

Agathe Israel · Björn Reißmann

Arriving in the World too soon



Brandes & Apsel

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The more concentratedly we try to enter into the inner world of the pre-term infant the more necessary it is to leave behind us every shred of experience we have ever had. Nothing is of any relevance for this encounter. We are confronted with having no knowledge, no experience and this to an degree we would otherwise avoid at all costs. Through the juxtaposition of images, observations and reflections this book tries to help us come as close as is possible to the subjective experience of a baby born before term.

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The Experience of the Preterm Baby
and its Parents in a Neonatological
Intensive Care Ward

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Foreword and Acknowledgements

This book with its pictures and reflections is concerned with the inner world of the preterm baby. For us the following questions were of central importance.

What is the felt experience of a new-born pre-term baby on »re-meeting« its mother, after having lost the mother-child unity before it was physically »ready« to be born? What goes on in the child? What are the experiences of the parents and of those who are responsible for looking after the baby? How can the bonds be reknit across the rent of birth which separated mother and child?

In its pre-birth life the baby is not only simply contained in its mother's womb, it is aware of its mother through all its senses. The waters, the amniotic fluid, reduce the force of gravity so that it can »respond« with movements and is thus capable of undertaking its own »actions«. A first space for experience is created: the start of an inner world. In the course of the pregnancy this space can grow but it collapses through the premature birth of the child. The living physical dialogue with its mother was lost before the infant was ready for the experience. In many small details we show how the baby gradually develops an inner space again. We also point out what may foster or hamper this difficult development.

In this book the interplay of picture and text gives depth to the reader's understanding of the pre-term infant. Björn Reißmann's photographs capture the moments of experiencing. They were made during last year in sequences of observation over several weeks in an intensive care ward

for pre-term babies. The pictures show what is visible on the surface of a pre-term's life in the ward and can naturally not give a direct insight into its inner world but they allow us to sense something of it and invite one to participate in the infant's experience.

The texts by Agathe Israel, are based on observations made at around the same time as the pictures were taken and are founded on the observation methods of Esther Bick. If one wishes to approach the experience of these infants – leaving aside the level of their outward appearance – one has to rely on »observation« of reactions within oneself. Everything that one feels has to be formed into thoughts and words. In doing this the observer creates an inner space in him or herself where the psychic experience of the infant can find a place; this then is communicated to the reader.

What goes on visibly at the surface level of nursing care and infant's reactions is given significance in this way which allows a new dimension of understanding to develop. This in turn leads to a greater depth of understanding and creates space in the observer for experiencing. From this perspective the relationship between infant and adult gains central importance.

We wish to thank all the parents who allowed us to observe and photograph their children. We hope that, in some cases, we were able to support the coming together of parent and child through our sympathy.

We also wish to express our gratitude to the staff of the Neonatologic Intensive Care Ward of the Martin Luther King Children's Hospital in the *Vivantes Klinikum Berlin-Friedrichshain*, who not only met us with friendliness but also sought a real exchange of ideas and were interested in our experience. We are grateful to the directors of the Children's Hospital for dealing with our project in an unbureaucratic manner and special thanks go to Franz Heider, Grit Jahn-Joksches, Brigitte Koual, Suzanne Maiello and Monika Schwab for their observations and valuable thoughts.

We should like to acknowledge the generous support of the *Gesellschaft zur Förderung Analytischer Kinder-und Jugend-Psychotherapie* and finally our sincere thanks go to Roland Apse, who first encouraged us to write this book.

Introductory Note

Around one in every 10 babies enter the world too early. Babies born prematurely are on the periphery of life, in a psychosomatic borderline area beyond what is familiar to us and beyond our familiar ways of experiencing. In babies, too, psyche is present in soma just as soma is present in psyche.

We take in the external appearance of the babies and track their bodily functions on the monitor. But as soon as we realise that beyond the physiological dimension every breath, every movement is also a manifestation of psychological experience, we are lost for words.

We can only begin to guess at the catastrophic state into which the failure of their body has led them, the fear of death resulting from the merciless rupture that was their birth, from being left alone and from their struggle for survival.

The more intensively one attempts to enter their world, the more necessary it becomes to dispense with all knowledge gained from previous experience. None of it is relevant any more. We are confronted with a huge degree of ignorance such as we otherwise seek to avoid at all costs.

Anyone wishing to approach the babies' experience must rely on observation. The effort involved in putting into thoughts and words, and thereby



understanding, the emotions sensed while observing, can bring us a little closer to appreciating the unremitting struggle of these infants, the effort that they have to make every second in simply trying to stay alive. In being there, observing, the observer creates an internal space in him or herself where the psychological experience of these infants finds a place. At the same time, this process transforms the observer's perception.

High-tech medicine facilitates the survival of increasing numbers of babies, although premature birth still represents a high survival risk, especially if the baby is born before the 32nd week of pregnancy and weighs less than 2,500 grams. But what price do they pay for physical survival? The quality of medical care is currently measured by one primary criterion – that of their positive physical state. How is their inner survival taken care of, how is the emergence of psyche in soma supported? There are signs of a change of approach. While follow-up examinations initially focused more on the existence and nature of any damage to organs, in recent decades attention has also been devoted to cognitive and emotional development (Grunau 2002, Ohrt 2000, Heubrock & Petermann 2000). There has been a realisation that a strong connection to the parents could alleviate the extreme pressures that these infants are exposed to. There has also been appreciation of the fact that parental intuition is disturbed by the situation and the bonding process can go wrong, with a lasting impact on development (Sarimski 1992, Laucht 1997).

Very often feelings of guilt, the conviction of having failed as a mother or parent, and fear distort the way the parents see their child and prevent them from reacting appropriately to signs that it is struggling (Sarimski 1997). In our observations we saw just how intensely premature babies seek and need contact, and how enthusiastically they react to those who interact with them. And we also saw how disastrous it can be if parent and child do not manage to make contact and communicate with each other.

The lives of premature babies has been the subject of more detailed research in recent decades and it has become more and more apparent that the foetus does not simply grow like a cauliflower but that experiencing is there from the very beginning. Neurobiological research has meanwhile provided proof that long before intellect and psychological consciousness become operative there is mental-emotional experiencing that accompanies all physical processes, and that sensory and social influences are already being mentally-emotionally processed by the foetus. The amygdala, a neuro-anatomical region that stores the earliest psychological experience »never forgets«. This means that once registered, experiences imprinted in neuronal interconnections can no longer be deleted. But luckily new interconnections can be added and as a result can temper and relativise the earlier ones (Roth 2006). This results in the establishment of neuronal networks that not only have an influence on further physical development, but also create the first internal conceptions of others and the self.

It has also been proved that nothing causes an infant more stress and fear than the sudden loss of the mother (Hüther 2002). This refers to experiences of loss such as separation or long absences to which every premature baby is exposed when it suddenly and prematurely leaves the mother's body.

We must proceed on the assumption that mental and emotional life already exists in the unborn foetus (Lazar 2001). Previous object relationships must already exist before birth, even if the foetus cannot yet draw on an I-you consciousness that is linked to experiences of separation, because it is from the outset a perceiving, sensitive and interactive being. Suzanne Maiello suspects that even while it is in the womb, the baby is exposed to pre-experiences of separation and differentiations. The unborn child admittedly lives in a *world of continuities*, it is incessantly surrounded by rhythms such as the mother's heartbeat, the rhythm of her pulse, her breathing, the consistent temperature of the amniotic fluid and is continually nourished via the umbilical cord. All this happens without