantime I looked for names for the two states of mind which were producing these conditions. The names Hypermetropia and Myopia were for the end result, the final outcome of the attitudes of mind, and what I was wanting was two names for the attitudes themselves. I first of all used the terms under-identification and over-identification but these were rather a mouthful and after much thought and reference to various books and dictionaries I decided upon the terms Afferent and Efferent. These two Latin words do not actually mean compulsive withdrawal and outgoing compulsion. Afferent means “to bring forward” or “bringing or conduction inwards or towards”; it is an inward action, but not compulsive; and Efferent means “conveying outwards or discharging”, and again, it is not compulsive. But I felt that these two words were right. It was years later, when I had developed Metamorphosis, that I realized that I was using these two words for the normal function and that the names of Hypermetropia and Myopia were referring to the same states when under stress - abnormal. Afference and Efference are words which refer to the entirely normal function of our mind, and, in normality, their action is simultaneous. It is only when there is stress that these two states of mind become separate functions and assume the characteristics of Hypermetropia and Myopia.

So these two words, Afferent and Efferent, were in use in my very early investigations before the war, and immediately after it.
My pursuit of the means of effecting changes in these primary attitudes of mind continued through a whole variety of methods of healing techniques and it was not until I began to be interested in what was then known as Reflex Therapy, and now Reflexology, that I realized that I was getting near to an understanding of a means of erasing or changing these primary attitudes of mind. This was somewhere in the middle of the 1950’s. I must have spent quite a few years in the pursuit of Reflex Therapy. There were quite a few “schools” of this technique and, mostly, different from each other. This being the case I decided that I would pursue the matter for myself without reference to other methods. This was easy because there were abundant feet available amongst my patients and friends. The chart that I created was similar in most respects except that I “found” the spine to be down the medial aspect of the arch. This seemed ridiculous because the bottom of the feet corresponds to the front of the body and the top of the feet to the back. They were placing the spine down the front of the body, and in most schools it is still so.

In addition to the discovery of the reflex points for the various organs and parts of the body I found several “reflexes” which seemed to have no correspondence with the physical functions of the body. At first I observed seven points that had considerable activity; these were the pineal, pituitary, first cervical vertebra, seventh cervical vertebra, ninth thoracic vertebra, the top of the sacrum and the tip of the coccyx. The pineal and the pituitary were obvious, but the others seemed to have no part in the physical function of the body. In addition to this there was a different “feel” about these points. I thought of the chakras and there was certainly a relationship but there was another theme functioning here that was not related to the chakras.

Then I observed that a callosity on the lower medial side of the heels always seemed to relate to the mother of the patient. A mother needs a father and so I looked for him. He was on the medial edge of the first joint of the big toes: but this was the reflex point for the cervical vertebra. This puzzled me and I thought about it for a long time and then, one morning in September when I was relaxing in the bath before going to work, it suddenly came to me that the “mother” and “father” reflexes were merely symbols of a function or a moment of time and that here was evidence of the moment of the beginning, not of mother and father or even of their activities, but of the result of these activities. Here was the moment of the conception of the subject. It was curious because father registered the beginning and mother the end of the period of time of gestation. But this put the seven other unaccountable reflex points into focus. The spinal reflex was also the reflex for the gestation period. This changed the whole concept of the work from a method of affecting change in the physical functions of the subject to a method of approaching a period of time in life. We had moved from a physiological function to a mental function during a period of time. The reflex of the spine revealed the formative patterns or attitudes of mind during the gestation period of the subject.

This opened up an entirely new concept and a new approach to healing methods and its application revealed a process whereby the subject became their own healer, not the practitioner, who was only a catalyst in the matter. I called this Prenatal Therapy because it was a therapy of the prenatal period.

When Prenatal Therapy became well established I began to direct my interest into a more abstract direction. As the prenatal period of our lives started with conception it was logical that the moment of conception must contain the principle of the whole of the gestation period. Therefore the same principle of treatment of the reflex for this “moment of time” should be effective. It was. Treatment of the conception point proved to have a very abstract approach to the prenatal pattern. Whereas in Prenatal Therapy it was possible to interpret the nature of the stresses in the subject and to further interpret them as mental and physical conditions, in the treatment of the conception point there was full evidence of stress but its nature had no pattern which was interpretable.
The response, however, was more deep seated than that of Prenatal Therapy and, because it was working on the period of time before the structure of our body had begun, there were no physical reactions.

I called this approach Metamorphosis. (St. John later determined that it was important to include the entire prenatal pattern when doing the hands on aspect and not just the conception point. Of primary importance here is what he called “pre-conception”, the period when our genetic and karmic influences are gathering to determine who we will be. Metamorphosis is a philosophy on creation and life - Afference and Efference - accompanied with the understanding of Prenatal Therapy. Prenatal Therapy without Afference and Efference takes on different approach and in effect is not Metamorphosis.) (Keep in mind that the word karma here is not in reference to any religious understandings - it pertains to thought patterns that have an affinity with us in some way that influence how we view life. This is versus the genetic patterns that influence our physical nature.)

At this stage I had reached a point of understanding this work from a creative rather than a therapeutic point of view. The nature of the work was more of a philosophy and the view of creation and the way in which our Being functions was beginning to come into perspective. An understanding of our mechanism other than that of the body was beginning to form; a view of the nature of Creation and its problems. This brought my interest into the relationship between people, not only between males and females but between all of mankind, although that between the male and the female was primary in this pattern of events. It was from this point that I began to find the patterns that I eventually realized were identical with those of Hypermetropia and Myopia.

The pattern of Afference and Efference was in my mind for a considerable time - years, in fact. I could see it in every aspect of life and in the lives of so many around me.
Conception
by Robert St. John

The moment of conception is the true beginning of the life of the subject. It is also the beginning of Time for that person. In the realm of the “Thought Patterns of Time and Space” there is no time, as we understand it; it is a thought structure and has no physical reality.

Physical reality begins at conception; the sense of Space and Time also begins here. Time and Space cease to exist in as much as Afference and Efference are separate; when they are one. Time and Space cease to exist for the subject, all is just the moment. Conception receives the genetic influence on a physical level and, also, on a non-physical level, the influences of the karmic pattern are received.

The keynote of conception is the beginning and the gathering together of and everything that has any relationship to this beginning. A beginning is physically real; other factors that belong to this beginning, such as, for instance, ones grandmother, have their contributory influence. Other factors, which are not real in the physical sense also come in from the records of Time and Space and influence the situation.

The factors which, influence this moment of time, the beginning, are, quite obviously, the sperm and the ovum, in both of these are genes which bring their contribution from the mother and the father to the beginning of our subject, related to the mother and the father are an endless number of relatives in the blood line, an inheritance which goes back to the beginning of Time on this planet. Because all of these relatives were live beings they also had a relationship with karmic patterns. The thought structure of a being who dies remains in Time and Space and creates what we know as karma.

Karma is the non-physical structure of the patterns of the past; genetics is the physical structure of the patterns of the past. They are related in as much as in their own time they had been together and that this “togetherness” influences the life of our subject. The karmic pattern arrives at the moment of conception through the medium of the pineal and pituitary: the genes arrive through the medium of the sperm and ovum.

The fact that the parents live together may be married or it may be a casual meeting which, proves to be the beginning of our subject all adds to the pattern of the immediate history of the subject. All the factors of his origin are influencing to this moment of conception. But there are really only two influences, which have any real, conditioning factors and those are the karmic and genetic patterns. The whole theme of Metamorphosis is that these influences are rather like a mosquito who bites one - it is not necessary to let happen and if it does happen one can get rid of the offending influence.