



## PRENATAL BONDING (BINDUNGSANALYSE BY RAFFAI)\*- INTRODUCTION

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**ABSTRACT:** Prenatal Bonding (Bindungsanalyse by Raffai) provides the possibility of creating an intense bonding between mother and fetus, of being witness to the development of the fetus in the womb and realizing the early growth of the personality. The same way any prenatal dysfunctions can be recognized including the capacity for immediate healing. In this respect the method is at the same time an instrument of pre- and perinatal research, an empowerment of bonding between mother and fetus and a great help for giving birth much more easily. After birth the baby has a remarkable degree of self-esteem and good access to its personal potential.

**KEY WORDS:** Prenatal Bonding (Bindungsanalyse by Raffai), dialogue with the fetus, results of Prenatal Bonding (BA), caesarean section, postpartum depression.

\*In the following the abbreviation: *PRENATAL BONDING (BA)* is used equivalently to the term *PRENATAL BONDING (Bindungsanalyse by Raffai)*

### THE INCEPTION OF PRENATAL BONDING (BA)

Prenatal Bonding (BA) has its origins in the early 1990s, when Dr. Jenoe Raffai, Hungary did psychoanalytic basic research with young psychiatric in-patients. Subsequently Raffai developed out of this a preventive method which helped mothers to create a far deeper bonding with their unborn baby than conceivable until now. Mothers can as well experience inner boundaries between themselves and their unborn babies, which is substantial for the emotional maturation of the baby.

Raffai on his own has provided more than 4350 women with Prenatal Bonding (BA) in Hungary since more than 30 years. He carefully documented the outcomes by observation and found that the method has a profound effect on pregnancy and childbirth in general and on the development of the child's personality (for details see figure 1). Raffai noted that Prenatal Bonding (BA) is intended primarily as a facilitating process and may be applied by many professions dealing with pregnancy, giving birth and the postpartum period.

## **THE METHOD OF PRENATAL BONDING (BA)**

Prenatal Bonding (BA) starts at about the 20th week of pregnancy. The following setting is required: The pregnant woman lies on a comfortable mattress in a relaxed position with the intention to focus on her inner perceptions, often induced by a relaxation process. Sessions start with centering on awareness of breathing, body feelings and emotions. By focussing on her awareness the facilitator helps the woman to come more and more into contact with inner images, as known from dreams. Images are seen to be symbolizations of words, body feelings and emotions. Gradually the images become more frequent, creating a flow of information and communication between the mother and the unborn and this creates the "soul's cord". Mothers find out how their babies are developing, what they are feeling and needing, even about things that might be threatening or dangerous. It is much easier and more impressive for mothers, as well as less expensive, less invasive and less dangerous for babies to gain information this way, as compared to ultrasound or medical tests. The most powerful effect: Prenatal Bonding (BA) enables an inner dialogue with the unborn.

## **IMPROVEMENTS IN THE PREGNANCY**

Raffai recommends that the pregnancy and the development of the baby has a better outcome if a inner separation between the pregnant woman and her own mother has taken place, which concerns the growth of the pregnant woman from the role of the "daughter of her mother" to the "mother of her baby". Prior to birth a second process of separation is facilitated by a number of explicit steps. For example, the unborn is invited to say goodbye to the intrauterine world of his mother. Or the mother and baby speak separately about their recollections during the pregnancy. The story, the mother tells, is partly or sometimes completely different to the experience, the baby tells. This substantiates that the baby has its own mind, perceptions and experiences and makes its own decisions. At the end giving birth itself is simulated in a "final rehearsal" as a mental training. The mother-to-be is invited to let go and open herself for a new step in her life, to explore inner obstacles to that new family constellation. So inner hindrances that could have evoked a somatic tenseness during giving birth can be eliminated a long time in advance. Depending on the starting point about 20 to 25 sessions are needed for the whole process of Prenatal Bonding (BA).

## **EFFECTS ON THE BABY**

Babies who are communicated with Prenatal Bonding (BA) feel themselves to be seen and heard at a deep level. This makes them feel respected as they are and for their unique personality and situation. The existence of a kind of personality even during the pregnancy has not yet been taken in account until Alessandra Piontelli's research on twins in utero by Ultrasound assessment in 1996. The very special communication between the mother and the unborn baby by the Prenatal Bonding (BA) facilitation creates a situation of a "safe container" and in addition, the reflections of the baby's feelings and perceptions by the mother allows for the fetus to expand and express itself, so a profound self-esteem can grow. The development of the brain is intensely stimulated and the interest and trust of the baby in the outside world are empowered.

## **THE IMPORTANCE OF FATHER AND SIBLINGS**

The important role the father has in the process of Prenatal Bonding (BA) should be emphasized. The research of Prenatal Bonding (BA) has proven that the unborn baby is

aware of the father and significant others as well. So the father also has the chance for an early bonding with the unborn. He is important to the unborn baby right from the beginning and his role is to provide a "social womb" for his pregnant wife. This means creating a safe space for the pregnancy, allowing the mother to encounter the extensive changes in her womb and body and widespread changes in her life as well. For that very reason the father is as well invited to participate in the sessions as often as possible. In addition the father is instructed to regularly have his time with the unborn baby e.g. by touching the womb and singing lullabies or poems. In similar ways siblings are invited to contact the baby in the womb. Thus long before birth a counter wise familiarity is built preparing the baby's arrival in the "new world".

## 12 COMMON RESULTS OF PRENATAL BONDING (BA)

(figure 1)

- 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 6750 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.

## **Comment:**

As full implementation of Prenatal Bonding (BA) can largely prevent manifest peripartum depression, this represents fundamental progress for the pregnant woman, the unborn child, and the respective family. Furthermore post partum, the appropriate and loving care of the baby that arises from Prenatal Bonding (BA) is the optimal way to prevent psychological illness in this new generation. It can be assumed that for the first time, the taxonomy of the Jenoe Raffai method has succeeded in providing an appropriate psychodynamic explanation for the nature of peripartum depression.

On the basis of my 40 year treatment-experience as a psychiatrist and psychoanalyst, I venture to propose that Prenatal Bonding (BA) not only represents an excellent method of preventing mental illness. In addition, Prenatal Bonding (BA) may open up new dimensions in terms of both our understanding of major psychiatric illnesses, and the chances of recovery from them.

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