

FIRST INTERNATIONAL TRAINING PROGRAMME
PRENATAL BONDING (BA) CURRICULUM

*The Soul's Cord - A Method for
Encountering the Unborn*



Training is conducted by
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Gleisweiler, Germany

Prenatal Bonding (Bindungs-Analyse by Raffai) opens a window to the womb and helps to create an intense bonding between mother and the unborn baby. This method is at the same time an empowerment for the mother and the fetus and a great help for a full-term pregnancy and for giving birth much more easily. After birth the baby is easy to nurse and is in a solid attachment to his parents. The child has a remarkable degree of self-esteem and full access to its personal potential. - Based on extensive research in Psychoanalysis and Pre- and Perinatal Psychology and Medicine, the Hungarian Psychoanalyst Jenoe Raffai, PhD developed this ground-breaking strategy to support pregnant women from the early beginning of gestation till birth. More than 7000 cases in Europe and USA have been facilitated, researched and carefully evaluated since 1995 with outstanding results for physical as well as emotional maturity of the babies.

Prenatal Bonding (BA) is the most extended general health prevention for a future generation available till now.

Registrants are invited **from all fields associated with pre- and perinatal psychology and medicine** as infant mental health, clinical and developmental psychology, clinical social work, early intervention providers, psychoanalysis, obstetrics, midwifery, doula, nursing, pediatrics, family medicine and related professions.

Dates: Starting **December 4 to 7, 2017**, following the APPPAH-Conferences in San Diego
Second training is conducted in Germany (South of Frankfurt/M) February 16 to 19, 2018
Location: San Diego (2017), **Gleisweiler (2018)** - 2 additional 4 day trainings to be announced
Tuition fee: 1580.- € per 4 days in the US, 600.-€ per 4 days in Germany.
For further questions arrange a meeting with Gerhard Schroth or call him **+49 175 161 1233**

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*Pathways to Prenatal Wholeness: Integrating
Healthcare Disciplines in a 21st Century Dialogue*

September 16 & 17th 2016

Bastyr University, Kenmore, Washington



**The Impact of Prenatal Bonding (BA) in the
Prevention of Postpartum Mood Disorders,
Gerhard Schroth, MD, Gleisweiler/Germany**

Gerhard Schroth is Director for Prenatal Bonding (BA) Trainings for the United States. He will be presenting his talk on stunning effects of Prenatal Bonding (BA) in the Prevention of Postpartum Mood Disorders.

A window to a complete new understanding and treatment of PPMD will be opened, which results in less than 1% of mothers suffering from postpartum depression. Also preterm birth can be reduced from 12% to less than 1%, saving preterm babies from challenging experiences in the NICU and billions of dollars for medical treatment. Birthing is much more natural with less pain, less birth injuries and less interventions needed.

Since the inception of Prenatal Bonding (BA) by Jenoe Raffai in 1995 more than 7000 cases have been facilitated worldwide with extraordinary physical and emotional maturity of the babies. Mothers and babies have a solid attachment from the beginning and nursing is greatly improved. This experience provides mothers, fathers and babies with great self-esteem. - We know about the critical effects of Prenatal Adverse Childhood Experiences. The powerful program has the potential of changing the perceptions of women's pregnancy experience as rewarding, empowering, and healthy. 12 facilitators in the US have been educated to work with families. A new training program will be starting in **2017** after the **APPPAH Conference in San Diego**. (see back page)

Prenatal Bonding (BA) in the prevention of Postpartum Mood Disorders

- One in five pregnant women experience depressive symptoms
- Postpartum Mood Disorders are largely underestimated (19/%)
- PPMD can be diagnosed already during pregnancy
- Change in naming as PERI-partum Mood Disorders is more accurate
- Careful witnessing of initial response to pregnancy of both partners
- What are the motivations of the partners involved in the pregnancy
- Myth of "blissful motherhood" and denial of conflicts in society
- Lack a maternal tradition in modern society
- Screening by Whooley questions and Edinburgh Depression Scale
- Upcoming emotional and physical changes must be aware and coped
- Transgenerational transmission of trauma largely underestimated
- Psychotherapy has contributed to understanding underlying conflicts
- Regular medical care is often unprepared for detecting PPMD
- Some Birthing Classes do not focus on emotional changes in partners
- During delivery unresolved conflicts can create somatic impediments
- Unaware conflicts in mother, midwife and obstetrician can confluent
- Depending on proceedings prior traumas can be restaged during birth
- Prenatal Bonding (BA) can create a coherent narrative of family ties
- Baby sessions pave a emotional pathway between mother and baby
- Body-awareness, baby-awareness and intuition are empowered
- Letting go and the transition to the outer world are well prepared
- The pathway to the transition "just in time" is well prepared
- The flow of birthing close to term is undisturbed by medical guidance
- Mother and baby have their "dance together" to pass the narrowness
- Both know each other confidently from the first moment after birth
- Evaluation of 130 cases after PB(BA) reveals no PPMD (25 expected!)
- Risks of antidepressant medication can be circumnavigated

12 COMMON RESULTS OF PRENATAL BONDING (BA)

- The mother's *inner perceptions* are well attuned to her pregnancy and the unborn. She has access to her own as well as to her baby's wisdom.
- Her natural *female capabilities* are empowered by Prenatal Bonding (BA) and create greater assertiveness and security during childbirth.
- Mother and baby become a good team experiencing *less anxiety and pain*.
- There is *less effort* in giving birth and fewer complications.
- The need for *obstetrical interventions* goes down significantly.
- *Caesarean sections* are *decreased* substantially by Prenatal Bonding (BA), natural vaginal birth is usual. Thus birth is safer and less costly.
- Pregnancies treated by Raffai's method *premature birth rates* were less than *0,2 percent* - as compared to an average of *9,2%* in Germany and *12%* in USA. The general experience tells us that most babies after Prenatal Bonding (BA) are born within 5 days around the due date, without any medical intervention.
- *Birth trauma* is of *low degree* as indicated by natural, round shaped heads and *little crying after birth*, excessive infant crying is unknown after Prenatal Bonding (BA).
- The babies are curious about the world, emotionally stable, socially mature and have complete *access to their personal potential*.
- There is less sleeping during daytime, but *longer and deeper sleep at night*, with few awakenings, so parents suffer less from sleeping disorders.
- Babies and children are *easy to communicate* and dealing with them becomes completely intuitive. Babies have a lot of *self-awareness and self-esteem*. They are patient and understanding of their parent's intentions and needs, as well as their own.
- *Postpartum depression* is expected to become a thing of the past, as in the sample of over 7000 by Raffai and his colleagues facilitated pregnancies worldwide far less than 1% postpartum depression was reported. On average about 19% of mothers experience postpartum depression for several months after birth.