

REPORT FROM CONFERENCE

# Contact between mother and child promotes health

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## **MOTTO:**

“Depression arises when the basic need of love and harmony in relationships is not satisfied. It is a hunger, desire for something that one did not get in the necessary amount as a child. I see causes of depression also in the disintegration of multi-generation families, divorce rate, women’s employment, technisation and seeming rationality of society. Depression is a pathological reaction to a loss where the healthy reaction would be anger and sadness. Separation of a mother from her child alarms the panic system – from screaming up to a paralysis of the child, which is a natural defence mechanism, such as when an animal does not want to draw the attention of a predator towards itself; paralysis saves its life. However, the consequences are exhaustion and loss of serotonin leading to depression and death of neurons. It is necessary to support and nurse the contact attachment between a mother and her child. “Crying it out” leads to an exhausted resignation, which can result in depression. Contact leads to mutual acceptance, basic trust and object stability.”

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## INTRODUCTION

When someone in general gives up their competency, they often do so because they are threatened and insufficiently supported by their surroundings, primary family and society, they are not in contact with their primary resources, or their resources are insufficient. In this essay, I would like to discuss the possibility of support for women and their children, which was an issue which run through the whole 'Prenatal Child Conference 7 – Attachment and Violence' like a red thread.

According to family therapists, the demographic behaviour of mothers and daughters has been changing since the half of last century<sup>1)</sup>. If we regard motherhood as a natural and intuitive ability, there is no strategy in society that can threaten it. However, if we see motherhood as a learned and culturally determined behaviour, then motherhood is significantly endangered and is being threatened by modern society. Women are beginning to seek anthropologically proven resources of intuitive maternal skills and not only for the reason that motherhood is threatened by a huge pressure on individuality, pregnancy by medicalization and parenthood by media publicity.

I could write long stories about the extent to which the maternal behaviour of mothers of today's mothers was threatened by totalitarian ideology. This topic is often present at the psychotherapy sessions with young new mothers and their mothers who come to my office of clinical psychology and psychotherapy. The learned maternal behaviour of today's mothers' mothers is affected by totalitarian patterns. In childcare, these are represented mainly by separation in early childhood and the difficult position of women in totalitarianism when caring for their families and with limited options of growth. These are institutional patterns of behaviour – putting children into care of strangers, i.e. observation points for newborns in hospitals, nursery schools for very young children, hospitalisations with separation from parents, summer camps, etc. Totalitarianism also strongly disrupted feeding patterns. Even in 1960s resources for paediatricians directed that newborns be left hungry for a day or two after birth and those who were screaming a lot, or the irresponsive ones were given several teaspoons of glucose<sup>2)</sup>. What could such starvation of newborns cause to their delicate and immature brain structures and the following traumatic reactions?

Hormonal contraception, which has significant effects on women's sexual behaviour and experience, can also contribute to changes of maternal behaviour. These changes can also be caused by insufficient or even non-existent support of intuitive womanhood from society, moving women's attention to historically men's spheres of competence, acceptance to influence resources (professional success, obtaining financial sources) and many others.

Throughout history and even now, there have been women, who are able to manage both motherhood and obtaining sources, with support from their immediate families and partners. However, this is a way for only a small number of women. Other women are happy to return to intuitive maternal resources in

their nuclear families. Not only from empiric experiences, but also from medical research do we know that intuitive motherhood, i.e. support of early contact and support of development of secure attachment, is the most beneficial source of behaviour and experience for individuals and society alike<sup>3)</sup>.

Support of early contact is the healthiest and the most desired feature of obstetric care<sup>4)5)6)</sup>, and Czech and hopefully also Slovak post-totalitarianism systems of family care are slowly beginning to learn this. If a system (which is always made up by individuals) can take care about the mother, i.e. the child and his family as one unit, we can expect support of self-confidence and self-respect, thus a healthy society. This kind of care is necessary not only in hospitals and not only for healthy children<sup>8 - 24)</sup>. Children who are sick, born prematurely, dying and dead need even greater support of contact with their close relatives and its healing effects<sup>25)</sup>. Certainty is also created by a sufficient number of rituals<sup>26)</sup>. Today there are already individuals in the health care system who recommend to the parents of dead children a christening, a funeral and mourning and support them in their burdensome way, which is healthier than isolation and ignorance of experiences of loss leading for example to psychosomatizations and increasing risks of abortion and maternal death rates<sup>27)</sup>.

Separation has always been used as a means of manipulation with individuals and the whole society. As an active method for creating easily-manipulated individuals, it was used mostly by totalities, the Nazi campaign used separation as a medical methodics<sup>28, 29)</sup>.

Isolation is the worst punishment for both children and adults. It is health-threatening to deny someone the contact with a loved caregiver.

Neuroscience sees the cortisol hormone, which the body produces when in pain or separated from a loved – reliable attachment figure, as leading to permanent damage of brain, emotions and forms of behaviour and establishment of relationships.

The dominant role of a mother and her care for her prenatal child is already necessary during pregnancy. The stress that a mother experiences during the first three months of pregnancy is the stress that influences the prenatal child's development the most. This is the period when a pregnant woman in prenatal care undergoes complicated tests that are focused on possible elimination of a prenatal child with possible developmental defects by killing it thus excluding it from life in society<sup>30)</sup>. The knowledge that the stress the mother experiences in pregnancy affects the prenatal child's development and subsequently the child's adaptation ability after birth is not limited only to neuroscience. Cortisol – the stress hormone, which a stressed mother's organism releases into her body, passes through the placental barrier and affects the prenatal child's brain receptors. Children whose mothers are stressed show hypersensitive reactions to stress. In the period around birth, the mother and her child establish a bond through the biological structures of bonding with the help of the unique hormonal readiness, when oxytocines, opioids and other "positive" hormones are released. It is thus an unrepeat-

able time when it is normal for the newborn child to be in contact with its mother, always and under any circumstances<sup>31</sup>).

It is a known fact that a continuous care of one caregiver for the mother and her child as one unit during the whole pregnancy, birth and postpartum period brings a lot of benefits, not only health ones, in comparison with a random caregiver in an institution. These are: less interventions, less operations, better health and also financial benefits on the mother's part and this kind of care mainly increases the mother's competency to take care of her child together with a higher extent of breastfeeding and maternal satisfaction<sup>35</sup>).

In Czech and Slovak health and social care systems I am mainly faced with unsatisfactory routine when caring of mothers and their children separately, with the caregivers' unwillingness to change the routine of traumatising and traumatic – pathological patterns of behaviour and thinking and also with the caregivers' own parental incompetency, which is the cause of their inability to support parental competency of others and then the vicious circle is created. That is why it is very desirable for medics and social services workers to demand professional supervision and treatment of their untreated emotional resources. It is desirable for medics and social services workers to demand a safe guidance and the possibility to safely contain their feelings in order to prevent the generational transfer of “institutionalization syndrome”<sup>32</sup>), i.e. handing individual competences over to institutions, which is a strong totalitarian and post-totalitarian phenomenon.

Institutionalization syndrome is on the part of the system of obstetric services – and not only there – a natural defence mechanism and an effort to preserve something that has been considered a standard for a very long time. Most of us were separated from our mothers after birth in an institution and the birth was influenced at least by routine, at most by medication and health-threatening processes, which today's science does not see as beneficial for health, and we were looked after by strange people. Medics and social services workers were also born this way. Women working in helping professions gave birth this way and experienced separation and were separated from their children as mothers. Every day, medics and workers in social services take care of people who were separated and they demand separation and often even exact it.

It is very difficult to admit a mistake in one's lifelong conduct. A system full of traumas and fear opens a way for manipulation. Where there is fear, there is also aggression.

These days are favourable to transformations. I feel that people generally assume more responsibility for themselves, even for their health. Medic and social services professionals who are used to stereotypical totalitarian patterns can thus feel threatened; it is only natural.

People are in contact with a variety of sources of knowledge and because of the availability of sources of information medical doctors are losing their “wise books” and are confronted with opinions of their patients who seek a safe relationship as a part of assuming responsibility. This can constitute a problem. Caregivers com-

plain to me about either too active and knowledgeable patients, or too passive and dependable patients. Where is the problem, then? On the part of caregivers or on the part of care recipients? The problem is on our part, because we, as medics and workers in social services, are and shall always remain professionals, whose duty is to care not only about the highest rational expertise, but also about the highest emotional anchorage.

Medics and workers in social services are professionals and their task is to cope with their clients' changes in behaviour. And this is where supervision seminars or individual supervision sessions can help. I feel that a great problem are untreated emotions of people in helping professions who are exposed to great pressure on a daily basis and if they are unable to cope with stress, then everybody in the system is threatened – mostly the recipients of care. Where a dialogue starts, there also looking for some sense starts. It is always advisable to learn dialogue because it makes it possible to search for some sense. I see the inability to lead an open dialogue with care recipients as a significant weak point of health and social care systems. Feelings of danger are then very intensive at all involved people.

### **WHAT ARE THE OPTIONS FOR IMPROVING THIS SITUATION?**

I see a certain connection between caregivers and the support of confident maternal role. This may be the point where we can look for possibilities of improvement. Support of intuitive motherhood, support of healthy emotions, responsibility for individual personal responsibility and maternal self-respect and its strengthening is a possible way of growth.

This is an interesting fact – I received an invitation to a conference on the topic of women's health. The doyens of the conference were men with many medical titles but with no maternal or women's experience<sup>33</sup>). At another recent conference, the topics were joined into referring about experiencing post-trauma and about the development of secure attachment<sup>31</sup>). This is a great challenge for us – professionals working with emotions – how do these “holes” in our attachment relate to other traumas which are passed? How did totalitarian upbringing in institutions affect us all and to what extent does our society suffer from institutionalization syndrome manifesting itself as a trauma with demonstration of attachment avoidance or anxiety? Or even disintegration?

Motherhood is based very much on instincts but it is also influenced by social expectations. And that causes numerous misunderstandings today. Our grandmothers understood the rules of nature and knew that it is necessary to plant a seed and then wait until a bulb and after that a whole plant grows. That it is necessary to take care about the whole process of growing and respect it. Today, women are vulnerable – at birth, after birth, as new mothers: they want to be protected by other women and need their men to provide safety, but the spirit of this time nags them – especially through mass media – to be fit as soon as possible and back at work, or at least at parties, or to be perfect women. This causes strong conflicting

tractions in women's psyche and weakens them. New mothers and their children need the support from experienced maternal figures, but in current society, the only support available is from anonymous institutions and the virtual world.

Women's instinctive behaviour is regulated and suppressed since early childhood. Take advertisements for sanitary towels for example, where some blue liquid is shown instead of menstrual blood. Such pressure results in women being disconnected from experiencing their own bodies. Blood is, and always has been red and it is best for a child to be with his mother, who is supported in her care for him.

The dominating setting in society is the masculine mode of existence, i.e. rationality, achievement, power. If a woman settles for this, she has great difficulty to use her intuitive self.

People can choose the easiest way: look for sources through which they can know motherhood and parenthood among themselves and support each other's behaviour. There is no imaginary society. Women can then become a part of society and they will transform the society by their behaviour and they can do so for example already during the prenatal care of their children and also during birth if they feel and behave competently during the contact with their newborn children. According to empiricism and medical research, skin to skin contact between mothers and their children is the healthiest place and way of care<sup>12, 24, 25</sup>). This contact supports and starts competent maternal behaviour and promotes health of children born at any stage of prenatal age. According to my work experience, caregivers are then able to adapt to such healthy behaviour of women and children.

Anthropologists observing monkey families always report that young and assertive females are the ones that bring changes and their offspring that put the changes into practice<sup>34</sup>).

Post-totalitarian and totalitarian information affected by institutionalization syndrome are malfunctioning, so parents and many professionals turn to different sources of knowledge. This is perfectly natural. The point is to find balance in sources and stay competent in using intuition, which cannot be replaced by any books. Mothers can turn to the behaviour of their grandmothers, or often their great grandmothers, which arose from intuition. Then the mothers can start living their lives with their children in their arms, which is the greatest and most professional maternal competence – to adapt your life to the child in your arms.

Only if we manage to see our incorrect behaviour, are we subsequently able to change it. If we are able to open the sources of empathy, sources of empathic care for children and their mothers, then we will behave in a healthy way in any system of care, health or social. This art is in the hands of every individual, even though today it is very, very difficult to resist the wiles of handing over the responsibility for one's life to anybody. That is where the media, pharmaceutical and food-lobbying groups have great power. However, they can only have as much power as each individual allows them.

I believe, and my experience from psychotherapeutic work supports this belief, that people of all roles and professions are still willing to seek the right way. The

way towards themselves, their children, towards responsibility, self-respect and freedom to respect the opinions of others.

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