

The APPPAH Newsletter

News From the First Frontier: Conception To Birth

Official Bulletin of the Association for Prenatal & Perinatal Psychology & Health, Fall 2011

APPPAH'S 25TH Anniversary Edition

Personal Reflections on the History of Our Association

David B. Chamberlain

This is an adaptation of an address delivered in response to receiving the Thomas R. Verny Award for Outstanding Contributions to Pre- and Perinatal Psychology and Health at the 1999 Congress. For additional important perspectives on APPPAH's history, please see Dr. Verny's tribute to Dr. Chamberlain in the Spring 2011 issue of this newsletter.

Our Association was born in the mind of Thomas R. Verny. Before this, Thomas had earned doctorates in medicine and psychology and had distinguished himself as a teacher and author. He explains what we might call our conception, in the Foreword to *The Secret Life of the Unborn Child* (1981, p. 11).

This book really began in the winter of 1975 during a weekend I spent with some friends at their cottage in the country. Helen, my hostess, was seven months pregnant and radiant. Often in the evenings I would find her sitting alone in front of the fireplace, softly singing a beautiful lullaby to her unborn child.

This touching scene left a deep impression on me, so when Helen told me later, after the birth of her son, that a lullaby had a magical effect on him, I was intrigued. It seemed that no matter how hard the baby was crying, when Helen began singing that song he quieted down. Was her experience unique, I wondered, or did a woman's actions, perhaps even her thoughts and feelings, influence her unborn child?

The Secret Life of the Unborn Child opened doors and proved to be the forerunner of the activities to follow. Thomas was the visionary who could see the emergence of an important new discipline that would require the attention of professionals from many different branches of study. He was the weaver who recognized the value of the separate strands of many contributors and was the first to weave them into one fabric. Communicator that he was, Thomas reached out to everyone he could find who had similar interests and brought us together one by one.

Founding board members were Dr. Verny, Sandra Collier, Marcia Penner, and attorney Paul Dineen. The objectives of the Association were to further understand the psychology of pregnancy and birth and the ways in which pregnant mothers influence the unborn; to study the effects of medical intervention on mothers and babies; to explore remedial techniques to counteract pre- and perinatal traumas; to enhance the mental and physical health of mothers and fathers and their babies; to publish and distribute information; and to organize educational meetings for the purpose of exploring the above issues. Professionals and non-professionals were invited to meet in an atmosphere of openness free of dogma.

The 1st International Congress on Pre- and Perinatal Psychology had a distinctly international flavor with Alfred Tomatis, Michel Odent and Anne-Marie Saurel from France, Sheila Kitzinger and W. Ernest Freud from London, Arnoldo Rascovsky from Argentina, Peter Fedor-Freyberg from Sweden, Hans Rausch and Ivan Milakovic from West Germany, and Averil Earnshaw from Australia. Sir William Liley, pioneering fetologist from New Zealand was on the program but died shortly before the Congress. The meeting was inspirational, egalitarian, interdisciplinary and life-changing—a character which would be preserved in all succeeding congresses. (Interestingly, seven speakers from the first congress were also on the program for the 9th biennial congress in 1999: Barbara Findeisen, Lewis Mehl, Stanislav Grof, Bob Mandel, Carista Luminare-Rosen, Thomas Verny and myself.)

That all the speakers were well prepared for the opportunity to speak on prenatal and perinatal psychology in 1983 confirmed the accuracy of Dr. Verny's vision and the reality of a new discipline whose time had come. Members of this readership know better than most that mothers themselves need nourishment if they are going to nourish their children. Your dues, financial gifts, and volunteer services are the life blood that keeps the Association in vigorous health and assures that it can serve both you and the world. I appeal for your steady support and diligent work on behalf of the Association as it continues beyond this silver anniversary, to reach out to professionals, parents and babies everywhere.

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Letter from the President

Dear APPPAH Members and Non-Members,

In celebration of APPPAH's 25th anniversary, I'd like to share the brief story of my entry into the prenatal and perinatal world. It occurred when I had my first birth memory, at the age of 28. I re-lived and catharted the trauma of birth, and its healing impact was profound, as you will soon discover. The healing created a certainty about the impacts of preverbal trauma, and propelled me into joining APPPAH, becoming a 27-year member (and still counting), a 17-year director on its board, and ultimately its president.



The memory occurred spontaneously during a psychotherapy session in 1968. I was on a carpeted floor at Vanderbilt University doing breathwork (a reliable regression technique) when my body was triggered into an intense and unexpected upheaval. My feet pushed frantically against the wall, my body writhed and twisted, my lungs and chest spewed mucous. At first I was frightened because I thought I might be having a seizure, but soon I found I could control the intensity, and trusted that this was some kind of compelling and healing body memory. Suddenly, I had the astonishing idea that I was experiencing my birth, but I had never heard of such a possibility.

As my birthing-body moved toward the cervix, I became increasingly aware of my twin sister who was close behind me, and was much weaker and smaller than I. As the memory progressed, I became convinced she would die unless I intervened, and this provoked a depth of sadness I had never before encountered. I cried intensely and agonizingly about her impending death, but hoped for the best. My emotional and physical pain reached a peak when I reached back with my right arm in an attempt to pull her along with me, trying to rescue her before she died. As I stretched towards her hand, I felt a shooting pain in my right scapula and shoulder, a throbbing agony I had felt my entire life when playing sports or exerting my upper body. I realized that in my failed rescue attempt (she died 12 hours after birth), I injured my right shoulder and scapula, and that this accounted for my ongoing scapula and shoulder issues throughout my life. In addition, after encountering and reliving the pain in several more regressions, I was pleasantly surprised there was no more pain, and that I had, for the first time in my life, pain-free and full motion in my right shoulder, that has lasted to this day. I also discovered that a childhood and young-adult pattern of rescuing others (particularly women) came to a pleasant end, providing a healthier basis for all my relationships. It was as if my rescuing had been an unconscious attempt to revive her, and to re-establish the intimacy of a twin. I was extremely discouraged and dejected when my therapist was disbelieving at the time of the session, and, after consulting with his colleagues, told me that birth memories were not possible, but only fantasies, and warned me about the dangers of fantasizing. But my student colleagues saw the changes occurring in me, as did I, and so we all believed something valid was happening. That was inspiring, and also a significant aid in my healing.

I share this story in celebration of APPPAH's anniversary, and pray that all of you experience healing in your lives. Please join us as members, as we can provide educational (conferences, journals, newsletters) and referral (APPPAH's resource directory) support for your healing journeys into the prenatal and perinatal world.

In your service,
William R. Emerson, PhD
APPPAH President

A Note on Anniversary Timing

“25 years? I was at two PPPANA conferences before 1986, in Toronto and San Diego. I didn't think the name changed until into the 1990's. I'm wondering about how that 25-year calculation came to be...?”
 – Diane Speier, APPPAH member

Those longtime members with a good memory may recall that APPPAH was conceived in 1983 as PPPANA (Pre- and Perinatal Psychology Association of North America) and begun as a non-profit Canadian organization by Thomas Verny. Its first international congress, as noted by David Chamberlain above, took place in Toronto that same year. PPPANA was “reborn” into U.S. citizenship in October of 1986; its first official journal (Volume 1, Issue 1) came out that same month. (PPPANA was renamed APPPAH in 1996.) Writes APPPAH's Executive Director Maureen Wolfe, “So our official US 25th anniversary is October, 2011. In fact, our official document from the State of California was dated November 17, 1986—the very same day that our Congress starts this year—now isn't that a lovely coincidence!”

25 Years of APPPAH Publications: The Journal & the Newsletter

JOPPPAH (Journal of Prenatal & Perinatal Psychology and Health) is our peer-reviewed publication whose original mandate to publish current findings from the growing field of prenatal & perinatal psychology later became refined and expanded to cover:

- Psychological factors that affect conception, pregnancy, labor, delivery and the post-partum period;
- The reciprocal mechanisms of interaction between the pregnant mother and her unborn and sentient child and the mother and her newborn;
- The influence of the family, society, and the environment on the pregnant mother and her unborn child;
- Evidence-based measures that will improve the emotional well being of mothers, fathers, and newborns;
- The psychological effects of medical technology during conception, pregnancy, labor, and delivery on all parties concerned;
- Methods of prevention and intervention/resolution of prenatal and perinatal traumas with children and adults;
- Interfaces between prenatal and perinatal psychology and medicine, genetics, developmental psychology, anthropology, ethics and the law.

Fall 2011 will mark the 101st edition and will kick-off our 26th year by celebrating the past 25 years (100 editions). It will feature editorials from each of the former journal editors and selected articles from those esteemed editors. This issue is being planned as a retrospective look at how the Journal has evolved over the years and a celebration of our potential for the next 25 years.

Thomas Verny reflects: *The first issue of the APPPAH Journal (which was then the PPPANA Journal, and looked more like a newsletter than a journal) was published in the spring of 1985 by me in Toronto. It was called “Special Pre-Congress Issue,” for the Congress in San Diego Congress, July 26-28, 1985. In it I announced that Human Sciences Press would start publishing our Journal in 1986, making 2011 indeed the 25th anniversary of the journal as we know it.*

APPPAH's quarterly newsletter was conceived as a bulletin featuring notable accomplishments of our worldwide membership, information on upcoming events, our collaborations with other organizations, brief book reviews, and notes/commentary on prenatal issues in the press and popular culture.

The Editors-in-Chief: Where Are They Now?

Journal Editors

Thomas Verny, MD (1985-1989): Founding president of PPPANA and journal editor from Vol. 1, No. 1 through 4(2). Thomas lives with his wife in Stratford, a Canadian town known for its annual Shakespearean Festival. He is in private practice, enjoys traveling world-wide lecturing and giving workshops on PPP. In his “free” time he writes short stories and poetry and studies chess.

Charles Laughlin, PhD (1990-1994): Taught for Carleton University for 26 years in the Department of Sociology and Anthropology, developer of Biogenetic Structuralism, which is a body of theory and research projects that integrates anthropology with the neurosciences, phenomenology, and quantum physics. He has a website at www.biogeneticstructuralism.com/index2.htm. Currently retired and living in Arizona. He served as Journal editor for issues 4(3) through 8(4).

Ruth Johnson Carter, PhD (1994-2001): Still teaching for Georgia College & State University (GC&SU) as a full professor of International Studies. She developed a new course for the fall schedule on the middle east situation that will be called Crossroads. She is also completing a book titled *From Death Row to Life*, a documentary based on a woman's experience on death row. She served as Journal editor for issues 9(1) through 16(2).

David Chamberlain, PhD (2002-2002): Now retired in Nevada City, CA, David served as interim editor between Ruth Carter and BJ Lyman and has been the “go to” person for advice on the Journal for many years. He edited JOPPPAH issues 16(3) through 17(1).

Bobbie Jo Lyman, PhD (2002-2009): Served as JOPPPAH editor faithfully for issues 17(2) through 24(2) and continued as Associate Editor to support the new editor until an untimely illness in February of 2011, which sadly took B.J.’s life in May, 2011.

Jeane Rhodes, PhD (2009-present): Current editor of JOPPPAH, served as Associate Editor from Winter, 2002 through Fall, 2008. She resides in Lakewood, CO with her husband, Larry, and Golden Retriever, Beau.

Newsletter Editors

Steven Raymond, 1987-1989: Could be considered the “father of the newsletter,” since he proposed it to the PPPANA board as a way to extend APPPAH’s outreach after the ’83 Congress—and it did: early issues had a circulation of 5,000! He’s now working on the other end of the life spectrum in senior care and end-of-life, hospice, and palliative care. “For me, there is a perfect balance of the consciousness-raising work I did in pre- and perinatal psychology, and the work I am now doing in seeking to raise consciousness in issues around death and dying.” [Ed.

note: Steve was responsible for introducing me to PPN, when his talk and film about pre- and perinatal psychology at an adoption triad support group I attended in 1992, rocked my world to pieces.]



Volume 1, Issue II – Winter 1987 (that’s Steve’s daughter Natalie, now 25 years old!)

Sylvia Winchester, 1990-1992

Sandra Whyte, 1993-1995: Sandra and her husband Donald ran a PR firm in Washington, DC, and served in these years as APPPAH’s administrative directors. They were living in Key West, FL, when Donald passed several years back.

David Chamberlain, 1996-1998: This man-of-many talents and APPPAH hats is focusing on his new book, keeping pace with email—several hundred a day—private practice, a nonprofit group for birth and early parenting education (<http://bepe.info/index.htm>), and gardening at his home in Nevada City, CA, where he lives with his wife and son.

Terry Larimore, 1999-2000

Michael Trout, 2001-2006: “Being the newsletter editor for a few years turned out to be a gas, mostly. After all, I wielded such power! Such authority! And I garnered such prestige! Oh, wait. That was something else. Being the newsletter editor was actually about slogging in the trenches, begging for information, staying up late a few days in a row to pull things together, hoping Maureen wouldn’t kill me if I was late, hoping it would appear coherent when it was published, and dealing with inadvertent offenses I committed. All in all, a pretty good job. Life did get simpler after retirement. I’ve been able to write a few things for myself in the years since I left the noble post, enjoy my love of sports cars (and occasional racing), and even come up with an original idea or two. My beloved and I are finishing a book this year that offers some thoughts to physicians and nurses about how a therapeutic connection with their patients might improve health outcomes. As I write this, our five grandchildren are lazing about the house after an afternoon of tubing with grandma and grandpa down a nearby river. Life is good.”

Marcy Axness, 2007-2011: “Ditto Michael, my predecessor and mentor in all things newsletter. It’s been an enriching experience, and (mostly) a joy. I want to particularly acknowledge Maureen Wolfe for her tireless dedication to APPPAH, and William Emerson for his unflinching championship of my work. Now on to other horizons, including those called into view with the publication in January 2012 of my book *Parenting for Peace: Raising the Next Generation of Peacemakers*.

Int'l Congress Spotlight On:

David B. Cheek Memorial Lecture

APPPAH created the David B. Cheek Memorial Lecture On Psychosomatic Obstetrics in 1997 to honor an esteemed colleague and to assure that his work will be long remembered. David Cheek, who died in June 1996 at the age of 84, was a pioneering obstetrician and researcher who illuminated the realities of infant consciousness in both prenatal and neonatal life, and invented new approaches to infertility, premature birth, and birth trauma. David was a beloved and loyal member of APPPAH, served on the Board of Directors for five years, and was a popular speaker at congresses.

Messages from the Womb

Phyllis Klaus, MFT, LMSW

It is a great honor for me to give the David Cheek Memorial Lecture. The legacy of Dr. Cheek's work has profound implications for the work we do in prenatal and perinatal psychology and health. He was a pioneer in understanding the power of the mind to explore and affect the physiology and psychology of pregnancy, of fetal life, and the importance of prenatal bonding as well as his trust in fetal consciousness. In my own work as a psychotherapist I had studied hypnotherapy along with other therapeutic modalities for many years before meeting David. I was deeply affected and encouraged by his work to trust what I was seeing.

In exploring the origins of physical illness, emotional distress, or behavioral dysfunction using hypnotic techniques, my clients would often regress to their gestational period, their birth, or even to the birth of their own parents to discover core experiences or beliefs causing these symptoms. With new research today there is evidence to show how parental emotions, intentions, and stress, as well as transgenerational trauma and stress, affect the fetus and the parents. Part of the potential of my approach is the use of multi-layered in-depth history-taking. Parents come into pregnancy with their own life story and often unresolved stressors, many held at an unconscious level. These experiences, coupled with any trauma during pregnancy, labor, or birth, can interrupt the natural hormones of birth, bonding and attachment and can have a negative effect on the baby's emotional and physical health later in life.

The goal of therapy is not only to retrieve these traumas but to heal them. Healing can often occur at the state-dependent subliminal level in which they occurred. Growing evidence of the brain's plasticity gives us hope that healing can occur and that the negative effects can be mediated. My talk will discuss methods and case examples of sensitive history-taking both at a present-day awareness and at a deeper mind level, and other methods such as communicating with the symptom in order to retrieve and heal unrecognized layers of early messages from the womb.

[Phyllis Klaus is a licensed Marriage and Family Therapist and social worker. Formerly on the faculty of the Department of Family Practice, Michigan State University, she currently teaches and practices in Berkeley and Palo Alto, California, providing psychotherapy, hypnotherapy and counseling to individuals, couples, families and groups. She has been working with the concerns of families in the perinatal period for the past 35 years. She has extensive experience in treating trauma-related disorders, such as PTSD, dissociative disorders, and adult survivors of abuse. She also incorporates Hypnosis, EMDR, Ego-State Therapy along with other psychotherapies in the treatment of somatic and medical disorders, family of origin and attachment disorders, and complicated grief. She consults, does research, presents workshops nationally and internationally, and is co author of several articles as well as *The Doula Book; Bonding; Your Amazing Newborn*; a video, *The Amazing Talents of the Newborn*; and *When Survivors Give Birth: Understanding and Healing the Effects of Early Sexual Abuse on Childbearing Women*.]

Members Reflect on 25 Years of APPPAH

Marilyn Milos (1985) *At my first Congress, in 1985, Ashley Montagu was at the podium receiving a Human Rights Award, and I stood not far from him in my booth. Ashley pointed to the sign above my booth that read, National Organization of Circumcision Information Resource Centers (NOCIRC), looked at me, and said, "I've talked against circumcision for years. I'm glad to see someone has picked up the banner." I later told him I didn't realize I had, but I have spoken about the harm of circumcision and the importance of genital integrity to a receptive audience at every Congress since.*

Lynn Rinehart (1985) *In 1982, in San Diego, I was working with a client who responded well to regression and began to speak of a "friend" in a dark place who suddenly disappeared. She was left alone. When we finally realized where she was (in the womb at the fifth month), she learned that her friend (brother) did not leave because of her; he was spontaneously aborted and did not survive. Her family had never told her she was a twin. With this realization, her lifelong fear of abandonment vanished. I was alone with that, my first experience of prenatal memory, until the 2nd PPPANA Congress came to San Diego in 1985. I had to join. It was the most enthusiastic, loving, accepting group of professionals I had ever experienced. APPPAH still is!*

Julia Pickett (2011—48 hrs. ago as of this writing!) *I've been listening to Gabor Maté's In the Realm of Hungry Ghosts, and I went to his website to look up his speaking engagements, and there was a link to APPPAH's site and I was like, "Oh, my gosh, I've never heard of this organization, I have to join it, this fits me perfectly!" So it was indirectly through him. [Ed note: Dr. Maté is one of our Congress keynotes.]*

Vicky Jeter (2001) *I have been privileged to keep the APPPAH archives since 2002. Working with all of the presentations as a collective body of information has been a transformational component in both my professional and my personal life. This 25th anniversary occasion is an opportunity to tell you all who work in this field and/or have contributed to APPPAH through sharing your experiences, what a profound impact the cumulative effect of APPPAH has made. When each of us only sees our part and the parts of a few people around us, it may seem difficult to realize the progress we are making. Within the whole picture of APPPAH's history, it is doubtless we are difference-makers. May this fuel our resolve.*

Dagi Heider (2011) *As a therapist in New Zealand, it is of great concern to me that we have an alarming rate of child parents, child abuse (resulting in death), suicides and other emotionally induced illnesses. Through my membership in APPPAH I have obtained access to research material that otherwise would have not be accessible to me—material I use to educate parents-to-be on how beliefs and thoughts influence not only their own life but the life of the unborn child, physically, emotionally and mentally. I believe that through the continuous efforts by all of us, soon government policies, obstetrics, and other related services will all pull together to achieve the same outcome: Creating future generations that will be healthier, happier, full of creative thought and more resilient to the ever-changing environment.*

Pamela Yenawine (2003) *Early in my practice of craniosacral therapy and after training as a birth doula, and through encounters with a number of children and babies, I became aware of my sensitivity to and awareness of birth trauma issues. A colleague gave me a copy of her APPPAH journal to read. I did not hesitate to join, even though it was a stretch for me financially. I have never EVER considered dropping my membership, and even though I have been unable to attend a conference until this year, I have always felt a part of this amazing community through the Journal and the Newsletter. APPPAH "speaks my language" like no other professional organization, and we have a lot to say that the world still doesn't understand, or want to hear. Thank you, APPPAH.*

Jen McCurdy (2009) *I was inspired to join APPPAH both as a mother and a student. Discovering an organization dedicated to empowering conscious choices regarding fertility, pregnancy, and beyond, was a breath of fresh air, and continues to be a joy to belong to. PPN issues in my Midwest community are slowly evolving, but my hope for the future of APPPAH is to spread farther and dig deeper into communities that may not be aware of the incredible PPN consciousness. I hope more empirical research will be conducted to further APPPAH's reach into mainstream universities and healthcare organizations. I am incredibly thankful for APPPAH's presence in my life, and look forward to what comes next from such an enlightened group of individuals.*

Continued on page 7

***** Special Congress Pull-Out Supplement *****

Int'l Congress Spotlight On: The Thomas Verny Award

This award was created with a dual purpose: to honor the visionary founder and first president of APPPAH, Thomas R. Verny, whose writings and lectures worldwide helped establish the emerging field of prenatal and perinatal psychology, and to honor other extraordinary contributors to this special area of study. The first Verny Award was given in 1993, and one has been given at each congress since.

Barbara Reid Findeisen, M.F.T, is this year's recipient of the prestigious Thomas Verny Award for her extensive contributions to the field of prenatal and perinatal psychology. Barbara's career comprises four decades of tireless efforts to bring the importance of our earliest experiences to the forefront of our thinking. She founded several organizations, trained numerous therapists and helped countless individuals to heal their early traumatic experiences and step into their fullest potential. The Verny Award will be presented as part of the Congress's Saturday evening gala, and Barbara will give an acceptance presentation.



In 1976, Barbara began her private practice in Palo Alto. That same year she founded the STAR Foundation in California and founded the STAR Association in Stockholm a year later. In 2004 she created the Kenyon Ranch Retreat Center in Tubac, AZ. She now serves as president, therapist, and workshop facilitator for both STAR Foundation and the Kenyon Ranch Retreat Center. She has been a leader in APPPAH since it was founded in 1983 in Toronto, Canada.

Barbara has been a lifelong learner and an enormously powerful teacher. After graduating from Stanford University, she was an elementary school teacher for seven years, then founded and directed a preschool before returning to college to study clinical psychology. She most recently received a PhD., Honoris Causa, from Santa Barbara Graduate Institute for her contributions to the prenatal and perinatal field.

From her early insight into prenatal and perinatal psychology to her exploration of the most recent advances in neuroscience, Barbara continues to teach, lecture, and learn. She has traveled the world, lecturing nationally and internationally for almost forty years. The presentations, conferences, and workshops she has lectured at or she has attended are too numerous to mention, but to give a sense of her reach, a few of the most recent ones she has been involved in are: the Women's World Conference on Peace in Vancouver, Canada where she had an opportunity to meet privately with the Dalai Lama; traveled to Tahiti to learn about the developing brain from Dr. Daniel Siegel; lectured on "What is New Age All About?" in Stockholm, Sweden; presented a paper on "Practical Applications to Prenatal Psychology" and lectured on "Birth and the Human Family" at the University of Moscow; lectured at the ISPPM conference on "Conscious Birth, the Experience of a Lifetime"; and, of course, spoke at the first APPPAH International Congress in Toronto in 1983.

Barbara's contributions to the world of prenatal and perinatal psychology and clinical psychology have been seminal. She continues to be the heart and soul of STAR. She continues to be a leader in APPPAH and has been since it was founded in 1983, serving as a presenter, president, vice-president, and many times as chair or co-chair of the congresses, as she is this year.

CEs Available from ACOG and CTS: Spread the Word!!

The APPPAH Congress has been approved for 23 CMEs from ACOG (American College of Obstetrics & Gynecology). Clinical Training Seminars (an approved provider for the California Board of Behavioral Sciences) will also provide the same number of CEs for mental health professionals.

If you have colleagues who are required to have continuing education for their licenses, please let them know about the APPPAH Congress, where they can obtain their CEs and gain some enriching new perspectives on human health and development! [More details at <http://birthpsychology.com/content/2011-congress> – under "Continuing Education"]

Congress Concurrent Session Schedule

(visit the website for information about keynotes, workshops and registration: www.birthpsychology.com)

Friday, 3:15 – 4:15 PM

Sandy Morningstar: How Pre and Perinatal Traumas Affect Our Beliefs and Our Behaviors – Each obstetric intervention leaves a body memory in the unconscious that plays itself out in recognizable ways. This session explores how children and adults replicate their traumatic birth experiences in the things that they say and do every day.

Carrie Contey: Self-Discovery Through the Pre- and Perinatal Lens –What beliefs did we take on, while we were in the womb, that are still influencing how we live life? How does our birth experience still impact the way we move through transitions? What did we learn about relationships in our earliest years?

Ludwig Janus: The Bio-Psychological Meaning Of The “Physiological Prematurity” of Human Babies for Understanding Adult Mentality - Cultural And Therapeutic Aspects – Human babies are born physiologically immature; the psychological impact of this special condition, and a helpful expansion of therapeutic tools, will be outlined in this presentation.

Marilyn Milos: Circumcision & Genital Autonomy: Protecting Personal Choice and Preventing a Primal Wound – We'll discuss everything you need to know.

Christof Plothe: Why birth does matter? Biochemical and Psychological Impacts – The birth process is a sensitive window in development that can leave lifelong physical, biochemical and psychological effects. A treatment model is presented for all these layers for the period after birth and any stage in later life that was influenced by our early experiences.

Friday, 4:30 – 5:30 PM

Suzanne Arms: Trauma during the Primal Period – Immediate and long-term impact on individuals and families, and implications for society – The human is a self-healing organism, striving for dynamic balance. There are many things that the mother and father/partner and health professionals and systems can do to prevent trauma and facilitate healing and integration.

Eva Gundberg: The Importance of Obstetrics for the Individual and Future Society – A call for consciousness in mothers, doctors, and midwives, together with families and society, so that we can make a change for Love, Peace, and Unity by going for more humanistic births, without much intervention, while providing support for the mothers and babies.

Nancy Hurwitz Kors: Adoption, The Political Aspects – We'll explore adoption practices and policies in light of the long-term health and welfare of the developing baby, which are mostly overlooked in today's mercenary arena of independent adoption. Case studies will be presented and a proposal to make the baby the most important person in the triad (of adoptees, adoptive parents & birthmothers) will be highlighted.

Karen Melton: Prenatal Survival Imprints: Understanding & Integrating the Effects of Early Life Threat – The intricate psychodynamics of overwhelming, life threatening prenatal trauma, which is more common than many think, with its inherent survival mechanisms and double binds, core issues, beliefs and perceptions will be presented.

Terry Monell: Psychological Medical Trauma: Past, Present, and Future – With 5 million operations on children and 500,000 premature births annually, it is crucial to recognize that life-saving medical procedures impact the entire physiology and often create psychological trauma that if left untreated may cause long term psychopathology.

Saturday, 3:00 – 4:00 PM

Patricia Crittenden: A New Conceptualization of Birth-related Depression and Psychosis –This presentation will combine videos of mother-infant interaction with modern attachment theory and epidemiological and demographic information to suggest a multi-factor hypothesis regarding causal factors in some cases childbirth-related depression and psychosis.

Yeshi Neumann: Mindfulness: A Resource for Health Care Providers during Labor and Birth – Cultivating awareness of one’s own moment-to-moment experience in an open, non-judgmental way, improves our quality of care. After practicing several mindfulness techniques, attendees will decide on a specific action to integrate mindfulness into their patient care.

Mia Kalef: Body-Centered Treatment for Mothers and Their Children after Intervened Upon Births – Using dialoguing techniques, Biodynamic Osteopathic and Craniosacral Techniques, we will learn to help mothers and children of all ages move to resolve prenatal and birth imprints from both elective and emergency procedures.

Teresa Robertson: The Ins and Outs of Utilizing a Perinatal Psychology History (PNP History) in your Clinical Practice – Learn how to obtain a PNP History and how to integrate the clinical significance and applications of this information into your clinical care plan.

Rupert Linder: Recent Advances in the Treatment of Preeclampsia: Psychological Perspectives – For the first time a psychodynamic understanding of such life-threatening conditions like HELLP-Syndrome and Preeclampsia come into reach. This gives rise to new prevention and treatment modalities, which will be discussed.

Saturday, 4:15 – 5:15 PM

Adela Barcia: Creating and Utilizing Energetic Fields in Healing Work with Pregnant Mamas, Prenates, Newborns, and the Very Young – Facilitating effective nonverbal communication and how one might utilize it in addressing variety of clinical issues (e.g. inviting breech babies to turn); hypnosis, meditation, guided imagery, and more, will be covered.

Kelduyn Garland: Birthing in . . . Birthing Within . . . Birthing Without: The 9 Stages of [hu]Man – Exploration of a recurring, consistent pattern of dynamics constituting a 9th stage of development that Erik Erickson was not aware of when he wrote about the 8 stages of development from birth to 65 years, in which pre & perinatal dynamics play an integral role.

Beverly Stokes: Essential Movement for a Happy, Healthy, Mobile Baby – Learn how Parent and Baby FloorMoves™ sessions daily build baby’s body, brain and joy of movement. Video and photo vignettes from baby movement research demonstrate how gaze, gesture, and touch influence the baby’s intention in reciprocal interactions and self-motivated action.

Becky Brittain Hicks and Eric Von Schrader: Teaching Grandparents to Help Parents and Babies Thrive – By starting out with a PPN focus and knowledge of their intergenerational history, grandparents can fully support the developing baby, enhance their natural closeness to their grandchildren, and make repairs with their own children.

Caroline Peterson: Breech Presentation as an Expression of Maternal-Fetal Attachment – Personality characteristics of mothers of breech babies parallel those of the maternal/infant dyad with ambivalent attachment. A mind-body therapy called neuroemotional technique is used to identify barriers to secure intra-uterine attachment and to treat breech presentation.

Saturday Evening Celebration: APPPAH’s 25th Anniversary!!

The evening will begin with a celebratory meal, followed by the Verna Award and address by the award recipient, Barbara Findeisen. Robbie Davis-Floyd will continue the celebration, sharing what APPPAH has meant to her on a personal level. She will then kick off the entertainment with a cabaret style show featuring talent of our own members. In Robbie’s words, “Come one, come all, to the APPPAH Cabaret! We will tap our very own talent pool to provide each other’s entertainment! Please find Robbie Davis-Floyd, our Cabaret host, during the conference and tell her what you plan to perform—music, songs, poems, skits, short stories, dances—all are welcome and more!! Think about organizing a skit in advance so you can bring your costumes and props with you, network with your friends to see what kind of group performance you can come up with. Release your inner actor, let your creativity shine!”

Focus Groups

Sign up sheets for focus groups will be provided at the registration table. You are sure to find one of the following groups that inspires your passion. Groups will meet on Friday from 8:15 – 9:15 (or later if participants agree) and again on Saturday from 5:15 – 5:45 pm (for a strategy check-in). Additional meetings may be arranged based on group interest, e.g. lunch or dinner together. The moderator for each group will give a 5-10 minute report to the entire Congress on Sunday morning. A note from Congress chair Barbara Findeisen about the focus groups, which are designed to increase networking and generate new ideas and connections: *I am always inspired and touched by how many attendees at our conferences are doing great work and could be keynoters at the podium. I feel like the don't have enough time to network and hear what they all are doing, so I can learn from them and we can mutually support each other. That is my motivation for having longer and more open panels as well as the focus groups. I hope they are interactive and dynamic and not just circling up and introducing themselves. We purposely organized by topic rather than profession. We hope they spread out and interact, exploring how their perspective interfaces with others. The overarching focus is of course about APPPAH and how we can grow and have more of a presence in society.*

1. Technology and Birth (Where is Mother Nature)
2. Attachment and Bonding (The important first foundation for living and loving)
3. PPN Research and Theories (New Frontiers)
4. Generational Impacts (What do you receive besides Grandma's hairline)
5. International Perspectives (Connections & inspiration from overseas & around the world - expanding our vision)
6. Media & Politics (Patriarchy & money v. mothers & babies ; hot issues like choice/no choice)
7. Creating Optimal Birth Environments (A loving welcome in all circumstances)
8. Fathers to be (Staying connected. The importance of fathers.)
9. Therapy and Birth Issues (What works and what does not work)
10. Marketing Your Message (Getting the word out about your work and your passion)

BABY VERSES
The Narrative Poetry of Infants and Toddlers
By Michael David Trout

From the Introduction to *Baby Verses*:
The voice of the infant.

"Such a mystery—and a matter for conjecture—it has been, for hundreds of years. She didn't speak up too well, so we imagined she didn't have a voice at all. His brain was tiny, so we imagined not much was going on in there. We pretended he wasn't watching.

But infancy research of the 1990's opened the brain of the human infant to our inspection. Advances in psychoneuroimmunology, developmental psychiatry, prenatal and perinatal psychology and neurology have shown us that the baby—perhaps even the preborn baby—is capable of observing her world, and struggling to make sense of it. What would it be like if we could listen in on his processing, to imagine his thoughts?"

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U.S. \$22.95 CD included

To order your copy of *Baby Verses: The Narrative Poetry of Infants and Toddlers*, or to learn more about our other publications and documentary films on foster care, adoption, domestic violence, divorce, attachment, and other issues in infant mental health, visit our website: www.infant-parent.com

Members reflect continued from page 6

Marjorie L. Rand (1989) *I have been a member since it was called PPPANA, when I first started training with William Emerson. I was involved in congresses in Atlanta, San Francisco, San Diego, and DC. We started an LA chapter with Wendy McCord and Judy Chapman, where Barbara Findeisen and Lisbeth Marcher came to speak. I have a long history with APPPPAH and have introduced it to many of your prominent members, including Myrna Martin.*

Myrna Martin (1996) *This year has shown me that ours is a field whose time has come. I was encouraged when I was presenting at a recent international conference in Toronto on The Early Years that a top Canadian researcher, Nicole Letourneau, was also presenting, about heart-rate variability, cortisol levels, and attachment styles co-created between mother and baby. What seems to be really key in reaching out to this mainstream audience is presenting from the heart. Our field is all about connection, and when people are exposed to the scientific information AND they have a personal experience related to their own life, they begin to take action steps to help us change the ways birthing families are supported. That is the difference we can bring.*

Stephen Maret (1993) *During my PhD coursework in the late 1980s, I stumbled across the work of Frank Lake and was immediately hooked. As I began doing some preliminary research and sketching out a possible dissertation on Lake's theories, I (of course) immediately found the seminal work of David Chamberlain and Thomas Verny and discovered APPPAH (which was PPPANA at the time). I subscribed to the journal and eagerly attended the next available conference (in San Francisco). The very first day I happened to be on an elevator with Dr. Chamberlain and introduced myself. He was gracious, kind and brilliant, a wonderful role model and a great "personal" face of APPPAH. I am very grateful.*

Ludwig Janus (1989) *The cooperation between ISPPM and APPPAH began with the friendship of Peter Fedor-Freybergh and Thomas Verny, who knew each other from school and met again in the common interest in prenatal psychology. Both were presidents of their societies. This was the rootstock for the close connections of the associations all these years.*

Laura Uplinger (1985) *I read The Secret Life of the Unborn Child in 1982, when I was part of a psychosomatic medicine team in a renowned Brazilian maternity ward. The relevance of a woman's inner life during pregnancy was already at the core of my work, but science didn't comprehend this powerful realm of the making of a human being. Thomas Verny's book was a gift of hope: Perhaps scientists were willing to explore the world of our beginnings. I attended the 2nd PPPANA congress, got married, moved to the US, joined the PPPANA / APPPAH Board of Directors for 11 years; and chaired its 1993 and 2007 Congresses! My life on three continents is greatly inspired by the shared glow of this soulful community.*

Reflections on Two Notable Late Members

Ashley Montague was a beautiful, traditional-appearing English gentleman with a far-out attitude about women and birth. He taught at Princeton and was a vigorous advocate of breast-feeding and bonding in a time of bottles, drugged births, and tight schedules. He was an outspoken advocate of mother-infant attachment before we used that word and had the science to back it up.

Dr. Bob Oliver was an early advocate of natural birth. He actually left his profession as an obstetrician to protest how women were being treated during pregnancy and birth. He later returned to practice as a physician in Samoa, where he observed firsthand the difference between wives of Americans stationed there, and native Samoan women. When I questioned him as to why there was such a huge difference in their births, he answered, "Samoan women come in to give birth, and do so in about 20 minutes. American women come in to have labor, and are in pain for hours." Bob was on the APPPAH board for many years. His mantra was "I do not deliver babies. I assist women to birth their babies." – *Barbara Findeisen*

Pre- and Perinatal Psychology Recognized in North Carolina

Some folks in NC are working towards a coordinated system of care beginning with the youngest. In October, the NC Infant/Young Child Mental Health Association will officially form after a year of foundational work; their mission statement will include the intention to work with families from conception onward. In March, NC Institute of Medicine formed the Task Force on the Mental Health, Social, and Emotional Needs of Young Children and Their Families upon the mandate of the NC legislature. After looking at best practices beginning from pre-conception, the Task Force will conclude their work with a report and set of recommendations that will shape policy not only in NC but in other states. Former APPPAH board member Emma Miller has been working with both groups advocating for health promotion, prevention, and early identification and intervention services for families beginning with pre-conception when possible, and conception at the least.

Another recent initiative in NC is the creation of Pregnancy Medical Homes. Health care providers who agree to be in the program ensure that there are no elective deliveries (induction and cesarean section) performed before 39 weeks of gestation, offer and provide 17p (17alpha hydroxyprogesterone) for preterm labor prevention to eligible patients, maintain a primary cesarean section rate at or below 20%, screen for risks (including those related to pre- and perinatal psychology) at the first prenatal visit and integrate the plan of care with the local pregnancy care management program. Service coordination is also available for the birth to five population and their families in the Care Coordination for Children Program. One of the risk categories on the screening form is Toxic Stress (search www.developingchild.harvard.edu). This program is designed to provide community based interventions to maximize health outcomes.

Increasingly, more health and behavioral health services in NC are integrated which suggests many benefits for families. Emma Miller created a webinar for the leadership organization, The NC Center of Excellence for Integrated Care. The program, “Maternal Depression and the Psycho-Social Development of Children,” noted how depression can (a) begin in pregnancy and affect the mother, significant others, siblings, and the pre-nate, and (b) continue to affect the infant and others in that baby’s circles with the passage of time. The same presentation was offered at the Mountain Area Health Education Center’s Infant Mental Health Conference in June. Miller is presently offering infant mental health services at a pediatric practice. Clearly, NC is receptive to pre- and perinatal psychology!

Spreading the APPPAH News

Myrna Martin has been spreading the word in such far-flung US locales as Hawaii, Washington, Colorado, Virginia, DC, Alaska, and also across Canada in the past year, presenting a seminar on Prenatal Origins of Physical and Mental Health as well as facilitating Birthing Yourself process workshops. She has noticed a new level of awareness in her attendees about the vital importance of the time from preconception through age two—topics she covers in the contexts of epigenetic environmental influences, attachment, and development. “I have been amazed at the variety of people coming to my seminars and the experiential workshops and the openness they are expressing to these concepts and to the exploration of their own experience in this time frame. I am welcoming physicians, nurses, midwives, doulas, chiropractors, naturopaths, counselors and therapists of all stripes (craniosacral, psychologists, social workers, family therapists, massage therapists) and, interestingly, many people who work with children in the early years, who really want to understand what is happening for the children in their care.”

Patrick Houser was interviewed by midwife Patricia Jones on the “Whole Mother” program on KPFT 90.1 FM in Houston, TX, about the central yet overlooked role of expectant and new fathers in the health and wellbeing of their children. The show can be heard at www.fatherstobe.org/media.htm.

Conferences of Interest



International Society for Pre-and Perinatal Psychology and Medicine
 “Roots of Life: Prenatal Psychology in the Scientific, Therapeutic,
 Obstetric, and Counseling Context”

October 21 - 23, 2011

Frankfurt, Germany - <http://www.isppm.de/>



Mid-Pacific Conference on Birth and Primal Health Research

October 26-28, 2012

Honolulu, Hawaii

<http://www.wombecology.com/>

Briefly Noted ~ Members (and Others) Recommend

Leap Before You Look, a film by Stephane Goldsand

What would you think about life if you were dropped on your head at birth and put into intensive care; separated from your mother, your source of life and love? How would feel if you were told your father did not want you? As a man, could you learn to love, and want to be a father yourself, if your father abandoned you and your family when you were two? If you were wise and courageous and in love with an amazing woman, you would make a film called *Leap Before You Look*. This debut documentary by NYC-based filmmaker Goldsand represents what could be called, “Where the rubber meets the road,” regarding contemporary parenthood. Utilising alluring multi-media techniques, Goldsand has committed to telling a story, an intimate personal story, which very few men would dare. Throughout this 22-minute sojourn the viewer is invited into Goldsand’s inner sanctum, as well as his family of origin, in order to explore his ambivalence (dread may be the more accurate word) at the prospect of becoming a father. We also engage with his beloved and charming wife Cristina, ripe for motherhood within the evolution of their long-term relationship. Welcome to a creative, provocative, and heart-warming piece of filmic excellence from a man who is destined to be a successful filmmaker... as well as a fantastic father. – Patrick Houser, author, *Fathers-To-Be Handbook*, director, *FathersToBe.org*. [*Leap Before You Look* has now been screened at many festivals worldwide; it’s available for purchase via its official site at www.leapbeforeyoulook.com]

Safe in the Arms of Love, CD/Book by Lisa Rafel, Gary Malkin, and David Surrenda

Combines beautiful, intentionally designed music, heartwarming lyrics, and an accompanying book full of essential and easy to understand information on the importance of how healthy attachment builds a secure emotional foundation for a child’s entire life. Endorsed by Deepak Chopra, Christiane Northrup, and Dean Ornish, and developed by sound healer and songwriter Rafel, Emmy-winning composer Malkin, and clinical psychologist Surrenda, the book and CD are designed to relax both parent and child, allowing them to form the deep heart connection that is the essence of the bonding experience. Composer Malkin—who has graced APPPAH Congresses with his music—says, “By utilizing psychoacoustics and sound healing principles, we are helping to create a peaceful, attentive, heart filled atmosphere where both parent and baby can become emotionally connected.” –Reviewed by Frank Lipman, www.drfranklipman.com/the-arms-of-love/

Media Watch

This section of the APPPAH Newsletter is intended to draw attention to items in the news that are pertinent to prenatal and perinatal psychology. APPPAH does not necessarily agree with, or vouch for, the scientific worthiness of any of the news items mentioned here. We mean merely to take note of what is going on, so that you may.

MEANS TO REDUCE VIOLENCE IN SOCIETY MAY BEGIN IN UTERO

Research out of the University of Pennsylvania School of Nursing and reported in the journal *Aggression and Violent Behavior* suggests that attention to health factors during prenatal development could prevent violence in later life. Regarding recent research demonstrating a biological basis of crime, this article's author, Penn nursing assistant professor Jianghong Liu, explains, "'Biological' does not mean only genetic factors, but also health factors, such as nutritional deficiency and lead exposure, which influence biological processes." Dr. Liu's study emphasizes the prenatal, perinatal, and postnatal periods, which are critical times for both a child's neurodevelopment and for environmental modifications. Among the early health risk factors Dr. Liu identifies are prenatal and postnatal nutrition, lead exposure, tobacco use during pregnancy, maternal depression and stress, birth complications, traumatic brain injury, and child abuse. Dr. Liu's research indicates that identifying early health risk factors is an important first step in preventing childhood aggression and teenage delinquency, which have been shown to lead to violence in adulthood. Says Dr. Liu, "As a society we should invest in better health care for early life—as early as a growing fetus—in order to minimize their health risk factors for violence." [Sept. 2011, [ScienceDaily Science News](#); it bears noting that [Dr. Lui](#) published in our own JOPPPAH's Issue 18(4), in 2004—an article entitled "Prenatal and Perinatal Complications as Predispositions to Externalizing Behavior."]

NEUROPSYCHOLOGICAL SCARS FROM DOMESTIC VIOLENCE ALSO BEGIN IN UTERO

A German research team asked twenty-five mothers whether they had suffered extreme stress caused by abuse from boyfriends or husbands while they were pregnant, and then rated their emotional level. They then monitored the behavior of a particular gene in their children, aged nine to nineteen. The gene—for the glucocorticoid receptor—is involved in the brain's response to stress. The researchers found that the gene was far less active in children whose mothers were victims of domestic abuse when they were pregnant. Study author Helen Gunter said: "It changes the way that people respond to stress and they may have a reduced ability to respond to stress." Carmine Pariante, of the Institute of Psychiatry at Kings College London, said: "This paper confirms that the early foundation years start at minus nine months. We have known for some time that maternal stress and depression during pregnancy induce a unique response in the offspring, by affecting children's behavior well into adolescence and children's ability to modulate their own stress response. This study shows that the glucocorticoid receptor is subject to a key biological change that contributes to the organization of this offspring response. This confirms that pregnancy is uniquely sensitive to a challenging maternal psychosocial environment—much more than, for example, after the baby is born. As we and others have been advocating, addressing maternal stress and depression in pregnancy is a clinically and socially important strategy." [July 2011, [Daily Mail Online](#), Health]

PITOCIN A RISK FACTOR FOR ADHD

Examining the medical records from 172 women from diverse regions across the country who gave birth between three and twenty-five years ago has led researchers from the Department of Psychiatry at Colorado State University to conclude that Pitocin is a significant risk factor for developing later ADHD. The study, reported in the *Journal of Attention Disorders*, found that children whose mothers were exposed to pitocin during labor had nearly double the risk of ADHD as compared to the children with no exposure to Pitocin—67.1% versus 35.6%, respectively. [May 2011, [Pregnancy & Childbirth @ Suite101](#)]

PITOCIN SHORTENS LABOR "BUT DOES LITTLE ELSE"

The *New York Times* reports that The Cochrane Library published a report online suggesting that Pitocin may not be accomplishing its purpose. Researchers at England's Nottingham University Hospitals pooled data from eight randomized studies involving 1,338 low-risk women in the first stage of labor. Compared with no treatment, the use of Pitocin shortened labor by about two hours, but it did not achieve its putative goal—to reduce the number of Caesarean sections or increase the number of unassisted deliveries. Whether it was given early or late in labor made no difference. It appeared to cause no harm to babies or mothers [Ed. note: see above item], but the sample was too small know if it has any effect on the death rates of newborns. "We need better ways of managing slow progress in labor," said Dr. George J. Bugg, the lead author and an obstetrician at Nottingham University Hospitals. "It's a real problem, and the method we've relied on for so many years doesn't actually work." [July 2011, NYT Research]

ASTHMA RISK FACTOR: STRESS, DEPRESSION, AND ANXIETY IN PREGNANCY

A study reported in the *Annals of Allergy, Asthma & Immunology* supports mounting research finding that the prenatal period is a time when children are particularly susceptible to asthma-related risks. The study of 279 inner-city African-American and Hispanic women was conducted before and during pregnancy, and after birth. “Approximately 70 percent of mothers who said they experienced high levels of anxiety or depression while they were pregnant reported their child had wheezed before age 5,” said Marilyn Reyes, lead author. “Understanding how maternal depression affects a child’s respiratory health is important in developing effective interventions.” [Follow research conducted by Antonio Madrid, PhD funded by APPPAH, Mental Insight, Huizenga, and Van Strum and published in the APPPAH journal – <http://birthpsychology.com/person/antonio-madrid>]

ASTHMA PROTECTIVE FACTOR: EXCLUSIVE BREASTFEEDING

A new study published online in the *European Respiratory Journal* found that feeding a baby on only breast milk, for up to 6 months after birth, can reduce their risk of developing asthma-related symptoms in early childhood. Examining the impact of the duration of breastfeeding and the introduction of alternative liquids or solids in addition to breast milk, researchers from the Generation R Study, Erasmus Medical Center in The Netherlands, used questionnaires to gather data on over 5,000 children. Children who had never been breastfed had an increased risk of wheezing, shortness of breath, dry cough and persistent phlegm during their first 4 years, compared to children who were breastfed for more than 6 months. Children who were fed other milk or solids during their first 4 months in addition to breast milk had an increased risk of wheezing, shortness of breath, dry cough and persistent phlegm during the first 4 years, compared to children who were exclusively breastfed for their first 4 months. [July 2011, [Stone Hearth News](#)]

C-SECTION NOT BEST OPTION FOR BREECH BIRTH

Physicians should no longer automatically opt to perform a cesarean section in the case of a breech birth, according to new guidelines by the Society of Obstetricians and Gynecologists of Canada—in response to new evidence that shows many women are safely able to vaginally deliver babies who enter the birth canal with the buttocks or feet first. Since around 2000, because some studies suggested that breech births were associated with an increased rate of complication when performed vaginally, many medical schools stopped training their physicians in breech vaginal delivery. The problem, according to SOGC executive vice-president André Lalonde, is that now—when reassessment of the research has demonstrated its relative safety—there is a serious shortage of doctors to teach and attend these deliveries. SOGC will launch a nationwide training program to ensure that doctors will be adequately prepared to offer vaginal breech births. [June 2009, *Globe and Mail*; Ed. note: Despite the fact that this story is over two years old, it continues to seem like unknown news that is of great importance to report, which we somehow didn’t back then.]

NEW YORK TIMES AND BBC HIGHLIGHT MOVE TOWARD NON-HOSPITAL BIRTH

“A small but growing number of American women are making the choice to deliver at home”: so reports the world paragon of news, the *New York Times*. From 2004 to 2008, the number of home births in the United States inched upward to 28,357—still less than 1 percent of the 4.2 million births each year, but up by 20% nonetheless. The article mentioned last year’s controversial *AJOG* paper that featured research finding that babies born at home are three times as likely as those born in a hospital to die before they are four weeks old—and the ensuing firestorm among experts. It said that one of the chief criticisms of the paper, which was a meta-analysis of previously published work, was that it evidently lumped together the outcomes of planned home births and much more dangerous unplanned home births, a fact pointed out by Eileen K. Hutton, director of the midwifery education program at McMaster University in Hamilton, Ontario. Dr. Hutton’s own studies have compared the outcomes of planned hospital births to low-risk women and planned home births to low-risk women who were attended by the same midwives—and that research found no differences in babies’ survival. The *NYT* article also featured basic information for the mainstream reader regarding homebirth, which unfortunately included the following: “Both ACOG and the American College of Nurse Midwives agree that women who want to try to have a vaginal delivery after having had a first baby by Caesarean section (known as a VBAC) should be in the hospital.” Meanwhile, the BBC reports the Royal College of Obstetricians and Gynaecologists’ position that too many births take place in hospitals and that “more midwife-led units are needed for women with low-risk pregnancies.” [Aug. 2011, [NYT Health](#); July 2011, [BBC News](#), Health]



Birth Psychology

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