

The Enduring Effects of Prenatal Experiences

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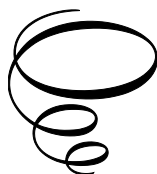
Echoes from the Womb

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The Enduring Effects of Prenatal Experiences: Echoes from the Womb

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Contents

Introduction	xi
1 “The Bundle of Life” and Superstition During Pregnancy: Prelude to Prenatal Psychology	1
2 Always a Trauma? The Evolutionary Development of Human Birth	11
<i>Evolutionary Factors</i>	11
<i>Social Factors</i>	14
<i>Psychological Factors</i>	15
<i>Traumatic Consequences</i>	16

	<i>Positive Effects of the Birth Process</i>	17
3	“But I can’t remember . . .”: The Problem of Early Childhood Amnesia	19
	<i>Preverbal Memories</i>	20
	<i>Early Memories in Dreams</i>	22
	<i>Fragmentary Memories</i>	25
	<i>Understanding Early Childhood Amnesia</i>	26
4	What Does the Unborn and Newborn Baby Feel? The Developmental Psychology of Early Childhood: Empirical Research	29
	<i>Every Smile Has Meaning</i>	29
	<i>Relating in the Womb</i>	33
	<i>The Baby’s Feelings During Birth</i>	38
	<i>The Traumatic Aspects of Birth</i>	48
5	Restoring Health Through Reliving: The Actualization of Pre- and Perinatal Patterns of Behavior and Experience in Psychotherapy	59
	<i>The Appearance of Early Forms of Experience</i>	59
	<i>Prenatal and Birth Experiences as Seen in Psychoanalytic Therapy</i>	62
	<i>Reports of Prenatal and Birth Memories in Hypnosis</i>	73
	<i>Reactivation of Birth Memories in Primal Therapy</i>	76

	<i>Reactivation of Perinatal Trauma in Psychoanalytic Regression Therapy</i>	79
	<i>Visualization of Pre- and Perinatal Events Under the Influence of LSD</i>	82
	<i>Birth Experiences in Rebirthing</i>	89
	<i>The Significance of Early Experience in Other Forms of Psychotherapy</i>	92
6	The Perils of Birth: Empirical Findings About the Effects of Pre- and Perinatal Stress	93
	<i>Prenatal Stress in Animals</i>	94
	<i>Prenatal and Birth Stress in Humans</i>	95
7	Fears, Aggressions, and Fixations: Disturbances Resulting from Pre- and Perinatal Psychological Trauma	105
	<i>Childhood Fears</i>	106
	<i>Childhood Mistakes</i>	110
	<i>Neurotic Symptoms</i>	111
	<i>The Psychological Effects of Prenatal Stress on Children and Adults</i>	115
	<i>Psychosomatic Illness</i>	118
	<i>Deviant Development and Criminality</i>	125
	<i>Suicide</i>	130
	<i>Psychosis</i>	135
	<i>Anorexia Nervosa</i>	141

8	From Fetus to Adult: Pre- and Perinatal Aspects of Developmental Psychology	143
	<i>Prospects</i>	143
	<i>Pre- and Perinatal Aspects of Psychological Development from Infant to Adolescent</i>	146
	<i>Children's Games and Stories – From the Wild Things to Superman and E. T.</i>	155
9	Dying and Becoming: The Cultural Manifestations of Pre- and Perinatal Experience	159
	<i>Overview of Pre and Perinatal Symbolism in the Process of Cultural Development</i>	159
	<i>A Primary Theme of Human Culture – The Journey of the Shaman</i>	163
	<i>Puberty Rituals as a Return to the Womb and Renewal</i>	167
	<i>The Fairy Tale Hero's Journey to the Beyond – Symbol of Life's Beginning. From Tom Thumb to Rapunzel</i>	170
	<i>Aspects of Birth in Tales about Heroes</i>	178
	<i>The Roots of Myth</i>	181
	<i>Between Heaven and Hell</i>	187
	<i>Sacrifice as Birth</i>	189
	<i>Yoga and Birth</i>	191
	<i>Omnipotence and the Downfall of the Ruler</i>	194
	<i>Battle</i>	197
	<i>Images of Primal Experience</i>	201
	<i>The Continuum of Sound</i>	205

<i>The Human Experience of Being Thrown into the World</i>	209
<i>Robinson's Initiation – Rebirth through Poetry</i>	212
10 The Fourth World of Mankind	223
Appendix: The First Nine Months	231
<i>Advice to Expectant Parents</i>	231
References	235
Prenatal Societies and Journals	265
Index	267
Supplementary Epilogue to the Current State of Research	279
About the Author	325

Introduction

One of the first big questions that a child asks is about where babies come from. The answer the parents give is crucial for the child's understanding of himself. And, as we all know, the answer is almost always unsatisfactory. Whereas in earlier times recourse was made to fairy tales or mythical powers, that, for example, the child had been delivered by a stork or had grown from a tree, nowadays, in keeping with the scientific spirit of the times, most people try to describe our coming to the light of day in purely biological or physical terms. All questions about the possible significance of the experience of being born are left unasked and unanswered. Thus, even the stories that portray birth as a journey, an

adventure or a transition from one world to another are more revealing. Children and adults remain more or less untouched by the statement that babies come from mothers' bellies. Any personally significant question is thereby simply avoided and one is left with the feeling that something unknown is lurking just around the corner.

What is the significance of spending nine months in the secret recesses of a woman's body? What did I sense and feel and experience there? To most in our modern culture, such questions still seem quite inappropriate, only things a child could ask. However, now, toward the end of this millennium, serious questions about the significance of birth, of our having been born, are being asked.

The first major breakthroughs with regard to the question "Is my birth significant for me?" were made in the pioneer works of psychoanalysts Otto Rank and Hans Gustav Graber, which appeared in 1924. Both of these men realized that birth is experienced and that this first experience of "coming into the world" provides a fundamental pattern for our future experiencing and development. One can often see this background pattern clearly in the feelings of mentally unstable patients but also in various cultural phenomena. A fear of darkness or claustrophobia can be the echo of an individual's traumatic birth experience just as much as the need that groups have to come together in special, safe places can be rooted in a longing for the original security of our first uterine home.

At first glance, such connections seem to go against common sense. And indeed, that such statements can be made with any plausibility at all requires the careful synthesis of various strands of modern research. “Prenatal psychology” is the umbrella title for the endeavors that unite various scientific disciplines in their attempt to elucidate the processes of experience involved in the earliest stages of human life.

Although it is now a generally accepted matter of fact that the child we once were continues to live on in the adult we have become, it is still quite strange for us to see the baby or the unborn child that we also once were in the same way.

This idea is challenging in a way not dissimilar to the challenge brought about by developments in the last decades in the field of human ethology. The parallel is instructive. Konrad Lorenz and his followers have shown that Darwin’s theory – that humans evolved out of the animal kingdom – is to be understood as the evolution not only of external characteristics but also of internal mechanisms of behavior. Animals are in fact much closer relatives than we normally care to admit, which remains extremely difficult for us to recognize within ourselves and to accept any similarities. We have a similar difficulty when it comes to recognizing a much closer relative, namely, the unborn child or the newborn baby within ourselves. We have to sacrifice a little of the security that a purely postnatal view of our existence fosters and at the same time allow ourselves to be confronted with such elementary feelings as those of dependence, helplessness and panic, which are so often present during birth.

This book offers an introduction to the recent developments in the psychology of birth and of human life before birth. In so doing, it also opens the reader to an understanding of his or her own birth and the significance of his or her own experience of having been born. However, it must not be forgotten that the very fact that the book could be written at all is evidence of a fundamental shift in present day attempts to understand ourselves. It could not have been written fifty years ago and no doubt completely different horizons will open up within the next twenty years. This shift has been especially impressed upon me in my work as a psychotherapist, in which access to birth memories and to prenatal stages of experience has now become commonplace. However, as will be shown in detail, approaches to these questions have been developed within many different disciplines. Full use will be made of quotations in order to communicate these new developments.

However, the emotional difficulties involved in attempting to approach birth and prenatal life in a personal way should not be underestimated. In the first place, birth is for us humans relatively traumatic. This is due to the biological facts of our upright posture and our relatively large brain. Both of these evolutionary developments have necessitated that humans be born earlier than otherwise would be good for them. Thus the adventure and exhilaration of coming into the world is regularly accompanied by a mixture of uncertainty, desperate aggression, and even fear of annihilation.

Thus, parallel to the fascination that the subject of birth and life before birth awakens within us, there is an even stronger diffidence and diffuse reluctance to look closer and examine our deep emotions. Many readers will almost certainly experience this difficulty. Despite all of the advantageous developments in obstetric practice in this century, the purely medical-technological approach that governs modern maternity clinics does not prevent all sorts of psychological trauma from being inflicted upon us during and shortly after birth. The simple statement of this quite obvious fact is itself enough to elicit an uncanny feeling of resistance in most people.

The second important difficulty that arises as soon as we try to understand the earliest stages of life is that we don't have the same access to our birth and life in the womb that we do to subsequent early experiences – say, for example, to the experience of starting nursery school. In fact, it is now recognized that much of our early experience is revealed and concealed in fairy tales about other worlds, in mythology, and in our religious imaginings. Belief in the well-being and security that an almighty being can guarantee or in a social utopia of a heavenly kingdom on earth can express the wish to return to a prenatal paradise. The fear rooted in prenatal panic can express itself in fantasies of hell and eternal punishment.

Both of the above-mentioned difficulties have led to a third problem, namely the denial of any connection between the earliest stages of life and those that follow. There was a shift in this denial at the beginning of our century

with the acceptance of the discovery that childhood experiences – still excluding the very earliest ones – are of significance for later development. Before this shift, the rejection of childhood was demonstrated clearly in the ways in which parents could treat their children with full social and legal acceptance. Babies were given away, sold, or killed, or if kept were cared for by paid staff or strangers. All of this is rightly condemned today. However, we still remain estranged from the very small baby within us and unquestioningly rely on external norms and authorities to determine what happens to our newborn and unborn children. As long as we deny any personal awareness of our life before birth, of our birth, and of earliest baby years, and as long as we repress the significance of early experience for a fuller understanding of human life, then we are also condemned to distancing ourselves emotionally from our unborn and newborn offspring. The next generation then remains unprotected from blind repetition of the same mishandling and traumata that lie buried but quite alive and active within our unconscious minds.

The last few decades have witnessed the beginnings of a relaxation of this deepest area of denial. This can be recognized above all in the “gentle birth” movement and in the recognition of the significance of the earliest traumata in various schools of psychotherapy (for example, in primal therapy). It can also be seen in the growing number of empirical studies of pre-, peri-, and postnatal processes of perception and behavior. Indeed, this new climate alone has

allowed the research and development of our theme: the personal, biographical significance of our existence before birth and of the process of our birth. However, the previous tradition of denial of prenatal human existence has not yet been fully transcended and we all still live more or less under its influence.

We are still exposed to countless prejudices – for example, that the unborn and newborn baby are insensitive and unconscious, with no memory abilities. Only further research leading to a better knowledge of the earliest stages of human psychological life – before, during, and after birth – can lead to a new and deeper understanding of ourselves, to a better start in life for our children, and to a better world.

“The Bundle of Life” and Superstition During Pregnancy: Prelude to Prenatal Psychology

Each individual culture symbolizes and explores prenatal experience and its significance for later development in quite different ways. As mentioned in the introduction, many traces of pre- and perinatal events are preserved in mythological stories and in rites of passage. The baby's experience of its own placenta is expressed explicitly in stories in which the placenta is described as brother, guardian spirit, or source of power (see “Nachgeburt” in Bächtold-Stäubli 1987a, Davidson 1985).

Several thousand years ago in the high culture of Egypt, elements of prenatal life were built into official state ceremony in a uniquely concrete and at the same time symbolic way. The placenta, which had sustained

the Pharaoh, was a most significant and respected object (Frankfort 1942). It was preserved in a container and there was an official called “Opener of the Royal Placenta.” As a symbol of security, the placenta was carried as a standard in processions. Furthermore, there were also the so-called life bundles, which contained the placenta and were ceremonially opened at the end of the king’s reign (Murray 1930). These facts are of significance for an understanding of the development of the human religious imagination because the hieroglyph for the life bundle later became the sign for the Egyptian concept of God.

A primitive awareness of prenatal existence expressed itself not only in religious myth and ritual but also in a more or less explicit teaching about the psychological life of the unborn child. In India, for example, there are traditions for the “care of the embryonic soul of the developing child.” The Indian psychoanalyst Sudhir Kakar (1984) writes:

At birth and the cutting of the umbilical cord, the connection ... to cosmic consciousness ... is interrupted. A hole appears in the area around the navel The well-known “navel-gazing” in the East is literally the contemplation of this hole, which ... in Hindu thought is called “Maya” and which separates the individual’s consciousness from its universal roots. [p. 207]

It is also quite remarkable with what openness and ease the Indonesians fantasize about the events of pregnancy in their literature. The psychotherapist Helga Blazy (1991a) who understands the East Asiatic mentality very well, writes: “The Indonesian culture and its literature have an advantage over the West in that they know no break and no taboo between conception, pregnancy and life outside of the

womb. For them, being and life does not suddenly begin at birth” (p. 163).

Quite differently from in Western cultures, the child is also recognized before its birth in China and Japan. Then when it appears at birth, it is considered to be already 1 year old. Another impressive example of openness toward unborn human life is to be found in the Mbuti, an African tribe that the ethnologist Colin Turnbull (1983) has described in a quite moving way. (Further examples are described by Gupta and Gupta 1989, Hakanson 1988, and Kilbridge 1990.)

Until the eighteenth century in our culture, people’s practical approach to prenatal psychology was influenced by the idea that mistakes made by the mother were significant. Folk belief held that strong emotional experiences, imaginings, and worries of the mother could have an effect on her unborn child. They could be the cause, on the one hand, of physical things such as birthmarks and, on the other, of character traits. In fact, folk belief understood the result of such prenatal influences to be quite direct:

If the pregnant woman makes a slip with a tight rope walker, then the child develops dangly arms and legs and cannot walk or stand. If the mother makes a mistake in being frightened by a mouse or a dog, then the child gets micyskin or a dog’s foot as a result; if by a hare, then the child gets a trembling chin or a hare-lip. Being shocked by a mouse or a frog gives the child a protuberance or a birthmark which looks like that animal. [Bächtold-Stäubli 1987b, p. 1422]

According to the theory, the cravings of the pregnant woman are also significant. The superstition recommends that “the cravings should be complied with wholeheartedly

and the woman should be in no way refused. . . . In Schlesia they believe that psoriasis is caused by stopping a pregnant woman from craving after fish” (Bächtold-Stäubli 1987a, p. 1417).

In the eighteenth century, there was a lively debate about this theory and the supporters of the idea went on the defensive. The rational-positivist mentality that ruled natural science of the day made any discussion about human psychological life before birth out of the question. Nevertheless, with the transition to romanticism, proponents of the “blunder theory” managed to popularize several ideas full of insight. Thus, for example, the Swiss theologian and author Johann Kaspar Lavater (1741–1801) wrote:

If a woman could keep an accurate record of the various strong imaginings which crossed her mind during the pregnancy, she would then perhaps be able to perceive the philosophical, moral, intellectual and physiognomic destiny of her child in advance. [quoted in Bennholdt-Thomsen and Guzzoni 1990, p. 116]

Quite realistically, the educationalist Joachim Heinrich Campe (1746–1818) saw in the normal conditions of pregnancy “a fatal lesson in suffering” for the unborn child. The *Sturm und Drang* novelist Johann Karl Wezel (1747–1819), nowadays hardly known, wrote:

It has been realized that, if not all, then most of the phenomena, which to the consternation of learned and simple alike can be observed in many people and which remain at present unexplained, that these can be understood quite easily if one makes known the exact and detailed history of their fate in the womb from the first moment

of their existence up until after their birth. [quoted in Bennholdt Thomsen and Guzzoni 1990, p. 117]

Such prenatal psychological associations were in fact made as early as 1738 in Adam Berns’s autobiography. He writes:

All of which [the war situation] made her terribly frightened, so that it is not to be wondered that she brought into the world a melancholic (child) with a constricted heart, one which the mother had carried for nine months under a contrite heart oppressed by fear and dread; partus enim sequitur conditionem ventris [for the departed (child) is followed by the conditions of the womb]. [quoted in Bennholdt Thomsen and Guzzoni 1990, p. 117]

In E. T. A. Hoffmann’s (1967) famous novel, *The Woman from Scuderi*, a direct connection is made between the prenatal experience of the main character and his later life. A prenatal trauma rooted in the mother’s confrontation with death and her mania for jewels during the pregnancy becomes the hero’s fate and is permanently repeated in his own sick passion for jewels and in the murders and thefts that he commits.

However, the insights and intuition of a few individuals into the deep roots of our psyche did not lead to a general acceptance and understanding of human prenatal existence but were lost and forgotten. The apodictic statement of the French psychologist and educationalist Jules Gabriel Compayre (1843–1913) in his book *The Development of the Child’s Psyche* (1900) is a good example of this tendency. For him, psychological life begins only after birth. He deals rigorously with the French authors of the seventeenth century like Nicolas Malebranche who had accepted the fact

of human life before birth. Malebranche (1674) assumed that there was an internal connection between the deep experience of the child and that of the mother, while Pierre-Jean-Georges Cabanis (1757–1808) thought that, because the unborn child possessed senses, it must also have a rudimentary psychological life before birth.

Even in the middle of the twentieth century, the medical world, when not downright negative, tended to be very reticent about the possibility of prenatal experience. Until quite recently, surgery was carried out on newborn babies without anesthetic because they were denied psychological life and pain sensitivity! This practice was only changed after increased stress hormone levels had been measured in babies being operated on without anesthetic (Anand and Hickey 1982, Brosch and Rust 1989).

While the nineteenth century attitude toward prenatal life was preserved in the traditions of school medicine, the development of psychoanalysis and of modern art marked the onset of a new approach. Because Freud emphasized the importance of childhood experience and the extreme psychological sensitivity of the child, he initiated a complete turnaround in perspective. From then on early experience was seen to be intrusive and formative, very often bordering on traumatic; later experiences build upon early ones and, because of more developed psychological capabilities, are much easier to handle. However, Freud was unwilling to develop his ideas about the effects of early experience through to their logical conclusion. It was a midwife who was eventually able to convince him that a child experiences fear during its birth:

It may perhaps interest you to learn how anyone could have formed such an idea as that the act of birth is the source

and prototype of the affect of anxiety. Speculation had a very small share in it; what I did, rather, was to borrow from the naive popular mind. Long years ago, while I was sitting with a number of other young hospital doctors at our midday meal in an inn, a house physician from the midwifery department told us of a comic thing that had happened at the last examination for midwives. A candidate was asked what it meant if meconium (excreta) made its appearance at birth in the water coming away, and she promptly replied: ‘it means the child’s frightened.’ She was laughed at and failed in the examination. But silently I took her side and began to suspect that this poor woman from the humbler classes had laid an unerring finger on an important correlation. [Freud 1966b, p. 412]

The Hungarian psychoanalyst Sandor Ferenczi (1964a) later traced the significance of good prenatal conditions. He described them as providing the model for feelings of omnipotence and good fortune. It was his impression that the newborn baby to some extent grieved for his prenatal life:

When one observes the general behaviour of the newborn child, one gains the impression that it was not constructed for the harsh disturbance of that perfect peace it enjoyed in its mother’s womb and that it longs to return to its previous condition. All who tend to babies instinctively recognize this desire. As soon as a child shows its listlessness by wriggling and screaming, they purposely bring it into a position which resembles being in the womb as much as possible. They lie it on the mother’s warm body or wrap it in soft, warm blankets and padding – obviously to create for it the illusion of the mother’s protective warmth. They protect its eyes from light, its ears from loud noise and make it possible for it to continue to enjoy intrauterine bliss; or they reproduce

the soft, rhythmic, monotonous stimuli which the child even in utero cannot avoid (the rocking movements as the mother walks around, the maternal heart beat, the dull noises from the surroundings which reach the body's insides) by rocking the baby and by softly humming monotonous, rhythmic lullabies. [p. 68]

Ferenczi understood the psychological life of the newborn as being essentially influenced by a hallucinatory desire to restore the satisfying conditions of undisturbed existence in the warm and peaceful womb. The strength of this desire, which is above all to be seen in the symbolic creations of neurotically sick children and adults, was explained by the psychoanalyst Otto Rank as rooted in birth, an experience that due to human evolution is unavoidably traumatic. It is this that in turn determines the intensity of the desire to return to the previous good condition, a desire that can manifest itself in an infinite number of symbols and foundational motifs in human psychology.

At the beginning of the 1920s, the pioneer work of obstetricians such as Philip Schwartz (1966) and Hans Saenger (1924), among others, who had recognized the traumatic aspect of birth on the physical level seemed to confirm the conclusions of Otto Rank. However, the work of Rank and Schwartz stirred up such deep feelings, resistance, and disquiet that the scientific interest in the subject again receded for a while. In the following years, some courageous individuals pursued research into the continuity of human experience from prenatal to postnatal life. This research has been intensified especially in the last twenty years, resulting in more scientific congresses and the appearance of more publications on the subject. This newfound knowledge now facilitates a comprehensive presentation. One precondition

for the study of the special aspects of human birth, however, is an understanding of evolutionary factors, which will be discussed in the next chapter.

Always a Trauma? The Evolutionary Development of Human Birth

Evolutionary Factors

Whereas the sea offers an expansive environment in which young marine animals can grow from the very beginning of their life onward, creatures on land must protect their very young from the danger of drying out by providing a very special milieu. In the course of evolution, the animals that could fly developed the relatively safe and protective system of the egg in which to contain their embryos, that is, a place outside of the mother's body. The mother bird would be too handicapped in her flying if she had to carry her babies with her. It is therefore very advantageous for her to lay eggs. However, during the embryonic phase of a young bird's life, its temperature regulation is almost completely

dependent on the brooding of the parents. Then, the rigidity of the eggshell forces the baby birds to emerge in a relatively immature condition. They are not completely developed and must remain in a second protective place, the nest, and be fed by the parent birds until they reach maturity.

None of the above considerations apply to nonflying land animals. For the mammals, the development of a protective compartment inside the mother's body proved to be successful. The protection that the mammalian parents could offer in this way was not as limited as that of the birds. The length of time that the baby can stay inside its mother can simply be increased until the baby has developed enough to survive in the external environment. So, for example, pregnancy in elephants lasts twenty months. As a result, practically all mammals are so well developed by the time of their birth that they do not need any nest and can more or less immediately cope in the adult animals' world.

The evolution of human birth has been complicated by the need to respond to a number of different demands. The progressive development of the brain and the accompanying increase in the volume of the skull demanded an enlargement of the birth canal in humans. However, the development of the upright position required a narrower and rigid pelvic bone, with an indentation caused by the S-shaped spinal column. Only this S-form column could carry the weight of the upright body. The evolutionary solution to this dilemma was to halve the length of the human pregnancy. The peculiar helplessness of human babies in the first year of their life is a direct result of this fact. One can thus speak of this first year of life as the "extrauterine premature year" of human development (Portmann 1969).

The changes in the pelvis due to the upright posture produced a bend in the birth canal. Furthermore, the upper