

# **Prenatal and Perinatal Communication: An Urgent Call for Action**

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**Abstract:** This short article discusses the value and virtue of prenatal and perinatal communication, including awareness of the environment inside and outside the baby. Babies in the womb, newborns, and infants need to feel, perceive, and absorb words. Most important is the way in which we speak and the awareness of the impact of our words and actions on the unborn and newborn baby. This is the best practice used at the Paediatric Hospital, University of Studies of Insubria of Varese, Italy.

**Keywords:** infant perception, prenatal communication, prenatal and perinatal environment

Communication includes the action of presence, adherence, coherence, and the action of perception. For the baby in the womb, the newborn, and the infant, the act of communication provides a sense of safety and connection.

When we speak of communication, we speak about action-with. If we think about prenatal and perinatal communication we think of that action, that delicate-but-deep-and-full action every mother is inspired to do for her baby in her womb, which is the baby's world, the baby's atmosphere.

Communication is stimulation, and stimulation is something which causes a response. The word "stimulate" itself comes from the past participle of the derived verb *stimulāre*, "goad on." Only learning the deep meaning of these two words, which are spaces, open spaces to live and love for every child who is in his mother's womb perceiving the world that is waiting for him. You can deeply feel great importance of communication and stimulation for the baby in the womb.

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As Sandra Bardsley, President of the Association for Prenatal and Perinatal Psychology and Health, shared with me in December, 2015,

Babies are fully conscious from conception. Babies need to feel loved and understood from the very beginning of that time, because conception is the birth of perception of the baby's inner and outside world.

Sandra Bardsley's words are so extraordinary, of such an extraordinary fullness and beauty because they open this awareness, this consciousness in everyone's heart and mind. This message is a gift that Sandra Bardsley gives and it's our pleasure and duty to spread it. I am spreading her precious words during my lessons to obstetricians, pediatricians, nurses, anesthetists, and others. Can we imagine reading this sentence at every obstetric and gynecologic and pediatric hospital ward in the world? This should be posted at the very entrance or inside medical rooms. Imagine reading it there, feeling the power of those words, living their full meaning. This is an urgent call for action. Awareness of the deep meaning of this message must rise and spread across the world. I feel this urgency because babies in the womb suffer, babies coming to the light of the world suffer, babies in their first year of life suffer because of our lack of awareness and action. Being aware of babies' full consciousness from conception moves us to a new way to speak, using kind words, leading to nurturing actions. Every baby in her mother's womb needs that. Knowing that babies are fully conscious from conception leads to important changes in the way we relate to them. The entire environment that surrounds the mother and her baby must be considered, valued, and studied to create the most nurturing atmosphere possible. In order to do that it is important to consider, already before conception, all levels of impact; cognitive, behavioral, emotional, environmental, sensorial, and experiential. In each of these dimensions, recognizing the power of thinking, speaking, and action is essential. This thinking, speaking, and action needs to be positive, responsive, and sensitive in order to create coherence and communicate deep caring to the babies. The baby in the womb feels, hears, sees, smells, tastes, touches, and is fully present to the thoughts, words, and actions directed to her. All that happens because the baby is in strict, constant, and continuous connection with her mother, who is her entire world at that point (Verny, 1981). Prenatal and perinatal communication is that precious act of listening to the baby in the womb, respecting the baby coming to the light of the world, attending to her needs during the very first years, building the foundation from which she can grow and develop. It is urgent to teach healthcare professionals the art of listening to mothers and their baby in the womb, listening to the baby during her coming to the light of the world, comforting and supporting her mother, and helping parents during the early period of the baby's life.

Education in universities and in hospitals must include what Dr. Thomas Verny (1981) wrote in his book, *The Secret Life of the Unborn Child*, “By creating a warm, emotionally enriching environment in utero, a woman can make a decisive difference in everything her child feels, hopes, dreams, thinks, and accomplishes throughout life” (p. 30). When every day I approach babies in their mother’s womb, when every day I approach newborns and infants, Thomas Verny’s words come to my mind. These words appear also when I listen to mothers who don’t know about the importance of communication with their unborn babies, mothers who want to know. When I mention the importance of this communication, they ask me for more information. When I approach the babies in the womb, newborns, and infants, I begin to speak softly, gently, rhythmically, creating a new atmosphere surrounding the baby and mother. My only tool is my voice. The rhythm of voice that babies in the womb perceive as caring when they hear and listen to it. The feeling contained in and conveyed by the rhythm of voice creates an atmosphere babies in the womb and newborns respond to because the “voice is an articulation of the bodily presence” (Boehme, 2017). There is an urgent need of such an awareness and consciousness. Healthcare professionals, students in obstetrics and pediatrics, and parents need to hear and deeply understand Thomas Verny’s words, when he wrote in 2002,

When a mother gazes lovingly into the eyes of her newborn child, that infant’s body is primed with hormones for socialization and empathy, and his brain [is] literally programmed (scientific term: entrained) with the capacity to love. Throughout the early years of life, the research shows the baby’s brain is continuously tuned by his caregiver’s brain to produce the correct neurotransmitters and hormones with appropriate sequence; this entrainment determines, to a large degree, the brain architecture the individual will have throughout life. If the entrainment is appropriate, the child will be wired for health. The constant flow of verbal and non-verbal messages sent by parents and caretakers interacts with biology to regulate the growth of the brain. The new studies reveal that every early experience from conception on, materially affects the architecture of the brain. From the journey down the birth canal to an afternoon at the park, a child will register every experience in the circuitry of his or her brain. (p. 10)

These words present a precious sharing of learning and knowledge, a depth of meaning behind and inside every word, to be collected and spread. These words have the potential to create an inner protocol belonging to each caregiver. This learning and knowledge must enter the caregivers’ approach. Caregivers must breathe each of these words as the air they breathe. It is urgent, so urgent, here in Italy and around the world. These

words begin to answer our wonderings about how and what the baby perceives in the womb, as well as what the newborn and the infant perceive. Let us also think of what Gernot Boehme (1993) teaches regarding the relationship between environmental qualities and human states. This “in-between,” by means of which environmental qualities and states are related is atmosphere (or environment), which is the perception, the experience of the felt-presence, the gaze, the tuning-in process, the wiring process, the interaction, and the affection.

In Verny’s words above there appears the word of all words, the adjective “appropriate.” What a noble adjective. In modern English it means “correct” and “morally right.” But, if we want to go inside it, we discover that its origin comes from “proper” which originally meant “belonging to herself/himself.” It comes from Old French “propre,” from Latin *prōprius* “one’s own,” which may have been a lexicalization of the phrase “*prō prīvō*,” literally “for the individual.” It is important to think of the individuality, personality, subjectivity of the baby, and wondering how he perceives when one approaches to him as can be seen in voice, gestures, signs, and movements. Each word we speak to babies in the womb and to their mothers, newborns, and infants has the potential to instill all the feeling that the word contains. If those words are from the heart, that would be a nurturing. Saying something in a certain tone of voice relates to what Wittgenstein calls experience (*Erlebnis*) of meaning, “When we attach feelings to the sound of words, we make those word-sounds into gestures. For me a musical phrase is a gesture. It insinuates itself into my life. I adopt it as my own” (Wittgenstein, 1980, p. 73). Attaching feelings to the sound of words (tone of voice) we obtain such a result.

Susan Highsmith (2016) speaks to the importance of the words themselves, “... watching our words can raise awareness of how the language we choose perpetuates society’s paradigms or empowers women to give birth more naturally and babies to be welcomed more gently” (p. 45). Dr Highsmith urges us to be alert and vigilant on our words, to being aware of our choice of words. Analyzing the origins of the verb “watch” we find that “watch” and “wake” have the same root. The two verbs share a common ancestor, the prehistoric Germanic “*wakōjan*” which meant to “be awake.” The best choice of words creates, gives, and instills a space of feeling, a shape of feeling, a shade of feeling, as well as a time of feeling, the meaning of feeling, the feeling of meaning, wherein the baby and her mother in their perceiving feel cured and cared for, cradled, and respected in their body and mind. Because they feel the appropriate atmosphere, their proper and individual atmosphere. And they become that atmosphere. Being conscious of the importance of the atmosphere can help in a better tuning-in process with the baby in the womb, and her mother, as well as with the newborn and the infant. I share this urgent message with you so that we, together, can share it with the world.

## References

- Boehme, G. (2017). *The aesthetics of felt spaces*. London: Bloomsbury.
- Boehme, G. (1993) Atmosphere as the fundamental concept of a new aesthetics. *Sage Journals*, 36 (Thesis Eleven). Retrieved from <http://journals.sagepub.com/doi/abs/10.1177/072551369303600107?journalCode=thea>
- Highsmith, S. (2016). Watching our words. *Journal of Prenatal and Perinatal Psychology and Health*, 31(1), 45-65.
- Verny T. (1981) *The secret life of the unborn child*. New York: Dell Publishing.
- Verny T. (2002) *Tomorrow's baby: The art and science of parenting from conception*. Family & Relationships.
- Wittgenstein, L. (1980) *Remarks on the philosophy of psychology, vol. 1*. Chicago, IL: University of Chicago Press.