

Hypnotherapy in the Treatment of Children and Adults Who Suffer Anxiety Due to Prenatal and Birth Trauma

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Abstract: Birth trauma in its many forms creates primal suffering for the infant which, if untreated, often leads to severe and unremitting anxiety into adulthood. Hypnosis has proven to be highly effective in assisting a sufferer to recover because it reveals the origin of the fear. When the origin is known—when a client can finally understand the “why” of it—then healing can begin.

Key words: prenatal and perinatal trauma, anxiety, fear, hypnosis, regression therapy, past lives

Just how much a fetus is affected by what goes on in the womb and within the environment of the mother came into sharp focus for me while teaching a course on hypnotic regression techniques. As the students were practicing on each other, one, who I will call Deirdre, became extremely anxious and said she couldn't go on. She did, however, agree to let me demonstrate how to work with someone heading for a panic attack. Once she attained a calm state, I prompted her to find the source of the panic—but to begin as a detached observer. Once the memory surfaced, it dawned on her that she was recalling a terrifying event that occurred when her mother was nine months pregnant with her. Her father, with mother present (outside the house where a party was going on), was violently and near fatally stabbed multiple times. She said “I'm feeling panic, terror, anger, helplessness. Oh, wow! This is just how I felt when Karin tried to get me deeper during hypnosis practice.”

Once she understood the source of the anxiety, and observed the situation from her adult perspective (where she and her family are all fine), she breathed a sigh of relief and let go of a lifetime of worry. Those few minutes of severe trauma during the attack had been frozen in time within her subconscious mind. Until that memory was brought to the surface, there was only never-ending fear because she believed the world was a dangerous place. Even though her father had survived and she was raised in a loving family, whenever she left home, she braced herself for the violence that could happen without warning.

All of the stress hormones Deirdre's mother secreted during those horrible moments had shot through the placenta and into the baby. Furthermore, Deirdre's own body responded to the screams, shouts, and perceived danger and she had secreted her own fight-flight hormones in the womb. Deirdre reported feeling guilty for the time mother spent taking care of her needs in the weeks and months after her birth because she took attention away from her father. That guilt evolved into co-dependency.

Process

When a fearful or anxious client enters treatment with me, I am not looking for a diagnosis. Most of them have already been told they have Generalized Anxiety, which tells them nothing, or that their fears and phobias are irrational, which is insulting and demoralizing. They want to know why they are suffering, and so do I. I want to know when and under what circumstance the primary wound occurred.

Therefore, in that initial session, after the intake interview has revealed the language of their wound—i.e., “I don't deserve love,” or “I feel guilty for just being alive,” they are led into an hypnotic state and prompted, like Deirdre, to find the origin of that belief. That may sound too simplistic to be real, but there is a mechanism within each person, I call it the “high-self,” that when engaged can sort through the subconscious mind and find the answer. Not everyone has sufficient faith in that process to allow it to emerge, but most of those who seek me out are successful within that initial session. Once the origin story is revealed, then the path to healing is also revealed.

The Primal Wound

Adoptees

When Gina began treatment it was for alcoholism, a defense against feeling constantly worried—was she doing a good enough job at work, was she a good enough wife and mother, was she lovable? During hypnosis, Gina went immediately to a prenatal memory. She reported being aware that her birth mother (19-years-old) was mentally ill and in a constant agitated state. Imagine the hormones of high anxiety that passed through the placenta into unborn Gina and the alarm she must have felt as she heard repeatedly, “I don’t want you, I can’t keep you.” Naturally, Gina had to develop defenses for what she was facing as she came into the world unwanted and feeling all alone—no attachment to anyone.

Unfortunately, she was adopted by a dysfunctional couple—he, an alcoholic, and she, a needy woman who wanted a daughter to love and take care of her. So, the child’s belief about her place in the world was, “I’m unwanted and therefore flawed, so I must earn love and prove my value by putting others first.” That level of self-sacrifice took its toll, and by her mid-thirties, she was in danger of losing her marriage and children because of her drinking. Following the regression, she agreed to day treatment, and joined Women for Sobriety. She worked on inner healing with me, coming to understand her traumatic beginning, and developing deep love for her infant-self. Gina recognized how faulty her beliefs were about herself.

When in an altered state, the imagery that comes to a client reveals the truth of their feelings and beliefs. When negative beliefs are spontaneously replaced with positive ones, durable changes have occurred. During one of Gina’s final hypnosis sessions she reported herself immersed in the imagery of a huge water-filled cavern, well-lit and beautiful. In the center there was an island. “From this island, I’m exploring the depths and I’m finding treasure. I’m seeing rays of light coming into the place, shining a light on what has been hidden. I’m shifting perspective from what’s wrong with me to what is right. I’m a good mom. I’m doing okay.”

Thanks to Nancy Verrier’s book, *The Primal Wound* (1993/2003), we have a greater understanding of the level of trauma an infant suffers when he or she is separated from mother. No matter how loving the adoptive parents are, that wound is there and shows up all too frequently as low self-esteem and a deep feeling of being unworthy of love or being flawed in some unknowable way.

Womb Twin Survivors

The incidence of multi-conception pregnancies is on the rise and vanishing twin syndrome has been identified in as many as 30 percent of those pregnancies. The phrase *womb twin survivors* was coined by Althea Hayton (n.d.), who has done a great deal of research on the aftereffects of losing a twin in utero. Like Hayton, it is very clear to me that a fetus is well aware of the presence of another being (or more) within the womb. Can one imagine a more intimate experience than that? Hayton wrote, “survivors spend their life constantly re-enacting their dream of the womb. Nothing is more important to them than that.”

Survivor scenarios play out in several ways, but two major themes prevail. One is the guilt of being the one who did survive. Feeling guilty for simply existing? How can one get away from that horrible feeling? Guilt (for no discernible reason) led a woman I call Marta to a suicide attempt, an attempt that was stopped by an “unseen presence.” That spiritual experience led her to seek the roots of bouts of grief over a loss she had no awareness of: A memory in a womb shared with a twin. “He doesn’t even have the look of a fetus yet, but I know he’s male.” She told me his name, and then burst into tears. “And he is starting to die. I’m watching him die. He is...slowly...disintegrating. NO! We were going to do this together.” She felt guilty she was alive and he was dead, and that all she could do was watch, not help. Discovering the source of her guilt, and looking at it through her adult eyes, she was very quickly able to let it go. She took comfort in making contact with the spirit of her brother, and perhaps she still does that. When we last spoke she said, “Fifty-eight years of not wanting to be here, and now I do.”

The other survivor scenario is feeling the loss of their “other half.” In this one, the survivor re-enacts the search for the other by seeking out the perfect mate or partner. Dorothy was a much wanted only child who was profoundly lonely. She begged her mother for a little brother for years. In school she’d identify one little girl as her best friend and stick to her like glue, fully expecting the other child to be as attentive to her as she was to the friend. “If she slighted me or pushed me away I’d think she was very cruel.” As an adult she was always looking for her soul mate but even good relationships were not enough, and she engulfed people until they left her. When she discovered she was a womb twin survivor she knew she had found the source of her longing and pain. Knowing what and whom she had missed allowed her to finally grieve. “I feel confident now and no longer need to have someone else to feel whole.”

Conception by Rape

Thomas R. Verny, MD, in his book, *Pre-parenting: Nurturing Your Child from Conception* (Verny & Weintraub, 1991/2003), helps us understand that a fetus does have memories even from the moment of conception. An example of that trauma was Evan, who believed he should never have been born. In hypnosis, he discovered that he was conceived when his teen mother was date-raped. Out of trance he said he saw that it was in the back seat of a car, and that his mother felt fear and shame. The message he got from the family in utero and growing up was that he was a mistake, a problem, and that he was responsible for his mother’s pain.

C-Section

A cocaine addict knew her birth was by emergency C-section, but until hypnosis she didn’t understand that her traumatic birth resulted in her re-enactment of the distress/rescue cycle. She was a damsel in distress and a drug addict. Her insight about the cocaine addiction was that drugs had calmed both mother and baby. Some clients with C-section births exhibit a lack of initiative, or passivity in relationships, believing they are subject to others’ timing, not their own.

Mother Ill During Pregnancy

A second grade boy would not go to school unless his mother was present in the classroom. Hypnosis revealed he was very aware in utero that his mother had a life-threatening illness. His fearful thought that she might abandon him started there. His obsessive belief was that if he kept her in sight at all times she would not leave/die. Another boy, 11-years-old, had a similar experience during gestation—his mother was bedridden, and sadly the message he received via the situation was that it was his fault she might die. He had been sleeping in his parents’ bedroom since he was brought home from the hospital. He needed to hear mother breathing to reassure himself she was alive.

Unwanted Pregnancy

The unborn child knows if he or she is wanted or not. There is statistical evidence that being unwanted often results in an angry child, with a higher incidence of delinquency, chronic illness, and suicide (David, Dytrych, Matejcek, & Schuller, 1988; David, 2006). A self-described Type A business woman entered therapy with “intimacy issues.” When she tuned in to her prenatal memories, she discovered she was unwanted. Her decision was, “Then I won’t want you, either!” She told me she turned away from any attempts from others to give her affection.

Prematurity

Being born too soon is a traumatic beginning, and the number of premature births is on the rise. Additionally, medical treatment now makes it possible to save micro-preemies, and those little ones face a multitude of challenges. Given that there is still much denial that a fetus has memories, many

neonatal intensive care units are chaotic—beeping machines, crying babies, flashing lights. What a stressful experience. Many birth psychologists believe that preemies feel pain more acutely than full-term babies, so even those small heel sticks for blood work must upset them greatly. I have found those children and adults to be hyper-sensitive to physical and emotional pain. Flashing lights and beeping or loud sounds can be panic triggers. Robin Karr-Morse, in her book, *Scared Sick: The Role of Childhood Trauma in Adult Disease* (2012), wrote “...the combined stress of being isolated from the mother and the daily pain and discomfort of a NICU unit leads to what Dr. Heidelise Als of Harvard Medical Schools calls ‘neurotoxic brain-altering events’—in other words, trauma.”

Gestation During a Time of Stress for the Mother

When a mother experiences stressful events such as war, high crime environment, domestic violence, and poverty during gestation, the message the preborn receives from the outside world can become the reality: The world is a dangerous place, I will never get what I need, people can’t be trusted, and a multitude of other limiting beliefs.

Past-life Trauma Carried into the Present

When I lead clients into a hypnotic state and prompt them to go to the source of a problem, sometimes they report scenes that they feel come from a different time and place—what we generally refer to as a past life. In my practice, *every* client with a phobia discovered the origin was from a traumatic event, repressed from early childhood or more frequently from a past life. Fears of flying were sourced back to actual deaths from crashes, often from the two world wars, or in one case, my client reported a past life as an army nurse, shocked at the carnage at a crash site. The fear of speaking, of taking on a leadership role, of a certain type of person—all have been sourced to past life trauma. Eating disorders often have roots in past lives of starvation or severe deprivation.

The Healing Process—Change Your beliefs, Change Your life

What I have learned from my clients over a 48-year career is that if fears and anxiety can’t be attributed to PTSD, the side effects of prescription or recreational drugs, or external pressure, then we look to their memories and beliefs, especially those deeply held in the subconscious mind. The process is:

1. Learn the language of the beliefs and find the origin through hypnosis.
2. Evaluate the beliefs through a wise-adult perspective, and
3. Replace the limiting belief with a positive new truth.

This can happen in one session, but may also take months of work.

Example of the three steps:

1. A guilt ridden CJ believes that his mother’s depression and anxiety are his fault, but in hypnosis he discovers that during her pregnancy with him, her partner was unfaithful and then left her to have the baby on her own.
2. From his 42-year-old perspective, CJ asks himself, “Is a baby responsible for his mother’s emotional state?”
3. He visualizes taking the responsibility for his mother’s moods from his shoulders and placing them on his mother’s while declaring, “I am responsible for my own well-being, and lovingly release my mother to her own work.”

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