

# Somatic Omatic Psychotherapy Today

Spring 2013

**The USABP Magazine** 

This issue: Touch in Psychotherapy Prenatal Bonding (BA) Organismic Psychotherapy

A PUBLICATION OF THE UNITED STATES ASSOCIATION FOR BODY PSYCHOTHERAPY



# Prenatal Bonding (BA): A Universal Healing

An Interview with Gerhard Schroth M.D. By Nancy Eichhorn

pregnant woman settles into a comfortable position lying down on Gerhard Schroth's couch. As a medical specialist in psychiatry, psychosomatics and psychoanalysis a 'couch' is part of the office décor. His voice guides her to a relaxed state. When her body is deeply relaxed, Dr Schroth uses breathing techniques to guide the pregnant mother to move even deeper within her body. Becoming aware of her body sensations and visualizations, she gains access to the signals of her baby. Her mind is directed to get in touch with her unborn baby through imagery, thoughts, words, movements, colors and so forth. In this state of relaxation and bodily connection, she also can initiate mutual contact with the baby inside. Sometimes there's no immediate, direct access; sometimes there are only colors for a while before the baby's image appears on the inner screen, as we know it from our dreams. According to Dr Schroth, if attention, intention, and inner presence are achieved, the communication between mother and baby is very clear and through this process the mother /unborn relationship is deeply rooted in one another.

# The Beginnings

**In the early 1990s,** Jenoe Raffai (a psychoanalyst in Budapest, Hungary) detected the importance of the prenatal relationship for a child's later development while working with teenage psychiatric in-patients. Together with his colleague György Hidas, he created a method to promote and improve the prenatal mother-child relationship by helping mothers create and experience inner connections between themselves and their unborn babies. They called their method "Bindungsanalyse", which was translated for the US to Prenatal Bonding (BA). The term <u>(BA)</u> refers to <u>Bindungs-Analyse by Raffai</u>.

**Dr Schroth** has been connected to Raffai's research since the very beginnings and supported research designs in Mannheim, Germany. Since 2004, he and Dr Janus (former President of International Society for Prenatal and Perinatal Psychology and Medicine) invited Raffai to teach his method in Germany. In 2009, Prenatal Bonding (BA) was first presented in the US at the APPPAH Congress (The Association for Prenatal and Perinatal Psychology and Health), at Asilomar, CA by Dr Schroth. He was invited by Michael Trout from the Infant-Parent Institute in Champaign, IL to offer his teachings in the US since 2011.

# The Method

**Prenatal Bonding (BA)** starts around the 20th week of pregnancy. A detailed, multigenerational history is obtained affording the facilitator a clear sense of the background scenery. Recalling the mother's own and her family's history over several decades greatly helps to clear away emotional wounds, which often remained unconscious, creating residual alterations in the organs especially concerning the uterus. The mother is learning how to communicate with the unborn baby. Every baby has its way of contacting the mother whether through "word thoughts", dialogue, images, colors, sensations, feelings, emotions, or movements. As the favorite way of communication is selected by the baby, the mother learns to adapt and understand the baby's signals. The communication is much slower than in adult relations, Dr Schroth said. With Prenatal Bonding (BA), the mother constantly realizes the baby's presence, existence, and feelings. Through this process, the images become more frequent, "creating a flow of information and communication between the mother and the unborn and this creates the 'umbilical cord of both souls." (Schroth, 2010, p. 3). Near the end of the third trimester, the mother and unborn baby prepare for giving birth, which is a separation and a transition to life in the outside world

After more than 40 years of research in prenatal and perinatal psychology, the unborn is clearly expected to be a sentient being in utero as described by David Chamberlain (1994/2011 and 2003), Nancy Eichhorn (2012), William Emerson (1996), Joann O'Leary et al., (2001), Thomas Verny (1981) and many others. According to Nancy Eichhorn (2012) the awareness and acceptance of maternal-fetal reciprocity impacts the maternal-fetal relationship, the fetal development, and the foundation of the infant-maternal attachment relationship post birth.

**Bearing this in mind,** facilitators of Prenatal Bonding (BA) need, beside many other instructions, to have access and clearly sense their own preand perinatal history during the Prenatal Bonding (BA) Curriculum. This may be challenging on one hand but has a tremendous healing capacity on the other. A well-trained facilitator thus is able to hold and contain the very sensitive and vulnerable scenery of a baby interacting with her/his mother and perhaps the father.

**"Mothers who report** using this process as a self-use strategy say that it does allow some access to the baby



but it is different than the actual sessions with the facilitator who holds the space for the mom and baby, creating a sense of security for both of them so they can relax and go deeper," Dr Schroth said. "Facilitators hold back their own presence; they guide the mother to the place where she can connect with the baby. During the so called babysessions, the mother describes what's happening with the baby to help the facilitator to give suggestions, according to what the baby may need. The mother acts in this situation more as medium transforming the signals of the baby to words without adding own interpretations.

# What Exactly Is Prenatal Bonding (BA)?

Prenatal Bonding (BA) is not intended as psychotherapy. It is primarily a facilitating process to help pregnant women and their families to have better contact with themselves and their unborn babies. It may have a healing effect as the family's history is consciously included in the transitional development of mother, father and baby. Facilitators never offer interpretations to mothers, though they may bring up questions if the baby shows up with inconvenience or is distracting itself from contact with mother. They may suggest the mother to ask the baby, "What are you feeling" or "What's going on?" or "What's your complaint?" The baby can acknowledge the presence of the mother and respond. Babies often "react like an adult person with astonishing wisdom and clarity. It seems the Soul contains information from preconception on."

"We get so much information from Prenatal Bonding (BA); it's like an ultrasound constantly happening at an emotional leve," Dr Schroth said. "Healing can occur before birth! We once received information from a baby that there was a dark space in the uterus, and the baby did not like to go there. When we researched with the baby what it may mean, we suspected that a twin may have died very early in the uterus. The consciousness of that lost Soul was still present. Dealing with the baby's and the mother's grief about the lost twin helps to clean the uterus and the baby can feel comfortable again. Today we more clearly see adults in psychoanalysis who are struggling with their life in unsuccessful search of something unnamable, not knowing that a

Natural giving birth can be a precisely coordinated dance of delicate body movements between mother and baby inside to use the tight space most efficiently to get born into the existence we live in.

Prenatal Bonding (BA) creates and secures the sensitive connectedness of mother and baby to realize this dance in a most efficient way by clearing away unconscious obstacles created in this life or former generations. The mother's life may include experiences of herself or her ancestors, which can get into the way of this dance in a sense of deeply emotional, mostly unconscious wounds.

twin died during pregnancy; with this process, the problem can be solved before birth! But this is only one example!"

"I have used Prenatal Bonding (BA) in some cases with hindrances of getting pregnant. One mother had a traumatic C-section and believed she would never be able to get pregnant again. We worked through this trauma and after only four sessions she came in and said, 'I'm pregnant.' Mother's who have been traumatized by the C-section experience, strongly want a natural birth for the second delivery and Prenatal Bonding (BA) can definitely re-empower them."

"We have access during every point

within the pregnancy, and if something is wrong, the baby can tell his mother about it long before medical examination can detect it by technical means. We can heal problems much earlier if the mother is supported by her medical care providers. It can sometimes be difficult to bridge the knowledge of Prenatal Bonding (BA) with the outside medical principles. You have to find an OB/Midwife that can work with this knowledge and be serious with the mother's imaginations/visualizations."

"We are now building a network of providers in Germany (midwifes, doulas, OBs, Prenatal Bonding (BA) facilitators, baby friendly hospitals) so mothers can connect with adequate medical support for pregnancy and giving birth. Clinics begin to accept this information (how to contact through imagination) and when the mom arrives, the staff knows about the huge female capacity of these mothers and can support birth in complete different and mostly natural way."

"Communication between the mother and the unborn continues during the whole birthing process. It is said that the mother receives specific signals from the baby such as, 'I can't get through, can you move a little bit and change position?'And when the mom is feeling too much pain she can relate this to the baby so he can change position. It is an intimate dance between the two," Dr Schroth said. "Some moms report they did not have any pain giving birth because of the incredible cooperation-they chose the best way for the baby to get out together. They know each other intimately at birth already."

# **Fathers and Siblings**

This is a family affair. The father becomes a container for the mother by offering emotional and physical shelter which allows the mother to go deeper inside and connect with the baby. The father's role is to create a "social womb" by nurturing a safe place for the pregnancy and allowing the mother to encounter extensive changes in her womb and body as well as in her life. Fathers can connect via energy and imagination/ visualization with their unborn baby and are supported to attend as many sessions of Prenatal Bonding (BA) as possible.

**Parents often report** that siblings contact the unborn spontaneously, talk and sing to the baby and cautiously touch the belly. If included and informed from the beginning, siblings tend not to show up with jealousy but with a deep and trustful bond immediately after birth. Fathers are also encouraged to connect with their unborn baby at home by singing lullabies, reading children's stories, fairy tales, poems, and touching/ holding the womb every day.



Photo shared by Martin Cauchon/Cabri Photo

According to Dr Schroth, one mother came to see him because she was quite upset about the sex of her prenate. She wanted a girl but was carrying a boy. Through Prenatal Bonding (BA) she accepted the boy, but the unborn still detected some of her rejection. "One day the mother was upset with the father and was sharing her frustration. The baby said, 'Oh keep quiet. He's really okay. He's done a lot for us.' The mother could accept the baby boy's point of view, thus the relation of the parents got balanced again.

# **Scientific Validation**

"We have not yet proof through a natural science research design for these experiences, but we hear the dialogues of mother and baby, and there is a lot of clear evidence," Dr Schroth said. "We do not yet pretend Prenatal Bonding (BA) is preventative, but with a sample of meanwhile

> more than 2,000 mother/ baby facilitations we can say there has not been one case of autism, and no postpartum depression. On average 15% of mothers experience post partum depression. Cesarean sections have decreased with mothers going through Prenatal Bonding (BA) facilitation to 10% (the national average in the United States is 34%). Of 1200 pregnancies facilitated by Raffai, premature birth rates were absolutely low with less than 0.1% (average i s 8%)" (Schroth, 2010, p. 6).

> Anecdotally, babies born through the Prenatal Bonding (BA) process are noted as "more curious about the world, emotionally stable, and s o c i a l l y m a -

ture" (Schroth, 2012, p.12). They are said to have "complete access to their personal potential" (Schroth, 2012, p.12). There is an easier transition to regular sleep patterns with fewer awakenings so parents are not suffering from sleep deprivation. And these babies appear to be farther ahead in development than their counterparts. Dr Schroth said that when they come to kindergarten, their teachers are impressed by the children's interactional capacities. Their capacity far exceeds that of other children and they often become class leaders.

"More research would help to identify Prenatal Bonding (BA) as a research tool for Pre- and Perinatal Psychology as we can learn immediately about the baby's development while in utero. My personal hope as a psychiatrist and psychoanalyst is that Prenatal Bonding (BA) has the capacity in the future to heal major psychiatric diseases, for it is now, as it seems, completely healing postpartum depression."

### **Upcoming Trainings**

Plans are underway for a second US Training Curriculum to begin November 2013 (at the earliest) in California. The Certification Program includes theoretical instruction in Prenatal Bonding (BA), prenatal selfawareness training, group-analytic processing, practical guidance in Prenatal Bonding (BA) facilitation, personal supervision and peer guidance during own practical case work. Gerhard Schroth is Raffai's representative to train in English speaking countries. The first US trainings held in Seattle/WA and Champaign/IL, will be finished in November 2013.

Gerhard Schroth M.D. is a medical specialist in psychiatry and psychosomatics, psychoanalyst, group analyst, systemic therapist and body psychotherapist. He is the founder of a psychosomatic education institute in Germany (Arbeitskreis Psychosomatik Vorderpfalz, Speyer/Germany). *Continued on page 34* 

# Schroth continued from page 11

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