

# **Mother's experiences - ours prenatal impressions**

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Peter Fedor-Freybergh gives our keynote: "Remember that the prenatal stage of life in the mother's consciousness and womb is our first ecological position as human beings. This is our first human encounter where we as children found ourselves involved in a creative dialogue with our mothers and their biological, psychological and social environment."

Some of these ideas may seem difficult to comprehend, but there are thirty years of experience by Western Medicine to confirm these ideas. There are beginning to be marked changes in attitudes towards birthing in Western Medicine. Some medical technology practices are being genuinely questioned not just because of physical impacts to tiny babies but because of demonstrable psychological damage inflicted both on us as being-born-babies as well as on our parents.

## **Bonding**

One of the most important words in Perinatal Psychology and Medicine, which we would like to introduce to you is "bonding". The very essence of being human is to experience bonded or connected relationships with other human beings. That bonding process begins before birth, possibly before conception, as part of the mother/child dialogue called for by Prof. Drr. Peter Fedor-Freybergh, Honorary Life President of the International Society for Prenatal and Perinatal Psychology and Medicine and Chair of Child Psychiatry at the Charles University here in Prague.

Bonding initiates an attunement between us, as babies, and our parents which lasts a lifetime. The initiation of bonding naturally starts when we, as newly emerged infants are placed on mother's bare belly and instinctively begin to crawl to mother's breast for our first physical food. The most essential formational patterning or bonding as reported by Dr. Michel Odent is when baby and mother exchange a recognition through their eyes. This powerful moment opens a DNA packet in mother's and baby's brains which give both their abilities to experience love, compassion and empathy for each other and for every other human being. This instant of bonding is the singularly most important event of our entire lives. It is in that moment, as all of our mental and psychological instincts are activated which will have the greatest formational patterning for our lives. There is now ample evidence that when bonding is denied by hospital or other procedures, the emotional/psychological deficit for all of us, even young children, could be leading to the large numbers of murders, even child murders, reported in the world news. These children simply do not experience love, compassion or empathy for themselves or for other human beings.

For nine months before that dynamic moment when the first breath enters the baby mother's body has been growing, developing and maturing

that little body within her womb. And, what is just as important is that baby's emotional body also have been growing, developing and maturing; being educated, if you will, through the emotional experiences of mother, and father through mother's experiences of him. This is one of the basic principles of Whole-Self Psychology, Philosophy and Education; namely, that each person not only inherits the genetic coding which gives each of us our physical characteristic, but we are also the synthesis of the charged emotional/mental patterns of our parents from the nine months of gestations. It would be very strange for «mother nature» to give our little bodies six months of practice and rehearsal so that after birth our bodies could live functionally, and, for her to throw us out into the world with no experience of emotional existence. We will share the Whole-Self model of the Prebirth Analysis Matrix which offers clear understanding of the significance of our psychological development in the nine months of gestation - the time when our ability to feel love, compassion and empathy is generated.

Some of you may ask why prenatal psychology is important. In this short time, allow us to offer some possible answers. While birth goes back a very long way, through all of human history, in fact, Prenatal Psychology is actually a Twentieth Century phenomenon. We will give you a very brief history of this new science. But the intent of our presentation is to give you case histories to illustrate what we most want to share with you about these last three aspects: the Psychological beginnings and the development of baby's mind, and emotions.

### **Resistance to take Responsibility for Life**

Our theme is the therapeutic aspect of Perinatal Psychology. Here is a case which supports Dr. David Chamberlain when he describes babies who have an amazing amount of awareness and control. We would like to share a case from a Whole-Self Facilitator Sigrid Westermann in Germany.

The life of my last client Ursala, 26 years of age, working as a physiotherapist was ruled by fear. She presented *anorexia nervosa* which gave her a great need to be in control. The paradox was that she was consumed with fear of everything. Fear to be liked; fear to be seen; fear not to be able to live very long. But most debilitating was her FEAR TO BREATHE. Ursala had never been able to take full deep breaths. We went through her PAM – her Prebirth Analysis Matrix – a simple questionnaire of 22 points regarding gestation to shortly after birth.

A few days later. Ursala returned and told me that in our session when she had taken the first breath she discovered that her consciousness had resisted taking responsibility for her life in that little body. She discovered that her thought – her belief – her reality had not allowed life to fully fill her body. Having recognized that resistance to take responsibility for her life and by changing that belief and allowing a full breath, from that moment on, Ursala felt she could take breaths to the full capacity of her lungs. She did

not want to tell me that had happened on the session day because she was not sure that she would be able to continue breathing deeply. The fact is Ursala's ability to breathe deeply has stayed with her and she was very happy.

Ursala's case illustrates that at the very moment of the first breath consciousness is able to begin to control the physical functioning of baby's little body. How many times have you found yourself holding your breath in a moment of crisis or trauma? How many times have you looked into the eyes of the baby you have just assisted into life and were sure it was thinking something? Prebirth Psychology as David Bodella has described, is able to recover non-verbal awareness even from birth and before.

### **Historical Beginnings of Prenatal Psychology**

One of the first moments in the development of what was to become prenatal and perinatal psychology, occurred in 1924 when Sandor Ferenczi looking at the faces of some newborns perceived a resistance to life and a wish, he interpreted, to return to the peace and happiness they had experienced in the wombs of their mothers. Even this year, as described in the case above, we discover the kind of resistance to take responsibility for life described by Ferenczi. While the happy womb and good mother theories have since then been disproved, we must still honor Ferenczi's bravery at that time.

After Ferenczi, Analyst Gustav Hans Graber, pushed back the consciousness curtain by advocating that children experience prebirth and well as post birth memories. Graber founded the International Studysociety in Prenatal Psychology.

The foundation connecting trauma with birth was laid by Otto Rank. Theoretical superstructure supporting Rank was built by Sigmund Freud. And, Nandor Fodor topped off Rank's trauma theory by describing the consecutive stages of development theorized by Rank. Over a quarter of a century ago, Dutch analyst, M. Lietaert Peerbolte integrated a reposing consciousness before conception theory and the accepted analytical approach. His search questioned where consciousness comes from and what we know.

In 1986, in Badgastein, Austria, through the vision of Prof. Peter Fedor-Freybergh, Graber's ISPP was transformed into the trans-disciplinary International Society of Prenatal and Perinatal Psychology and Medicine. After the ISPPM was birthed in Badgastein, Dr. Thomas Verny in Toronto, Canada founded the Pre & Perinatal Psychology Association of North America later renamed the Association for Pre- and Perinatal Psychology and Health, and made the first major step in public awareness of babyhood with his book *The Secret Life of the Unborn Child*. Dr. David Chamberlain had an equal impact with his book *Babies Remember Birth*. In the 1970s, your authors pioneered in Prebirth Memory Recovery.

Through thousands of studies, early prenatal and perinatal psychology theories about pregnancy and birth have been proved or corrected. We must gratefully acknowledge those pioneering theories conceived during the last century. Now in the 21<sup>st</sup> Century theory and practice are advancing rapidly. At the 13<sup>th</sup> ISPPM Congress held in Cagliari, Sardinia, Italy in June 2000, Prof. Grigori I. Brekhman of the Ivanovo State Medical Academy, Russia described his research on «the conception of the multiple-level co-ordinated action between the mother and her unborn child». Brekhman described that the relationship between her unborn child and mother exist on the physical, mental, emotional and energetic levels. Brekhman's work confirmed Prof. Fedor-Freybergh who decades ago advocated the importance of the mother, father, unborn child dialogue. It was a model, which Whole-Self Psychology has also been teaching for 30 years. Recently I presented at the World Organization of Prenatal Education Congress "Towards A Violence Free World in Caracas Venezuela. Overwhelming was presented evidence that violence during pregnancy and birth creates violence in life.

Quoting Professor Brekhman:

*Nowadays a lot of data obtained has confirmed the hypothesis that the psycho-emotional interrelationship between the mother and her unborn child is the reality.... we (Brekhman) offered to examine the mother-unborn child relationships based on the idea of a permanently functioning multiple-level polyphonic system. It has been assumed that if mother is a multiple-system embracing such levels as biological, energetic, astral, mental, etc, to have intimate and fruitful interplay between her and the unborn, he (the unborn) must already possess the same levels beginning with the zygote. Such a methodological approach proved to be fruitful. The subdivision of this system into the various levels is very relevant since baby is able to live and develop harmoniously only if all its components properly interact.*

In this last sentence the word «only» is the operative word. Prof. Brekhman states that if there is such a process as a mother-unborn child dialogue - long advocated by Prof. Fedor-Freybergh - there needs to exist complementary resonant cohesive media systems which can recognize each others messages. In its very simplest terms, Whole-Self Psychology, Philosophy and Education is confirming that just as each of us is the synthesis of our parent's genetic coding which gives us our physical characteristics, there is also a synthesis of the emotional-mental patterns of our parents from the nine months of their pregnancy. This is exactly the multiple system Brekhman's research proved to exist. Prenatal and Perinatal Psychology and Medicine shows that the little body growing inside mother is a part of her body which is growing and practicing so that at birth it can function independently and that baby's mental and emotional faculties are practicing within mother's mind and emotions so that after birth they also can function independently.

People often ask how my wife and I, co-founders of our Institute, discovered and developed interest in Prenatal Psychology. Troya's discovery

of the significance of the Prebirth period dates to her teen years when she was anorexic and bulimic when she was a nurse. Wanting to stop those behaviors, Troya got the inspiration that she might find the cause of her suicidal behaviors by going back to discover if something had happened at her birth that made her not want to be. She closed her eyes and tried to visualize her birth. She was surprised to see her mother in her doctor's office. She felt her mother's joy at being pregnant and felt that joy crushed as he told her that because of previous surgery she should prepare herself for this first baby to be born dead. That was when Troya realized that her suicidal eating disorders were her attempts to fulfill his prophecy. After meeting me I asked Troya if she had ever mentioned this information to her parents. She told me she had not because she did not want to upset them. But the next time we visited her parents she told them what she had imagined. Her father laughed and said the pregnancy was fine and they were so happy that they would have a baby. Her mother was stunned, "I never told anybody, not even your father, what the doctor said!"

My own history began when my mother, as a teenager, contracted TV. When she recovered her doctor told her that she should never have children. Years later when she had married, I was conceived and born by a forceps delivery. This resulted in brain damage. As I grew I had learning disabilities, short term memory deficit and I was hyperactive. The main point of all this was that I was living out my mother's pattern that it was inappropriate for her to be pregnant. Therefore, it was also inappropriate for me to be. It took me 50 years to overcome her patterns.

Around 1970, I was in therapy practice in Beverly Hills California and was getting referrals from psychologists who had given up on people they concluded as incurable. I realized that those people had spent many years – some decades exploring their lives. The inspiration came to lightly regress those persons to explore what their mothers, and in some cases fathers, had been experiencing during the nine months of their pregnancy. That is when I discovered that not only had I inherited the genetic coding of my parents but also the charged emotions of my mother when she discovered that she was pregnant.

### **Symbiosis; Your Feelings or Mine?**

Symbiosis is a psychological problem in which people cannot tell if what they are feeling are their own feelings or someone else's. Symbiosis begins in pregnancy as baby's emotional body is practicing within mother's emotions. Troya had a recent case.

A man I call Ronald, 40, is divorced and wants a relationship with a new partner. His concern is his sexual power, his potential, his future. Ronald expects too much from his partner. This expectation is what caused the breakdown of his first marriage. His present partner makes him aware of this and therefore wants a 'living apart together' relationship. Because of his

symbiotic neediness this is not satisfactory for Ronald. It is his neediness which creates conflict in relationship for him, too. He feels consumed! Feeling himself a victim he closes down. He is impotent to stay connected. This is also his relationship pattern with his children since his divorce.

Ronald feels responsible in life and looks forward to make new beginnings. His desire is freedom, independence and to express those in a close (symbiotic) relationship. But, not today, maybe tomorrow.

*Through his Prebirth exploration Ronald discovers that*

- He is not conscious of himself, his emotions, his feelings, including his feelings of lust.
- He admires other people, men and women, in a way that he discounts himself.
- These patterns appear to be based on a symbiotic relationship with his mother.
- His passion is handcrafts, working with his hands at home, all by himself. Ronald's parents were divorced and his mother raised him. He dislikes his father for leaving them. The last appears to be the most important discovery!
- Difficulties between his parents were present during the pregnancy causing his mother to cling to her child Ronald from his birth on.
- With his mother, Ronald keeps blaming his father for their identical lack of self-love and self-respect. His opposition to his father leaving them set him up for the same experience of a divorce pattern.
- Through the absence of his father, Ronald could not identify with any male model leaving him impotent to erect himself seeable - to manifest himself.

### **Worst Trauma's are Deaths and Betrayals**

The most common trauma patterns babies inherit are mother's reactions to death or betrayal by the father of their child. Here is a case from another German colleague Katharina Honey:

I call her Susan. Susan had cried a lot in her life and continually expressed her sadness with this crying behavior. She often went to the cinema where she could safely express her sadness watching tragic dramas. The sadder the drama, the more she could cry.

In her Prebirth exploration, Susan visualized her mother during the pregnancy receiving the news that her mother, Susan's grandmother, had died. Susan described the very deep bereavement of her mother. She was extremely sad. Susan's mother's non-conscious decision was: «I have to deal with these feelings. This is life and life will go on.» Susan discovered that the deep, extreme sadness which had consumed her all her life was actually her mother's reaction to the death of her mother at the very time she was pregnant with Susan. Like her mother Susan was not a self-judging person. Whenever she had new challenging experiences, Susan had reconfirmed the

same decisions her mother had made during the pregnancy: 'I have to deal with these feelings. Life will go on!' Susan is very successful in her life. She is married with a kind, loving, supportive man. Both are very creative and are committed to continuing personal development. Her profession is medicine. Susan is a doctor.

### **Factual or Symbolic Memories Still Work**

Sometimes information about trauma can be symbolic rather than factual. Sigrid Westermann offers another case. She gives the name Anna to her client who did the PAM – Prebirth Analysis Matrix. Basically, Anna has been happy in her life, but her work is very exhausting for her. Anna wanted to find deeper insights into her life. She also was looking for personal development to make her life easier.

In her PAM, Anna visualizes her mother bicycling to her parent's house. For no apparent reason, she is having bad feelings and is trying to understand those feelings. When she arrives, Anna's mother goes directly to the kitchen where she sees her sister crying disconsolately. Her sister sobs the news that Gisela, her little daughter, is dead. The two sisters are very close – just 14 month apart. In childhood, they were together almost all the time. So close, in fact, that people thought that the sisters were twins.

Little Gisela had been a special, talented child with high intelligence. She was a happy and lovable little girl. Already, at the age of two and a half years, she was going with her brother to the Kindergarten where she was learning very long poems and songs. Everybody loved Gisela more than other children. Somehow, Gisela contracted an infection and was taken to the hospital. By the next day, she had recovered and should have gone home. So the doctor thought. Then without warning, for no apparent reason, Gisela was dead. Now the sister of Anna's mother is in incredible pain. She has lost her wonderful little child.

Because they were so close physically, mentally and emotionally, Anna's mother was very sensitive of her sister's feelings of loss and despair. Wanting to be able to help her sister deal with her tragedy, Anna's mother was determined to help her sister. But, unable to do so, she non-consciously judged herself to be not good enough. Not only were neither sister's traumas released, but they were passed on to Anna. What kind of work did Anna do? She became a Psychologist.

What is interesting about this case is that after the Prebirth work, while talking about what she had seen in her visualization, Anna realized that there had been a death in her aunt's family during her mother's pregnancy. But consciously, Anna was sure, that it was her aunt's husband who died. The daughter, her cousin, died just three years ago. Anna had forgotten that her mother had told her, that her sister's husband had died at the time of her pregnancy and that she was not allowed to go with the

funeral because their grandmother had declared: «It is not good for the unborn child when a pregnant woman goes to a funeral.»

Because Anna had been working in a slightly altered state of conscious she was responding to the pain of the more recent death of her cousin. The exploration about her prenatal period showed her pictures and feelings from the imagined death of her cousin, instead of the actual death of her uncle. The reason can be that the aunt had not released her shock at the trauma of the death of her husband. This is what Anna non-consciously had carried with her all her life.

When her cousin died her personality, which had been suppressing mother's pain was activated. In other words, for Anna, mother's pain at losing her husband and Anna's pain three years ago losing her cousin were the same degree of pain. Symbolically, for Anna's personality the deaths were interchangeable.

As a result of her Prebirth discovery, Anna stopped her work for a while. After three month, she began working with clients again but in an easier, more relaxed way, no longer trying to take away their pain. She was relieved that her work was no longer exhausting.

We trust that these cases give you an idea about how the charged emotional patterns which mother is experiencing are implanted into the conscious of the baby. In some therapies people experience birth as traumatic and painful. In 1989 Troya & I were invited to present a paper on Prebirth Memory Recovery at the First German Rebirthing Congress at the University of Osnabruck in Germany. Up to that time, in 20 years working all over the world, we had found that very, very few people experienced having a traumatic birth. In fact, these people confirmed studies reported to us by Joseph Chilton Pearce, noted American researcher and educator, that shortly before birth if there is no medication administered, the baby's body is saturated with endorphins which act as an anaesthetic for the actual birth. We proposed that what people experienced as traumatic was not the memory of their own trauma but the memory of mother's labor and delivery.

For the future of humanity, as Prof. Fedor-Freybergh has urged, it is imperative that we all dedicate ourselves to create the most enhancing circumstances and conditions in which a pregnant dialogue takes place. We have offered just a sampling of cases which support the concept of Prenatal Psychology. We trust that these cases will give you pause and inspiration in understanding that many of the problems which people are dealing with are sourced in the reactions to stresses or traumas which their mothers and fathers experienced during pregnancy and birth. It is these feeling patterns which continue to be lived out as pathology by their children. It is these feeling patterns which when explored in Prebirth Memory Discovery can be healed.