

# The APPPAH Newsletter

News From the First Frontier: Conception To Birth

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

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## *Int'l Congress Spotlight: "Echoes from the Womb"*

*We wanted to offer our newsletter readers a glimpse of what inspires the 2011 Congress keynote speakers towards the work that has led them to the APPPAH podium. So here it is, in their own words:*



In his Saturday keynote “Kids in Chaos: Recognizing the Consequences of Impaired Attachments and Fostering Resilience,” **Gabor Maté** outlines the mental health implications of early childhood emotional loss, whether due to abuse, trauma, or the loss of parental attunement with the child owing to stress on the parenting environment: “My impetus for learning about child development and what threatens it came from my observations as a physician and recognizing the links between adult outcomes and childhood experiences. Also looking at my own life and my behaviors and dysfunction and finding the sources of that, and then thirdly, as a parent, the impact I had on my children in the long-term. I find it so far almost impossible to drop that sense of guilt around what I did or didn’t do as a parent when my kids were small. If anyone had ever asked me to throw myself into a fire for my child, I’d have done it. Unfortunately, no one ever asked me to throw myself into a fire. My child just needed me to be present. I can deal with the guilt in a healthy way, but so far I haven’t been able to make it disappear. A way in which I’ve transformed it is to do the kind of teaching and work that I do in the world.”



**Bruce Lipton**’s talk, “The Biology Of Belief: The Science Of Personal And Global Transformation,” will illuminate connections among biology, psychology, spirituality and our imminent evolutionary upheaval, including how pre- and perinatal programming shapes our genetics, behavior, and thoughts, and thus the conditions of our body and our place in the world: “I like to ask an audience, ‘Go back to when you fell head over heels in love with someone,’ and I ask them, ‘Were you healthy?’ And of course the answer is ‘Yes, very healthy.’ ‘Did you have energy?’ ‘Of course, lots of energy.’ ‘Was life so beautiful that you couldn’t wait for the next day?’ ‘Yes!’ That’s the equivalent of living heaven on earth. The most important thing is that it wasn’t an accident, it was a creation—you did that. And if you understand the mechanism of *how* you did that, then it could be a way of life every day. The only reason we don’t all have this honeymoon experience as a way of life is because it was programmed out of us. The interesting part is, I’ve been living this experience for so many years in a row with my partner, and the fact is, it was not an accident, there was a knowingness to it. This is heaven. I can’t wait to get out there and enjoy it, but I’ve got a lot of people to tell about it before I can sit down and enjoy it that easily, so they start propagating it as well, then all of a sudden it will just be here—heaven!”

[Continued on page 3]

## *Letter from the President*

### Home Birth is Making a Comeback

*Special Acknowledgment to Mothers Who Choose Home and Birth Center  
Childbirth, and to Supportive Family Members, Midwives, Nurses, and Doctors*

Dear APPPAH Members and Non-Members,

More than 99% of U.S. women give birth in hospitals, and the remaining 0.6% give birth at home, supported by midwives. In the rest of the world, 70-80% of mothers give birth at home, supported by midwives or qualified birth attendants. It's important to ask why so many U.S. mothers give birth in hospitals, and if this is the healthiest choice. Most independent medical experts think not, and agree that homebirths are safe and that the hospital birth rate is high not because it is so successful, but because doctors inadvertently scare parents into believing birth is dangerous. Prenatal care becomes prenatal scare, as Michel Odent points out.



When pressed to verify the danger, medical authorities cite a few studies that have major flaws, but do not mention or recognize the flaws. In the flawed studies, homebirth data was polluted by the inclusion of unplanned and unattended home births, which are very risky and end up with a high incidence of complications including injuries and death. As compared to the flawed studies, there are a vast number of homebirth studies that indicate home birth is as safe or safer than hospital birth for the vast majority of women who are in fact low risk. Medical researcher Henci Goer reviewed the literature on home birth and said, "No study has ever shown that planned home birth with a trained attendant who took proper precautions increased the incidence of poor outcomes..."

Home birth attendants usually practice the midwifery model of care, and this model has been fully described by Citizens for Midwifery ([www.cfmidwifery.org](http://www.cfmidwifery.org)). It is not a fear-based system, but a system that supports and builds confidence in women to give birth safely, usually at home or in birthing centers, with skilled and licensed midwives in attendance. It contends that each labor is unique and takes time. It believes in the competence of women more than technology, but welcomes interventions when necessary. Midwifery attendants are experts in normal birth, but are also trained and licensed to recognize signs of trouble, consult with obstetricians, and transport to the hospital when necessary. The midwifery model and home birth have been practiced for over forty years in Holland, a country that has the best maternity care system in the world, with the best birth outcomes and the fewest number of complications and interventions. In Holland, midwives "deliver" about 35% of babies at home, and the rest in hospitals. When necessary, midwives call in doctors to do surgery or other interventions for which they themselves are unlicensed. Doctors and hospitals there welcome midwives, who are appreciated for their skills and excellent birth outcomes.

Information about the success and safety of home birth has been widely disseminated in the UK, so much so that the UK health minister recently mandated that all UK countries increase their homebirth rates by 10%, contending that women should be able "to choose... from...options including home birth and delivery in midwife-led units" ([BirthChoiceUK.com](http://BirthChoiceUK.com); MIDIRS, 2008). As a result, home births attended by midwives there increased 9.7% overall, representing 2.5% of all births. The biggest rate increases were in England (10%) and Scotland (9.2%). The increase in homebirth rates occurred despite subtle and overt resistance from the obstetric establishment. Nevertheless, home birth is burgeoning and thriving in many parts of the world (references available on request). If we follow the lead of our European neighbors, it appears hopeful that U.S. women may soon enjoy a greater range of choices for childbirth, including the use of homes, out-of-hospital birth centers, in-hospital birth centers, and hospitals.

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

[Keynote speakers, cont. from pg. 1]



Journalist **Annie Murphy Paul** will speak about bringing the importance of prenatal life to the mainstream in her book and *Time* magazine cover story about “Origins: The Important First Nine Months of Life,” written while she was pregnant with her second child: “I’d been keeping tabs on a lot of interesting, varied types of research in different fields, and slowly I came to realize that many of the most exciting and surprising findings were clustered around the prenatal period. That realization clicked in for me around the same time that I realized that I had a lot of *personal* questions as well, about what makes us the way we are, about the nature vs. nurture debate, about how much my behaviors and even feelings could affect my offspring before they were born. So all those things came together when I realized that this was a rich, engaging topic that I could explore as both a science writer and a pregnant woman. I also became conscious of how critical it is that everyone in society—not just pregnant women themselves—feels the responsibility to promote and enable healthy pregnancies. This is the next generation of citizens, students, and workers that we’re talking about—something that should concern us all!”



**Michael Trout** will speak on “The Narrative Of The Infant: Why Our Story Matters,” proposing a clinical model for helping parents develop a series of stories that will fill in some of the blanks, and clarify some of the perceptions, allowing their children to work out more coherent stories of their early experiences: “I was born into a grieving house. My very young mom treated her grief by getting pregnant with me. My uncle had been captured as a WWII prisoner, and for nine months they waited for news. My grandparents finally received confirmation that their oldest boy (my mother’s older brother) was dead, just days before I was born. My grandfather fell into a terrible depression, from which he was saved only by hours of holding me. This is my story, and it helps me understand a lot. Daniel Siegel has taught us that *what* happens to us is less important than the *coherence of our narrative* about it. I will explore with you how such coherent narratives can be developed to benefit children—particularly adoptees and foster children—whose histories may be unknown, or whose narratives may be garbled.”



In her talk “Where Is My Mother? Supporting Mother-Infant Attachment In The NICU,” neonatal physician **Raylene Phillips** will describe the effects of separation during newborn hospitalization on infants and their mothers, explore ways to heal the wounds that inevitably result, and propose a model to care for premature and sick newborns with minimal mother-infant separation: “I experienced the effects of this separation as a new mother, when my firstborn son was observed in the newborn nursery for 24 hours before I was allowed to see him. After secretly wondering for years why there was such a disconnection with this son that was not present with my next two children, I learned about the sacredness of the first moments and hours after birth and what often happens when that time is interrupted. My passion for the importance of mother-infant attachment is the reason I went into neonatology—to find ways to help heal the wound that always occurs with the separation of mothers and infants in the NICU.”

[Continued on page 4]

*[Keynote speakers, cont. from pg. 3]*



**Jeanne Ohm**'s talk, "Chiropractic Care for Safer, Easier Births," will address the potential physical and emotional stressors of birth on the infant and the chiropractic role in eliminating these contributing factors with care for the mother throughout pregnancy: "When I looked at APPPAH, I immediately felt akin to them, because, 'Wow, they're dealing w/ the emotional stress that a child goes through in birth!' I'm so tired of the perspective of, 'It's all about the mother, that she has nice lit candles and incense going in her room.' No, it's about the baby, it's really about the baby. I really appreciated APPPAH because they were recognizing the emotional stress that affects that baby from conception on, and certainly during birth. And I said, 'Yeah—and it's physical, emotional, chemical stress that subluxates a child, and it's physical, emotional, chemical stress that we help reduce with adjustments throughout pregnancy, on the mother, which then affects the baby, and steers her toward a more natural, trusting type of birth.'"



Closing the conference on Sunday, **Marcy Axness** will speak about her new book, "Parenting for Peace: Raising the Next Generation of Peacemakers," and what savvy APPPAH-ites might call "physiological parenting"—fostering optimal growth-mode from before conception: "As an adoptee I've experienced a personal study of epigenetic influence on phenotype, which speaks to this central theme of what cultivates children's growth versus their defense posture. I was always tiny growing up—skinny, small-boned, flat-chested, with a meek voice and the metabolism of a hummingbird. This was challenging, living with a voluptuous adoptive mother who filled a room with her voice and personality. When I was 21, driving across the Golden Gate Bridge to reunite with my birth mother, I anticipated meeting someone Audrey Hepburn-esque, in whose string-bean silhouette I would see the genesis of my own. I was stunned to meet a tall, "normal-sized" woman, zaftig even, with average bone structure. And a bustline! Years later, after a wonderful pregnancy, I had a daughter. As she was moving into adolescence, I started learning how a pregnant mother's stress can imprint its message of constraint on her developing fetus, eliciting defense-over-growth expression of genomic potential. My daughter is now a stunning 20-year-old woman who can fill up a room with her presence, her engaging openness, and her statuesque, curvy body. Call it "nature, nurture, and cup size'."

APPPAH's 16th International Congress  
Echoes from the Womb:  
Applications for Lifelong Well-Being  
November 17 - 21, 2011 - San Francisco, CA  
[www.birthpsychology.com](http://www.birthpsychology.com) - [apppah@aol.com](mailto:apppah@aol.com)



***Register Now***

## *The Passing of Bobbi Jo Lyman*

On May 4, 2011, Dr. Bobbi Jo Lyman succumbed to an intense three-month battle with pancreatitis and multiple organ failure. She was surrounded by family and close friends at the UC Irvine Medical Center. She is survived by her husband, Kit Lyman, and their sweet dog, Lucy.

Born Roberta Jo Pettit, she sometimes called herself “Bobbi Jo” and was affectionately known as “B.J.” to family, friends, students and colleagues. She was a student of life, a perpetual researcher and a supporter of all who crossed her path. Her career spanned over four decades and included musician, entertainer, psychologist, teacher, researcher and writer. Her biggest contributions were perhaps made in her role as Chair of the Prenatal and Perinatal Psychology Department at Santa Barbara Graduate Institute. She served in this role from 2003 to 2008, masterful not only in teaching and mentoring students but in developing and evaluating curriculum, supervising doctoral research, serving on the Institutional Review Board for research with human subjects and serving as disability specialist for students’ American with Disabilities Act accommodations. All this and more she did with great skill, passion and compassion.



Even as B.J. stepped into semi-retirement in the fall of 2008, she opened a new chapter of service to prenatal and perinatal psychology; in November 2010 she chaired one APPPAH’s most successful international Congresses. B.J. was one of the true pioneers in prenatal and perinatal psychology and one whose gifts will continue to give for generations to come. She published over two-dozen scholarly articles and editorials regarding prenatal and perinatal psychology. She also served as primary faculty/mentor or committee member on over 100 masters theses and doctoral dissertations. Her first book, *Prenatal and Birth Memories: Working With Your Earliest Experiences to Help Your Life Today*, serves as a practice manual for clinicians and a workbook for clients. She also left a near-completed manuscript for a second PPN book.

Even though B.J. did her work quietly, never seeking recognition, she did receive “The 2002 President’s Distinguished Instructor Award” at City University and Honorable Mention in contributing to an article on “Navigating the Nuances: A Matrix of Considerations for Ethical-Legal Dilemmas,” published in *Professional Psychology: Research and Practice* (1999). And in the book “Piece of My Heart: The Stories of Twenty-Six Women in Viet Nam” (1997), Presidio Press, this compilation of experiences of the war in Southeast Asia devoted one chapter to B.J.’s two tours (1967-1971) as musician/entertainer to the troops. Yes, in a “prior life”—from 1964 to 1983—B.J. was a musician and entertainer. Beginning at age 18, she traveled throughout the United States and abroad, including entertaining the troops in Vietnam during the war. She remained passionate about rock music and finally fulfilled her dream of recording a CD containing all original songs in 1996. B.J. brought this love of music, along with her guitar, into the classroom at SBGI. Students always enjoyed hearing her sing and joining her on songs written specifically for them as grad students, as well as old favorites like “Me and Bobbie McGee.”

B.J.’s advanced education included her Ph.D. in clinical psychology with a behavioral (medicine) health specialization from Fielding Graduate University in the summer of 2000. Her dissertation was entitled “The Effects of Maternal Stressors on Behavioral Conditions Found in Human Newborns.” In addition to her tenure at SBGI, she taught at Olympic Community College, Washington School of Professional Psychology/Argosy University, Walden University and Pacifica Graduate Institute.

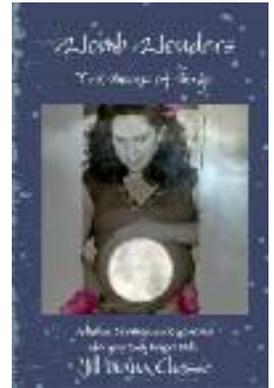
B.J. served as JOPPPAH’s Editor in Chief from 2002 to 2009, and served on APPPAH’s board of directors from 2008 - 2011.

Our entire field, and many of us personally, have all lost a devoted friend, mentor, and colleague. And, the world is a much better place because B.J. Lyman was here. She leaves her mark on all our hearts and her influence will be felt for generations. —*Marti Glenn*

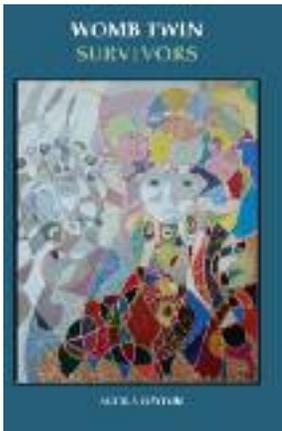
## Briefly Noted ~ Members Recommend

**Womb Wonders: Ten Moons of Magic**, by Jill Diana Chasse, Magic of Motherhood, 2011; and **Mommy's Lap**, by Jill Diana Chasse and Malachi Chasse, Create Space, 2010.

Jill Diana Chasse's newest books are worthy additions to the growing body of resources available to parents and professionals who are interested in the time before birth. Chasse's *Womb Wonders* truly is a wonder of information and resources for creating a nurturing, welcoming, and holistically centered birth experience. She is the expert birthing planner! Chasse nicely weaves together pre- and perinatal research and personal stories, while drawing from a wide variety of sources and traditions. With evidenced based tools and a diversity of cultural rituals, she provides a wealth of inspiring ways to welcome and bond with prenatals and also support parents in their birthing journeys. Her writing style is simple, clear, persuasive but not prescriptive, and invites the reader to slow and pace herself in a way that supports the prenatal and perinatal material she is presenting. Reading this book leaves the reader feeling calm, happy, and grateful. Chasse has shared all she has learned! Likewise, *Mommy's Lap*, (written by Chasse and her son, Malachi) is a sweet little book that gives families a chance to bond through reading together about what a positive birth experience can be like for a child. – Reviewed by Patricia Lucas



**Womb Twin Survivors**, by Althea Hayton, Wren Publications, 2011.



This book is a gift to not just the prenatal and perinatal psychology community; it is a gift to society as a whole. As Hayton masterfully illustrates, it is amazing how broadly the subject matter of womb twin loss and survival affects millions of people across the globe, and yet it is so little in conscious awareness. Her comprehensive work changes that and serves to enlighten us all on what it is to be a womb twin survivor. She has painstakingly articulated the complex processes of the development of multiples in the womb, taking the reader through the many ways twins and multiples are connected physically, emotionally, and psychologically. Hayton covers a broad spectrum of clinical research and includes fascinating firsthand accounts of those who have suffered the loss of a sibling perinatally. Hayton expertly documents the identifying psychological and physiological characteristics of womb twin loss and provides excellent direction for healing the many painful emotions and life shaping despair these survivors can share. This wonderful accomplishment by Hayton serves as a primer for those who wish to learn more about the power of the very early experiences of multiples in the womb. It is also a treasure to those who have survived such a painful loss and will help ease their loneliness and offer hope and guidance for positive and healing change. Don't miss adding this book to your prenatal and perinatal literature. It is an essential read! – Reviewed by Patricia Lucas

## Resources of Note

### WORLD BREASTFEEDING WEEK 2011

August 1-7 is World Breastfeeding Week, designed to raise breastfeeding awareness and celebrate the collective efforts around the world to protect, support and promote breastfeeding. The theme for this year's World Breastfeeding Week is communication and using a variety of methods to accomplish those goals. For example, communities and health facilities are encouraged to use new media technology to reach large numbers of people with breastfeeding information. The World Alliance for Breastfeeding Action (WABA) is asking its partners to reach out through their communication channels to share the messages needed to empower every woman and every community to succeed in optimal breastfeeding. La Leche League (LLL) USA has been hosting celebrations since May 1st to highlight the mission of LLL in communities. For more information, go to the WABA Web site at <http://worldbreastfeedingweek.org> or the LLL USA Web site at <http://lllusa.org/wbw/index.php>.

## Spreading the APPPAH News

APPPAH member **Wendy Anne McCarty's** newest article, "Consciousness at the Beginning of Life," appears in *Bridges* (21:1), magazine of The International Society for the Study of Subtle Energies and Energy Medicine. ISSSEEM also hosted Dr. McCarty's workshop, "Evidence Based Spirituality at the Beginning of Life," during their 2010 conference. [Article and audio recording of the presentation available at [www.issseem.org](http://www.issseem.org)]

APPPAH member and newsletter editor **Marcy Axness** is featured in "Trail Marker Moments"—brief YouTube videos that are part of the wellness community-building project of Pathways Connect, through *Pathways to Family Wellness* magazine. The magazine is published by the ICPA, International Chiropractic Pediatric Association. Axness was a plenary speaker at ICPA's Freedom for Family Wellness – Celebrating the Shift to Conscious Choice Summit in Washington, DC, last fall. To see Marcy on "Attuned Conception to to [www.youtube.com/watch?v=vAoI9bxNNxo](http://www.youtube.com/watch?v=vAoI9bxNNxo)



## News from the APPPAH Journal Publication Team

### Call for Papers



*The Journal of Prenatal and Perinatal Psychology and Health (JOPPPAH)* is accepting new papers for consideration. If your paper clears the peer review process, you will receive a contract and your article will appear in print and on the APPPAH website. Submit your manuscript as a Word document via e-mail attachment to the editor at [joppah.rhodes@gmail.com](mailto:joppah.rhodes@gmail.com). For your convenience, here are manuscript guidelines.

### **Guidelines for Contributing Authors**

*The Journal of Prenatal and Perinatal Psychology and Health* accepts only original material that is not under consideration by any other publications. Articles should be word-processed and transmitted electronically to the Editor. The Editor reserves the right to edit manuscripts for length, clarity, and conformity with the journal's style. The author should retain his/her copy. American spelling should be used. The title page should be submitted with the article and include five elements: title, running head, author byline, institutional affiliation and author note (contact information). The 100-word abstract should be placed on the title page as well.

The journal is interested in publishing theoretical and empirical articles utilizing data gained from clinical work, experimental research, case studies, and self-report. Among the areas of special interest are:

- 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.

### **Illustrations, Figures and Tables**

All illustrations and tables should be included separately from the manuscript (at the end of the references or in a separate file) and should be clearly identified in Arabic numerals, showing which is the top of the illustration if this is not obvious. Legends for illustrations, which should be referred to as "Figures," should also be submitted separately. Tables must supplement the text without duplicating it. They should include an appropriate title. Lettering within an illustration, figure or table should be no smaller than 8 points and no larger than 14 points, and prepared at a resolution sufficient to produce a high-quality image, that is, using computer-generated, professional-level graphic software. Illustrations should either be black-and-white glossy photographs or India ink drawings. Unless previously agreed with the Editor, color illustrations can be published only at the author's expense.

### **APA Style**

Formatting and referencing must follow APA style. References should be limited to work cited in the article, rather than being a bibliography of the topic. [American Psychological Association (2009). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.]

## Call for Book Reviewers

JOPPPAH is updating and adding to its list of publication reviewers. If you have an interest in sharing your prenatal and perinatal expertise through suggesting relevant material for review and/or writing reviews for the journal and newsletter, we are in need of your skills and ideas! For addition to our reviewer list, it would be helpful if you could send a brief explanation of your PPN background and what areas of the PPN field for which your training would make you a good reviewer. In as many issues as possible, JOPPPAH tries to inform readers in approximately 600-1000 words what's being written in the field. If you love to read, want to add a great credential to your resume, and think you can return a review in a month's time or less, please consider volunteering to become a book reviewer. You even get to keep the books for free! Call Patricia at 612-718-3383 or email [plucas.jopppah@gmail.com](mailto:plucas.jopppah@gmail.com)

*Thank you in advance for your service to APPPAH, and feel free to give me a call if you have questions or want to discuss any possibilities!*

### Conferences of Interest



APPPAH Regional Meeting  
August 7 - 8, 2011  
Washington, DC  
[see back cover for more information]  
[davepaxson@aol.com](mailto:davepaxson@aol.com)



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/>

## *Media Watch*

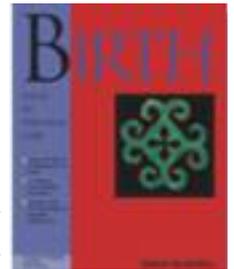
*This section of the APPPAH Newsletter is intended to draw attention to items in the news that are pertinent to prenatal and perinatal psychology. APPPAH does not necessarily agree with, or vouch for, the scientific worthiness of any of the news items mentioned here. We mean merely to take note of what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

### **NEW, OMINOUS RISK FROM REPEAT C-SECTIONS**

Together with more diabetes and preeclampsia, a higher number of twins and multiples, and advanced maternal age, a rise in the rate of placenta accreta is now suspected to contribute to the rising rate of maternal postpartum mortality. A life-threatening condition where the placenta grows into the uterine wall and sometimes beyond, placenta accrete was once a rare event that affected 1 in 30,000 pregnant women in the 1950s and 1960s; it now occurs in 1 in 2,500 pregnancies, according to a 2007 report in the *Journal of Obstetrics and Gynecology*. In some hospitals, the number is as high as 1 in 522. And doctors say the main reason is the dramatic rise in the number of cesarean sections—about about 38 percent of all pregnancies in New Jersey, the second highest in the nation. “The rule of thumb is if you have one C-section and the placenta sits right on top of the scar, the risk of placenta accreta is 25 percent,” said Dr. Abdulla Al-Khan, director of the Division of Fetal Medicine and Surgery at Hackensack University Medical Center. “If you’ve had two previous C-sections the risk is close to 50 percent and three, it’s 75 percent and four, it’s invariably closer to 100 percent.” [[ABC News, April 2011](#)]

### **HOME BIRTH STATISTICS IN US REPORT**

The journal *Birth* reports that in 2008, there were 28,357 home births in the United States. From 2004 to 2008, the percentage of U.S. births occurring at home increased by 20 percent, from 0.56 percent to 0.67 percent. This rise was largely driven by a 28 percent increase in the percentage of home births for non-Hispanic white women, for whom more than 1 percent of births occur at home. At the same time, the risk profile for home births has been lowered, with substantial drops in the percentage of home births of infants who are born preterm or at low birthweight, and declines in the percentage of home births that occur to teen and unmarried mothers. Twenty-seven states had statistically significant increases in the percentage of home births from 2004 to 2008; only four states had declines. Authors see this as “a notable development that will be of interest to practitioners and policymakers.” [[Birth, 38:3 September 2011](#)]



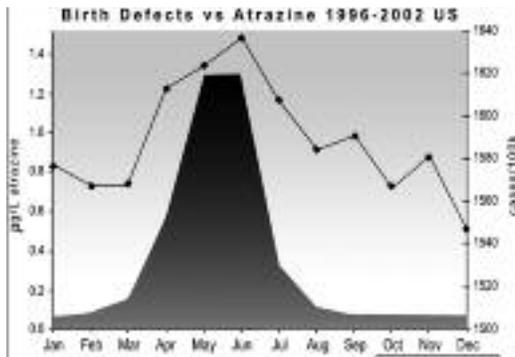
### **DANGEROUS TOXINS FROM GMOs FOUND IN WOMEN AND FETUSES**

When U.S. regulators approved Monsanto’s genetically modified “Bt” corn, they knew it would introduce a deadly poison into our food supply, because that’s what it was *designed* to do: the corn’s DNA is equipped with a gene from soil bacteria called Bt (*Bacillus thuringiensis*) that produces the Bt-toxin—a pesticide that breaks open the stomach of certain insects and kills them. Monsanto and the Environmental Protection Agency (EPA) swore it was only insects that would be hurt; they claimed the Bt-toxin would be completely destroyed in the human digestive system and not have *any* health impact

on consumers. A study has just proved them wrong. Doctors at Sherbrooke University Hospital in Quebec found the corn's Bt-toxin in the blood of pregnant women and their babies, as well as in non-pregnant women. (Specifically, the toxin was identified in 93% of 30 pregnant women, 80% of umbilical blood in their babies, and 67% of 39 non-pregnant women.) The study has been accepted for publication in *Reproductive Toxicology*. [May 2011, Institute for Responsible Technology; [read entire article here.](#)]

### SPRING CONCEPTIONS AT HIGHER RISK

Scientists have found that children conceived in spring have a higher chance of being born with one or more birth defects, such as spina bifida, Down syndrome, or cleft palate. A study reported in *Acta Paediatrica* found that birth defect rates closely track levels of the herbicide atrazine found in surface water. Atrazine's



maker, the Syngenta corporation, calls such findings “alarmist,” and continues to promote its flagship product. Atrazine is one of the most commonly used pesticides in the U.S, though it’s been banned in the European Union since 2003. While researchers in this study were careful to point out their results do not prove a “causal link” between in utero exposure to atrazine and birth defect rates, the findings are nonetheless startling. Children in rural areas are most at risk.

[[Pesticide Action Network of North America](#); Ed. note: earlier findings by study author Paul Winchester were featured in a 2007 Media Watch item, which reported that school-aged children conceived during the three *summer* months had lower reading and math scores, hypothesized to be related to high pesticide exposure during crucial months of fetal nervous system development.]

### STATE-BY-STATE STATS ON UNINTENDED / UNWANTED PREGNANCIES

At least 4 in 10 pregnancies in every U.S. state in 2002 and 2006 were unwanted or mistimed, according to the first-ever state-level analysis of unintended pregnancies. According to the analysis released today, more than half of pregnancies in 29 states and the District of Columbia were unintended; 38% to 50% were unintended in the remaining states. In nearly every state, about 65% to 75% of unintended pregnancies were considered mistimed and 25% to 35% unwanted, according to The Guttmacher Institute, which studies reproductive issues. “We know we have very high levels of unintended pregnancy in the U.S., much higher than in most places around the developed world,” says Kelly Musick, a sociologist at Cornell University in Ithaca, N.Y., who was not involved in the analysis. The analysis, based on 2006 data, the most recent available, used national and state surveys on pregnancy intentions, births, abortions and miscarriages, including data from 86,000 women who gave birth and 9,000 women who had abortions. It is published online in the journal *Perspectives on Sexual and Reproductive Health*. “There are many, many reasons why people don’t plan ahead, even when it’s such a crucial decision,” says Claire Brindis, director of the Bixby Center for Global Reproductive Health at the University of California-San Francisco, also not involved in the analysis. Says Brindis, “We do a better job of planning to buy tickets to see Lady Gaga than we do about being careful in planning for when we’re going to have children, how many children and when in our lives we’re going to have them.” [[USA Today, May 2011](#)]

## **APPPAH Regional Meeting**

**Washington, DC - August 7 - 8, 2011**



There will be a regional APPPAH meeting and fundraiser this August 7th and 8th at the Chevy Chase Marriott (near DC). This is the first APPPAH meeting of any kind on the east coast in a number of years. It will be an opportunity for APPPAH members, potential APPPAH members, those interested in APPPAH-oriented education/issues and for those working with babies and expectant mothers. It will also be a chance for those working with adults on issues related to prenatal, birth and early attachment psychology to meet for networking, resource sharing and education. We will work creatively and collaboratively to support each other in improving depth of knowledge and skill building in our field.

This meeting is for you if you are wanting to connect with other east coast folks interested in the PBA (prenatal, birth, attachment) psychology field. Those interested in learning about or discussing the public policy and health care economics issues related to our field should also attend. We hope to create a cadre of informed and interested folks close to the DC area as the health care delivery debate continues to unfold in the next few years.

In addition, we will explore the level of interest in encouraging APPPAH to consider conducting one of their large annual conferences on the east coast sometime in the next few years. If this is something of interest to you, please join us at the meeting.

On each day there will be presentations as well as the opportunity for attendees to share their knowledge and experience in our field. Presenters and discussion leaders will include William Emerson, Cherionna Menzam, Myrna Martin, Ellyne Skove, and David Paxson.

The first day features an educational and informational focus. We will review the issues and latest research and activity in the all of the areas of interest, including conception, the embryonic period, the fetal period, birth, post birth (lactation, circumcision, etc.) and the attachment issues that arise in the first eighteen months. This review will be a summary and a brief discussion of these subject areas. Those interested in further study in any area will be given a list of resources (books, websites, organizations), and will also be encouraged to attend the APPPAH annual meeting in San Francisco in November. There will be a resource table of printed material and tapes, and a small bookstore.

The second day will be more somatically oriented. For the morning segment, Ellyne Skove will present "Moving From the Inside Out: Connecting Heaven and Earth." This is a movement-oriented experience that explores the embodiment of issues from the primary period, and the physicality of developmental movement. The afternoon will focus on discussion and demonstration of the clinical therapeutic practices and techniques being used in the PBA field.

These meetings will be from 9 to 5 each day, and lunch will be included. There will also be informal social activities in the evenings. The cost is \$90 per day. For further information or to register, please contact David Paxson, E. [DavePaxson@aol.com](mailto:DavePaxson@aol.com) T, 240-346-5155.

**Interested in hosting a workshop in your area?  
Please contact the APPPAH office: [apppah@birthpsychology.com](mailto:apppah@birthpsychology.com)**