

Integrated Prenatal and Perinatal Dynamics: An Innovative Model of Care that Combines Somatic Trauma Resolution, Midwifery, and the Baby's Experience

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Background

- Nearly 4 million babies are born each year in the United States, with statistics showing a slight decline in births in 2021 to 3.7 million.
- Currently, the majority of births (98.4%) happen in hospital settings (MacDorman & Declercq, 2019).
- Currently, as many as 45% of birthing parents report their births as traumatic, with 60% saying they had traumatic experiences within their births (Svanberg, 2019)
- The US has the highest maternal mortality rate among developed nations, with an exponential number of women nearly dying (severe maternal morbidity).
- The CDC (2022) reports that in 2014 for every parent who dies in childbirth, 70 nearly die, resulting in a morbidity rate of nearly 50,000 per year.
- Patient safety groups report that number is much higher, with 80,000 parents reporting "severe maternal morbidity" (NPR, 2018).
- Birth trauma, perinatal depression and anxiety, and PTSD are on the rise greatly attributed to the COVID pandemic (Basu, et al, 2021), and the impact of these experiences can be measured in billions of dollars.
- The projected costs of maternal morbidity from birth trauma from conception through age 5 is **\$32.2 billion dollars** (O'Neil et. al, 2021).

Our Model of Care

Integrated Prenatal and Perinatal Dynamics

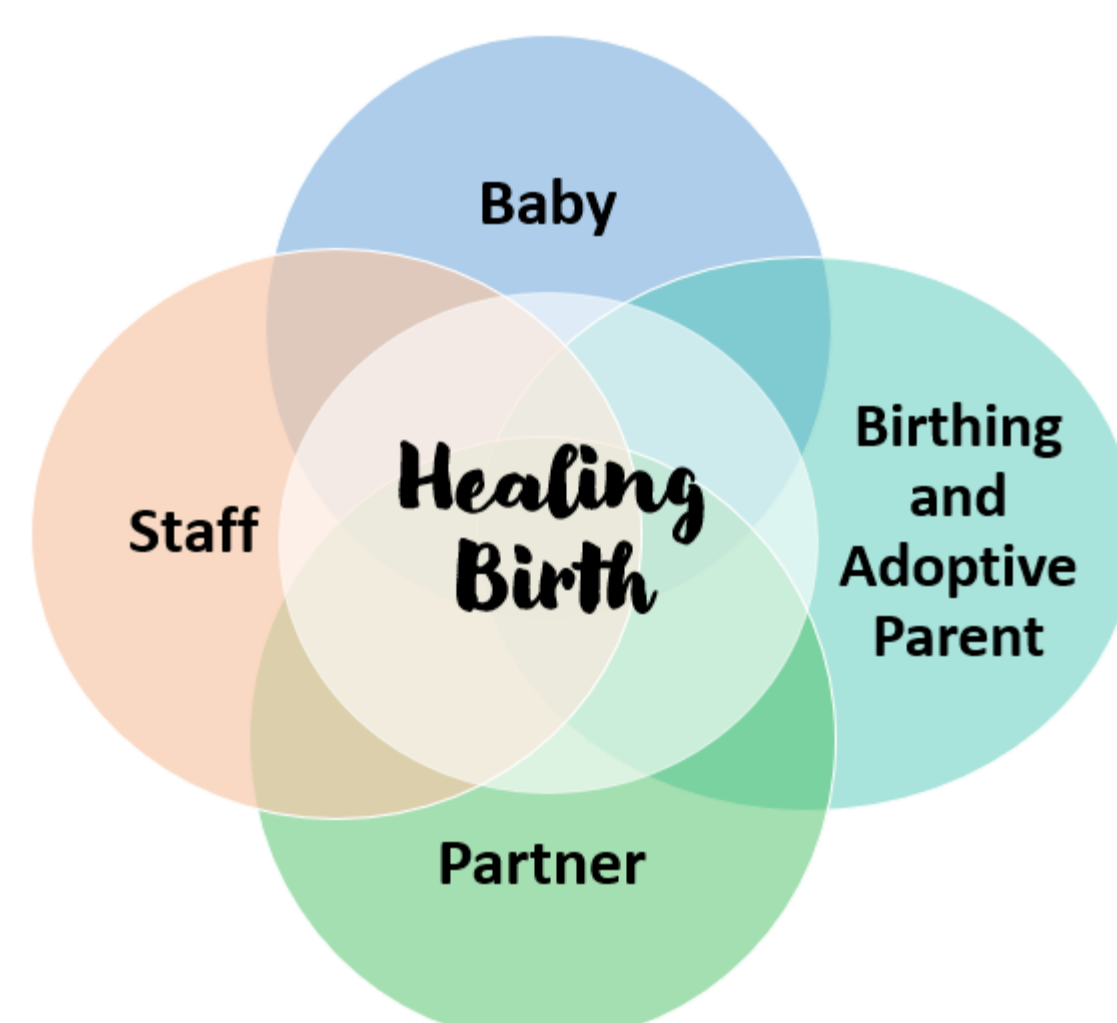
Integrated Prenatal and Perinatal Dynamics



- Built on several approaches:
 - Prenatal and Perinatal Somatics
 - Somatic Trauma Resolution Skills
 - Midwifery
- The Autonomic Nervous System and Trauma Layers
 - Trauma-Informed
 - Polyvagal and Trauma Skills
 - Applying these to Birth Professionals
 - Relational Field Dynamics that Start Early in Life Repeat
 - Therapeutic Spaces and Birth Spaces, How Are They Similar?

Our birth model addresses morbidity, and not just the birth injuries, but also how birthing families feel traumatized by how they were treated by professionals. We use layers of perinatal experience starting preconception as the schemata for our model of care, and then build in the somatic trauma resolution relational pieces, the midwifery model, and an understanding of just how vital this experience is to our neurodevelopment as a species by including the baby's experience. We also educate about how the body "keeps the score," (van de Kolk, 2014) as now a standard of wisdom about health in humans, and how this memory starts in utero.

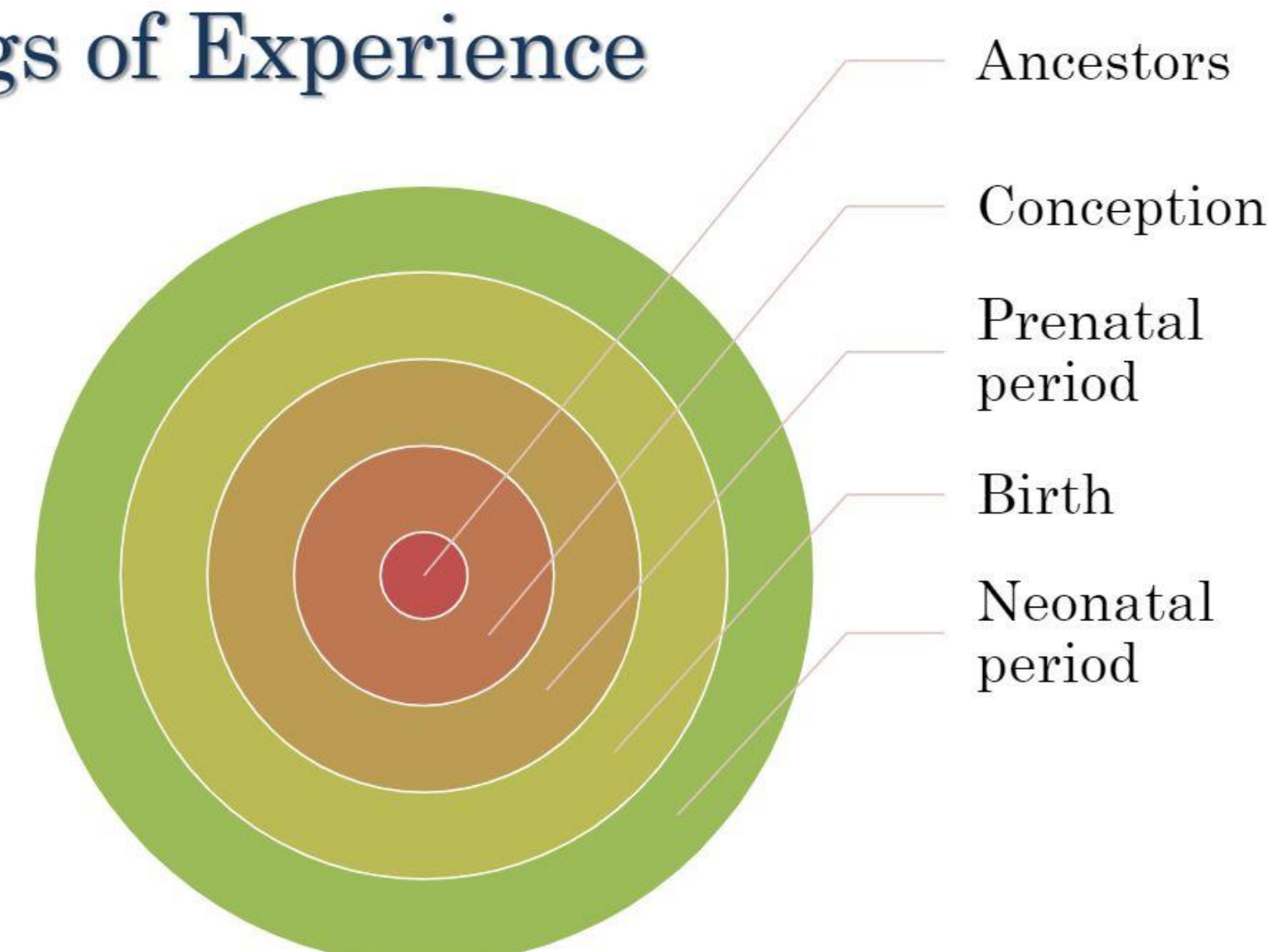
Our model employs recognizing instinctual stress and threat responses during a very vulnerable threshold moment in human development and teaches practitioners to help clients/patients integrate their experiences. We include everyone that is part of the prenatal and perinatal experience.



Curriculum

Our curriculum combines somatic trauma resolution skills, midwifery model of care and understanding the baby's experience.

Rings of Experience



The concentric rings of experience build upon each other. We offer an understanding of the autonomic nervous system and how the body processes shock and developmental trauma, both of which happen in births. We offer an introductory course that allows participants to experience and understand the model of care called Foundations in Prenatal and Perinatal Dynamics. Then we offer three beginning, three intermediate, and three advanced modules. They are:

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| Module 1: Preconception/Conception Dynamics | Module 2: Prenatal Dynamics | Module 3: Physiologic Birth Dynamics |
| Module 4: Chemical and Womb Dynamics | Module 5: Birth Intervention Dynamics | Module 6: Postpartum Dynamics |
| Module 7: Blueprint and Double Bind Skills Identification and Practice | Module 8: Double Bind Protocol Definitions and Practice | Module 9: Double Bind Skills and Protocol Application to Modern Birth Conditions, Setting and Outcomes |

Program Participants

We currently have trained 114 professionals in our Foundations in Prenatal and Perinatal Dynamics course, an introductory course for the full training and we have graduated 3 cohorts (20 people). Current training includes 6 modules for graduation, with the last three modules offered as advanced training. Professionals include:

- Birth Professionals (Midwives, Doulas, Obstetricians, Nurses)
- Advanced Bodyworkers (Biodynamic Craniosacral Therapists)
- Somatic Trauma Resolution Specialists (Somatic Experiencing and other trauma therapists)
- Professional Counselors and Mental Health Specialists
- Breastfeeding Support
- Childbirth Education and Perinatal Coaches

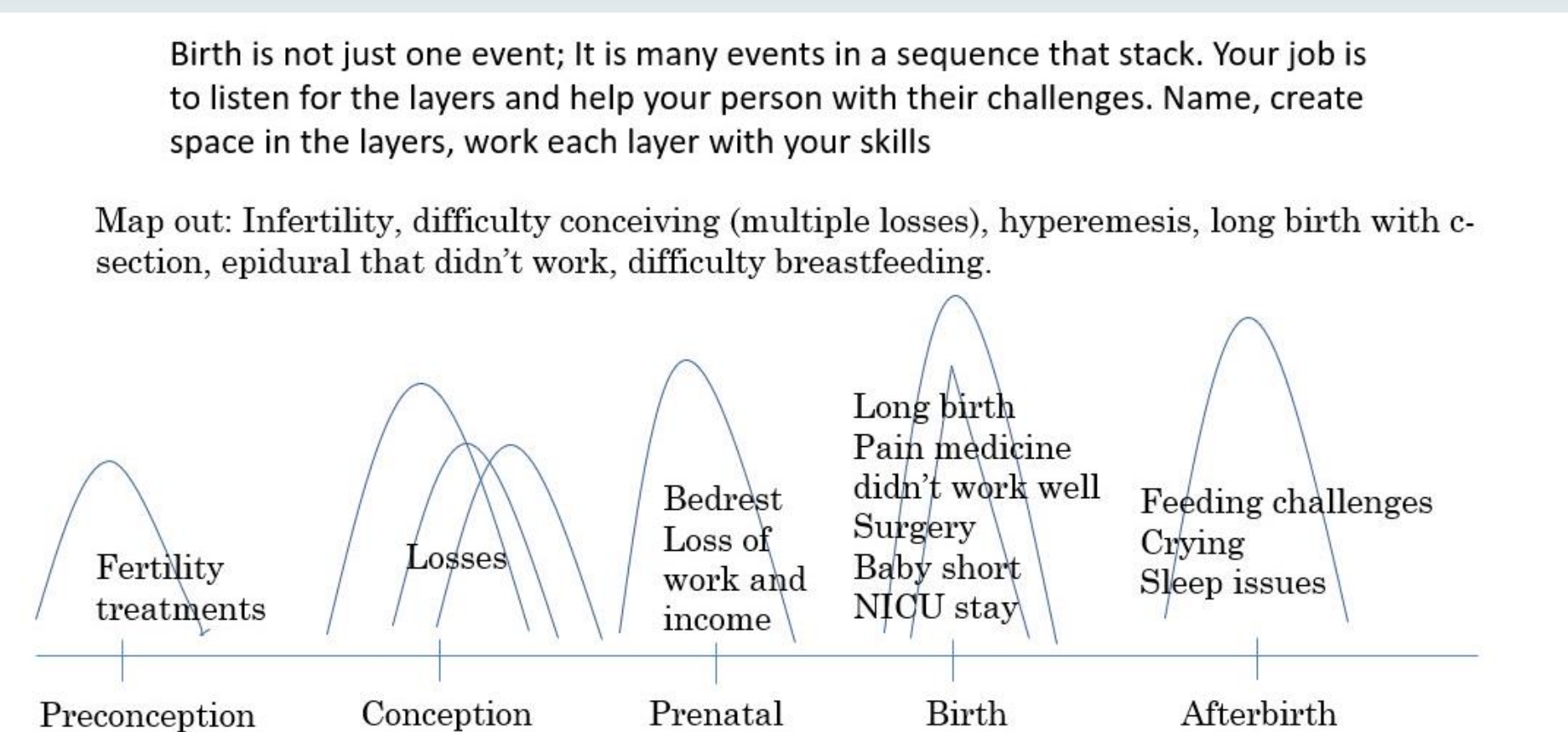
Skills

Experiences happen in layers and in sequences. We can address what happens for families by understanding all the layers of experience. We can then work with the timeline to track overwhelming experiences in the body. We work with sensation, tempo and pacing. When we slow the pace, we integrate using five practitioner skills:



Source: Anna and John Chitty, Colorado School of Energy Studies, used with permission from their website, energyschool.com.

Treating Prenatal and Perinatal Trauma



We teach professionals to understand how trauma shows up in the body, and then how to facilitate integration using specific skills. Our skills work with the autonomic nervous system instinctual responses. A birthing timeline can have many places where trauma shows up, and our trainees track where they are in the prenatal and perinatal sequence.

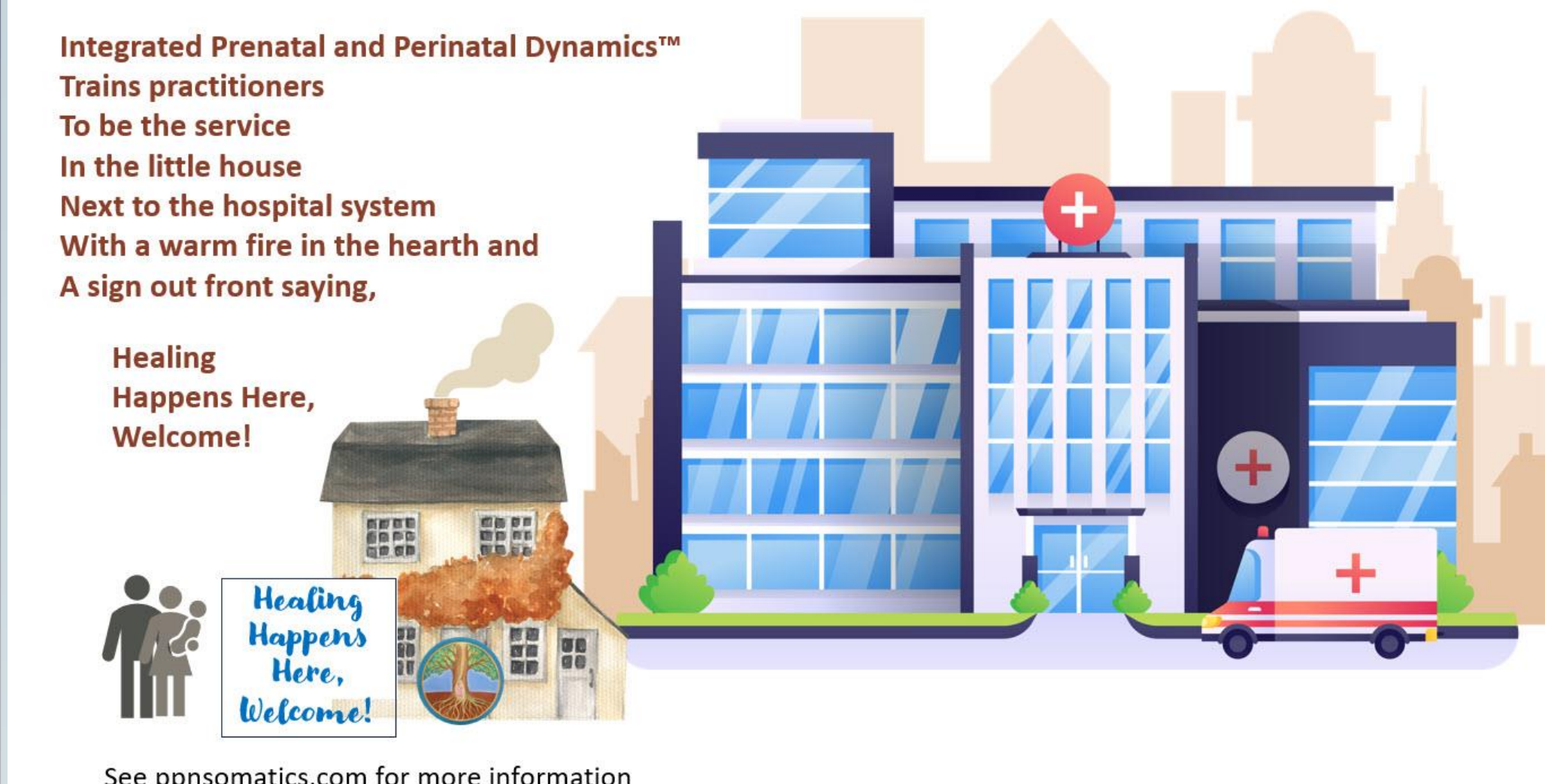
Including the Baby's Experience



We know that the body carries the memory of what happened somatically. Babies remember their experiences, and they show the story in their body through posture, gesture, crying and other behaviors. Children and adults also carry the memory of what happened to them as babies. We include the baby's experience starting preconception based on prenatal and perinatal somatics, a new field of study that has grown from birth psychology. This model is somatic, not psychological.

Conclusions

There is room in the field for a new professional who has expertise in somatic trauma resolution, midwifery models of care, and the baby's experience. This professional can be integrated into existing care or have their own practice beside hospitals to provide continuity of care, birth preparation, and trauma prevention and treatment for birthing and postpartum families.



References

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"I felt seen, heard and validated, and that there is a path I can walk down. I feel I have softened, and the work has helped me feel hopeful."

- Parent in North Carolina, US who has benefited from the Integrated Prenatal and Perinatal Dynamics approach