

Wing of the Butterfly - A Philosophical Overview

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Full Text: Headnote ABSTRACT: Based the principles presented in the book she co-authored with Judith Acosta, LCSW, *The worst is over: What to say when every moment counts*, Dr. Prager focuses in this article on the application of these techniques for expectant parents. This is accomplished with reference to a wide variety of background concepts, including Native American and other traditional cultures, as well as Chaos Theory. Dr. Prager's wide experience in training doctors, nurses, and first responders how to speak in medical emergencies, including those responding to 911, provides a solid grounding in practical application of the techniques discussed. KEY WORDS: prenatal care, emergency care, traditional cultures, Chaos Theory. INTRODUCTION Having co-authored a book titled *The Worst is Over: What to Say When Every Moment Counts* (Acosta & Prager, 2002), I have spent the last several years training doctors, nurses, and first responders how to speak in medical emergencies to relieve pain, promote healing, and save lives. What I tell them is that every thought in our minds creates physiological chemicals that influence our cells, our bodies, our spirits. This idea has become more readily accepted of late because of the brilliant work of cellular biologists like Candace Pert, PhD (2000) and Bruce Lipton, PhD (2005). Their research and writings provide evidence of the mechanisms (neuropeptides) through which emotions are generated and carried throughout the body and the effects at the cellular level of these emotions. When Dr. Pert says, "Your body is your subconscious mind," (2000) she is indicating the ways in which thoughts are somatized. When Bruce Lipton suggests that our thoughts and emotions are so powerful they affect our genes-"Genes are not destiny! Environmental influences, including nutrition, stress, and emotions, can modify those genes, without changing their basic blueprint" (2005, p.67)-we begin to see that no one can afford to live with an unexamined mind. The great writer, Rudyard Kipling once said, "Words are, of course, the most powerful drug used by mankind." Words also are, of course, the beginnings of images, and images in our minds are the way that we manifest the world. The images in our minds are also the way we manifest, or undo, our health. THE CHEMICAL CASCADE You wake up from a nightmare. Your heart is palpitating, your palms are sweaty, your throat is dry. You look around. You are in bed, likely one of your favorite places to be. There's no stalker, no monster, nothing to fear, just your familiar old bedroom. Do you roll over and go back to sleep? No. You get up, you go to the bathroom, you have a drink of water, you check the locks on the door, and you turn on the TV to watch those commercials for ginzu knives, which are featured at 3 AM. Because your body is experiencing a cascade of chemicals, it takes approximately 20 minutes to process them and settle down before you can relax enough to go back to sleep. This entire disruptive event was generated by an image in the mind. And, if this is all true, which it is, when we are carrying a baby in our body, the chemicals, the neuropeptides that communicate our emotions within us are shared by the baby and, along with those neuropeptides, the thoughts that are tied to those emotions are shared. The babies are feeling the very same thing we are feeling. And, they are correlating their feelings to what they hear and sense with senses developing very keenly, for life, very early. In his book, *Prenatal Parenting* (2001) Dr. Frederick Wirth says that, "By the time the fetus has completed the twelfth week of gestation, the total number of neurons he will have for the rest of his life have already formed. By the time he is twenty-eight weeks old, he has developed all of his senses, as well as those brain parts dedicated to emotional responses and memory. By this time in gestation, the unborn infant is developing concepts about himself and the world in which his mother lives" (p. 6). Johns Hopkins University psychologist, Janet DiPietro, and colleagues reported on a study in which the heart rate and movements of 31 fetuses were recorded before birth and compared to readings taken after

birth. Their findings suggested that, "Fetuses that are very active in the womb tend to be more irritable infants. Those with irregular sleep/wake patterns in the womb sleep more poorly as young infants. And fetuses with high heart rates become unpredictable, inactive babies. 'Behavior doesn't begin at birth,' declares DiPietro." (Hopson, 1998, p, 44). And yet, as we will see in the second half of this article, there is an almost conspiratorial determination by contemporary medical researchers to deny the possibility of thought, experience, or intelligence in the baby before the moment of birth.

OTHER CULTURES, OTHER VIEWS Other cultures have ways, other than that of the medical/scientific model, of seeing not only the pre-born baby's potential, but the mother/ baby relationship. Since earliest times, and without the benefit of knowing about neuropeptides, they have understood this shared emotional experience and drawn their own conclusions about what influences form a baby. For example, according to Kathryn White, Ph.D., LAC (2005), President of the University of Complementary Medicine, in traditional Chinese medicine everything that exists in that moment of conception has an influence on the baby and the baby's development; the father, representing the yang, the mother, yin, and the entire cosmos. For that reason, you would certainly not choose to conceive a baby during a tempestuous thunderstorm. One would be wise to conceive in a calmer climate that would contribute that more desirable trait to the child's temperament. In her book *The Continuum Concept*, author Jean Liedloff (1985) writes about the Yequana tribe in the South American jungle and their aboriginal culture's view of the mother's connection with the baby. They recognize that the baby spends its first nine months intimately within the mother; safe, warm, encapsulated, waking and sleeping to the sound of the mother's heart beat. How shocking, then, at birth, to be torn from that warm, safe nest and put down in some cradle to lie alone without the sounds of life it has come to know. In what Liedloff identifies as the continuum concept, the baby is carried continually, never set down for the first few months, so that it adjusts peacefully, gradually, to a world harsher and more unforgiving than that from which it has come. Mythology from 25 centuries ago in India gives us clues to belief systems about what the baby learns in utero. In one such myth, a 16 year old warrior is able to breach the fortification of the enemy to lead his people to victory by knowing the fortress' secret vulnerability, although there is no way he could have known this fact, because only one man in his tribe knew it. That man was his father, who had died. But, it turns out, 16 years before, in order to reassure the mother that everything would be all right, the father had whispered this secret to the mother when she was pregnant with the boy hero, who overheard it then and remembered. The message of this myth is: the baby was listening. The many African cultures have an impressive number of approaches to these prenatal issues. One is that there are two beings born at the time of a birth. One is the baby, and, they believe, at the same time, a being known as the mother is born. When we realize how much a person's life is changed by stepping up into motherhood, this recognition of the birth of a new identity seems both obvious and necessary. Melissa Gates (2003) reports on a Jack Kornfield story which explains that in a certain tribe in East Africa, it is believed that conception doesn't happen when the sperm and the egg get together. Conception occurs, they conjecture, when the mother has the concept of having a baby. She goes off into the woods, sits under a tree, and a song comes to her, "Oh," she says, as the thought arises so beautifully within her, "oh, my baby is coming." She then sets out to find the right man to whom to teach this baby's song. In the book *The Red Tent*, author Anita Diamant (1997) traces women's birthing practices from biblical times. At one point in the story, a baby appears to her pregnant mother in a dream and advises the mother on food and relationships. As the mother describes it to the now-grown child, "You and I whispered to each other like old friends. You were very wise, telling me what to eat to calm my upset stomach, how to settle a quarrel between [your brothers] ... You told me about the other side of the universe, where darkness and light are not separated. You were such good company, I hated to wake up." (p. 66-67). So, mothers talk to the babies in utero, and sometimes the baby also talks to the mother and advises her, as if from a higher place or perspective. I have the good fortune of having traditional Native American friends whom I can ask about their culture. In the 1980's a famous medicine man named Rolling Thunder ran a Native camp in Nevada where his son, Mala Spotted Eagle, and Mala's wife, Sky, lived. During that time, Sky was pregnant

with their first child, Red Wolf. I asked Sky to talk about how pregnancy was viewed there. She said, "The understanding is that from the moment of conception, you're in communication with the child. When I was pregnant, I was told to be careful and watch my thoughts. Everything that I thought and felt would be part of my connection with the baby. Whatever I thought and felt would go into the baby and as a result, Mala's Mom emphasized that I was to be babied almost, although I didn't like that. I was told not to lift anything heavy. We did Sunrise [Ceremony] every day, and I felt whatever prayers I was saying and good food I was eating were very important." Sky continued, "We knew the woman with child had to be careful with her own thoughts and energy and other people around her had to be careful, too, because everything could influence the baby and have an affect on development; music, violence, TV, even though not directly." Sky says sometimes these challenges are good, helpful, not hurtful, and can make one stronger. "Many times the fears and things we go through are as important a part of our growth as anything. What you have to do is recognize how it affects you." Sky says that in the Native American culture they don't think of sickness as a bad thing, but as something to learn from. "With an unborn child, when things would happen, the mother would sometimes take some time and sit with the unborn baby and look within and talk to the child and this is the way the mother would talk to the child if something would happen that was upsetting to her. She would say, 'I just went through this and I know you did, too. You're a part of me. We needed to do this so that we could learn something.'" She also advises pregnant women to watch their dreams, as they can foretell events. Back when I was writing *The Worst is Over* (Acosta &Prager, 2002), I talked to Sky about the power of words and she said then, "When we plant a seed, we pray over it. When we water it, we talk to it. When we harvest and cook it, we sing to it. And before we eat it, we pray over it and sing to it again. And then," she said, as if it were too obvious for words, "and then, it's medicine." So, when I talked to her this time about her culture's approach to prenatal care, to pregnancy and birth, she reiterated that thought about the philosophy of planting in a different way. "For us," she said, "it's all the same. It's a way of life, to nurture." WING OF THE BUTTERFLY In chaos theory it is said that any little thing can set off an unforeseen and much larger chain of events. The fluttering of the wing of a butterfly in Asia can generate perturbations that magnify over the ocean so that you wind up with a tornado somewhere in Kansas. In this analogy, the pre-born baby is the wing of the butterfly. The perturbations are the environment. The full-blown tornado is the 50 year old man or woman who appears in my office with emotional issues. As a hypnotherapist, I have the opportunity to regress those tornados, as if looking through the other end of the telescope, back to the womb. And what we discover is that there are seminal emotions and knowledge of experiences from womb-time that the adults had no idea remained, unexamined, even hidden, in the depths of their unplumbed oceans. In Shamanistic practice it is said that you can deal with the tornado if you like, but the Shaman, the wise person, influences things and events at the source. And, if you influence things at the source, you avoid the tornado. That is what we are all doing in this important prenatal psychology work. WHAT WE ARE UP AGAINST Of course, any talk about prenatal issues verges around the edges of the abortion issue. If we are talking about consciousness with a preborn baby, it sounds like we're taking sides in that debate. I don't think so. The case we're making is not involved with the knotty problem of the right of a woman to decide on issues concerning her body and future. We are, rather, pointing out that when one decides to bring a baby into the world, it is important to know about the environmental influences on its wellbeing, and to do everything to offer that baby the healthiest support for its emotional development. The other thing we're up against is the resistance I alluded to earlier, the resistance to the message that the baby is learning in utero feeling and experiencing everything that the mother is experiencing during the pregnancy. Remember that old expression, "She's got a bun in the oven." Whether consciously, or for reasons as yet unspecified, the medical model is still acting as though they believed "a bun in the oven" is the dynamic of pregnancy. The mother is the oven, the baby's the bun, and you simply have to put in good ingredients and let it grow. Be sure to eat well, exercise right, and don't smoke, and then you get a healthy baby. The issue that we've got here is the mistaken idea that the baby's emotional life begins at birth. We know something different. Why do I talk about scientific/medical

resistance? I refer you to the August 15, 2005 cover story of Newsweek magazine. On the cover is a photograph of a seven-month-old child with electrodes on her head. Not a pretty picture. The editors then spend thousands of words about how unexpected it is to discover that three-month-olds exhibit emotions. To the doctors' surprise, it is reported, they are learning that, even before the baby can speak, even before the baby can sit up, it has feelings. "A wealth of new research is leading pediatricians and child psychologists to rethink long-held beliefs about emotional and intellectual abilities of even very young babies. They can master complex emotions, jealous, empathy, frustration, that were once thought to be learned much later, in toddlerhood." (Wingert & Brant, 2005, p. 35-39). The article continues, "[Babies] are also far more sophisticated intellectually than we once believed. Babies as young as 4 months have advanced powers of deduction and an ability to decipher intricate patterns. They have a strikingly nuanced visual palette, which enables them to notice small differences, especially in faces, that adults and older children lose the ability to see. Until a baby is 3 months old, he can recognize a scrambled photograph of his mother just as quickly as a photo in which everything is in the right place." (Wingert & Brant, 2005, p. 35-39). So that ability exists before 3 months and not after. How much before 3 months? The interesting part, of course, is that there is not one word in this thousand-word article about the prenatal experience. Never once do the authors even speculate on what the baby they couldn't put electrodes on was doing in the womb all this time, when it already has, as Dr. Wirth (2001) points out, "more nerve cells and many more connections among them than an adult." (p. 12). In his work with premature infants, Dr. Wirth sees what they are capable of before they are full term and testifies that "a baby recognizes his/[her] mother's voice and smell, and these stimuli tell the brain to pay attention, this person is important ... My tiny patients are seeking human contact. And they know how to get it.... They watch us carefully for facial cues and sounds that reassure them that they are loved." (p. 12). He is writing about premies, babies who show us what abilities they have in the womb before they are full term. And why are the researchers not interested in the emotional life of the fetus? Is it that they don't get it? Or is it because they can't so easily wire the baby for scientific measurement? In any case, this is what we're up against—the implicit impression that baby pops out, and only then, when we can see it like a tree falling in the forest, starts having emotions. The Newsweek article that never addresses prenatal psychology continues, "Take shyness for instance," reporting on studies conducted by Nathan Fox of the University of Maryland to address why some of the 15-20 percent of children who are "shy and anxious by nature," don't grow out of it. He "proved," they contend, that shyness is initially driven by "biology," [no definition of what they mean by that. DNA?], "... by wiring dozens of 9-month-olds to EKG machines and conducting a simple experiment. When greeted by a stranger, 'behaviorally inhibited' infants tensed up, and showed more activity in the parts of the brain associated with anxiety and fear. Babies with outgoing personalities reached out to the stranger." Fox says that "parenting style has a big impact on which kind of adult a child will turn out to be. Children of overprotective parents, or those whose parents didn't encourage them to overcome shyness and childhood anxiety, often remain shy and anxious adults." (Wingert & Brant, 2005, p. 35-39). Perhaps the article unfairly synopsisized the study, but it seems to me that throwing around terms like "behaviorally inhibited infants," is entirely self-serving. What is that? Where does a "behaviorally inhibited infant" come from? Has he proved it's the result of biology? That question, at least in the Newsweek article, isn't answered. What if, while the baby is inside the mother, the mother is fine as long as she's around familiar people, people with voices she knows and the baby gets to know. And what if the mother makes a fear chemical when she hears a strange voice that threatens her? What if that is the influence? Are we to believe that "behaviorally inhibited" babies just happen or enter on a gene? And, to help solidify my argument, Fox is talking about children of "overprotective parents." That means the woman is already hypervigilant. What kind of chemicals is she making that bathe the baby in utero? As mentioned earlier, Bruce Lipton (2005) has become world recognized for explaining that genes do not turn themselves on, but are turned on by environmental influences. The problem with the electrodes on the head approach is that science is only interested in what it can measure, and so, until more intrusive devices for bothering the fetus are developed, the

researchers are content to work with what they can wire up. There are many wonderful studies discussed in Dr. Wirth's book (2002) that prove as concretely that babies are listening and learning within. For example, he discusses the study by Anthony DeCasper at the University of North Carolina, in which mothers read aloud the popular Dr. Seuss book *The Cat in the Hat* twice a day to their unborn children. A few days after birth the newborns were given the opportunity to hear another Dr. Seuss story. The infants were outfitted with a special nipple that let them change the story read by altering the speed of their sucking. "As demonstrated by their sucking speed, the newborns remembered *The Cat in the Hat*, liked it better than the new story, and adjusted their sucking speed to hear the familiar one. They preferred the story read by their mother over another female reader. Furthermore, they preferred it read forward instead of backward." (Wirth, p. 36-37) That is, they had heard it, learned to recognize it, remembered it, and preferred it. Where did all those emotions and preferences come from? Clearly they were forming before those babies popped out. We don't need electrodes on the head of fetuses to tell us that so much is going on. Once when my husband and I were visiting Mala Spotted Eagle and Sky Pope, we asked Mala to sing some Native songs for us. During one song, his granddaughter, Miranda came over and stood against her grandmother, listening. "You like that song?" I asked her. "It's her song," Sky said. "It's the one her mother, Winter Sparrow, sang to her while she was pregnant." So, when our daughter Jennifer was pregnant with her third child, Madeleine, my husband Harry wrote a lullaby for her. Jennifer played the CD of "Madeleine's song" to her baby in utero and after Madeleine was born, whenever she was cranky riding in the car, which she did not like, Jennifer would put Harry's CD into the player and Madeleine would become soothed, calm, and sleepy. That lullaby calmed her because of the chemicals of calm that her mother had been producing when they both heard this song during her pregnancy with Madeleine. When Maddie was 4 months old, there was what Harry called the "first post in-utero live performance." Because we live in Los Angeles, and she in New York, we hadn't seen her since she was born. Meeting in Ohio that summer, Harry brought out his guitar and began to sing her lullaby to her. At a mere 4 months, Maddie was stunned and enthralled at the sight of the man whose voice had so soothed her. It was as if the rock star had come to her house! She couldn't believe it-the song that she loved, that made her so relaxed, here it was. And then she fell asleep. In the year 2000, I created a program of "Guided Imagery for Surgery" for a pilot study for Cedars-Sinai Medical Center's Cardiothoracic Surgery Unit. The effectiveness of these techniques helped to prove the value of guided imagery on patients under anesthesia. Later I wanted to show the value of guided imagery for pre-verbal fetuses. I created a program for a group of pregnant mothers called "Bonding With the Baby Within" (which is now also a CD), and presented it as a workshop under the guidance of the South Bay Health District in Los Angeles. The day I presented the importance of introducing music prenatally, my husband, Harry, joined us. He said, "It looks like there are 9 people here in this circle, but there are actually 18. Maybe you would like to draw closer into a circle and maybe the babies would like to talk to each other." It was so incredibly inspired. So I did a little relaxation induction and all the mothers closed their eyes, and all the babies communed. The mothers loved it so much, they insisted on doing it every time. One mother said, "It was as if there was a little window in my belly and my baby was looking out at all the others." Later we formed a yahoo! group and when the first baby was born, the mother wrote, "And now, as the babies are being born, we're wondering if, when the last baby in our group appears, we can get together and have the babies see each other in person and see what they remember." So we'll be having a reunion at the Health District. I'll tell you more about that at the next conference. CONCLUSION In sum, we don't need electrodes on the head to tell us that the babies hear and remember, and that emotions and thought begin before birth. In a cartoon that appeared in the *New Yorker* magazine, a baby being carried into its new home by its parents is thinking, "Oh, great. Humble beginnings." Well, we don't have to give our babies humble beginnings. When we understand prenatal psychology, we can give them wonderful starts on a full, emotionally healthy life. I'd like to end with blessings on your good work. You are the vital connection between ancient wisdom and modern science. You are birthing a very old idea whose time has come. You are influencing the future at its source-at the wing of the butterfly. References

REFERENCES Acosta, J., &Prager, J.S. (2002). The worst is over: What to say when every moment counts. San Diego, CAiJodere Group. Diamant, A. (1997). The Red Tent. New York: Picador USA. Gates, M. (2000). Washington Women's Foundation Annual Meeting. Retrieved online October 11, 2005 from <http://www.gatesfoundation.org/MediaCenter/Speeches/MelindaSpeeches/MFGSpeechWashWomenFdn-000406.htm> Hopson, J.L. (1998). Fetal Psychology. Psychology Today, 31 [5], 44. Leidloff, J. (1975/1985). The Continuum Concept. Reading, MA: Addison-Wesley Publishing. Lipton, B. (2005). The Biology of Belief: Unleashing the power of consciousness, matter, &miracles. Santa Rose, CA: Mountain of Love/Elite Books. Pert, C. (2000). Your body is your subconscious mind. Audiotape. Boulder, CO: Sounds True. White, K. (2005). "Unraveling the myths of illness." Oral Presentation at the Academy of Guided Imagery Conference. Monterey, CA. Wingert, P., &Brant, M. (2005). Reading your baby's mind. Newsweek Magazine. August 1, 2005, 35-39. Wirth, F. (2001). Prenatal Parenting. New York: Harper-Collins. AuthorAffiliation Judith Simon Prager, PhD

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