

# The Psychoanalytic and the Prenatal “Partnership”

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**Abstract:** Psychoanalysis and psychoanalytic knowledge has spread around the world for one century, however, compared to other sciences it is still rather neglected in society as a whole. Pre- and perinatal studies – I exclude medical studies here – emerged intensely from the 70s on. As information spreading has grown a lot during the last decades, one could imagine that the knowledge about prenatal studies and findings has become a common knowledge very quickly. However, it is the same as with psychoanalysis. It seems to be a science for rather small groups only. Both of them might not yet have separated from the medical realm – psychiatry, embryology – in the common conscience. But what is still more astonishing is that psychoanalysis up to now has hardly made any effort to consider prenatal life and to broaden the psychoanalytic theories to embrace it. Prenatal studies, on the other hand, very rarely touch psychoanalytic theories and refer to them. I think this is a very peculiar fact as both sciences are mostly interested in aetiologic questions.

Prenatal science started with embryology, and for a long time it was not the living child in the womb who received interest but its physiological reactions. Beyond that, until some years ago new-born babies were regarded as not sensitive to pain. And there are still psychologists and analysts who keep to the conviction that during the first extrauterine year a child does not understand language and is not able to participate in interaction.

“... the mother has a baby inside her”, Winnicott started one of his thoughts and finished by “... within the most intimate contact there is a lack of contact” (1988, p. 157). This statement elucidates the situation between both disciplines too. Succeeding seem to be the group- and body-oriented techniques in the field as Veldman, who does not claim a psychoanalytic but a haptonomic approach in his body-oriented technique.

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It seems strange that the prenatal dimension has hardly officially won access to the psychoanalytic realm. The question why psychoanalysis and pre-/perinatal studies obviously cannot easily combine and enrich each other could be promptly answered from one aspect. Since its beginning a century ago psychoanalysis has been struggling for acceptance as a scientific discipline and is not yet fully acknowledged.

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Pre- and perinatal studies are neither because the object of study seems to be too near or too far away, completely subjective or objective though these studies have grown enormously within a quarter of a century like the child in its impressive and unique growth from preconception to birth. Besides, the history of speculation about the nature of the functions of psychoanalysis is divided between opinions in favour of the corrective emotional experience and the development of insight. Prenatal studies view the same problem.

Concerning a problem of psychoanalysis, Rycroft stated:

What I am suggesting is that one of the unresolved contradictions in Freud's thinking is between psycho-analysis conceived of as a natural science – objective, detached and intellectual – and psychoanalysis conceived of as an intuitive, receptive mode of relating to others; and that awareness of this contradiction combined with failure to resolve it is part of the contemporary 'malaise' of psychoanalysis. If an analyst conceives of himself as only a scientist, he will apply theory to his patients and risk seeing only what he already knows. If, on the other hand, he conceives of himself as only a 'free-floating attention', he risks not being able to express what he discovers in terms comprehensible to others (Rycroft 1985, p. 57).

On the 1975 congress of the International Psychoanalytic Association Green argued that it was no longer possible to think in terms of welding new pieces to an existing theoretical core. He emphasized that the 'perception of the change that is beginning today is that of a change in the analyst' (quoted in Rycroft 1985).

Another critical remark is that psychoanalysis is so distant from the body and its central place in human intimacy that the whole method can be dismissed as artificial. However, in regard to prenatal studies importance might be given to a 'sensual' barrier, as normally the child in the womb cannot be seen nor heard. There is no risk of transference here but a great risk that the researcher projects into the unborn child his own psychological conceptions via countertransference. But does psychoanalysis really deal with the postnatal person only? It was Freud himself who first mentioned the contact with of father with the child in the womb as a knowledge that transgressed the caesura of birth. It was he who said that psyche is expanded, though it does not know it. He mentioned the cornerstone of biology as a border for psychological insight and suggested that "all our provisional ideas in psychology will presumably some day be based on an organic substructure" (1914, p. 144). Nowadays, this cornerstone is disintegrating. Not all the facts of procreation are discovered yet but many of the physiological reactions are.

I come to some ideas now on the discovery of the child and the discovery of the infant in psychoanalysis and then illustrate a bit the pre-/perinatal realm.

## **The Psychoanalytic Realm**

### *Discovery of the Child*

From the beginning psychoanalysis was under pressure to verify its theoretical foundation, and still today critical voices continue to reproach that psychoanalytic theory is not to be proved empirically, however it is not to be falsified either. Freud said that he observed his patients and studied mental phenomena and claimed that psycho-analysis was a scientific psychology analogous to natural sciences and that the same principles of causality applied to mental phenomena as to physical phenomena. He even adapted his language to that of natural sciences.

Early in psychoanalysis the child became an object of interest (Freud: *Analyse des kleinen Hans*, 1907) but not so much in himself as in verifying the theories of the traumatic, neurotic childhood-background of the adult patient. The discovery of transference fostered this process, e.g., a child/patient feels for his parents/analyst. So we find many generally small remarks and observations on children's behaviour when looking through *Imago* or *Internationale Zeitschrift*, as for more than a decade Freud had urged his pupils to collect especially observations on the sexual life of children. First steps in child analysis started in 1912 with Hermine Hug-Hellmuth, however, this approach was meant as psychoanalytic pedagogics and part of it remained in this discipline until today through the teachings of Anna Freud. Thus, in some way the child served even in psychoanalysis nearly a century as a 'transitional object', an object to approach the former relations of the neurotic adult and an object to give structures to a non-disturbed adult. The child's play with an object on a thread (Freud 1920, GW 13), the first mention of what Winnicott later explored as the realm of transitional objects, gives an image to the thread of thoughts in psychoanalysis too. Maybe one day we may dare to discover that, when alone, the child delves into the depth of his prenatal knowledge, helped by some transitional object and that we may borrow this thread of the infant as a 'common thread' which brings together prenatal experiences of the umbilical cord and/or the placenta, mother and child. Freud attached the thread to the mother's coming and going, which meant a big step in the knowledge of transference. Although on another level the child's play might re-find an original relation to the intrauterine life. We know from other cultures the importance of the placenta and the umbilical cord, that they are regarded as siblings of the child. This is another transfer. So we might say that the child, when alone, remembers his siblingship in play with a transitional object which in fact was inside with him and outside of him.

As we know from the observations in sonography and child analysis done by Piontelli, children keep their prenatal memories very clearly until the age of four. Life becomes structuralized then and defends the early memories, and so we 'forget'.

With this image in mind, if we take psychoanalysis as a motherlike body for the conceived child of prenatal studies we find more reactions of incompatibility than of acceptance, as if the immunity systems do not work in the right way. So the body of psychoanalysis reacts with expulsory actions to such a child, to such a knowledge, to keep the true body of the structure.

### *Discovery of the Infant*

Ferenczi's paper on "Entwicklungsstufen des Wirklichkeitssinns" written in 1913 was one of the first psychoanalytic papers on infant observation. Melanie Klein's theories on early hatred and love followed. After this interest in the early experiences of the infant there is a gap until Winnicott's rather differently structured observations of mother and infant followed together. Winnicott said that the infant acquires the illusion that there is an external reality that corresponds to his capacity to create. Rycroft commented this idea:

In Winnicott's view health and creative living depend on the establishment of a third 'transitional' or 'intermediate' realm in which the subjective and objective are fused (to remain undifferentiated). In this transitional area, objects are felt to be parts of both internal and external reality . . . To the extent that this illusion is successfully created and premature,

disillusionment is avoided, the individual will feel at home in the world and have a creative relationship with it (Rycroft 1985, p. 145).

Winnicott described traumatic birth experiences as a basic matrix of experience (1958). It is especially psychosomatic pain and persecutory feeling which he regards as important hints to traumatic birth experience.

Bion gave illustrations of a "protomental" life prior to birth but in communication with the outside. The British school of Child Psychoanalysis in fact put the infant observation during the first year of (extrauterine) life into the curriculum as a "must". But as a "must", the image of the dimension observed faded obviously; within some decades it never really evoked discussions on prenatal life nor on ways of birth nor on prenatal communication of the infant with his mother and father. The return to Freud's postulation of primary narcissism brought forward the theories of Mahler and Pines and of Tustin on autism. Psychoanalytic theories were for a long time attached to their teachings. It was only in 1991 that Tustin revised her concept of narcissism in autism and added that birth experiences often might be a trauma for mother and child to establish an amalgamating clinch between both and leave the child with a shocking loss of omnipotency whenever bodily separation is observed, so the child reacts with automatic, psychochemical and autistic reactions.

We see psychoanalysis nowadays concerned with actions but more with reactions of the infant, e.g., in the taking over of experimental observations of infants done by non-psychoanalysts to be empirically provable. Some of these findings evoked new discussions, e.g., the "sense of core-self" which Stern found in the review of experimental data on the infant (1985) and it gave space for a debate on old psychoanalytic theories. For a long time psychoanalysis underestimated the abilities of infants and, as Dornes put it, overestimated them, ascribing to them the capacity for complicated psychic operations. What he meant by 'complicated psychic operations' are hallucinatory wishfulfilment, grandeur phantasies, projective identifications. Zuriff, too, questioned the overestimation of infantile reactions which do not allow acceptance that they really experience one self or another. However, Zuriff admitted that the infant may experience both during the symbiotic phase and may experience borderlessness and melting as well as he may realize cognitive differences.

How little is in fact known about the newborn infant shows the little knowledge psychoanalysis has even about the infants' mothers, though many psychoanalytic reports mention women who get pregnant during psychoanalytic treatment or who have difficulties after giving birth. It was only Winnicott who thought it noteworthy to discuss fears during pregnancy of possibly giving birth to either a monster or a human child. In her paper, Hendrika Halberstadt-Freud reminds us that really very few psychoanalysts ever mentioned the postpartal depression of a mother – and hardly anybody ever explored or mentioned the distress of the baby of such a mother. 'Naturally', nobody ever discussed the effect of the phantasies of the mother during pregnancy on the baby.

### *Transference and Countertransference*

Freud thought that human beings remain deeply attached to their parents all their lives and that transference, the patient's relationship to the analyst, shows that fact.

Transference seems to be taken from the early genetically written language which is transferred to the next generation. Countertransference seems to be a rather newly detected register in psychoanalysis, though originally it might be of the same age as the human being. In psychoanalysis, Ferenczi pointed out early to the fact of countertransference and elaborated his technique on it though not calling it by the technical term. Psychoanalytic papers of the 1990s are full of ideas on relations in psychoanalysis and of ideas on countertransference as a means to understand transference. Countertransference, on the other hand, can be said to result from successful projective identifications. It is questionable if we reckon it as a working tool or better as a means of human communication.

Kafka once described a fight: He has two opponents, the first one presses him from the origin, the second prohibits the way forward. He fights with both of them. In a certain way, the first opponent helps him to fight the second as he wants to press him forward and likewise the second helps him to fight the first one because he drives him backward.

This may be a useful illustration to bring forward the problems of psychoanalysis and likewise the problems of pre-/perinatal life and studies and their problems with each other. Given an image of a fight, possibly not every image of transference meets an equal image of countertransference. Often the thread of communication is cut prematurely, while phantasies behind are outgrowing the other too much or, misunderstanding comes by simply not understanding the transfer.

## **The Prenatal Realm**

When we look closely at the writings of the psychoanalysts who bring new ideas to the psychoanalytic movement, I suppose we can always trace back to ideas on prenatal beginnings of relations. As Janus demonstrated on Freud's "Mass Psychology and Ego-Analysis" – and in another paper of Winnicott's writings, too – the proximity to the prenatal realm might be obvious:

... shows that the hypnotic nature of the group/leader relationship can nevertheless be traced back to the early relationship with the mother before and after birth. This serves as a stimulus for the psychoanalytical theory of culture, which, as a result of the negative imago of the mother and the forces at work in early relationships being mythologized, is at present going through a period of stagnation (Janus 1994, p. 435).

Or as I tried to show on Bion's thoughts, at a certain moment the barrier between pre- and postnatal experiences fades. Bion, for instance, had fully integrated the prenatal dimension into human postnatal life, though not claiming to have discovered a new approach; neither did Meistermann claim new discoveries but just adapted theory to embrace her new findings.

### *Discovery of Birth / of Early Abuse*

It is a pity that the thread to the prenatal experiences followed the thread of psychoanalytic explorations insofar as the aberrations again gave way to normal experiences, which then were hardly discovered as there were so many aberrations and abuses confessed. It is quite the same disaster which is explored in pre-/perinatal studies. The abuses are overwhelming and hardly give way to the normal relation.

Misunderstandings are the rule, lots of tried abortions are reported, and Eliach-eff in her book on psychoanalysis with very young children started with children neglected by their mothers and sick from that neglect.

We find another approach in the book of the French group *La Cause des Bébés* edited by Marie-Claire Busnel. Here, papers of a different type are collected scientific beside observations of parents and pediatricians mostly on the normal reactions of the infants. For instance an observation of how a new born baby recognized the voice of his mother and turned his head to her while the mother was not sure which of two babies was hers. Or the report of a doctor who saw a 2-day-old baby which cried vehemently in his waiting room but stopped crying in his parlour. During the next months this behaviour continued until the mother remembered that in the third month of pregnancy she had entered the building once to see a social worker on another floor because she had thought of abortion. The baby listened attentively to her confession and since then did not need to cry any more when entering the building.

To sensibilize people for pre-/perinatal facts, I suggest it might be more helpful with papers like the ones just mentioned. There need not grow an immediate countertransference in regard to the facts reported, as it happens with reports, on great suffering over years due to conflicts during pregnancy and birth. There is evidence that most people have suffered during the earliest life span and hardly dare to transfer feelings to disastrous prenatal events when they are confronted with it.

### *Discovery of Procreation*

Procreation generally is understood biologically, thus mainly psychological insights will become confirmed by biological discoveries. As the prenatal child cannot talk to us in a way we can understand, we must rely on the attempts of children and adults to talk about their intrauterine experiences. Meistermann points at the fact that procreation is not observed psychologically by the human couple. The process of procreation works in darkness and unconsciousness. As we know, meanwhile, sperm and egg have a direct relation before procreation and choose each other, elements in the liquid of the egg give signals to the sperm to approach the egg.

All events of the past, especially those intensive events as procreation and pregnancy, are imprinted into the bio-psyche developmental structure. Later on they often show themselves in psychosomatic reactions. During the period of maximal sensibility of the fetus in uterus, the first patterns of memory and of behaviour are composed. They are not known consciously. However, during psychoanalysis, when the analyst sensibilizes the intuitive abilities in himself and in his patient and slowly turns to an animalic understanding, there develop imitative and identificatory interactions between patient and analyst which are similar to those typical for mother and child in the earliest lifetime. Thus, the patient can display, together with his analyst, a reconstruction of the experiences and emotions of the earliest lifetime, he can re-animate them and re-experience them with the analyst (Meistermann 1991).

Not knowing each other Joanna Wilhelm in Sao Paulo nearly experienced the same in her analytic work and developed the theme in her papers in the 1970s. She came to view the psychoanalytic session as an encounter of two minds following the biological model of conception with the integration of the two cells in one.

The whole process of our biological conception, starting with the experiences of the two individual cells, sperm and egg, is important on a protomind by means of cellular memory. These imprinted individual patterns produce a basic unconscious matrix which provides the raw material for the production of unconscious phantasies. There is an effective and archaic link between the soma and the psyche (Wilheim 1995).

Raffai in Budapest gave proof that body sensation is the language of prenatal communication. From case studies he has drawn that schizophrenia has prenatal roots which can be originated from the disturbance between mother-child bonding. When libidinal bonding is not possible, a mother cannot relate either to her own body or to that of the child.

John Sonne proposed an embedding of the new prenatal science into the accepted western sciences:

There are rewards for taking the psychoanalytical approach to understanding symbols and symptoms to greater depths, and applying it to examining intrauterine life. Similar rewards have come by doing this in the fields of archeology and geology. For example, Schliemann discovered the ruins of Troy from reading a story. From a psychoanalytic exploration of worldwide commonalities in religion, myths and legends, plus evidence from geology, architecture and astronomical records, Velikofsky (1950) deduced that worlds had collided in the not-too-distant past in a catastrophe that shifted the earth on its axis. If postnatal analysis can be likened to archeology and digging underground, a view Freud often espoused, prenatal analysis could be likened to oceanography and submarine exploration (Sonne 1994, p. 257).

### *Discovery of Relations*

The Italian study group of Ancona et al. in Rome give a group paradigm for the study of prenatal life.

From a biological perspective conceiving is a collective phenomenon. It is true that only one male cell will be able to enter the ovum, however that single spermatozoon can get in, thanks to the capacitation function acted by the powerful crowd of all the other male gametes. . . . From a psychological perspective we find the same situation. The conception of a baby becomes possible only when a whole set of syntonic stimulations by a group of meaningful parental figures has psychologically 'capacitated' the parental couple. Our understanding of human conception as a collective phenomenon explains why we organized an interdisciplinary group. . . . The observation of prenatal life cannot be founded indeed on the diadic setting of the classical psychoanalytic relationship (Ancona et al. 1993, pp. 40–41).

Besides the interdisciplinary group, the Italian researcher team apply for the results of psychoanalysis and ethnopschoanalysis to be taken into account. An individual is left to his subjectivity only and to his countertransference, which might be best, however, here, is shown as aberration. The team illustrates in a case study how the sonographer's professional capacities may lessen through his own countertransference so that he risks acting out and materializing the patient's unconscious instead of the patient's anatomy (1993, pp. 43–48). Piontelli taught us the new possibility of combining medical and psychoanalytical knowledge within group work on the screen, though not diving deeply into it.

Veldman with his "science of affectivity" stands against a world of effectivity. Psycho-tactile contact seems to have been repressed in western cultures and left under- or non-developed. Surely, most pregnant women suffer from this fact and have tried to change the bad conditions for a long time. Haptonomy itself is in the

strange position that it resembles in some way the early experiments in analysis done by Freud – to put his hand on the patient's forehead to support the flow of associations – thus, it cannot be easily accepted by psychoanalysis. On the other side haptonomy shows very real and strikingly visible what intense kind of contact is possible when the hand makes the child react in the uterus. That's finally, we may assume, what psychoanalysis wants to become ensured from the experiments with infants that they are human beings.

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