Perinatal Psychology and Psychotherapy Experience of the Russian Association of Perinatal Psychology and Medicine

Natalia P. Kovalenko

Abstract: Perinatal Psychology is a new science that emerged at the interfaces between medicine, psychology, psychotherapy and pedagogics. Perinatal psychology and psychotherapy study psychological links enrooted into a family system at the time of expecting and bearing a child. They study things that impact the quality of baby's mental health and the success of its delivery. Practical methods to diagnose young families and young parents are proposed along with the methods of how to work with the problems of the period such as volatile relations, lack of knowledge about pregnancy and delivery, lack of skills to control dynamic emotions during pregnancy and in labor (especially at times of family conflicts), fears and worries about labor pain, etc. Counseling young expectant families is a specific work performed by a professional consultant or psychotherapist. This work requires special training under programs of perinatal psychology and psychotherapy.

Zusammenfassung: Perinatale Psychologie ist eine neue Wissenschaft, die an der Schnittstelle zwischen Medizin, Psychologie, Psychotherapie und Pädagogik entstanden ist. Perinatale Psychologie und Psychotherapie untersuchen die psychologischen Verbindungen in einem Familiensystem zu der Zeit, wenn ein Kind erwartet und geboren wird. Dabei werden die Umstände untersucht, die die Qualität der seelischen Gesundheit des Babys umd den Erfolg der Geburt beeinflussen. Es werden praktische Methoden zur diagnostischer Erfassung von Familien und werdenden Eltern vorgeschlagen, zusammen mit den Methoden, wie man mit den Problemen dieser Lebenssphase umgeht: wie unsicheren Beziehungen, Mangel an Kenntnis über Schwangerschaft und Geburt und fehlenden Fähigkeiten, mit den starken Emotionen, wie sie mit Schwangerscahft und Geburt verbunden sind, umzugehen, insbesondere bei familiären Konflikten. Diese Emotionen können sich auf Ängste und Besorgnisse in Bezug auf den Geburtsschmerz und anderes beziehen. Die Beratung werdender Eltern ist eine qulifizierte Arbeit., die in den Händen eine professionellen Beratern oder Psychotherapeuten liegen sollte. Eine solche Tätigkeit erfordert eine qualifizierte Ausbildung im Rahmen der perinatalen Psychologie und Psychotherapie.

Keywords: perinatal psychology, perinatal psychotherapy, counceling.

Introduction

Nowadays families and their problems are studied by a number of scientific disciplines, i.e., by psychology, medicine, pedagogics, sociology, demography and economics. Professionals study the dynamics of emotional relations in marriage, what causes one's loneliness within his/her family and brings a marriage to separation, the specifics of pregnancy and childbearing and the specifics of upbringing methods used in families. Unfortunately these days being involved with your family and in your family matters is no longer considered essential, institutive or popular. People became relatively independent of their families and that changed how they see family relations. Conjugal, free-choice based relations became more important and central in a family rather than kindred and therefore objectively given relations. This family life stereotype is wide-spread. The stereotype weakens the strength of family connections, helps to disrupt the family institution, and wipes family life traditions that are typical of Russian mentality.

We observe a long-felt need to restore the family into its status of a patrimonial institution, the importance of family per se and family heritage which can be first of all represented by family traditions, achievements, and quality of emotional relations, The concept of perinatal psychology and psychotherapy is being formed as a new approach to study family systems when the family is started, a baby is expected, the birth and at other family milestones.

Becoming a new and timely field of science Perinatal Psychology brings together the knowledge from different domains and generates new paradigms, approaches and research methods which do not separate physiological and psychoemotional elements in a human body.

Having analyzed research papers, five scientific conferences and three international congresses organized by the author we can generate the following fundamentals:

The Mother-Baby-Father System is a unified psychoemotional and physiological system that depends on the condition of everyone therein; psychoemotional (spiritual) level of the mother is the system locomotive; once a fetus has developed its first cerebral substrates, it will have first functions in the antenatal period (initial perinatal experience); a good psychoemotional fetus development depends on strong positive dominants of its mother and father; a successful delivery depends on how well the mother is prepared for the labor and on her positive emotional dominants towards the labor and her baby; any psychocorrection of a pregnant woman's emotional status must take into account her personality and psychophysiological status and must include working with a pain syndrome during labor; an activation of a woman's role must be at the heart of psychocorrective and preventive work with pregnant women.

The Concept of Perinatal Psychology and Psychotherapy

Perinatal psychology and psychotherapy study psychological links enrooted into a family system at the time of expecting and bearing a child. They study things that impact the quality of baby's mental health and the success of its delivery. Practical methods to diagnose young families and young parents are proposed along with the methods of how to work with the problems of the period such as volatile relations, lack of knowledge about pregnancy and delivery, lack of skills to control dynamic emotions during pregnancy and in labor (especially at times of family conflicts), fears and worries about labor pain, etc. Counseling young expectant families is a specific work performed by a professional consultant or psychotherapist. This work requires special training under programs of perinatal psychology and psychotherapy.

A young expecting family usually comes for counseling to obstetricians/gynecologists and midwives because the mother/child health and a labor success worry them most. Unfortunately not much attention is paid to one's psychological readiness to labor and to parental competence which is – as any competence – is a prerequisite to a life success.

We cannot deny achievements of modern culture but it made a destructive impact on a family institution and continues to damage family values and family traditions. Domesticity and parenthood are not popular with today's young people at their reproductive age. Freedom, entertainment and irresponsibility are much more appealing. This brings serious problems for young people who decided to start a family and to have a child. Isolation of family members and lack of support between generations make young couples helpless and desperate while building their own family (though initially being at the peak of their love they believe they can deal with any family responsibilities and duties). But life and especially pregnancy brings new and unfamiliar problems with which a young couple fails to cope without being supported by their parents.

Perinatal psychology and psychotherapy study how the family system develops because this system is the basis on which any baby's mental health is founded starting the intrauterine period of its life (Kovalenko 2000).

Perinatal psychology develops both in terms of theory and practice. It has studied how an emotional life of mothers and fathers impacts their babies' psychological potential. It explores the specifics of a psychoemotional life of women during pregnancy and in delivery and analyses conditions and methods of helping to have a good childbearing and delivery. Moreover, none of the practical models involve any drug administering to support pregnancy but rather consist of psychological, pedagogical and cultural elements.

Perinatal psychotherapy develops chiefly through family- and individual counseling. In this respect family counseling can be focused at preparing young families to childbirth. The most common psychological problems of the period are:

- problems in relations with parents;
- fear for the baby's life;
- lack of confidence in one's capabilities and abilities;
- internal young family problems;
- being not ready to deliver and breast-feed the baby;
- loss of one's spouse during pregnancy;
- adultery of one's spouse;
- uncontrolled spontaneous emotions during pregnancy;
- psychosomatic disorders,
- fear of medical institutions;
- algophobia, etc.

The list shows that most often young families seek a professional family counseling with problems related to psychological life of young spouses/future parents and associated with specific adaptation and self-regulation skills and communication culture initially acquired in families.

If one's family did not become a source of positive life skills and if such knowledge was not learnt through education, then a family might have many questions while expecting their first child.

Partnership and cooperation in a new family requires of young people to make efforts, to mobilize their resources and to continuously develop. If during this period one counts on good fortune only, he/she can run into some unforeseen and difficult to overcome situations.

Perinatal psychology offers a comprehensive program named Gloria (N. P. Kovalenko) which prepares young families to having a baby. The program focuses on pregnant women, however, the father's role during childbearing and delivery is also reviewed.

Concepts of Familiy Therapy

The program treats family as an integrated organism/system, i.e. mother-fatherbaby, where each element is independent and yet interdependent at the same time. Studying a family as an integrated system with common laws and rules has been used by family psychotherapists for a long time.

The author of the Family Systems Theory M. Bowen states that family members cannot act independently of each other because such behavior will result in an interfamily dysfunction. This statement brings him closer to system therapists but still his views are somewhat different. Bowen views all human emotions and behavior as a product of the evolution. Moreover, it is not an individual or unique evolution but the one related to all life forms. He developed eight tightly related concepts such as differentiation of self, emotional triangles, family projections, etc. Bowen believes that the mechanism of internal family relations is similar to the way all other live systems function. It is not by chance that his concept of differentiation of self very much resembles the scientific concept of cell differentiation. Therapists of the school believe that differentiation of self during family therapy sessions calms down the client family and that helps to make responsible decisions and reduces symptoms of family dysfunction. The Counselor's Role in this respect is similar to the coach who teaches family members to differentiate in their family communication, to think about the existing family communication patterns and to learn more productive ways of interaction. In this situation psychologists should not provide families with ready solutions but to ensure a joint search for the solution. It would be difficult to argue with the approach because a joint search helps family members to master productive methods in problem resolution, develops their sense of subjectivity and self-confidence which after the reduction of negative symptoms will result in sustainable changes in this family life.

In his family therapy theory and practice Bowen widely uses the notion of a family's life cycle and believes it is necessary to take into account national specifics of his clients.

Another scenario of working with families that has become very popular around the world is the Structural Family Therapy by S. Minuchin.

The approach is based on three axioms:

- Delivered psychological help must take into account the whole family. Each family member must be viewed as its subsystem.
- Family therapy changes the family structure and results in changing behavior of each member in the family system.
- Working with families a psychologist must join into the family thus forming a therapeutic system which enables family changes.

S. Minuchin views any family as a differentiated whole with subsets of individual or several family members. Each subsystem (parental, spousal, children) has specific functions and imposes certain requirements on its members. Each subsystem must have some freedom and autonomy. For instance, in order to adapt to each other spouses must be free to a certain degree from the impact of their children and external environment. Thus the issue of delineating family subsets becomes really important.

S. Minuchin identifies two types of improper boundaries. Type one is when the boundaries are enmeshed, unclear and blurred. Type two is when the boundaries are too rigid and result in isolating family members. One or the other type of wrong boundaries is to be found in any dysfunctional family. For example, very diffused boundaries between mother and child estrange father and create two family subsystems – mother/child (children) and father – who function autonomously. Children in such situation slow down in developing their communicative competence with peers while the parents face a threat of divorce. Opposite to the above families with separating boundaries are not able to build a collective family "US". Family members are isolated to such a degree that they cannot satisfy one of the most important human needs of trust, warmth and family support.

An enmeshed family reacts to any event rapidly and intensely with its members infecting each other with emotions. Indifferent families are dominated by an estrangement which a child perceives as coldness and aggressiveness and can describe his family as the one where no one cares about others.

The provided classification and the method of psychological assistance primarily address how to recognize and to overcome the inappropriate closeness of family members which turns into a symbiotic interdependency and how to help each family member to recognize and adjust boundaries between him/herself and others.

S. Minuchin believes that a psychologist role is to join into the family and for a while become a family member. He writes that "a therapeutic impact onto the family is a necessary element in family diagnostics. The therapist cannot just observe the family and provide a diagnosis while remaining a stranger" (Minuchin 1978). By "joining" the family the psychologist provokes a mini-crisis of a major significance: strong rigid bonds and relations became slack which gives this family a chance to change its boundaries, to enhance them and thus to change its structure.

S. Minuchin identifies seven ways a psychologist can work to restructure a family: actualize family transactional patterns, mark boundaries, escalate stress, assign tasks, utilize symptoms, manipulate mood; support, educate or guide.

Another type of system-based approach – a Strategic Family Therapy – is wide spread. (J. Haley, C. Madanes, P. Watzlavick, L. Hoffman and others). Here the therapist mainly focuses at making family members responsible for each other.

Sometimes the strategic framework includes a systemic family therapy variation developed by the Milan scientific school. However, the work here is aimed at the identification and transformation of subconscious "rules of the game" which underpin family's ill-being. "Family games" (first described at Eric Berne's transactional analysis) are based on an erroneous belief of family member that they can unilaterally control interpersonal relations within their family by manipulating other family members. A psychologist (therapist) first shall identify what reactions of family members result in "connections" which make this family unhealthy (diagnostics) and then shall help with recognizing these connections and developing productive ways of cooperation.

Another structure used to analyze spousal interaction is a concept that all family conflicts are based on a subconscious wrestle between spouses for power and influence, their competition and rivalry (for Russia it is expressed in a proverbial question about "who is the master of the house?"). In this psychotherapeutic model the counselor will focus at setting the right balance between the spouses when victories/losses of one will be compensated by victories/losses of the other.

Practical Aspects and Methods of Perinatal Psychology

Perinatal psychology views family systems as a live organism on a genetic foundation. Comparing family systems to a tree (N. P. Kovalenko) is a common allusion since it illustrates well the necessity of and the connection between all system parts where ancestors/grandparents are the roots, actual parents are the trunk and children are branches and fruits. The tree image is often used by perinatal psychologists to describe a family system and to give a graphic representation of deep links between family members underpinned by genetic kinship and their dependence on deep-rooted psychological and physiological ancestral programs (Kovalento 2006).

A family system analysis recreates a "family tree" that to some extent is similar to a "system" under the systemic approach but is visual and focuses on family's integrity of a life organism with interdependent parts.

Bonds which determine family interaction levels are:

- genetic;
- historic (event-based);
- personal (individual);
- psychological (emotional).

Using the "family tree" image becomes especially important in counseling of young families because it helps young people to realize and feel the connection and the continuity of generations, the responsibility for their children and the importance of parental roles. The model studies families as live organisms rather than structures or systems and let one naturally feel that family relations are rather the way of life which nurtures and determines generational bonds than ties or connections which limit the freedom and uniqueness of family members.

Perinatal psychology has a comprehensive range of methods aimed to engage a creative potential of young parents – especially of mothers – in shaping parental roles, recognizing emotional problems and difficulties in family relations espe-

cially while preparing for labor. There is a specially developed model of Resource Art Therapy (Kovalenko 2008) which is successfully used in family counseling especially during pregnancy.

Family counseling in perinatal psychology is preventive but if a young family has psychological problems, then psychotherapeutic programs are applied to correct pathological emotional states, to resolve conflicts, to treat anxieties and pain syndromes. The therapy uses models of family constellations (N. P. Kovalenko) which do not require that all family members participate in the therapy and are aimed to treat pathogenic feelings of a specific family member who approached for help and recognizes the therapy need. The constellation is set up based on the experience of recognizing the patient's psychosomatic complex which was formed due to pathological family relations.

Most of perinatal psychology methods are aimed at teaching young families parturient skills. It is done by using "family constellation" models and art-therapy in order to create an image of a successful labor and generate effective attitudes towards labor and parturient feelings.

For 10 yeas of observing family couples who prepare to a labor with partner we see that having a child when the father is present does good for the family. However, some negative outcomes have been also registered when a husband/father is not prepared to witness this dramatic physiological process. Some men face major difficulties after the baby is born: they feel sacrum and chest pain, have depression and loose sexual interest in their wives.

The examination of life stories of such men showed some common patterns: periods of "being unwanted" during pregnancy, traumatic birth, difficult relations between their own parents during breast-feeding and the yearly age. All of it resulted in neurotic complexes pushed out of the conscious domain and in an inclination toward anxieties and depression. The non-constructive and pathogenic family relations inherited from the early childhood become the basis for these men to form their own emotional experience and parental feelings which gravitate towards being pathogenic and very often subconscious.

It is required to work profoundly and tactfully with the content of both conscious and subconscious domains of such future fathers to provide them with an effective assistance. These methods were developed by perinatal psychology and psychotherapy. Perinatal psychotherapy is aimed at working with one's psychological and memory content from the perinatal period and onwards. At the counseling start the model can use spontaneous or theme-based drawings of a patient as its support vehicle. The drawings are usually related to fears, kinship and intimate relations. The above counseling also uses the analysis of the Patrimonial Family System.

The Concepts of Counceling

Informational counseling is a well-known psychological method and is used in lectures, talks, workshops, discussions, exhibitions of psychological books, viewing/discussion of videos in terms of a psychological analysis of the characters' behavior. Programs run by the Russian Association of Perinatal Psychology and Psychotherapy widely use the above methods. Educational counseling can be used at schools, with students and at youth centers. Since recently many Marriage Offices started to arrange youth groups where a psychologist lectures about male and female psychology, about the first year adaptation of young married couples, etc.

It is really important that young families receive information about the first childbirth and positive childbirth information. This information is often unavailable at their families and friends. It can be done by viewing videos about young couples who bore great healthy children. Disseminating of positive parental experience is very timely nowadays because mass media is full of quite opposite information focusing on pathologies and labor pain. But childbirth is a prerequisite of human existence and is beautiful.

Sometimes information is provided during one-on-one psychological counseling when there is no need for correction and to resolve his/her problems a customer just needs the information or is offered to read certain books, attend lectures or group sessions.

The Russian Association of Perinatal Psychology and Medicine established the University of Parental Culture where young couples and parents are taught the science of being good parents, staying healthy and bringing up healthy children. This is the venue where only positive experiences get shared as well as updated information on how to make relations between family members and their health stronger is passed around.

The book titled "Psychological Case Studies" by N. P. Kovalenko (2006) describes a practical model that can be used either by family counselors or by spouses on their own. The book focuses on the most common acute problems of young families such as relations, love, money, sexuality, etc. Working on these topics under the schema provided in the book one can simulate the development of a required resource of a family member or of the family as a whole. The work is based on developing the effective statements of I want, I believe, I can. These formulas show a gradual process of developing a desire into a statement and then into taking a decision to act. The process often is hampered especially when new spouses or other family members are in a difficult situation. To put on an adult role one must take a mature decision and a mature action. The action must develop its potential and reach an efficient result. Conscious decision and acts is a sign of wisdom and experience in life and family matters and that requires patience, knowledge and inner culture.

This method allows one to realize his/her personal resources as well as attitudes and stereotypes which block the success. By becoming aware and finding new solutions this person either independently or with a counselor's help overcomes these limitations and thus the basis of a new resource gets formed.

Counseling under this method a psychologist helps to identify a psychosomatic complex hampering one's personal development, growth and cooperation.

Generally the complex history goes back into one's early childhood and is related to the system of relations with one's parents that are fixed in emotional and somatic reaction stereotypes.

The development of new principles in and new standards of relations which help to acquire new forms of relations and reach a new quality of being your adult self and a parent is the objective of such counseling. Pre-marriage counseling and counseling of young families expecting a child or of young families who just had a child are important elements in family counseling. Having acquired the new status and getting ready to become parents young spouses very often feel the need to improve their knowledge and capabilities on how to facilitate a successful childbirth and to help each other during such difficult time. This is the time when psychological problems associated with new rights and duties of parental roles emerge as well as emotional conflicts that young people are not always able to resolve on their own.

However, the approach mainly focuses at psychological health of the baby from its antenatal life. Family is the environment which ensures the basis of child's good mental and psychological development. And here a psychological status of future mothers (psychological health, motivation to become a mother, self-assessment, abilities to self-evolution) plays a special role (Kovalenko 1998). However, it is proved that father also actively impacts the psychoemotional domain of the mother/child system during his wife pregnancy and at birth. Perinatal psychology views mental life of intrauterine babies as active and reflective of strong emotional bursts of its parents that are registered into the baby's subconscious domain and later can manifest itself through an inclination to certain emotional reactions, behavior patterns and life strategies. Things that are important: whether the baby is wanted; what the pregnancy motivation is and what the birth experience was. The latter greatly depends on mother's and father's competence and abilities to at maximum reduce the birth trauma by applying specific skills and practices in the delivery process. Therefore, a prenatal family counseling covers:

- psychoprevention of emotional crises in young families;
- psychocorrection of internal family relations and balancing of family bonds;
- preparations to parenthood and labor;
- psychocorrection of pathologising emotions in pregnancy (anxiety, fear, offense);
- help growing into mother's and father's role and teaching of parental functions;
- resource therapy to family members who cracked down under the psychological and emotional pressure of child expecting and delivering (N. P. Kovalenko, 2000).

Miscarriage and baby loss is a special area in perinatal psychotherapy. Routines of working models described in western literature for such issues are not always effective with Russian mentality. Works at maternity clinics and developing a special approach to child loss in/after delivery helped to create an original model of coping with such losses. The model is based on perinatal psychology principles. These circumstances especially fit for using resource technologies of family therapy. However, it shall be noted that there is no single model of working with such traumatic situations. Each woman survives the loss of her child in her own way and that depends on her emotional and personal characteristics. Therefore, working with each such case must be unique and idiosyncratic and requires of psychotherapist to be trained and experienced. The Russian Association of Perinatal Psychology and Medicine examines in detail instances of child loss and accumulates the statistics which is then discussed at workshops and conferences.

References

Kovalenko NP (1999) Monograph Perinatal psychology. 1 edn. Saint-Petersburg
Kovalenko NP (2000) Monograph Perinatal psychology. 2 edn. Saint-Petersburg
Kovalenko NP (2000) Perinatal psychology (Theory, methodology, experience). Petrozavodsk

Kovalenko NP (2008) Perinatal psychology and psychotherapy. Saint-Petersburg

Natalia P. Kovalenko, Doctor of Psychology, Professor, President of the Russian Association of Perinatal Psychology and Medicine; the President of the International Family Academy of the Russian Educational Academy (St. Petersburg).

Correspondence adress: RAPPM, Natalja Kovalenko, Prospekt Hydojnikov 2, Korpus 1, ku. 348, 194354 St. Petersburg, Russia

E-Mail mipu@yandex.ru, mipu2008@yahoo.com