

The Relevance of the Dread of Being Aborted to Models of Therapy and Models of the Mind

Part I: Case Examples

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Abstract

This paper describes how marked positive changes occurred in two male patients when feelings of dread of tunnels, bridges and interpersonal relationships were found to be transference derivatives of an underlying dread of being aborted and a wish to be aborted. Both of these men had a proneness to act out by sanctioning the abortion of their own and others' unborn children. Associations and dreams were characterized by a fear of annihilation in holes or containers and a mental imagery and mental processes of formlessness and timelessness similar to that seen in borderline conditions and psychoses. They were drifting through life, alive but not alive. Little movement had occurred from addressing symptoms in terms of post-natal separation and individuation issues of self, or psychosexual conflicts of desire despite many years of analysis with myself and prior analysts. The long delay in connecting the word abortion to feelings of dread raises questions about countertransference blind spots in seemingly interminable analyses, and the need for models of therapy and of the mind that include a consideration of pre-natal mentation and communication, and the registering of pre-natal experiences as important influences in later life. These issues will be explored in a companion paper (Sonne, 1993) "The Relevance of the Dread of Being Aborted to Models of Therapy and Models of the Mind, Part II: Mentation

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and Communication in the Unborn” (published in a later issue of this journal)

Zusammenfassung

Dieser Artikel beschreibt, wie es bei zwei männlichen Patienten zu entscheidenden Besserungen kam, als Ängste vor Tunneln, Brücken und Beziehungen als Abkömmlinge einer dahinterliegenden Angst entschlüsselt werden konnten, abgetrieben zu werden oder des Wunsches, abgetrieben zu werden. Beide Männer hatten eine Neigung zum ausagieren, indem sie die Abtreibung eigener oder von ungeborenen Kindern von anderen unterstützten. Typische Themen in den Assoziationen und Träumen war eine Vernichtungsangst in Löchern oder Behältern und geistige Vorstellungen und Gedanken von Formlosigkeit und Zeitlosigkeit, wie man sie auch bei Borderline-Patienten und psychotischen Patienten beobachten kann. Sie drifteten gewissermaßen durch ihr Leben, aber waren nicht wirklich lebendig. Trotz mehrjähriger Analyse bei mir selbst und früheren Analytikern, in denen die Symptome als Probleme postnataler Trennung oder psychosexueller Konflikte gedeutet worden waren, war es kaum zu einer therapeutischen Entwicklung gekommen. Es hat sehr lange gedauert, bis die Angstgefühle mit dem Abtreibungsthema in Verbindung gebracht wurden. Dies wirft Fragen über blinde Flecken in der Gegenübertragung bei scheinbar unendlichen Analysen auf. Wir müssen uns ebenso fragen, ob wir nicht für die Therapie und die psychische Entwicklung Modelle brauchen, die die pränatale psychische Entwicklung und Beziehung in Betracht ziehen und die bedeutsamen Einflüsse vorgeburtlicher Erfahrungen auf das spätere Leben in Rechnung stellen. Diese Themen werden in einem weiteren Artikel unter dem Titel „Psychische Entwicklung und Beziehung beim Neugeborenen“ in einem späteren Heft dieser Zeitschrift behandelt werden.

Introduction

In this paper, Part I of a two part study, I shall describe how connecting the word abortion to feelings of dread that had been previously experienced as dread of tunnels, bridges, and various interpersonal situations encountered in everyday life, resulted in a marked diminution of presenting symptomatology, a change in thinking processes, the development of a more solid sense of presence and self-assertiveness, and the enrichment of expressive language in two men, George and Richard. They both had regarded themselves as incurable prior to this connection being made. Their mental imagery and thought processes were characterized by a lack of boundaries and a sense of timelessness similar to that seen in borderline conditions and psychoses.

There was a long delay before feelings of dread were connected with the word abortion, despite several years of therapy with myself and several other analysts. The dread which was attached to other elements ultimately turned out to be an underlying dread of being, and a wish to be, aborted themselves. As a defense against this dread each had a wish to abort or sanction the abortion of others.

George's Analysis

George, a young computer specialist, had entered analysis with the chief complaint that his life was drifting. He was unable to make up his mind about "certain things," one of them being whether or not to finalize his divorce from his estranged wife Ann, "the brightest woman I have ever known." Though separated, George and Ann were still continuing to have an on-going intellectual long distance telephone relationship. Occasional sex during their period of separation had been fairly satisfactory, but when they had lived together their relationship had been mostly platonic because of mutual anxieties about sex. George was concerned about his inability to express deep emotion, his reluctance to get deeply involved, and his inability to have provided Ann with what he felt she needed emotionally. He was distressed that his creativity relative to writing scientific papers was not flowing, particularly concerning his work in developing a computer that could play chess. He was unable to make crucial moves that would advance his career. He tended to procrastinate in various other matters, such as needed car repairs. In addition to concern about his relationship with Ann, George wanted to explore and master difficulties he had in relating to women in general. He was currently involved in an uneasy, ongoing, intense relationship with a woman, Betty, that was marked by repeated suicidal threats on her part, her periodic rejection of George for other men, and placation by him.

During the initial history taking, George reported having a significant recurrent dream that he had had numerous times throughout his childhood, adolescent and college years. In the dream George described his feelings as similar to those he had had when he had realized, during an self-imposed experiment he had conducted, that he could will his heart to stop. He was terrified by the fact that he could do this, and never tried it again. The feelings in the dream were also similar to feelings he had when he suffered from hay fever.

The dream was as follows: "It takes place outdoors in a field. There is a wooden fence down the middle. I'm on one side, or maybe I'm not on one side. There's an indistinct rolling black ball ten feet in diameter. For some reason I think it's feces of some sort. I don't know for sure. I have that feeling. I'm being chased by it, or I'm terrified by it, and am attempting to escape. I don't know if the fence is between us or not – the wooden fence. I can't seem to deviate from a path roughly parallel to the fence and I have this feeling of impending disaster. There's a hole ahead of me which I'm afraid I may be forced into, or which will suck me into it. I don't know the nature of this hole. It's not like a hole in the earth would be. It's roughly black and has the nature of a tornado about it, something dynamic. I wake up about then, before anything happens to me. I have a terrible feeling of dread."

A significant piece of history, relative to the abortion dynamics which were to emerge later, was that George had described himself early in his analysis as a staunch advocate and generous financial supporter of women's abortion rights. His consciously expressed reasons for this position were that there were too many people in the world, and that he respected women. There had also been some other harbingers of abortion dynamics in George's occasional descriptions during his analysis of daredevil experiences in parachute jumping, white water rafting, spelunking, scuba diving, and a period of hang gliding that was cut short after a shoulder injury. At these times neither George nor I originally saw any connection between these activities and abortion.

Noteworthy in George's history are some significant facts from his early infancy. George's father was away in military service for the first two years of Georges life, and George was cared for by his mother, his maternal aunt and his maternal grandparents. He was repeatedly assured by all of them during this period that he was "the only one." George described his mother as controlling, and having the ability to disrupt, discredit or erase his thinking or feeling with tersely expressed "word bombs." He was not prepared for, nor did he have the benefit of, any paternal intrusion into his world, until he was seven months old, at which time he and his mother joined his father near his military base to be with him during a brief leave. George's earliest memory was of his speaking his first words, "No vacancy," spoken during this visit while he and his father and mother were driving along the highway looking for an available motel room.

George's secure yet insecure position as the "only one" with his mother was further shaken at one year of age when his mother left to visit his father without taking George along. While his mother was absent, George was abruptly toilet trained by his grandmother and his aunt. He recalled a terrifying experience at eighteen months of age, when he was left by his mother alone in a barber shop with the barber to have his hair cut. About this same time, George's belief of himself as "the only one" was once again threatened by the birth of a sister, Carol. His sibling rivalry became murderously intense. He abused Carol, and frequently threatened her with death if she wouldn't admire his showing off. One time he deliberately crashed down on her from an upper bunk in a room they were sharing, and another time succeeded in getting her punished for breaking a window which he himself had intentionally broken. The window was never repaired. He recalled at one time his escalating vigorous bouncing play with toddler Carol to the point that Carol had flown off a second story balcony to the ground below. Fortunately, Carol survived unharmed physically.

When George's father returned permanently from military service, George, two at the time, met him by proclaiming, "I am the only one!" to which the father retorted sharply, "Oh no you're not!" George saw his father as "just an observer," who never gave him guidance in life, and who was afraid of both him and the women in the family. George's paternal grandfather, an adventurer and a wanderer like George, and an important influence in George's life, had so repeatedly emphasized to George that he must not get a girl pregnant because it would ruin his life, that George later concluded that his grandfather was speaking of himself and his own experience in conceiving George's father, who was his

only child. George grew up contemptuous of his father, and in later years urged his mother to divorce him because of his alcoholism. Many of his reactions were similar to those described by Stoltz et al (1954) of children whose fathers had been away during wartime.

I shall focus on the last two months of George's three year analysis, and the history and associations centering around abortion. The prior period of analysis was not remarkably different from that of other analyses, with various early childhood issues of self and desire emerging and being dealt with. The transference during this period seemed to be mainly a paternal one. George saw me as an ineffectual yet dangerous observer from whom he expected powerful criticism as he cautiously began to express his intense hostility toward his mother. He eventually had dreams and fantasies that he was equal to me, could disregard the restraining imagery he had projected onto me, and could kill me if he wanted to. Feeling more sexually and aggressively expressive, and more secure in his gender identity, George was contemplating termination when a disturbing event occurred in his life which, to my surprise, brought the subject of abortion to center stage into his analysis.

This event was that George had been abruptly abandoned by his sweetheart, Betty, to be replaced by another man. In his anger George experienced a strong wish to write Betty a terse note announcing, "The mimosa plant is dead!" He wanted to hurt her by telling her that he was going to let their jointly cared for mimosa plant die. If Betty wasn't going to care for George, then he wasn't going to care for Betty or their mimosa plant. He likened the mimosa plant, a sensitive plant that responds to touch by recoiling, to his and Betty's unborn baby. Letting it die represented an abortion. In discussing the mimosa plant "abortion," George mentioned for the first time that there had been two real abortions in his life. He and Betty had had an abortion, and he and his estranged wife Ann had also had an abortion.

Shortly after the mimosa plant episode, George became romantically involved with another woman, Diane. When they were about to make love, Diane had said that she wanted to make love naturally, without contraception, but that she nevertheless didn't want to become pregnant. They began to make love, but in the middle of intercourse, George had a sudden realization that he might be faced with the possibility of a third abortion, and withdrew in panic. He felt transiently sorry for Diane for abandoning her in the middle of passion, but rather quickly his feelings shifted to anger toward her for her part in drawing him into such a conflictual situation.

Over the next few weeks George produced a prominent cluster of dreams, fantasies, and vague memories, all centering around the dread of being aborted, and the wish to be aborted himself. He recalled being at the bottom of a pleasant canyon on one of his wanderings. He was lying, warm and cozy, looking up at the sunlit sky above, thinking that the orange and pink walls of the canyon looked like the walls of the vagina. In a reverie, he had fantasied climbing out of the canyon, only to be hit on the back of the head by a two by four just at the moment he emerged at ground level. To George, an important part of this emergence was his finally being able to see the blue sky, and while relating his

fantasy he repeatedly kept puzzling over the question, "Why is the sky blue?" He spoke of having a great interest in astronomy, yet he was afraid to look at the stars because the sight of various constellations mobilized destructive images of genitals, semen, and babies in caskets. He expressed the fear that he would be drawn into a "black hole" if he were floating in outer space, and came too close to a constellation that represented the vagina. He had a fantasy of being in an airplane awaiting an imminent crash, knowing that he was about to die. Similar fantasies included being in a rocket whose launch was about to be aborted, and waiting next in line to be shot in a gangster style execution. The dread filled wait would seem interminably long, even though the clock time might be short. He felt relief at narrowly escaping death when he read that an airline stewardess whom he had met on a flight a week earlier had been killed in the crash of the same plane on the same route he had taken.

George had often likened himself to a computer. He also had an interest in the idea of being able to travel back and forth in time. Continuing to pursue his fantasies about the dread of imminent destruction, George speculated on what it would be like to go back in time and think like an unborn baby. If the unborn baby had a computer-like brain that thought at the speed of light, five seconds of waiting for the imminent and inevitable destruction of abortion would seem to the unborn baby like two months filled with dread. This feeling of dread would resemble that experienced in the aforementioned fantasies.

George had a significant dream in which all of his wishes and fears about abortion coalesced. In this dream he came up to some women lounging on beach chairs at the seashore and offered to spoonfeed them from a bowl of "sort of a gray, mushy, cereal-type material." This material was a mixture of "smushed up" human beings, including himself, his own unborn babies, and those of others. He said that he was prepared to destroy himself, and his and others' unborn babies, to make a sacrificial offering to please the women, to horrify them, and to achieve reunion with them by reentering their bodies orally. He would destroy his babies and himself. He had cannibalistic associations to this dream of the movie "Soylent Green", a movie in which people were recycled into human food, and of Greek myths of fathers who were fed their children by women who told them half way through what they were eating. (These associations are reminiscent of Devereux's (1955, 1956) writings on abortion in primitive societies and cannibalistic impulses of parents.)

During his sessions he experienced transient hay fever symptoms, neck aches, and visual and auditory acute hypersensitivity. He was uncertain whether these sensations were related to fantasies or whether they were a re-enactment of preverbal memories of difficulty breathing, head, neck and shoulder pain, and the startled reaction he had experienced upon emerging into the world of light and sound during delivery. He had associations that my consulting room represented the uterus, and that the waiting room represented the vagina. He would firmly close the door to the consulting room upon leaving his session. He said that the pressure, a word which he made clear he intentionally was using to mean physically felt pressure, was higher in the office than in the waiting room. In the transference, he alternately saw me as mother or father. He sometimes saw me as

representing the combined parental relationship. He was afraid of being aborted by me, and equally afraid of being interminably confined.

George spoke of having learned that his mother had had an abortion one year prior to his birth. He talked about how, originally, he had been glad and relieved to hear of this, saying that if his mother hadn't had this abortion, he, as his unique self, would not have existed. He connected his espousal of abortion, his two earlier abortions, the mimosa abortion, and his potential third abortion, to his wanting to abort or sanction the abortion of any potential competitor who might have disrupted or would disrupt the precarious relationship he had had with his mother as an unborn baby and infant. In order to protect himself from the fear of abandonment and the underlying fear of being aborted, his wish to abort any potential competitor had become a paramount concern to him. This wish had been more important to him than any wish to have children of his own, or to compete with or identify with his father in the usual Oedipal sense.

Resolving his abortion complexes resulted in an almost complete disappearance of George's hostility and his presenting symptomatology. There was a genuine reorganization of his personality. He became more directed, present, warm, loving, poetic and creative. He was no longer afraid to look at the stars, and spoke of constellations in a positive way relative to his procreative impulses. His previous fears of being drawn into a black hole in space and being dismembered were gradually replaced by happy analogies of various constellations seen as male and female genitals, sperm and ova, joining to create children. He joyously fantasied naming his children after stars. "Wouldn't that be neat?" He said that he had been unable to think of himself as a father for many years because he had never felt safe to do so.

George openly criticized his parents for not welcoming into their home a psychotic neighbor boy who had walked backwards in the snow up to their front door at Christmas time. He likened this scene to there being no room at the inn for Joseph and Mary, and told his parents that Jesus would probably been aborted in today's social climate since he had been conceived by unwed parents. He saw analogies to himself in the neighbor boy and in Jesus. They reminded him of his own life and his regression through time travel in his analysis back to his intrauterine life, his dread of being aborted, and his birth.

George became much more emotionally expressive, and less in awe of and less inclined to placate intellectual, cold, dominating women. He would no longer be manipulated or worried should any woman in his past, present or future life threaten suicide. Illustrative of a change in him was that he was able to play tennis with women and be comfortable with winning, whereas in the past he had either intentionally lost or felt sorry for them if he had won. He finalized his divorce from his wife, Ann. He gave his tormented sister Carol money so that she could go into therapy. He sought relationships with softer, more affectionate women. He became increasingly interested in poetry, and his prior interest in abstract art was replaced by an appreciation of art with more form and more recognizable subject matter. He resolved a career dilemma, about which he had been indecisively ruminating for months, by deciding to leave his current job and take a more promising academic position requiring his relocating to another city. He

terminated his analysis two months after the abortion material began to emerge. His termination appeared to represent a psychological rebirth, reminiscent of reports of prenatal and birth memories and reenactment by Cheek and LeCron (1968), Fenichel (1924), Grof (1985, 1988), Little (1990), Milner (1950), Pines (1982, 1990a, 1990b), Rank (1929), Rossi and Cheek (1988), Verny and Kelly (1981), and Winnicott (1949). It is interesting to speculate whether or not there was any connection between the five seconds of dread George had so often talked about and the two months of psychoanalytic work during which his abortion dynamics resolved.

Richard's Analysis

Richard, a physician, entered analysis because he was unable to travel through tunnels or cross bridges because of terrifying anxiety. He also lived in almost constant fear of dying of a heart attack, and repeatedly experienced atrial fibrillation just prior to orgasm. He described the feeling as if the door of a candy store had suddenly been slammed shut just as he was about to open it. He tended to see all of his feelings as externally generated. Although highly successful in his specialty, he became intensely anxious approaching any advance in his career, fearing that he would not be able to handle the life and death responsibilities involved, and resenting the prospect of their being placed on him. He was married to a woman toward whom he felt intense hostility, a hostility he was afraid to express for fear that he would be directly responsible for her suicide. He felt that whether his wife lived or died was literally in his hands. At times of extreme marital distress he would find relief by dressing up in her clothes. He explained this by saying, "I felt as if in some way by playing both the man and the woman I could give myself more sexual satisfaction than by aggressively bringing out sexual feeling in the woman." Although it was very upsetting to him that he felt so, he was highly excited by stories, movies or his own thoughts about rape. He had an unusual autoerotic practice which involved his seemingly being able to circularly impregnate himself. During intercourse his wife would sometimes complain that he was indifferent to her feelings or presence, and would ask, "What about me, Richard?"

Richard consciously wanted to help people, but felt that his life mainly involved sacrificing himself, and that was what people expected him to do. He had gone into medicine with the goal of finding a cure for his father's polycythemia. He had no sense of his own identity, and at times felt as if he were his father, possessing his father's mannerisms and his lips and his symptoms. At times he felt in a similar fashion as if he were his mother. There were frequent slips of the tongue in his sessions, in calling his patients "parents." He felt responsible for everyone else's safety, health, happiness or unhappiness, but felt that no one cared for him, nor would he let them. Although he wanted to be loved, he said that the thought of being happy was more terrifying to him than his anxiety, and that he did his best to keep people from loving him. He felt close to no one and trusted no one. He had strongly resented his younger male sibling, two years his junior, whom he felt had been a cause of trouble to his parents, and who had

required excessive attention because of his refusal to eat. Richard nevertheless had tried his best to keep his hostility in check and had been a “perfect child”, an exemplary student, first in everything, and later, a sought after and highly successful heart specialist.

Richard had been in analysis with several different analysts prior to coming to see me, with only minimal amelioration of his symptoms. His analysis with me was only moderately successful. A great deal of hostility was expressed toward his mother and his wife. He felt dominated, manipulated and controlled by both. He had some hostility towards his deceased father, mostly for his not standing up to his mother, and for not spending enough time with him, but he also longed for and missed him. He remembered as a child watching his father play poker with his cronies, and feeling that he would never be able to grow up and be a big man like him, or, in the transference, like me. In the “big man” transference he behaved superficially ingratiating with me. In regard to his image of his father as ineffectual, sick, unable to be helped and afraid of dying, he surprisingly never spoke of me as weak or ill, only as being unable to help him. He was severely critical of his mother, and blamed her for emasculating his father and himself. He said that everything his mother possessed financially had come from pieces taken from his father at the cost of his health and ultimately his life. He resented wealthy insurance widows. Despite the fact that he resented his mother for acting as if she knew everything, he did come to realize that at some level he agreed with her, and had not been able to separate from her psychologically. He expressed a wish to be a little baby again to start over, to be cuddled and loved.

Richard had a frightening dream of being castrated by a woman with a straight razor just as he was about to have intercourse with her. He had previously found it sexually exciting when he had read about a woman shaving a man’s genitals with just such a razor. In another dream he was in a rocket with his head wobbling from side to side, not sure if it was he or his mother in the rocket. The rocket launch was about to be aborted. In another dream he was inside a building that was crashing, even though it was made of steel and stone, strong like his mother. He came outside only to step in excrement. In still another dream he was a baby being drowned by orange juice gushing from the wall while his father and mother were lying indifferently in bed. He wondered how any baby could go through such a horrifying experience. He had a dream in which a woman was being punished by some men by being drowned in a coffin full of water. In retrospect I can see the compatibility of these dreams with a dread of being aborted, but the thought did not occur to me at the time, or if it did, I didn’t pursue it.

Richard came to see that his occasional wish to commit suicide by jumping out a window had contained within it a wish to hurt all of the people who had hurt him and whom he hated so much. He also recognized that his excessive need to take care of other people served as a defense both to protect himself from acting out his own destructive hostility, and to protect himself from abandonment. He was afraid that for him to be happy he would have to kill or be killed. Although initially Richard had held the position that he was not willing to pay the price he assumed must be exacted for love, he was able over time to see intellectually that in sacrificing himself he often was not recognizing others’ responsibility for

their own lives, and that the sacrifice was not necessary. Expressions of anger, independence, or the need for love did not kill, and it was the responsibility of others to handle their own feelings, rather than to exploit his tendency to feel guilty. He could also see that he often was not sensing accurately the true needs of others.

Despite some of these insights, the analysis seemed to drift, with no fundamental movement. Richard had a peculiar quality of being unimpacted by my formulations or interpretations. Combined with this, he exhibited a seductive presumption of familiarity, calling me by my first name, and saying things in a manner as if we both knew without question that they were the truth. He clung to his symptoms, continuously rationalized and questioned psychiatry's ability to help. At times, he almost condescendingly and tentatively would seem to take something in, as if it possibly, just possibly, might be of importance. He would despair, and clamor for help, saying that for someone to get him well that person would have to live within his body throughout the day and experience the torment he was feeling. At one point he said that I was him and he was his father, and that I couldn't help him to get well or to save his life anymore than he had been able to help his father. I must feel as impotent and frustrated with myself in being unable to help him as he had felt about himself in being unable to help his father in his illness.

Although I didn't feel quite that way, I did feel that we really weren't getting much more movement than had occurred in his experiences with several prior analysts. I told him that I wanted to stop his analysis, and set a date a month or so hence. He became enraged, and counted the days one by one until termination. He said that I was like his mother, that I was materialistic and hated everyone, as she did. Yet he was afraid to leave me and felt abandoned by me.

Although at that time I hadn't read a paper by Milner' (1950), "Note on the Ending of an Analysis," the description of her decision to terminate an unsatisfactory analysis in some ways resembled mine. She felt retrospectively that her playing the part of the bad mother had been actually helpful to the patient, who showed marked gains following termination. I can also see in retrospect that perhaps I was aborting Richard before he could abort me. The pregnancy seemed interminable, even though I had been unwittingly colluding in it. At least the termination was direct and explicit.

Similar to Milner's patient, Richard, some time subsequent to termination, wrote me an affectionate letter telling me how he was doing. He wasn't doing too badly. He said that he realized that, in trying to provide a cocoon for his son by logically watching every word he said to him, and in trying to protect him from his wife's harshness toward him, he had not listened to his son and to his son's feelings. Richard had not shared his own feelings with his son, or with the rest of his family as well. Despite some gains, and a degree of lessening of symptoms, he said that he still had trouble being spontaneous. He wrote of how, when his mother failed to invite anyone other than his brother and himself to an annual visit to his father's grave, he took charge and invited the rest of the relatives. He knew intellectually that this was the right thing to do, but he recognized that his decision and his attendance at the event were done without his feeling anything.

He was better able to take care of himself when people asked too much of him, and had a better sense of self and of boundaries. In general he was able to enjoy himself somewhat more than in the past, but not fully. He still found it almost impossible to drive through tunnels.

Richard's Family Therapy

Five years after termination, Richard called to tell me that he was experiencing severe anxiety and suicidal thoughts in reaction to being pressured by his wife to move from their home of many years to a new home in a better neighborhood in a nearby town. Richard didn't want to move. His office was in his home, he was used to it, didn't have to travel, and he was worried about whether or not he would be able to afford the move. He feared he might become incapacitated and unable to work or earn a living. I agreed to see him on the condition that he would bring his whole family, and this time elected to do family therapy, using a heterosexual co-therapy team composed of myself and a female co-therapist. Richard's wife, his son and daughter, his mother and his brother all agreed to participate.

Some of the problems in the family relationships were worked on over a period of several months, but the issues of the house, moving, and financial security kept coming up over and over again. Richard's wife Renee became increasingly impatient. His mother implied that Renee was too ambitious in wanting Richard to move, and was inconsiderate of Richard and unappreciative of all that he had given to her financially. Richard's mother went on to say that she and her husband had struggled for years to achieve financial security. She couldn't see what was wrong with the nice house her son and his wife already had. If Richard's wife wasn't happy with her home, she would trade houses with her. It was a nicer home than she had, and she described it in detail, room by room. She repeatedly advised Richard that he mustn't risk financial security by moving from one house to a newer, nicer one.

For some reason, during one of these discussions, I interrupted to ask Richard's mother if Richard had been a wanted child. She responded that he had been, but that when she became pregnant she had been living with her sister, and had not yet set up housekeeping. She wouldn't have wanted to have a baby in her sister's house. She had married a "boy" of nineteen, and they weren't financially secure. She had asked her doctor if he could give her something, just to bring on her period. The doctor had responded by saying, "What's the matter, you're not married? You're married, you have babies." He declined her request. Richard responded to his mother's story by calmly saying that that was not the way he had heard it, that she was not being entirely honest. He had heard that she had wanted to get rid of him.

Richard's confrontation with his mother resembled an encounter between a five-year-old girl and her father described by Bloch (1974), in an article on fear of infanticide. The little girl was becoming increasingly suicidal toward the end of her second year of analysis, and wanted to play an alarming game of climbing into a washing machine and having to be pulled out. She would say such things as,

"The baby's getting into the washing machine! Come on, we have to pull her out! Pull! Pull! Pull!" or, "Help, I'm disappearing! Hold on to me!" or, "I'm at the bottom of a well and I'm dead.", or, about the monster, "He's breaking through the window!" or, "You can't get out of jail. You stay in jail. You're never getting out." (To have intrauterine associations to these verbalizations is not difficult.) In a family therapy session which the girl herself had asked for and set up, she told her father that she thought he wanted to kill her, and asked him if he did. Upon reassurance from him, she turned away, ignoring everyone, and occupied herself in play. Bloch states that nothing she had thought of prior to this experience had prepared her for the utter simplicity of this confrontation and its effectiveness in freeing this little girl of her preoccupation and her appearing subsequently "to be very much in the real world."

Richard's mother responded in an unusual, bland way, to Richard's statement that he'd heard that his mother had wanted to get rid of him, by saying, "Oh no. You weren't you then. You were just a period."

Richard's response was interesting. He had been listening intently to these interactions, and seemed to have become aware of what had just happened. He interjected, musing almost as an aside, and talking "sotto voce" to himself more than to others, "I wonder if I have ever taken a gamble on anything."

It is difficult to describe Richard's mother's manner, as well as the content of what she said, but I would like to digress to comment at length, because I feel that an understanding of both her statement and her manner is of the greatest importance relative to the issue of prenatal awareness and unawareness, hers and the former unborn Richard, and to the issue of communication between her and Richard, past and present. Analyzing this transaction bears directly on the question of the degree of awareness or unawareness we may attribute to the unborn, or, for that matter, to the mother as well, during the prenatal period. It also bears directly on the question of the nature of the communication of abortion impulses between the offspring and the mother, both prenatally and postnatally. Some things one needs to see and hear only once. Richard's mother's statement was one of those. She spoke in a seemingly helpful but condescending manner, as if talking to someone harmlessly naive and misguided, who hadn't matured enough to see the light, a manner that suggested that the question was trivial, and hardly needed answering. Her words to Richard, although said calmly, not explosively, nevertheless suggests a similarity to George's description of how his mother erased him with "word bombs." She didn't even dignify Richard in the relationship by being upset by his position. Her response, even though it contained the word, no, was more a statement of fact than a denial. Denial in a social situation recognizes the existence of another person, even while telling him he is wrong. She was following Samuel Goldwyn's advice to actors on how to handle critics, "Don't even ignore them."

Of further importance was the fact that the discordant perception of, and definition of, reality was not about a trivial matter. The past reality in question here was the serious matter of Richard's conception, a question of whether Richard had existed at some earlier time, and whether Richard's mother had intended to abort him. The current reality in question was whether Richard's current recall

of his former perceptions was valid, and whether Richard's feelings were of any importance. Richard's mother was presenting herself as the sole definer of both current and past reality. She was also defining a reality which was inconsistent with her own reality, in that the reality of her own statement made a moment earlier in which she had documented the beginning of her pregnancy, was glossed over. She also had an air of blithe obliviousness to the reality sense of the other people present, acting as if they too would be completely oblivious to, or erase, what they had just heard, and be contentedly in complete agreement with her last statement. This behavior could be called an abortion of an abortion, representing a cascade of abortion impulses, in that the idea that she in any way had intended to abort Richard was itself aborted. Her statement was an unaware psychological abortion of both her own and Richard's thinking and feeling.

Injected into Richard's mind, her psychologically aborting statement was an abortion "booster shot." If believed by Richard, instead of being disbelieved by him through an awareness and understanding of its destructive import, it would make any independent thought or feeling on his part which deviated from that of his mother relatively useless, erased, deleted and non-existent. This would reinforce his not being able to become aware of his dread of being aborted, and his continued existence as an automaton. Richard's mind would then be not only relatively useless to Richard himself, but it would have no power to exert any influence on his mother.

This exchange represented the core of Richard's problem, and it touches on the core issue of this paper, i.e., the reality that the dread of being aborted exists in certain persons. It also illustrates the operation of intellectual collusion to abort ideas by denying not only the presence of a dread of being aborted, but also by denying the possibility that there could have been a threat of such a happening in a person's history. It also has a bearing on an understanding of transference and countertransference issues relative to the dread of being aborted. For example, Richard's mother's behavior of being unimpacted by Richard was reminiscent of Richard's transference behavior of being unimpacted by me in his analysis, and his assumption that he and I both knew the truth, even when I was disagreeing with him. It was important that Richard intervened with his mother initially to give an alternate version of reality, and his response to his mother's statement and manner is likewise most important. It represented the beginning of a psychological separation of Richard from his mother, risk taking, and the use of words by him to talk to himself in a self-reflecting way that increased his awareness and diminished his mother's power over him.

Richard's mother went on to say that she would never have an abortion, and would never take anything to cause one because "you might have a deformed baby." She had begun to save for Richard's medical school education the day he was born, and, starting when he was very little, had played doctor and nurse with him on rainy days. She had sacrificed and scrimped so that there would be financial security. Richard responded that she had given up fifty-five years of enjoying life for that security. I asked Richard's mother if she had ever given any thought to the possibility that her anxiety might have been conveyed somehow to Richard in the womb. She began to cry, repeatedly saying that she had thought

about it many, many times, whether her “worriment” had been transferred to him in the womb and was the cause of his symptoms. This was the only time during the entire two years of twice weekly family therapy that Richard’s mother ever cried. I asked Richard how he felt about abortion, and he responded that in certain cases, especially where the mother’s health was concerned, he was for it, but that he didn’t think that this situation applied in his mother’s case at that time.

Following the exchange on abortion involving Richard and his mother, Richard’s wife told of a miscarriage that she had had, and wept while telling of a therapeutic abortion of a six month pregnancy at a time when her marriage was not going well and she had been very ill emotionally. Richard said that he hadn’t really been involved then, and that the abortion had been a decision between his wife and her doctor. Richard’s wife went on to wonder whether her mother had wanted her, recalling that her mother had had an abortion prior to her pregnancy with her. At the end of the session I asked the family if they would like to read a paper I had written on abortion (Sonne, 1966). Everyone was eager to read it and I gave each member of the family a copy.

In the next session Richard reported that he had had several symptom free days. He had been able to enjoy himself at the theater, and to carry out his work without anxiety. He said that he felt great, almost well, and as if he could do just about anything. He said that until the previous session he had never understood the term rationalization. He always had thought that to rationalize meant to be reasonable and logical. He was going to stop it and look for real reasons. He was able to stand his ground when his wife Renee, after angrily and sarcastically telling Richard that she was glad that he was feeling better, attacked him relentlessly for having said to her, “If you don’t like it, it’s tough.” Richard refused to be cowed, and stuck calmly to his guns, holding to his opinion that he was the target of a spillover of upsetting feelings Renee was having about their daughter Rachel, a point Renee later acknowledged. Richard’s comment had been in response to Renee telling him to “stay out of it.”

Reflecting on his birth, and the fact that he had not been aborted, Richard said, with a self satisfied chuckle, and again “sotto voce,” “I run into the fact that if it weren’t for some good-natured doctor, I wouldn’t be here today. I have a tremendous change in my outlook because I never realized that . . . because . . . I don’t know . . . If I owe my presence here to anybody, then I owe it to him as much as I do to anybody else. I don’t have to make any more excuses for being.” This was said in the middle of everyone else in the family talking about houses, and so quietly that no one else heard him at first.

In ensuing sessions more material gradually came out centering around abortion. There was discussion of Richard’s brother and sister-in-law expecting a baby. The pregnancy was unexpected, and there was some concern that there might be a miscarriage. Richard’s mother had suggested to his brother that an abortion might be considered, a meddling that enraged Richard’s wife. Richard’s mother spoke of her feelings about abortion and men. “Men use women as toilets.” (This comment equates semen with feces, babies with feces, and medicine to induce menses with a laxative.) She said that her mother should have had an

abortion, for she had died in childbirth when Richard's mother had been a year old. There had been too many children, and Richard's mother, having been one of the too many, would not have minded having been aborted herself, for her life had not been all that happy. When she was nine years old she wanted to commit suicide by jumping out of a window to let people know how much they had hurt her, an impulse similar to that which both Richard and his wife had felt in later life. She described frequent abortions in the extended family, notably four home abortions by the sister with whom she lived when first married. In all this talk about pregnancy and abortion, which was interspersed with continued talk about security and houses, Richard's daughter spoke of her not ever wanting to become pregnant and have something disgusting growing and squirming inside of her.

Eventually, over the next year and a half of family therapy, with much turbulence and many ups and downs, a great many of the problems were resolved. Richard's marriage improved, and most of his symptoms disappeared. He no longer felt omnipotently responsible for everyone. He felt more adult, able to take risks, and able to love more fully. The children moved on, the son to college and the daughter to high school, both freer to separate themselves from their parents' problems. Richard and his family moved to a new home, Richard's brother and his wife had a new baby, and Richard's mother took trips to Europe. Her intrusiveness seemed to abate, and when it evidenced itself it had lost its power.

Discussion

Neither George nor Richard had presented themselves for treatment with the complaint that they were consciously distressed and conflicted about abortion. Their symptoms could be thought of as derivative from postnatal difficulties with separation and individuation, and postnatal psychosexual conflicts. However, initial efforts directed toward analysis of post-natal self-object distortions, and defenses against unacceptable or feared impulses, all operative and important to analyze, had resulted in only moderate to minimal benefit. It was not until the subject of abortion significantly entered their therapy that fundamental changes occurred in them, and the connection of abortion dynamics with their symptomatology, as well as to their espousal or acting out of abortion became apparent. Their core problem emerged as one of basic, primordial survival versus annihilation of self, resulting from their psychological development having been arrested by a threat, or perceived threat, to the continuity of their lives in utero from their mothers. Their problems seemed to be more in the area of self than desire, and the threat to the self seemed to be more global and at a more primitive level than that addressed by Mahler et al (1975), Kohut (1977), and Stern (1985) in their studies of separation and individuation, and of the development of a sense of self. They were survivors of an incomplete psychological abortion, living as if they had been infected with a virus, or imprinted in utero.

Both George and Richard were afraid of being aborted, or drawn into, or held, in a situation from which they could not extricate themselves safely. In either in-

stance, they would be in, as Bion (1970) put it, "an immensity so great that it cannot be represented even by astronomical space." Each had defended against this fear and wish by becoming super-logical, unfeeling, mechanical, and intellectual. At a very early age, they had become, and were probably treated as, little adults. George, for example, spoke at seven months, and Richard was the little doctor. They experienced precocious closure and a cut-off from their already threatened primitive whole selves, and subsequently, in infancy, developed split selves. This process was probably facilitated by their being the recipients of the continuation of initially self-destroying and later self-fragmenting destructive projective identification by their abortion minded mothers, to whom unborn babies were feces, missed periods, inconveniences, unacceptable body parts, unwelcome intruders, and the embodiment of unwholesome impulses. George and Richard each saw their fragile psychological existence as constantly in danger. They avoided the heterosexual intimacy described by Binstock (1973) in his paper on the two forms of intimacy, and were strongly connected symbiotically with their unsatisfactory mothers, or mother substitutes, from whom they had not separated.

Unprotected by their fathers, they had unconsciously identified with their abortion minded mothers and oscillated between acting this identification out or projecting it onto others. They had also introjected their mothers' projection of unacceptable impulses and re-projected them onto others. Each, as an adult, had supported abortion, and each had embedded in his unconscious a wish to abort others and a fear of being, and a wish to be, aborted. One must speculate on the genesis of these wishes and fears, but it is conceivable that George and Richard were the recipients of parental abortion threats from the preceding generation, some prenatal, some post-natal, threats of which they were only dimly conscious. Along the lines of the axiom that if one is treated badly and doesn't know it, one acts out, their proneness to act out by aborting unborn babies of the next generation, could be viewed as similar to the proneness to anti-social acting out described by Johnson and Szurek (1952), and the abuse of children by survivors of child abuse reported by Steele (1970). Aborting others would function as a combination of sacrificial suicide, and the matricidal, patricidal, fratricidal and homicidal elimination of other undesirable objects and impulses in effigy or by proxy. It would be a symbolic disposal of the presumed bad self, bad desires, and bad relationships of themselves and others and a retention of the presumed good. In the process, however, splits of self and others would be reaffirmed, unacceptable impulses would continue to be repressed, the whole self would still be submerged and developmentally arrested, and the whole self and life of others would not be recognized. Their abortion dynamics resembled those variously reported in women by a variety of writers (Abraham, 1969; Calef, 1968, 1969; Fischer, 1974; Pines, 1982, 1990a, 1990b; Reik, 1953; and Sonne, 1966, 1975).

Both George and Richard wanted to get rid of a competing younger sibling. George reacted to threats to his existence by aggressively attempting to kill his younger sister and banish his father. Richard reacted sacrificially by attempting to save everyone. George flirted with death counterphobically by engaging in daredevil activities, which involved being carried along in rushing water, exploring caves and flying in space. Richard attempted to avoid anything he felt might

be dangerous to himself, such as tunnels and bridges. Both had similar fantasies of destruction, and dreams, such as crashing in an aborted rocket launch, or an airplane, which they ultimately connected with a dread of being aborted. Both were afraid of heart attacks. In fact George was afraid of his own ability to control his heart beat and stop it. He had intentionally stopped it once and, terrified, vowed never to do this again. (It is interesting how the psyche of some people seems to be so directly in touch with their soma. One woman I had in treatment absolutely knew-felt-sensed that her body had a miscarriage because she hated her mother so much.) Both George and Richard were afraid of being trapped in tunnels or caves, or being hurt entering or leaving. Their lives were dominated more by fear than by guilt or love. Both had sacrificial attitudes and behaviors toward women which masked enormous hostility towards their mothers. Both had a feeling that they were drifting through life, oscillating, suspended in time without noticing its passage. Neither could reminisce, anticipate a future, or fully experience the joys and sorrows of the moment. They were alive but not alive. Neither had a sense of self, and both feared that self assertion would lead to abandonment or abortion, or it would require or cause the death of their mothers, mothers whom they saw as both murderously powerful and suicidally fragile. The women they chose seemed to either have had a remarkable psychological resemblance to their mothers, or to have been unusually compliant in accepting this projection.

Neither George nor Richard felt that they had been protected from their mothers by their fathers, nor did they have fathers with whom they felt they could identify (Seligman, 1985; Stoltz, 1954). They saw their fathers as uninvolved, weak, and competitive with them in their infantile dependency on their dominant wives. Both had fantasies of omnipotence and magical thinking. Until the abortion issue was confronted, neither could appreciate poetry, metaphors, metonyms or love. They lacked flexibility, grace, humor, and a sense of the sacred, and they knew it. Richard had said once that he would love to be a poem, something that "no one could shit on." George brought Japanese poems into his sessions toward the end of his analysis.

Both George and Richard felt that they were incurable, and that they would be too much for their analysts to handle. In both George's and Richard's relationships with me in analysis, and in Richard's relationships in family therapy, there was a peculiar quality of being unimpacted upon by, and not creatively interacting with their therapists, which, in combination with a parallel posture of presumed intimacy and friendliness, blurred differentness and made it seem as if the therapists and they were one, thinking and feeling alike. Most of this changed subsequent to the emergence and analysis of their abortion dynamics. Another interesting change was that, following the confrontations with abortion, the fear and hostility that had so dominated their lives seemed to almost miraculously disappear, to be replaced by a self confident state of calmness. Both were ultimately able to speak with their parents about abortion without fear or animosity.

It is interesting to speculate about how, or why the mental imagery and mental processes used by both George and Richard might be connected with the theme of abortion. A pervasive quality of sameness or equivalency seemed to be partic-

ularly evident. Their wishes to abort, i.e. their feticidal wishes, were equivalent to their wishes to be, and fear of being, aborted themselves. What they feared in being aborted was also very similar to what they feared in the thought of being interminably held in utero, confined, trapped, and never being born at all. Their mental imagery was of infinity, formlessness, lack of differentiation, fusion, lack of boundaries, and a sense of amorphous space without identifiable markers. As for their mental processes, there were connotations of disintegration, dispersion, dissolution, helplessness, drifting, floating, timelessness, equilibrium, and a state of mindlessness, deadness, non-thought, and non-tension.

If thought of in thermodynamic terms, the psychological primitive "mental" state exhibited by them of oscillation, chaos and equilibrium could be thought of as remarkably analogous to, parallel with, and congruent with, a thermodynamic description of the physical state of affairs which would occur with either abortion or interminable confinement, wherein the intrauterine negentropic-entropic dialectic (creative-destructive, integrative-disintegrative, disequilibrium-equilibrium, anabolic-catabolic) would shift in the direction of the entropic equilibrium reached in biological death (Sonne, 1967). They were living as if dead. They were born, but unborn, or half born. Alive, but not alive. They were split, precociously assembled, but not integrated. They feared collapsing, but this was exactly what they needed to do to reorganize. Relative to this, George had an interesting dream near termination in which he was driving a bulldozer that was going to knock down the last remaining prop that was holding up a building. They stood on the edge of anxiety, half well and half sick, living lives of chronic anxiety in protecting themselves from experiencing increased anxiety connected with the threat of being aborted or with the threat of happiness.

In this clinical paper I have documented how connecting the word abortion to feelings of dread which had been attached to other entities produced remarkable changes in two seemingly unanalyzable patients who had experienced no such changes from connecting symptoms with post-natal experiences. If we take this data as evidence that a dread of being aborted can be expressed symbolically as a transferential derivative in postnatal life, it is incumbent on us to explore whether or how the trauma of an intrauterine threat of being aborted could be registered in the mind and body of the unborn. For registration of this particular trauma to be possible requires documenting evidence that there is more mentation and communication in general in the unborn than has heretofore been believed to be the case. If this is so, we need to reevaluate the models that have guided myself and other analysts, and examine the issue of countertransference as a dynamic blocking which has impeded a consideration of prenatal psychology, particularly relative to the dread of being aborted. Data from multiple disciplines addressing these issues will be presented in the second part of this paper "The Relevance of the Dread of Being Aborted to models of Therapy and Models of the Mind, Part II: Mentation and Communication in the Unborn."

Summary

In this paper I have presented clinical data on the treatment of two men who experienced marked psychological changes for the better when, after years of little movement in therapy, their symptomatology of drifting through life with fears of tunnels, bridges, closed spaces, open spaces and of various other situations which they saw as life threatening, was connected with a dread of being aborted. Qualities of sameness, equilibrium, an imagery of vast space and a sense of timelessness which characterized their thinking could be seen as similar to qualities one might imagine being possessed by an unborn child threatened with abortion or interminable confinement. The long delay in treatment of connecting presenting symptomatology to the dread of being aborted suggests that there were countertransference resistances to hearing or seeing presenting material as possibly being symbolic descriptions or transference acting out of intrauterine experiences. There is a need for models of therapy and of the mind that consider the field of psychoembryology, and include an openness to considering the possibility of psychic registration of prenatal experiences, the possibility that these experiences can influence later life, and the possibility that these experiences can be recalled and reexamined and understood in analysis.

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