The Varying Behaviors of Fathers in the Prenatal Experience of the Unborn: Protecting, Loving and "Welcoming with Arms Wide Open," vs. Ignoring, Unloving, Competitive, Abusive, Abortion Minded or Aborting

Author: Sonne, John C, MD

Publication info: Journal of Prenatal & Perinatal Psychology & Health 19. 4 (Summer 2005): 319-340.

ProQuest document link

Abstract: None available.

Full Text: Headnote ABSTRACT: In this paper the author explores varying behaviors of fathers during the prenatal life of the unborn from a psychoanalytic and family system perspective, enriched by studies from the field of prenatal psychology. He suggests broadening the meaning of behavior to encompass communications that are not clearly visible, audible, or tangible, and emphasizes the importance of the communication of affect in assessing whether an expression of caring and love is genuine and sincere. This is not only important to adults, but especially so for the unborn, who cannot speak or understand adult language, and who are especially sensitive to picking up on affect. The threat of being aborted is discussed, and the consequences of this in the creation of abortion survivors. It is essential that therapists be alert to the possibility that prenatal dynamics are operative in patients' symptoms and transferences. The use of and understanding of metaphors, polysema, synesthesia, and similes as a measure of the creativity involved in having meaningful relationships is stressed, and note is made of the remarkable change of speech in this direction that occurs when abortion survivors recover. After exploring positive and negative behaviors of men, the author also deals with the phenomenon of depreciation of men in today's society, which makes it difficult for men to find support, respect, and encouragement, particularly in their roles as fathers and husbands. The overall dehumanization of our culture and society has reached a point where love and responsibility have taken second place to narcissism and materialism. This also has affected the relationship between men and women, and their relationship with the unborn. In the closing section suggestions are made for making positive changes to remedy this situation, and in particular to improve the behaviors of fathers - and mothers - in their relationship with the unborn, with each other, and with their families in a rewarding, committed marriage. KEY WORDS: fathers, prenatal psychology, abortion trauma. INTRODUCTION Most studies of the behaviors of parents during prenatal life, and their effect on the unborn, have focused on the behavior of the mothers of the unborn. Almost none have focused on the behaviors of fathers. Even the relatively recent psychoanalytic and family systems work on the role of the pre-oedipal father in early childhood development, have usually stopped short of examining the importance of the father during the prenatal period. To begin to do this is an important step, but even here, the focus must be broader than to look only at the father-unborn dyad. It is necessary also to consider the father's behavior in the dyadic relationship with the mother - and hers with him - as well as his behavior in the fathermother-unborn triad during the prenatal period, or even before conception. If something is awry in this triad, the unborn will be deprived of the ingredients that are necessary for them to construct a family image1, i.e. an internalization of the father-motherunborn relational triad of which they are a part, and within which they must have their appropriate position. Therefore, a triadic communication system perspective is necessary if we are to fully appreciate all that is involved in the unborn's development, and I shall use this perspective in examining and illustrating varying behaviors of fathers in the prenatal experience of the unborn. These behaviors not only affect a person's life in the womb; they have consequences in their entire lives, where derivatives of prenatal trauma - often consisting of the threat of being aborted - are expressed in individual symptoms, social interaction, and in transferences during psychotherapy. In addition to describing some positive and negative behaviors of fathers. I shall also discuss the effect on men of the current social climate in which demeaning of men by women has become prevalent, their role as fathers under-appreciated, and love between men and

women seems to have decreased. I shall then discuss the general dehumanization that has been becoming increasingly prevalent in culture and society in recent years, and will make some suggestion as to how this trend can be reversed, including how to help men - and women - become better fathers and mothers in their relationship with the unborn, and in an enduring marriage and family. THE MEANING OF THE WORD "BEHAVIOR" NEEDS TO BE EXPANDED In using the word "behavior" in my title, and throughout this paper, I am using it in an expanded sense to include thoughts and feelings as well as conspicuous actions. To do so is of particular significance to the study of communication in general, and particularly so to that between the environment and the unborn. Usually when we describe people using terms such as thinking, feeling, and behavior, implicit in this is the general understanding that feeling and thinking are subjective, and that the word behavior refers to objective and observable actions, deeds, or events. This separation of behavior from thinking and feeling tends to be reinforced by our use of the term "behavior disorder" as a diagnosis for someone who engages in conspicuous socially disruptive actions, and when we say of a person who acts in an offensive manner that he is "misbehaving." To some extent this narrow use of the word behavior to describe transactions in everyday life is misleading, for it implies that there is no communication unless it is tangible, visible, audible, or in some way measurable or quantifiable. This diminishes emphasis being put on the fact that we often communicate nonverbally by "saying" nothing, or "doing" nothing. The meaning of the word "behavior" needs to be expanded to encompass such communications, particularly so when it comes to the unborn. Most pertinent to this point is the profound statement repeatedly made by Virginia Satir (1983), "One cannot not communicate." GETTING THE WHOLE PICTURE OF WHAT IS HAPPENING IN COMMUNICATION Understanding communication is not an easy task. In addition to recording conspicuous actions, it requires consideration of the context, the timing, and, in particular paying special attention to affect. Assessing affect is how we gauge whether a person means what they say or do, and whether they are truthful, genuine, caring, loving and trustworthy. Even the assessment of affect can be problematic, for it can be dissembled, projection can lead to misinterpretation, and body language (Birdwhistell, 1970) can either conceal or reveal its true nature. It is a totally unwarranted assumption for adults to think that only they understand communication, and that the immature unborn know nothing since they cannot speak or understand adult language. It was suggested in the paper, "Proven but not believed: An exploration of the psychosocial resistances to accepting the reality of prenatal mentation, communication and trauma" (Sonne, 2001), that to some degree we might think of the unborn as more mature in some respects than the adult in that they pick up on affect, their main mode of perception, better than adults do. Because of years of education in which we are expected accept unquestioningly that what we are told is the way things are, scientific "prove it" and "give me the facts" study, plus parental restrictions that minimize the importance of affect, adults can be mechanical, literal and opinionated in their conclusions about their perceptions, while often neglecting the accompanying affect. Two essays expand upon this, "Metaphors and relationships" (Sonne, 1964), and "Poetry, sentimentality and family living" (Sonne, 1972), emphasizing that sentimentality is a reductive imposition, in contrast to poetry, which is a creative sharing. Metaphors are the reservoirs of relationships and the instruments for relating, and to live a life without them can be to live a life alone. Keats wrote, "Heard melodies are sweet, but those unheard are sweeter still." He was referring to positive communications, but an analogy can be made to negative communications as well. We use metaphors and words like "aura" and "vibe" to connote these important communications and give them form and meaning, and we may say such things as "Something is rotten in Denmark," "I know something is going on, but I can't quite put my finger on it," "He wasn't present," "He seemed distant and cold," "It doesn't ring true," or "What he said touched my heart," when we sense behaviors, but are unable to define the associated affect clearly. Sometimes, when a communication is sent tachistoscopically, we aren't even puzzled. Both the message and the affect are sent so briefly that they are recorded subliminally. Totally unaware consciously that our behaviors in response to them have been influenced by others, we unquestioningly think of them as originating solely from within ourselves. To focus overly much on conspicuous actions definitely limits

our comprehension of communication in adult life. To do so relative to prenatal life diverts us from appreciating the fact that a tremendous amount of reciprocal communication is occurring between the unborn and those around him during his prenatal existence, behaviors that consist of various conscious or unconscious thoughts and feelings, whether or not they are directly or indirectly expressed in words or clearly visible and clearly objective actions. PROTECTING, LOVING, AND "WELCOMING WITH OPEN ARMS" FATHER BEHAVIORS Fathers with these behaviors protect and love their unborn, and assure that they are healthy and well cared for, including making sure that they receive proper prenatal care. They talk to them, sing to them, rub them through their mother's abdomen, feel their legs kicking, and listen to their heartbeats. They are present. And, although it might never occur to them, they are also communicating with their unborn when they make love to their mothers. They take good care of the mothers, hugging and comforting them, talking with them and loving them. They are empathie if the mothers are tired or not feeling well, and do more than their usual share of work around the house. They make sure that the mothers are caring well for the unborn, supporting them in avoiding the use of drugs, tobacco, and alcohol, and encouraging good nutrition. Should the mothers be contemplating aborting the unborn, they oppose them in this, claim their rights as fathers, stand up for their unborn, and make the point that the unborn are not solely the mothers', but theirs also. Beyond this, these fathers will try to understand, and help the mothers understand, why they might be feeling the way they do, and if possible help them to change their minds so that they come to appreciate and enjoy being pregnant, love and respect their unborn, happily anticipate childbirth, and look forward to caring for their unborn and watching them grow and move throughout life thereafter. A warm, welcoming attitude toward the unborn in the father is well expressed in the popular song, "With Arms Wide Open" (Tremonti/Stapp, 2000), in which an expectant father sings of his happy anticipation of the birth of his child. Abelin (1978), Jacobson (1964), Kernberg (1975/1995), Kohut (1971, 1985), Lansky (1992), Mahler, Pine and Berman (1975), Spitz (1957), Stern (1985), and many others have written a great deal about how important the father's behavior is to development of the self of the small child, particularly in the stage of what Kohut (1971/1985) has called the idealized selfobject, when the child moves away somewhat from his earlier grandiose selfobject relationship with the mother, becomes increasingly interested in and identifies more with the father, starts to say "no" with head shaking, a marker Spitz (1957) has called attention to, and enters what Mahler (1975) has called the rapprochement sub-stage. These researchers emphasize how the father provides protection and refuge from possible maternal over-indulgence, engulfment, domination, neglect, or hostility, and serves as an object for male identification for boys, affirmation of gender for the girls, and helps both boys and girls comprehend heterosexuality, and establish their appropriate place in the family triad. The father accepts idealization of himself, and supports the child's self-assertion, and independence. If the father fails to meet the toddler's needs because of a variety of reasons, including problems between the father and the mother, the child will have serious problems developing a healthy self. Although these behaviors of fathers have been studied primarily in early childhood, I believe they may also have been nascently operative in the prenatal period. THE THREAT OF BEING ABORTED, AND THE CREATION OF ABORTION SURVWORS Before going into discussing and examining negative behaviors of fathers during the prenatal period, a few words must be said about the threat of being aborted, and about abortion survivors. This threat can consist not only from the unborn experiencing a literal abortion attempt, but also from picking up on other behaviors of fathers that reveal that they are not welcome, that their fathers are not interested in them, and that they unconsciously or consciously would just as soon be rid of them. Such threats of being aborted have consequences in later life in a constellation of individual and social psychopathology that is distinctive enough from other psychopathologic syndromes to warrant its being called an "abortion survivor disorder." I have taken the term "abortion survivor" from the work of Ney (1983), who used it in a paper, "A consideration of abortion survivors." I have written several papers on abortion survivors: "The relevance of the dread of being aborted to models of the mind and models of therapy, Part I: case examples, Part II: Mentation and Communication in the Unborn" (Sonne, 1994a, 1994b), "Prenatal themes in rock music" (Sonne, 1995), "Social

regression and the global prevalence of abortion" (Sonne, 1996a), "Interpreting the dread of being aborted in therapy" (Sonne, 1996b), "Magic babies" (1997), and "Abortion survivors at Columbine" (Sonne, 2000). The characteristics of abortion survivors that are derivative from the threat of being aborted have been described extensively in these papers, but I shall briefly outline some them here. Not all abortion survivors exhibit all of them, and they may vary in intensity in any given person. Ambivalence is pervasive. One of their basic characteristics is self-loathing, sometimes to the point of being suicidal, or actually committing suicide, the ultimate self-abortion. They also tend to abort others, either psychologically or physically, including their own offspring. Despite their self-loathing, they are attention seeking, and protest being mistreated, but they are unable to let themselves be loved when love is offered, and they cannot love. Although often talented, they tend to sabotage themselves when near success. They have hostility to authority figures, sometimes of murderous proportions, and intense, often murderous sibling rivalry. Beneath what are often presentations of false selves, two major dynamics are operative: identification with the aggressor(s) who damaged them in utero, and acting out against themselves and against symbolic parents and siblings. They often engage in daredevil life threatening activities. They can be tyrannical, out to change the world - by force if necessary. Although generally they do not believe in God or the soul, in some instances they claim to be God's chosen ones in these efforts. They are unappreciative, and lack the capacity to feel grief and humor. Relative to affect, one of their traits is that they seldom use figures of speech, and tend to be literal, dry, and dogmatic. Upon recovery they become much warmer, more poetic, and use figures of speech in their descriptions of themselves and others. This difference in their use of language is guite remarkable, and is important evidence in therapy that they are becoming fundamentally and genuinely integrated. IGNORING, UNLOVING, COMPETITIVE, ABUSIVE, ABORTION-MINDED OR ABORTING FATHERS An extreme example of an uncommitted, ignoring and unloving father's behavior is his giving - or selling - his sperm to a sperm bank, where the "marvel" of reproductive technology can use it to create a baby - or babies - who are either implanted in a woman, or frozen. In most cases the fathers are not only uninvolved, but their identity is kept secret. Do these unborn know absolutely nothing about this? Even though they can't understand it or put it into words, do they not in someway "know" that they have been created in an unnatural way, and that they have been deprived of being conceived within a mother's body. This may seem preposterous to many, but to deny from an anthropomorphic perspective that it is even remotely possible cannot be said with certainty. What will be the fate of these "Magic Babies" (Sonne, 1997), who have experienced a psychological abortion by their fathers at the moment of conception? Some indifferent fathers simply walk away and abandon their unborn babies and their mothers. Some stay around, but act as if the unborn baby is the mother's concern, and none of their own. Relative to the point I made earlier in this paper, that thoughts and feelings can be considered behaviors, do we not think that the unborn are aware that a parent doesn't want him or love him, even if he doesn't say anything or do anything? One can imagine what vibes a young man may have picked up in utero from his father, who angrily told him as an adult when he was getting divorced, "You are depriving me of a grandchild. We could have aborted you, you know!" Do we adults not sense an aura, or sense vibes that convey a sense of distance or coldness that gives us a clue to how someone feels about us, that they have negative thoughts about us, about who we are, and what we are thinking, feeling or doing. We may misinterpret this, but we do it all the time. As adults, we can bring this into the open, and amend our perceptions if they prove to be inaccurate, or confirm them if they are correct. We also have the option of attempting to modify the other person's behavior toward us; and we can choose to stay or leave the situation. The unborn have limited options. Some fathers suggest directly that their unborn be aborted, and do their best to see that this is accomplished. Some act out against their unborn by physically abusing their mothers, which not only damages them, but also the unborn, and in some instances causes them to be aborted. Other fathers act out physically against their unborn without any conscious awareness of any intent to abort them. For example, one young man, who, as far as he knew, was pleased that he and his wife were going to have a baby, told me that he had awakened suddenly in the middle

of the night and was shocked to realize that he was punching his wife in the stomach. He said "wife," not "baby" or "wife and baby" when describing this. Does this not suggest some unconscious ambivalence about the baby? THE FATHER'S RELATIONSHIP WITH THE PREGNANT MOTHER In today's world of "one night stands," "hooking up," cohabitation, and irresponsible procreation, many babies are conceived by couples who are not married. The father has impregnated a woman to whom he has promised no commitment, and who has promised none to him, and together they create almost half of the babies born in the world today. In terms of security and basic trust, these babies conceived from such a sexual encounter are immediately faced with living in a tenuous, unstable, ambivalent environment. Furthermore, the ingredients available for the unborn's beginning construction of a triadic family image are deficient by virtue of the fact that there is no bond between the father and the mother, and no bond between them as a couple and him. The stage is already set for the construction of family image deficits, and there is in essence a divorce or a separation in the "family" from the start. We know that thirty-three percent of babies born in America in 2000 were born out of wedlock (National Center for Policy Analysis Daily Policy Digest, 2001). One must wonder how many babies conceived by unmarried couples even make it that far? Men and women who are afraid of commitment and having children often have conflicts that may motivate them to act out by aborting their offspring. Worldwide twenty five percent of the unborn are aborted (Sonne, 1996a). Although it is impossible to say with accuracy, it would not be unreasonable to assume that, without commitment on the part of their parents, the likelihood of their unborn being aborted would be higher than the global average. They definitely at risk of being abortion survivors. In some cases, the unwed mother doesn't even realize for some time, even months, that she is pregnant. Sometimes she doesn't even tell the father that they have conceived a child, and proceeds to have an abortion without consulting him, maybe telling him afterwards, maybe not. In instances in which she does tell the father, there can be various outcomes. If she is happily pregnant, and he greets the news with pleasure, there is a chance that things may go well. Optimally they will marry. Sometimes they don't, but at least then the baby will have two interested parents who are happy with his existence. If the father is displeased, and tells the mother she is on her own, or even goes so far as to tell her that he wants her to have an abortion, she feels abandoned, and may be inclined herself to consummate aborting their baby. Years ago I organized a group of six psychiatrists who offered to see without charge pregnant women who were in conflict about their pregnancy, and were often considering abortion. A standard question during the consultation was, "Are there any circumstances under which you would wish to keep your child?" and the answer often was, "Yes, if the father would take care of me." One father who had impregnated a woman I saw later in therapy did not object when she told him that her former therapist, upon hearing that she was pregnant, had said, "Of course you'll immediately arrange to have an abortion." Since the baby's father did not object, the mother did just that, and both she and the father, whom she later married, regretted having done so ever since, experiencing each anniversary of the abortion as a "horrible death day." This woman was an abortion survivor, preoccupied with caves, retreats, and cozy places, who said that she had never really wanted to live except for "once or twice." One striking piece of multigenerational evidence that she was not a welcome child came from the fact that her maternal grandmother's response when the patient's mother had told her that she was pregnant had been a dismayed, "Oh, my God!" Because of her own trauma this patient was most vulnerable to accepting the suggestion that she abort, but doing so further damaged her and compounded her conflicts. With the baby's father and mother in agreement, one couple I saw had had two abortions before they married. For years ever after the mother had extreme difficulty forgiving herself, and was plagued by guilt and self-condemnation. She wouldn't forgive herself, and wouldn't let God forgive her. Not until I pointed out to her that she was playing God, did she let Him in, and also forgive herself. Her husband had little sympathy for her distress, and said that he was generally a very happy person, rarely depressed, and that he never thought about the abortions. However, he added in a revealing aside, that these rare times when he was momentarily depressed occurred only when he thought about the abortions. Some repressed mixed feeling and denial here perhaps? Some

fathers, in the name of "It's her body," will not attempt to persuade an ambivalent mother to keep the baby, when she actually is hoping someone would indeed encourage her to do so. However, behavior that goes beyond persuasion and helping to the point of insisting that the mother have the baby, can become problematic. One of my patients, whose mother obviously did not want her, was born only because her father insisted on it. She was abandoned by her mother for the first year of her life, cared for by an aunt, and suffered from many abortion survivor symptoms. Her father doted her on, but that didn't solve her problems, and created other ones. Conversely, if the father is reluctant, and the mother insists on having a baby, this also can cause problems, for the unborn will pick up the father's feelings. One father told his wife early in their marriage that he was still a child himself, needy, wanted some time for romance, and was not yet ready to be a father. Nevertheless, the wife, who, because of earlier uterine and ovarian surgery was most anxious to see if she could still become pregnant, insisted despite her husband's reluctance. She prevailed, did indeed become pregnant and gave birth to a son, who over the next several decades suffered from almost all of the symptoms of an abortion survivor. and hovered daily on the brink of suicide. His mother, upon reading a draft of this current fathers' paper, exclaimed, "This is my family!" She suggested we have family therapy, adding, "We might break the case." During the therapy, which was done using a heterosexual co-therapy team, the abortion survivor son repeatedly told his father that he had always felt that there was no room for him in his father's life. THE IMPORTANCE OF THERAPISTS CONSIDERING THAT SOME SYMPTOMS AND TRANSFERENCES MAY BE DERIVATIVE FROM PRENATAL, TRAUMA It is most important for therapists to be alert to the possibility that some of their patients may have experienced and remember being traumatized prenatally, particularly by the threat of being aborted either psychologically or physically - and consider that their symptoms are derivative from this, and that defensive dynamics are still operative and unresolved in their unconscious. The term an "unthought known," originally used by Bollas (1987), is eminently applicable to the unconscious memory of such a prenatal threat, and it is most important for knowledge of these dynamics to become part of the theory and practice of analysis and psychodynamic therapy. I have written on this in two essays, "The relevance of the dread of being aborted to model of therapy and models of the mind. Part I: case examples, and Part II: Mentation and communication in the unborn." (Sonne, 1994a, Sonne, 1994b). In the essay, "Interpreting the Dread of Being Aborted in Therapy." (Sonne, 1996b), I suggested that one of the problems with interminable or interrupted analyses could be that abortion dynamics being acted out in the transference were not recognized by the analyst in the womb-like setting of the consultation room. I have wondered if many therapists' resistances to accepting the reality of prenatal mentation, communication, and trauma may have roots in their own psyches, expressed in their own behavior in counter-transferences that make it difficult for them to recognize their patients' prenatal themes and prenatal transferences. Like fish in water, these therapists may fail to consider that their private office patienttherapist setting is a natural one for re-enactments of the private father-mother-fetus relationship. Furthermore, many therapists are so focused on behavior in the narrowest sense that they are not alert to considering behavior in the expanded sense I have described early in this paper. It is interesting in this regard that Freud (1921/1941) and Ferenczi (1932/1988) both were interested in thought-transmission and mental telepathy. They wrote and spoke about it rather tentatively, but felt that such phenomena needed to be studied further. Freud's paper, "Psychoanalysis and mental telepathy," was presented September, 1921, not at a large conference, but to a gathering of Freud's closest followers: Abraham, Eitingon, Ferenczi, Rank, Sachs and Jones. According to Jones, Freud did not publish this essay in his lifetime for fear that the scientific outlook of psychoanalysis might possibly be endangered if the truth of thought-transference were to be established. Freud also attempted to discourage Ferenczi from writing and talking about it. My hunch is that, if they were alive today, they would be captivated by prenatal psychology and consider thought-transmission and mental telepathy most pertinent to it. There is a problem in addition to therapists not being alert to and sensitive to prenatal dynamics, in that even those who are so oriented tend to think mainly about the influence of the mother's behavior. This is not enough. One must think of the father's behavior during the unborn's prenatal experience as well. A longtime colleague

and friend, Victor Schermer, was for some time quite skeptical of the reality of a prenatal psyche. I, nevertheless, continued to give him my abortion dynamics papers to read. After reading several of them over a period of years, he told me that he was finally convinced that, "There's somebody alive in there." Some time later he told me of his experience with a mother and her eight-year-old daughter during their therapy. After hearing that her husband had beaten the mother during her pregnancy, he spoke to them about my work on prenatal trauma. Following this the little girl immediately brightened up, showed great interest in learning more about what had happened to her before birth, and exhibited a marked change in her behavior (Schermer, 1995). Abortion survivors' abortion wishes and fears not only can be acted out in social relationships; they can also come to the fore in therapy in the transference. James Grotstein (1992), my longtime friend and colleague, gave me permission to quote his letter to me in which he wrote of how, after reading one of my papers, he had asked a woman patient whom he had been seeing in analysis for fourteen years, whether she had ever been afraid of being aborted. She responded, to his surprise, by saying, "Yes, by you!" In my own experience, I was struck by the fact that the first question one of my survivor patients asked me in his initial interview was whether I was sure that I wanted to accept him as a patient. This patient, later in his analysis, when asked why he so firmly closed the door to my consultation room when he entered or left, responded, "Fm afraid something might fall out." Another of my analysands told me that, even though I might think that what he was saying was crazy, my consultation room had become for him the uterus and the waiting room had become the vagina, and he thought he was re-experiencing his birth and his fear of being aborted. Another friend and colleague of mine, Donald Nathanson, recently gave an excellent presentation at Grand Rounds, Department of Psychiatry and Human Behavior at Jefferson Medical College, "From insult to injury: A plan to end school violence." (Nathanson, 2001) in which he described a program he had created to minimize violence by teaching teachers to identify affects and to help their students to do the same, in order to enhance their capacity for empathy, and thereby be less inclined to use violence. The program is being implemented internationally (Nathanson, 2000). After his talk we spoke, and I told him what a wonderful social intervention I thought he had developed. I also spoke to him about some of my ideas about the prenatal origin of violence, and gave him some of my abortion dynamics papers to read. He called me up a few weeks later, shortly after having finished a session with a man he had had in analysis for two years. He said that he had brought up the issue of the threat of being aborted with him and a great deal of new material came out around this. Among other things, his father had changed his first name to that of his son when the son was a few days old, stealing his identity from him, in effect a psychological abortion. The patient wept for fifteen minutes after the abortion material came out, and subsequently was a dramatically changed person, warmer, more present, relaxed, and more expressive. Nathanson said he was relaying this to me "hot off the press," and that it had been a real break-through. He added that he couldn't have done this without having read my papers. I myself wept when I heard the story. He told me in a later conversation that even his patient's wife had noticed a major change in her husband's behavior. Nathanson had said that he and the patient had heretofore been working under the assumption that the patient's problem was that he was having difficulty identifying with his father and feeling loved by him. The new material that came out suggests that the father was probably competitively acting against his son what appeared to have been murderous sibling rivalry, one of the major dynamics of abortion survivors. DEPRECIATION OF MEN IN TODAY'S SOCIETY Although I have pointed out flaws in some fathers' behaviors in the foregoing paragraphs, there is another side to it that needs to be considered, and a few words must be said in defense of men. Men are under attack today as a group. They are described as insensitive, self centered, concerned mostly about what they want, and not concerned about women's needs. If we are to help men to become better fathers we must make every effort to reverse the current trend in society that is depreciative of them. An excellent essay published recently in the American Legion Magazine, "Is 'Dad' America's most endangered species?" (Dowd, 2001), is a great step toward bringing these questions to the general public. The cover of the magazine is shocking, with FATHERHOOD UNDER FIRE printed in bold letters at the top (FATHERHOOD is printed in

black, and UNDER FIRE in red). Beneath this is a framed photograph showing a smiling family with the mother holding a little girl, and the father holding a little boy, the glass covering it is shattered, as if a rock had been thrown right at the father's face. Shows like "Father knows best," "Life with father," and songs like "Oh my papa, to me he was so wonderful," have vanished from the scene, and in a current book by Ellis (2000) the founding fathers of America are demoted to "founding brothers," who behave more like selfish quarreling siblings, than as wise, public-spirited men of vision. It seems to be taboo today to say anything that is in any way critical of women, particularly about how they relate to men these days, and as for mothers, they are sacrosanct, and beyond reproach. The terms "penis envy," "schizophrenogenic mother," and "phallic woman," have disappeared from both the lay and professional literature. One seldom hears, sees, or reads anything relative to how much women enjoy loving and taking care of men, and being loved and taken care of by them as well. Any book on this topic, if published today, would probably not sell a single copy. More in vogue is the view that men already are too much taken care of: chauvinistic, dictatorial, and not appreciative enough of women, - particularly relative to their emphasizing "a woman's body is her own," and, relative to abortion, their "right to choose."2 WHERE, OH WHERE Is LOVE? Where has love between men and women gone? In an essay, "Contemporary marriage: The question of significant change in marital patterns," (Sonne, 1985a), I point out that, although important changes have occurred improving the position of women in society and in marriage, some women are continuing to protest to the point that it seems as if love has "gone out the window." This tendency has permeated the lay and scientific literature, professional groups, and the dialogue at professional conferences. Scholarly works often contain demeaning comments about men. Helen Hardacre (1997) in her book, Marketing the menacing fetus in Japan, examines and comments on a semi-religious, semi-commercial program in Japan that purports to help women who have had abortions who are being plagued by the dead fetus. Although Hardacre presents herself as wanting to facilitate unity in male-female relations, she is obviously divisive and hostile to men in her depiction of this practice as a "typical example of the abuse by heartless men of vulnerable women." At a recent meeting of the Family Institute of Philadelphia, Lillian Rubin gave a talk, "Intimate Strangers: Men and Women Together," during which she mocked and ridiculed men. Any time she did this there was a chorus of laughter from the women in the audience. In my review of her presentation (Sonne, 1985b), I point out how divisive her presentation and the audience reaction to it were. At another Family Institute of Philadelphia meeting, Betty Friedan, who was upset that the media television cameramen were not on the scene, boasted that her daughter didn't need to marry a doctor, because now she is one herself. I asked myself, "Is this the main reason why women marry doctors?" Friedan's comment raises a somewhat broader issue about how some women use men but have little regard for them. A friend and colleague, Thomas H. McGowan Jr. (2002) told me recently of a young male adolescent patient of his who was asked by a thirteen year old girl, with whom he had no ongoing relationship, to have sex with her just to get her pregnant, but not to bother her after that. He declined. As a further example, one woman I had in couples therapy, whose husband had said that he was reluctant to be a father until he and his wife had resolved their marital conflicts, said to him, "Just stick it in and get me pregnant. We'll worry about that later." Concern has been expressed in the Family Institute of Philadelphia as to whether or not sexism was prevalent in the organization, and questions were raised about why there were so few men involved in administration and teaching and in classes, which are predominantly composed of women students. Over the years, family therapy early on moved from being done by men to being done by a heterosexual cotherapy couple. Male therapists who wanted and needed women therapists to work with them introduced this change. They respected and valued women, and also felt that to have a male and female point of view, and a male-female relationship when doing family therapy would be more effective in helping families resolve marital conflicts and psychopathological transgenerational dyads that were part of family image deficits, assist in analyzing triadic transferences, and facilitate the construction of healthy family images. A case could be made that the Family Institute today is replicating the family dysfunction it was originally formed to remedy, and is echoing rather than confronting the dysfunctional family problems prevalent

in society today. It is composed of emotional divorces and pathological trans-generational dyads, and its structure is coming to resemble that of a matriarchal single parent family. Women are going it alone, and yet are complaining that too few men are available. Yet, one must ask what man would want to be a part of an organization in which, at an all-day meeting on sexism some years back, a summary of conclusions about men arrived at in a women's small discussion group, was, "Men are only good for opening bottles." (Family Institute of Philadelphia, 1994) In a paper, "Won't you come home Bill Bailey." (Sonne, 1995b), I pointed out that possibly men were not participating because they felt unwelcome, and that to reverse this trend would require efforts to court them. Although I have given examples from a local Philadelphia organization, similar problems can be seen in national and international groups as well. DEHUMANIZATION IN CULTURE AND SOCIETY Irresponsible behaviors of fathers - and mothers - do not originate simply from ignorance. It is derivative from, and a component of, a pervasive global trend toward a dehumanized, mechanical, utilitarian way of life in our society and culture in which narcissistic gratification and momentary pleasure are valued more highly than love, honesty, trust, and responsibility. This social psychopathology permeates all levels and categories of life, including family relations, friendships, education, government, commerce, health care, international relations, conflicts between ethnic and religious groups, reporting and opinion in the media, and it is evident in sports, music (Sonne, 1995a), dance, painting, poetry, literature, movies, television programs and advertising, and as mentioned above, also in professional organizations. It is also a component of the recent rash of schoolyard killings (Sonne, 2000). How did this all begin? It is difficult to pinpoint the origin of this individual and social behavior, for it is a multi-generational and cultural evolutional phenomenon composed of multiple ill-defined forces that interact in such a way that destructive entropie processes are gaining the upper hand over creative negentropic ones. The subject has been written about by Orwell (1950) in 1984, Fromm (1955) in The Sane Society, Cesarman (1974) in Hombre y entropia, Volkan (1988) in The need to have enemies, and by Bork (1996) in Slouching toward Gomorrah. I have also written on this in "Entropy and family therapy" (Sonne, 1967), "Entropie communication in families of adolescents" (1979), "Social regression and the global prevalence of abortion" (1996), and "The dynamics of dehumanization." (1998b), and "It's proven but not believed: An exploration of psychosocial resistances to the acceptance of the reality of prenatal mentation, communication and psychic trauma" (2001). It is difficult to avoid being pessimistic about the prospect that things will change for the better, but they must or we are doomed as a civilization, and our children and their children will live in an increasingly dehumanized world. AN UPBEAT CONCLUSION As an alternative to the foregoing bleak view, there is room for optimism in the very organization of this conference (ISPPPM, 2002), and its theme, which emphasizes how important it is for social scientists and the psychoanalytic community to do research on the behaviors of fathers in the prenatal experience of the unborn, a heretofore-neglected area of study. In enjoying the mutual affirmation of our interests however, we must remind ourselves that we must not confine the results of our work to professional journals, academic circles, and conferences, but also disseminate them in the public arena to enlighten citizens in general. Those of us who have listened carefully, and to whom the unborn have revealed their secret lives, have a responsibility and privilege to write and speak for them about their prenatal experiences, what they need, and what they have to offer to our society, which is replete with suffering and destructive social acting out that are derivative from unresolved prenatal trauma. We need to speak in public schools to counteract the narrow focus of sex education programs that teach students how to have sex without getting sick or pregnant, and offer referrals for abortions if pregnancy does occur. These programs put little emphasis on the importance of loving relationships, and foster the very one night stands and hooking up that are all too prevalent in society today. We must repeatedly remind men of all ages, but in particular young ones, that fathering a baby is a most serious matter involving the assumption of responsibility for the life of another human being. The importance of this must become front-page news and part of everyday social dialogue in families, among friends, in political, professional and religious discussions, and in school from the earliest years on up. Where have all the fathers gone? We each must ask ourselves why today we have so many who are

uncaring, abusive, or absent. To make an analogy to the importance of fathers to the unborn, placing a dependent person of any age in a lifeboat contains the implied promise that he will be carried to safety, and cared for on the way. He will not be thrown overboard by the person who puts him there, and he will be protected from others harming him as well. One should not promise more than one can deliver. Some young men act as if the possibility of their fathering a child when they have sex is the furthest thing from their minds, so they do not think that they are promising anything. And if, to their surprise, this should happen, there is an easy solution in today's world. Dump the passenger. There is no assumption of responsibility for the potential mother's welfare as well. She can be dumped also since there was no prior commitment to her. Perhaps our efforts might change the flow of the entropicnegentropic matrix in which we all live to one of increasing negentropy, and contribute to the development of a more humane civilization in which love and responsibility replace hate and narcissism. Leo Szilard (1929) wrote an interesting paper years back, "On the decrease of entropy in a thermodynamic system by the intervention of intelligent beings," that has relevance to this possibility. Nathanson's (2000) social activist project on identifying affects and enhancing empathy offers promise. We can also use and disseminate knowledge from the work of such researchers as deMause (1994) on psychohistory, von Bertalanffy (1967, 1968) on general systems theory, Bateson (1972) and Ruesch and Bateson (1968/1951) on communication, Hayek (1944) on the dangers of serfdom, Volkan (1988) on the need to have enemies because of unresolved grief about narcissistic injury, and the contributions of Lidz (1977) and many others on family dynamics. All of this work is most important relative to communication on numerous levels that also interweave with one another. Add to this the work of an increasing number of students of prenatal psychology, including, but not limited to, Bion (1977), Blazy (1999), Fedor-Freyberg &Vogel (1988), Ferenczi (1929), Grof (1985), Janus (1997), Kafkalides (1980), Lake (1981), Lidz (1977), Liley (1972), Nev (1983), Ploye (1973), Turner(s) & Westerman (1999), Verny & Kelly (1981), and Wilheim (1988). We can provide a revolutionary knowledge base to the world that can create a change in the way people look at life, and thereby help to change it for the better. Part of this change would be the fostering of an increase in society of responsible and loving fathers, who not only care for their children, and their children's mothers, but who do everything they can to make the world a better place for all mankind. We can change the negative behaviors of fathers by helping them in therapy to resolve their conflicts about having children, and by reminding them that being a father is more than a burdensome responsibility, and that to be deliberately childless would be to deprive themselves of the most enjoyable and rewarding experiences that give meaning to life and make life worthwhile. We can emphasize the joys and satisfaction that can come from a life-long commitment to marriage and family, and can tell them that if they give love to their children, especially the unborn, it will be returned to them a thousand fold as their lives moves on. They, and also their wives, will enjoy seeing their love being carried forward and given by their children, and their children's spouses, to their children, and will experience a continuation of their own development in a new and exciting role as someone lovingly called "grandpa" and "grandma" by their beloved little darlings, whom they will enjoy over the years as they participate in their lives and watch them grow and blossom. Footnote 1 For a more extensive explanation of the concept of a family image, see "The absent member maneuver as a resistance in family therapy of schizophrenia" (Sonne, Speck, &Jungreis 1962), "The importance of a heterosexual co-therapy relation in the construction of a family image" (Sonne, Lincoln, 1965), "Triadic transferences of pathological family images" (Sonne, 1991), and "Magic Babies" (Sonne, 1997). 2 In regard to this point about the right to choose abortion, very few feminists today are aware of the fact that two prominent originators of the women's suffrage movement in the middle of the nineteenth century, Elizabeth Cady Stanton and Susan B. Anthony, were unremitting opponents of abortion. They called abortion "child murder" and "infanticide." Stanton said, "When we consider that women are treated as property, it is degrading that we should treat our children as property to be disposed of as we see fit. There must be a remedy even for such crying evil as this (abortion). But where shall it be found? At least, where begin, if not in the complete enfranchisement and elevation of women." Anthony said, "The woman is awfully guilty

who commits the deed. It will burden her conscience in life. It will burden her soul in death." (Hentoff, 2000). References REFERENCES Abelin, E. (1978). The role of the father in core gender identity and psychosexual differentiation. In C.R. Prall (Reporter) The role of the father in preoedipal years. Journal of the American Psychoanalytic Association, 26, 143-161. Bateson, G. (1972). Steps to an ecology of the mind. New York: Ballantine Books. Bion, W. (1977). Two papers: The grid and the caesura. Originally presented as talks to the Los Angeles Psychoanalytic society in 1971 and 1975 respectively. Rio de Janeiro: Imago Editera. Reprinted, Karnac, 1989. Birdwhistell, R.L. (1970). Kinesics and context: Essays on body motion communication. Philadelphia, PA: University of Pennsylvania Press. Blazy, H. (1999). "schneefarhenes bewusstein, geh'nicht fort" (Snow covered consciousness, don't leave.) Int. J. Prenatal and Perinatal Psychology and Medicine, 11(3), 379-392. Bollas, C. (1987). The shadow of the object: Psychoanalysis of the unthought known. London: Free Association Books. Bork, R. (1996). Slouching towards Gomorrah. New York: ReganBooks, an imprint of HarperCollins. Paperback edition, 1997, HarperCollins. Cesarman, E. (1974). Hombre y entropia. Mexico, D. F.; Editorial Pax-Mexico, S. A. DeMause, L. (1982). Foundations of psychohistory. New York: Creative Roots. Dowd, A.W. (2001) Is 'dad' America's most endangered species. The American Legion Magazine, June, pp. 17-18. Ellis, J. (2000). Founding brothers: The revolutionary generation. New York: Alfred A. Knopf. Family Institute of Philadelphia (1994) Symposium on gender issues: The war between men and women: Can both sides win? Oct. 14 . Fedor-Freyberg, P. &Vogel, V., Eds. (1988). Prenatal and Perinatal Psychology and Medicine. Carnforth, Lancaster, England: Parthenon Press. Ferenczi, S. (1929). The unwelcome child and his death instinct. International Journal of Psychoanalysis, 9. 10-16. Republished in Final Contributions to the Problems &Methods of Psychoanalysis, (ed. M. Balint trans. E. Mosbacher and others) New York: Basic Books (1955) pp. 102-107. Ferenczi, S. (1932/1988). The clinical diary of Sandor Ferenczi. ed. J. Dupont (trans. M. Balint and N.Z. Jackson) Century, MA: Harvard University Press (1988). Freud, S. (1921/1941). Psychoanalysis and mental telepathy. Standard Edition of the Complete Psychological Works of Sigmund Freud, (trans J. Strachey, A. Freud, A. Strachey, A. Tyson) 18: 177-193. London: Hogarth Press and The Institute of Psychoanalysis. (Presented September 1921, not published until 1941). Fromm, E. (1955). The sane society. New York: Rinehart &Co., Inc. Grof, S. (1985). Beyond the brain. Albany: State University of New York. Grotstein, J. (1992). On "Survivors of childhood sexual abuse", Psychoanal. Dialogues, 2, 61-76. Hardacre, H. (1997). Marketing the menacing fetus in Japan. Berkeley/Los Angeles/London: University of California Press. Hayek, F. (1944). The road to serfdom. Chicago: University of Chicago Press. Hentoff, N. (2000). Modern feminists' revisionist her-story on abortion. Washington Times National Weekly Edition, April 3-9, p. 30. Jacobson, E. (1964). The Self and the Object World. New York: International Universities Press. Janus, L. (1997). Echoes from the womb: The enduring effects of pre-natal experience. New York: Jacob Aronson. Kafkalides, A. (1980). The knowledge of the womb. Corfu 49100, Greece: Triklino House. (Republished 1995). Kernberg, O. (1975/1995) Object relations theory and clinical psychoanalysis. New York: Jason Aronson, Inc. Kohut, H. (1971) The Analysis of Self. New York: International Universities Press. Kohut, H. (1985) Self psychology and the humanities. New York: W.W. Norton &Co. Lansky, M.R. (1992) Fathers who fail. Hillsdale, NJ, London: The Analytic Press. Lake, F. (1981) Studies in constricted confusion: Exploration of a pre- and perinatal paradigm. Nottingham: The Clinical Theology Association. Lidz, T. (1977) The family and human adaptation. New York: International Universities Press. Liley, A. (1972) The foetus as a personality. Australian and New Zealand Journal of Psychiatry, 6, 99-105. McGowan, T.H. Jr. (2002) Personal communication, February 19th. Mahler, M.S., Pine, F., &Berman, A. (1975) The psychological birth of the human infant. New York: Basic Books, Inc. Nathanson, D. (2000). The name of the game is shame. Philadelphia: Bulletin, Silvan S. Tomkins Institute. Nathanson, D. (2001). From fault to injury: A plan to end school violence. Philadelphia: Grand Rounds Presentation. Department of Psychiatry and Human Behavior, Jefferson Medical College. National Center for Policy Analysis, Daily Policy Digest (2001) July 25th. (Statistics on out-of-wedlock births.) Ney, P. (1983.) A consideration of abortion survivors. Child Psychiatry and Human Development, 13(3), 168-179. (Republished in

the International Journal of Prenatal and Perinatal Psychology and Medicine, 10(1), 19-28, 1998.) Orwell, G. (1950). 1984. New York: Penguin Putman, Inc. Ploye, P. (1973). Does prenatal life exist? International Journal of Psychoanalysis, 54, 241-246. Ruesch, J. &Bateson, G. (1968/1951). Communication: The social matrix of psychiatry. New York: W.W. Norton & Company, Inc. Satir, V. (1983). Conjoint family therapy. Palo Alto, CA: Science and Behavior Books. Schermer, V. (1995). Personal Communication. Sonne, J.C., & Lincoln, G. (1965). Heterosexual co-therapy team experiences during family therapy. Family Process, 4, 177-197. Sonne, J.C., Speck, R., & Jungreis, J. (1962). The absent-member maneuver as a resistance in family therapy of schizophrenia. Family Process, 1, 44-62. Sonne, J.C. (1964). Metaphors and relationships. Family Process, 3(2), 425-427. Sonne, J.C. (1967). Entropy and family therapy. In G.H. Zuk &I. Boszormenyi-Nagy (Eds.), Family therapy and disturbed families. Palo Alto: Science and Behavior Books. Sonne, J.C. (1972). Poetry, sentimentality, and family living. American Poetry Review, Premiere issue, (1), Nov.-Dec., p. 40. Sonne, J.C. (1979). Entropie communication in families with adolescents. International Journal of Family Therapy. 1, 276-289. Discussion by Eduardo Cesarman, 290-292 (Reprinted in Special Issue, Family Approaches for Adolescents, Journal of Family Therapy, 1985, 7, 178-191, and 192-194.). Sonne, J.C. (1985a). Contemporary marriage: The question of significant change in marital patterns. In D. Goldberg (Ed.), Contemporary marriage; Special issue in couples therapy. Homewood, IL: Dow Jones-Irwin. Sonne, J.C. (1985b). A little learning or the truth, but not the whole truth and sometimes not the truth: A critique of Lillian Rubin's presentation on March 22, 1985 to the Family Institute of Philadelphia: "Intimate strangers-men and women together." Families, 1, 4-8. Sonne, J.C. (1991). Triadic transferences of pathological family images. Contemporary Family Therapy, 13(3), 219-229. Sonne, J.C. (1994a) The relevance of the dread of being aborted to models of therapy and models of the mind. Part I: case examples. The International Journal of Prenatal and Perinatal Psychology and Medicine, 6(1), 67-86. (Republished in 1995, Pre- and Perinatal Psychology Journal, 9(3), 195-219). Sonne, J.C. (1994b). The relevance of the dread of being aborted to models of therapy and models of the mind. Part II: Mentation and communication in the unborn. The International Journal of Prenatal and Perinatal Psychology and Medicine, 6(2), 247-275. (Republished in 1995, Pre- and Perinatal Psychology Journal, 9(4), 257-294). Sonne, J.C. (1995a). Prenatal themes in rock music. Pre- and Perinatal Psychology Journal, 10(2), 103-119. (Republished in 1996, The International Journal of Prenatal and Perinatal Psychology and Medicine, 8(4), 451-463). Sonne, J.C. (1995b). Won't you come home Bill Bailey? Family Talk (Newsletter of The Family Institute of Philadelphia) Summer 1995. (Viewpoints insert, 2 pages between pp. 1 &2). Sonne, J.C. (1996a). Social regression and the global prevalence of abortion. The International Journal of Prenatal and Perinatal Psychology and Medicine, 8(1), 27-46. (Republished in 1997, Pre- and Perinatal Psychology Journal, 11(3), 125-150.) Sonne, J.C. (1996b). Interpreting the dread of being aborted in therapy. The International Journal of Prenatal and Perinatal Psychology and Medicine, 8(3), 317-339. (Republished in 1997, Pre- and Perinatal Psychology Journal, 11(4), 185-214.) Sonne, J.C. (1997). Magic Babies. Pre- and Perinatal Psychology Journal, 12(2), 17-43. (Republished in 1999, International Journal of Prenatal and Perinatal Psychology and Medicine, 11(2), 1-23.) Sonne, J.C. (1998b). The dynamics of dehumanization. Paper presented June 5 at the 21st Annual Convention of the International Psychohistorical Association. New York City, June 3-5. Sonne, J.C. (1998c). Is that all there is? Book Review of "Marketing the menacing fetus in Japan," by Helen Hardacre. The Journal of Psychohistory, 25(4), 370-374. Sonne, J.C. (2000). Abortion survivors at Columbine. Journal of Prenatal and Perinatal Psychology and Health, 75(1), 3-22. Sonne, J.C. (2001). It's proven but not believed: An exploration of psychosocial resistances to the acceptance of the reality of prenatal mentation, communication and psychic trauma. International Journal of Prenatal and Perinatal Psychology and Medicine, 73(1/2), 1-40. Spitz, R. (1957). No and yes: On the genesis of human communication. New York: International Universities Press. Stern, D.N. (1985) The interpersonal world of the infant: A view from psychoanalysis and developmental psychology. New York: Basic Books. Szilard, L. (1929). On the decrease of entropy in a thermodynamic system by the intervention of intelligent beings. Behavioral Science, 9, 301-309. Tremonti/Stapp (2000). With arms wide

open. Tremonti/Stapp: www.creed.net. (Sung and played by the musical group Creed). Turner, J.R.G., Turner, T.G.N., &Westermann, S. (1999). Prebirth memory discovery in psychotraumatology. International Journal of Prenatal and Perinatal Psychology and Medicine, 77(4), 469-485. Verny, T., &Kelly, J. (1981). The secret life of the unborn. New York: Bantam Doubleday Dell Publishing Group, Inc. Volkan, V. (1988). The need to have enemies. From clinical practice to international relationships. Northvale, NJ: Jason Aronson. Wilheim, J. (1988). A Caminho do Nascimento - Una pointe entre o Biologico e o Psiguico (On the way to being born: A link between the biological and the psychical.) Sao Paulo: ImagoEditora, (German edition: Unterwegs zur gehurt, Eine brucke zwischen dem biologischen und dem psychischen. Heidelberg: Mattes Verlag). AuthorAffiliation John C. Sonne, M.D. AuthorAffiliation John C. Sonne, M.D., a psychoanalyst and family therapist, has written extensively on communication systems, abortion and adoption. In addition to being in private practice, he is Honorary Clinical Professor, Jefferson Medical College, Philadelphia; Emeritus Clinical Professor of Psychiatry, University of Pennsylvania School of Medicine, and Senior Attending, Department of Psychiatry, Pennsylvania Hospital, Philadelphia, PA. Address correspondence to 13910 Swantown Creek Road, Galena, MD 21635. This paper was presented on 3-16-02 at a conference of the International Society for Prenatal and Perinatal Psychology and Medicine on "Wieviel Vater braucht das Kind?," held in Cologne, Germany from 3-15-02 through 3-17-02. Accepted for publication 7-12-02 in the International Journal of Prenatal and Perinatal Psychology and Medicine.

Publication title: Journal of Prenatal&Perinatal Psychology&Health

Volume: 19

Issue: 4

Pages: 319-340

Number of pages: 22

Publication year: 2005

Publication date: Summer 2005

Year: 2005

Publisher: Association for Pre&Perinatal Psychology and Health

Place of publication: Forestville

Country of publication: United States

Journal subject: Medical Sciences--Obstetrics And Gynecology, Psychology, Birth Control

ISSN: 10978003

Source type: Scholarly Journals

Language of publication: English

Document type: General Information

ProQuest document ID: 198696015

Document URL: http://search.proquest.com/docview/198696015?accountid=36557

Copyright: Copyright Association for Pre&Perinatal Psychology and Health Summer 2005

Last updated: 2010-06-06

Database: ProQuest Public Health

Contact ProQuest

Copyright © 2012 ProQuest LLC. All rights reserved. - Terms and Conditions