

# The APPPAH Newsletter

News From the First Frontier: Conception To Birth

Official Bulletin of the Association for Prenatal & Perinatal Psychology & Health, Fall 2012

## Breastfeeding Moms Boot Nestlé from Maternity Wards

by Elizabeth Ben-Ishai October 4, 2012 YES! Magazine

From TIME magazine's provocative photo of a mother breastfeeding her toddler to the recent controversy surrounding an American University professor who breastfed her baby while teaching a class, how we feed babies often attracts its fair share of media attention.

But while news coverage often focuses on what are perceived as personal choices related to infant feeding, an important piece of the puzzle is often missing from their analysis: the intrusion of massive corporations into the relationships between patients and health-care providers, and the subordination of public-health considerations to profit margins.

Fortunately, advocates and activists are joining forces and putting a spotlight on this missing piece of the puzzle. And momentum is building as hospitals across the country—including all of those in Massachusetts and Rhode Island—are telling the infant-formula industry to take their marketing pitches elsewhere.

Consider this: Across the country, up to 72 percent of health-care facilities with maternity units distribute so-called infant formula to new mothers in industry-supplied "discharge bags," complete with formula samples, coupons for formula, and marketing materials.

With the many benefits of breastfeeding touted by the Surgeon General and other public-health officials, why would hospitals send a new mom home with a bag full of formula? Because the infant-formula industry, which is worth \$3.5 billion in the United States alone, knows there couldn't be a better marketing tool than hospital freebies that are seemingly endorsed by health-care providers.

Studies show that women who receive infant formula samples in maternity wards are more likely to stop breastfeeding sooner and less likely to breastfeed exclusively. Though all major health care organizations recommend that infants be breastfed exclusively through six months, only 16.3 percent of moms nationwide achieve this goal. Experts agree that one of the obstacles to exclusive breastfeeding is ubiquitous infant formula marketing.

Certainly, families should make their own decisions about how to feed their babies, taking into account a variety of life circumstances and personal preferences that might make them elect to use infant formula instead of breastfeeding. But as far as practicing evidence-based medicine goes, it makes sense for health care providers to recommend the option that is best for their patients' health. That recommendation is seriously undermined by infant-formula marketing in health care facilities, highlighting the conflict between the ideal goals of hospitals (health) and goals of formula manufacturers (profit). As one humorous comic put it, discharge bags seem to send the message, "Breast is best, but you probably can't do it."

This issue strikes a chord that goes beyond this particular product. We look to our health care providers for scientifically based medical advice, not for a sales pitch. So many aspects of our lives are commercialized, from schools plastered with advertisements, to bridges, highways, and roads named for the corporations that make the highest offer. Still, at the very least, shouldn't our relationships with our health care providers be spared from the encroachment of values that turn every human interaction into one of buying and selling? Shouldn't we be able to trust that our doctors, nurses or midwives are offering us advice that is best for us, not best for the bottom lines of deep-pocketed corporations?

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### The struggle for a marketing-free maternity ward

Fortunately, we are starting to see change on this issue, thanks to many years of work by committed public-health advocates and activists. Recently, Public Citizen, the organization I work for, launched a campaign calling on health-care facilities to stop allowing the distribution of infant-formula samples to new moms. More than 15,000 people have signed Public Citizen's petition calling on the three major manufacturers of infant formula—Abbott, Mead Johnson, and Nestlé—to stop using health-care facilities to market their products. Some states are leading the charge to get infant formula marketing out of hospitals.

Last fall, Rhode Island became the first state in which all maternity hospitals voluntarily eliminated industry-sponsored discharge bags. This summer, Massachusetts followed suit, with all 49 of its hospitals ending formula marketing on their premises. Massachusetts advocates overcame significant obstacles: In 2005, then-governor Mitt Romney forced the state's department of health to overturn regulations that would have banned formula discharge bags from hospitals. Most recently, 28 of New York City's hospitals voluntarily agreed to stop distributing infant-formula marketing materials to new moms.

The movement to ensure that health care facilities promote health, not corporate profits, is gaining speed. It's time for hospitals across the country to say "no more" to corporate interests encroaching on patients' access to quality health care.

<http://www.yesmagazine.org/happiness/breastfeeding-moms-boot-nestle-from-maternity-wards>

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## APPPAH's 17th International Congress

### *New Frontiers in Birth Psychology*

November 15 - 18, 2012

*Kabuki Hotel*

San Francisco, California

**[Register Now!](#)**

### *APPPAH Conference Preview*

The 2012 APPPAH Congress will feature a "Video Room" for the showing of films during the extended lunch breaks. Contact Jeane Rhodes at: [conference@birthpsycholog.com](mailto:conference@birthpsycholog.com) for further information. Plan to take time on your lunch breaks on Friday and Saturday to enjoy a film. The schedule will be posted on site.

## *Letter from the President*

Dear APPPAH Members, Friends, and Colleagues,

And special greetings to our 1000+ Facebook friends and 3500 Constant Contact members. Together with members and friends, we are changing the face of childbirth and empowering birth psychology practitioners everywhere. APPPAH is on the move along with world-class organizations that have babies' and mothers' healthcare as major focuses.



These organizations are cooperating in getting APPPAH's important message and research out to the world. For example, OMAEP (of the United Nations) and its 17-member coalition have formed an active partnership with APPPAH to spread our message, circulate flyers, post our logo and vision-mission statements, and trade exhibition tables at each other's conferences. Thanks to the efforts of Deb Puterbaugh, Sandra Bardsley, Peter Prontzos, Constance Rock, and Bruce Wilson, APPPAH formed a partnership with the California Association of Midwives. Similar partnerships with MANA, DONA, CAPP, ICEA, and other organizations are underway, and in collaboration, APPPAH is training midwives, doulas, childbirth educators, and others to be Pre and Perinatal Educators (PPEs). Barbara Harper, Jeane Rhodes, Debra Puterbaugh, Karen Strange, and I are the organizing committee for APPPAH. And starting in 2012, each Congress will have special training programs in preventing and treating pre- and perinatal trauma. In addition, APPPAH has formed a special guild for physicians, and Constance Rock agreed to chair and host the guild. Guilds for midwives and others are also in the planning stages.

We are actively upgrading our services to our membership base. For example, the APPPAH Journal archives from 1986 to 2012 (full articles with an abstract) are being transferred to our website so full members can access and download them free of charge. Non-members can read abstracts free of charge and pay \$10 to download full articles. Top rated Congress audios and videos are also being added to the web site for purchase by members and non-members, with special rates for members.

At the last two Congresses, many members requested that we return to Asilomar for occasional Congresses because of its beauty, serenity, and idyllic location—it lends itself to the Congress theme (see below) and is a great venue for networking and professional growth. The 2013 Congress will be at Asilomar, and will be co-chaired by Ellyne Skove. The dates are Nov. 14-17 and the theme is, "Birth Psychology In Action: Transformation Through the Creative and Healing Arts." Sign up early for special rates. Please watch for a call for papers and workshops, to be announced in the Newsletter and member emails.

In your service,

**William R. Emerson, Ph.D.**  
**President of APPPAH**

***“Our primary focus should be on prevention of prematurity. What really saves the lives of babies is remaining in the womb until they are fully ready to emerge and begin the next phase of their embodied journey.” - Jeane Rhodes***

## **Guidelines Developed for Extremely Premature Infants Shown to Be Life-Changing**

ScienceDaily (Oct. 31, 2012) — For the last decade, prematurity has been the leading cause of infant mortality in the United States. As a result of prematurity many infants enter this world too early with a small chance of survival. In order to help treat these extremely premature infants, physicians at Nationwide Children's Hospital developed a set of guidelines tailored to meet the needs of these tiny infants, some born up to four months early. Now, a new study shows that these guidelines are not only improving survival rates for extremely premature infants, but also improving their quality of life.

This study, appearing in the *Journal of Neonatal-Perinatal Medicine*, included more than 200 'small babies' -- infants born less than 27 weeks gestation -- who stayed in the Small Baby Pod inside the Neonatal Intensive Care Unit (NICU) at Nationwide Children's. These small babies received care following the Small Baby Guidelines and were monitored from birth to at least 2 years corrected age.

Results from this study showed that by following these guidelines, the survival rate of these small babies increased over time. "Our approach was to standardize the level of care, ensuring that every baby received the same care," said Edward Shepherd, MD chief of the Section of Neonatology at Nationwide Children's Hospital and co-author of the study. "The idea being that if we do everything the same, for each of these infants, that our results should be better."

Before these guidelines were instituted, there were very few survivors of babies born less than 27 weeks gestation. In fact, many families and professionals viewed these small babies as having a predestined conclusion of not making it through the first few days of life. However, the findings from this study show that patients who receive care following these Small Baby Guidelines, do very well compared to normal children of the same age.

"The challenge is to convince families and our peers that these are children who, while they have had many challenges, can ultimately lead a normal life," said Dr. Shepherd, also an assistant professor of Clinical Pediatrics at The Ohio State University College of Medicine. "If you treat patients as if they do not have a chance for survival, these patients don't do as well as they could. Our approach was that each and every one of these infants has enormous potential for a normal outcome and for a satisfying life."

In addition to improving survival rates, this study showed that treating babies with this unique approach leads to shorter hospital stays. While small babies often go on to develop infections, necrotizing enterocolitis (NEC) and/or bronchopulmonary dysplasia (BPD), by following these guidelines, babies are recovering from these diagnoses and improving their developmental outcomes leading to an earlier discharge. "This is a real win-win; a shorter stay means parents get to take their child home sooner and it saves an enormous amount of resources," said Dr. Shepherd.

Part of the success of the Small Baby Guidelines is due to the multidisciplinary approach to treating these infants. The specialized care team includes everyone from physicians and nurses to cardiologists and nutritionists. The goal of this multidisciplinary approach is that every member of the team should understand the goals, the expectations and the gold standard of care so this can be achieved in each patient.

While there is still a need for new approaches to prevent the many illnesses premature infants face when entering the world too soon, physicians and researchers at Nationwide Children's continue to study ways to prevent illnesses seen in premature infants and the cause of prematurity.

## ***Conference Preview***

**To All Congress Registrants,**

**The excitement is building as we come closer to November 15th and the opening of APPPAH's 17th International Congress. We are so pleased that you will be joining us.**

This is a reminder to join us for a fantastic evening on **Saturday, November 17<sup>th</sup>!**

**When you register for dinner you are also registering for a wonderful evening of relaxation and entertainment - the dinner is just the beginning. During dinner we will be doing a drawing for wonderful door prizes and hearing more about APPPAH's plans for a certification program. Following that Robbie Davis-Floyd will host a cabaret. The crowning point of the evening will be dancing to the Klezmer band. You don't want to miss this very special evening!**

For those of you who haven't added the dinner to your congress registration, we have simplified the process for you with a special page just for the dinner reservation:

<http://birthpsychology.com/content/2012-conference/dinner-registration>

You can choose from 4 wonderful entrees:

Honey Sesame Marinated Chicken Breast, Chili Scallion Sauce  
Japanese Steamed Rice with Baby Bok Choy and Shiitake mushrooms  
Grilled Salmon with a Tomato Puree, Couscous, Grilled Seasonal Vegetables  
Grilled Portobello Mushroom on a Bed of Couscous with Seasonal Vegetables

Accompanying all entrees will be a first course of mixed salad and a final dessert course, as well as coffee, tea, and water. There will be a cash bar for those of you who enjoy wine with your dinner.

**Go to the congress website now and complete you dinner reservation on this special page!**

<http://birthpsychology.com/content/2012-conference/dinner-registration>

Joy and Blessings, Your Congress Co-Chairs: Jeane & Ellyne

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## ***Birthing Yourself Process Workshop with Myrna Martin***

***Vancouver, B.C. Canada - November 22nd, 23rd, 24th, 25th, and 26th.  
An opportunity to learn professionally and do some personal work around your birth  
or early years in a safe space: maximum 7 participants. Contact Myrna at:  
[myrna@myrnamartin.net](mailto:myrna@myrnamartin.net) [www.myrnamartin.net](http://www.myrnamartin.net)***

### ***Future Events of Interest***

**TOWARD A NEW PSYCHOLOGY OF INTERPERSONAL RELATIONSHIPS**  
| UCLA | March 8-10, 2013 | <https://www.uclaextension.edu/attachment/r/default.aspx>

## 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.

JOPPPAH is looking for high-quality research or clinical papers focused on the psychological dimensions of human reproduction and pregnancy, as well as the mental and emotional development of the unborn and newborn child.  
 Please contact the editor, Jeane Rhodes, at [journal.editor@birthpsychology.com](mailto:journal.editor@birthpsychology.com) for complete author guidelines and/or to submit your manuscript of 2,000 to 8,000 words.

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APPPAH's quarterly **Newsletter** is 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.

APPPAH Members: Please send news items, reviews, events, commentary, and other items to the Newsletter Editor, Peter G. Prontzos at: [pprontzos@langara.bc.ca](mailto:pprontzos@langara.bc.ca)

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**APPPAH is now on Facebook !**

You are invited to join our open group on Facebook, at: <http://www.facebook.com/groups/50590323188/>

Get the latest information about our work, new research, meetings, events, discussions, and connect with friends, old and new!

## MEDIA WATCH

*This section feature 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.*

**British Columbia health minister backs home births in low-risk cases.** B.C. Health Minister Margaret MacDiarmid trained as a physician in the 1980s, home births were not even contemplated as a safe alternative. MacDiarmid, former president of the B.C. Medical Association, is encouraging women with low-risk pregnancies to plan their deliveries at home. [Nov. 2, 2012; Vancouver Sun: <http://www.vancouversun.com/news/health+minister+backs+home+births+risk+cases/7492311/story.html>]

**Mortality rates significantly higher if both mother and newborn admitted to ICU.** They are significantly more likely to die than when neither is admitted. [Oct. 22, 2012; ScienceDaily: <http://www.sciencedaily.com/releases/2012/10/121022122048.htm#.UIbHHI2LQEw.email>]

**Iraq records huge rise in birth defects.** New study links increases with military actions. [Oct. 14, 2012; The Independent: <http://www.independent.co.uk/life-style/health-and-families/health-news/article8210444.ece>]

**Most pregnancy-related infections are caused by four treatable conditions.** In low-and-middle income countries, pregnancy-related infections are a major cause of maternal death, can also be fatal to unborn and newborn babies, and are mostly caused by four types of conditions that are treatable and preventable. [Oct. 9, 2012; ScienceDaily: <http://www.sciencedaily.com/releases/2012/10/121009171454.htm#.UHWQq5KTGP0.email>]

**Maternal depression affects language development in babies.** Maternal depression and a common class of antidepressants can alter a crucial period of language development in babies. [Oct. 8, 2012; University of B.C. : <http://www.publicaffairs.ubc.ca/2012/10/08/maternal-depression-affects-language-development-in-babies>]

**Vaginal Delivery Safe for Most Preterm Babies.** A large study has found that even very preterm babies can be safely delivered vaginally, provided they are not in the breech position. [Oct. 1, 2012; New York Times: <http://well.blogs.nytimes.com/2012/10/01/vaginal-delivery-safe-for-most-preterm-babies/?emc=eta1>]

**Relieving stress the biggest help for smallest babies.** Training for parents to recognise and respond to signs of stress in premature babies from as young as 30 weeks could improve their brain development. [Sept. 30, 2012, West Coast Sentinel: <http://www.westcoastsentinel.com.au/story/366839/premature-babies-thrive-if-parents-take-it-easy-study>]

**Cuba's Prenatal Program Improves Low Birth Weights.** Comprehensive prenatal care can decrease the rate of low birth weights. [Sep. 24, 2012; ScienceDaily: <http://www.sciencedaily.com/releases/2012/09/120924174958.htm>]

**The Way Mothers Interact With Babies In First Year Predicts Child Behavior To Age 13.** Both a mother's parenting style and an infant's temperament reliably predict challenging behavior in later childhood [June 24, 2008; ScienceDaily: <http://www.sciencedaily.com/releases/2008/06/080623102530.htm#.UIbDJ5a03Bc.email>]

**As preterm births soar globally, U.S. ranks 130 of 184.** The world's developed countries have see their average rate of premature births double to 6 percent since 1995, despite efforts to reduce the phenomenon. Worldwide, 15 million of the 135 million babies born in 2010 were premature and 1.1 million died [May 2, 2012; Reuters: <http://www.reuters.com/article/2012/05/02/us-births-idUSBRE84111220120502>]

**Expectant Fathers Should Receive Prenatal Care, Support, Study Finds.** A University of Missouri researcher has found that stress related to pregnancy uniquely affects the health of expectant fathers, which in turn, influences the health of expectant mothers and their infants. Health services should incorporate counseling and assessments for men *and* women to reduce stressors and promote positive pregnancy outcomes. [May 12, 2011; ScienceDaily: <http://www.sciencedaily.com/releases/2011/05/110512132514.htm#.UBvZDliQXEE.email>]

## **My Moonlit Musing on the Mid-Pacific Conference on Primal Health and Research**

By Debra Puterbaugh

I had every intention of reporting on our facebook page to you, the APPPAH faithful, as the Conference happened. I wanted to share all about the epic gathering of amazing hearts and minds called together by Michel Odent and Heloissa Lessa. The Mid-Pacific Conference on Birth and Primal Health Research, in Hawaii Oct 26-28. However, as fate would have it...my lap top got a virus and I had to wait until I was home and my IT guy could heal it! And by that time Marcy Axness had covered all the really important details in her excellent report for Mothering.

She writes, "Michel posed the provocative yet convincing hypothesis that our human oxytocin system is weakening and therefore Women Are Losing the Capacity to Give Birth. Kerstin Uväs-Moberg gave an enlightening report on her leading-edge research on oxytocin and motherhood. She asked point-blank: "do we protect and use our oxytocin system as we should?" You can read all about it by googling Marcy Aness on Mothering.com.

I was off the hook. There is a flurry of new birth visionary voices out there. Talking and tweeting about healthy birth, they all make me feel so hopeful.

Stephanie Dawn, one of the bright new voices, writes so beautifully: " while I enjoyed Kerstin Uvnas-Moberg's presentation on the power of oxytocin (the bodies' love hormone) and Pier Francisco Ferrari's presentation on the how we connect via the mirror neuron system, and I realize the need for science in our present day and age, I feel that science is only serving to back up what women and mothers have long known: when you hug someone, it feels good, when you connect with eye contact and touch, more love hormone is generated in our bodies, thereby facilitating a juicier, more calm and potentially more peaceful prenatal, birth or postpartum or parenting experience" I just LOVE that she gets it so deeply. She gives me hope.

I find it fascinating that science is now finally studying the birthing woman as a force of nature. Is not observation the primary tool of the scientist? Why then, is the majority of what we call reality about birth based on controlling and manipulating the process? As midwife, Sara Wickham RM, PhD. in her keynote on "Cervical Wisdom" so passionately put it: "Who made up 10 centimeters anyway? How many of you think that every women opens in some kind of mechanical precision to and exact dimension?" She asked for a show of hand from birth workers in the audience: "Who of you think the whole dilation myth is a made up story?"...all hands went up! Who made this all up? Who made up stages, or decided how long a labor should last? Why do we continue with all these truly un-scientific practices around birth? Just WHO is deciding how birth should be treated in our world today? I was just sitting with all of these thoughts floating around in my heart and head when....the full moon captured my muse for the last two days!

I have more to say about this historic gathering in the middle of the Pacific Ocean, but it will have to wait! We close to our own International Congress and I have much to do to get ready for all our colleagues and friends. See you soon...Peace Deb

### **Brief Book Review**

**The Science and the Art of Psychotherapy. Allan N. Schore. Norton. 2012. 480 pages. \$45.**

By Peter G. Prontzos

Although the main focus of this work is therapeutic, many of Schore's insights are relevant to the pre and perinatal period, and infancy in general. For instance, he stresses that, "attachment experiences shape the early organization of the right brain, the neurobiological core of the human unconscious." For this reason, "the essential task of ...the prenatal and postnatal critical periods", as well as... "the first year of human life is the creation of a secure attachment bond...between the infant and the primary caregiver."

Schore notes the larger social factors which can negatively affect the child in the womb and afterward. He mentions the need, especially in the United States, for most parents to leave their children (often in poor quality day-care) in their earliest years because they have to work, due to inadequate support for the most vital job there is: parenting.

## JOIN US AT THE APPPAH CONGRESS IN SAN FRANCISCO!



### New Frontiers in Birth Psychology

APPPAH's 17<sup>th</sup> International Congress  
November 15-18, 2012 San Francisco

APPPAH is proud to present some of our faculty:



Stan Grof



Peter Nathanielsz



Thomas Verny



Elan McCalister



Carista Luminaire



Michael Mendizza



Dennis Hertenstein



Myrna Martin



Gerhard Schroth



Ray Castellino



Robbie Davis-Floyd



Suzanne Arms

APPPAH's mission is to educate professionals and the public about, and advocate for, the life-changing discoveries made in the area of prenatal and perinatal psychology and health. APPPAH illuminates the life-long impact of conception, pregnancy, and birth on babies, families, and society.

Join leading edge scientists and scholars dedicated to the future of humanity.

Register @ [www.birthpsychology.com](http://www.birthpsychology.com)

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