

Prenatal Experience as a source of healing further education with Franz Renggli

Level I: Introduction

About the evolution of the mother-child relationship. The alienated parent-child-relationship in our own culture: the history of infancy.

Basics about pre-verbal experiences: the history of prenatal psychology and psychotherapy. An introduction to the emotional life of a baby during pregnancy and birth: what we know from our work with regressed people about this early pre-verbal period and what we know from direct observation (scientific basis).

What is the essence of a trauma? Seen from the cultural evolution of the human race: why are we human-beings polytraumatized? I teach the basics of the trauma healing of Peter Levine: work with resources – never re-traumatize patients. This technique will lead us as a guiding thread through all the training courses.

Demo of my work in birth-workshops: I show, in the group, how I accompany someone through birth and pregnancy.

Demo of my work with a baby and his/her family. Basics of the baby-therapy or therapy with little children.

During my whole training, the trainees work in small groups of two to three people: one person is in the role of the therapist, the other in the role of the patient – afterwards the roles are changed. This means:

Self-experience of one's own earliest experiences in pregnancy, birth and babyhood.

Experience of how somebody, as a therapist, can accompany other people on a bodily level to these early hurt feelings. Important is that our patients – strengthened by their resources – can make a new, a healing, experience. At the end of these small groups we discuss in order to understand their meaning and in what kind of depth we accompany our clients/patients.

Integration and questions from practice: what consequences for the work with patients, result from these new experiences about my own pre-verbal period: how can I make use of these new experiences in my daily work?

Level II: Birth

Birth among animals and human beings.

The special situation of humans: their upright position and strong development of the brain: both complicate the birth situation in the human race. Every traditional culture has its own forms of birthing. Where do the origins of birth complications in our culture lie? Separation of mother and baby in the 20th century and the new development of no longer separating them.

Demo with a doll and the pelvis: the different stages of birth. Conjoint points and pathways, cranial deformation.

Birth practice in our own culture: anesthesia, labor induction, labor intensification, epidural, forceps, vacuum extraction, and Caesarean section: what consequences do these techniques have for a baby and its bonding process with the mother? Late consequences of trauma/shock experiences. What is the meaning of an undisturbed birth, homebirth?

Shock and trauma: what kind of shock and trauma experiences does a baby have in his/her pregnancy and during birth? Newborns with and without trauma/shock experiences. Symptoms of shock and trauma in adults. Physiology of shock: dissociation, split-off, fragmentation, freezes. Why are human beings polytraumatized although they have no life-threatening experiences in their daily lives-experiences. Animals have to live with these constantly, but mostly show no signs of trauma?

Body language of resources, the root of our strength, joy and meaning in life and on the other hand, the body language of shock and trauma. How can we work on our daily practice with these trauma and shock patterns?

Self-experience always takes about the half time of a training course: I show my trainees different techniques to accompany themselves and later in their practice, the patients, through the different stages of birth. In small groups- as in level I – people learn about their own birth, what kind of experiences they made then and how these traumas influence their lives. Integration of questions about the new experiences for our daily work.

Prenatal Experience as a source of healing further education

Level III: Pregnancy

Embodiment: how the soul enters the body and even before: how the soul separates from its divine origin? Sperm journey and egg journey. Conception. Journey of the fertilized egg through the oviduct and its implantation on the 7th day after conception in the uterus. Near-death experiences at this early time.

The lost twin phenomenon and the consequences for our later life.

The discovery: when the parents, for the first time, realize consciously that they are pregnant and their reaction to the new baby. The parent's ambivalence and how the baby feels it.

Navel affect.

Technique of touching patients, to accompany them on a bodily level: when, how and where are they touched? When there is a contra-indication to touching people? And how to work on a bodily level? How is the reaction of patients to touch to this kind of

to work on a bodily level. How is the reaction of patients to touch, to this kind of holding and warmth?

Working with anger and rage: Aggression is mostly strong discouraged and prohibited in our society. So it is our first task to diminish the anxiety of these forces. And then to find their origin: the fire in our body, which helps us to set boundaries and to be curious in our lives. This is the source of our strength.

Themes of abandonment and of old hurt boundaries, as the roots of conflicts in our lives.

Transference and counter-transference: the more trust there is in a relationship in love as well as in therapeutic relationships – the more the old shadows, the old deep hurt feelings resurface. We re-enact all our early life dramas continually – with the aim/hope of healing. How can I handle my counter-transference in the bodywork with my patients: what happens in my body during my work?

Working with babies and their families: as in every level of my training I demonstrate my work with one baby and its family to broaden and deepen my technique of baby therapy. And to work with a baby it is necessary to work with the birth and pregnancy traumas of the parents as well: through their baby their old “inner hurt child” is strongly awakened. As long as their old wounds overshadow them they are not really open for their baby.

As in every level of my training, the self-experience takes about half the time: to experience the beginning of our lives from conception through the whole pregnancy.

Prenatal Experience as a source of healing further education

Level IV: Birth workshop

I show the trainees how they themselves can hold birth workshops: accompanying 5 patients, in two days, through the earliest traumatisation of babyhood, birth and pregnancy. The patients are always in good contact with their resources: every human being has a divine core and that means, is whole or healed in the center. Everyone who would like to give such birth workshops later on in her/his practice has the opportunity to work with anybody from the group: there are no small groups anymore – all is concentrated in the training group as a whole. Now a therapist can feel the power of big group, going back with a patient to the earliest time of life. And I am ready for life supervisions during these processes.

Theory: new research in neurobiology: the creation of new neuron synapses and neurotransmitters after a good healing-experience. On the contrary: after a trauma a lot of neurons and synapses die. The dominance of the right hemisphere during babyhood, birth and pregnancy with the imprinting of bodily sensations, feelings and bonding experiences. Imprinting is implicit which means there is no, or a very, limited access to the conscious level of mind, the research of Allan Schore. And finally: It is not our genes which regulate our bodies (genetic determinism), but the genes that are regulated through the

environment, through our experiences with our parents, the research of epigenesis, of Bruce Lipton.

Problems in practice are more important now: what kind of experiences have the trainees made in their practical work? What kind of difficulties showed up? What kind of support do they require in the future to do their work? The question of intermission and supervision.