

# Basic Trust is Crucial for Life. How Can a Newborn Child Gain Basic Trust?

**Manfred Doepp**

HolisticCenter, 13 Haupt St, Abtwil 9030, Switzerland

**Corresponding author**

Manfred Doepp, HolisticCenter, 13 Haupt St, Abtwil 9030, Switzerland.

**Received:** February 08, 2024; **Accepted:** February 16, 2024; **Published:** February 20, 2024

## ABSTRACT

A decisive course for life is set in the earliest phase, namely during the birth trauma and in the immediately following postpartum minutes. Here the newborn either gains its basic confidence for life or not. The consequences are not only significant for the individual, but also for society as a whole, which has to pay for the costs of psychological problems as part of health insurance solidarity. The behavior of the obstetrician, but above all the midwife, is important. The newborn needs attention, warmth and immediate contact with the mother. This empathy would be an “investment” that would certainly pay off for everyone involved.

## Introduction

Every birth is both a dramatic event and a risk. It is common to all mammals, and one might wonder why there are hardly any problems with animal births in the wild. Mammals coexisted with dinosaurs around 65 million years ago (the principle of egg-laying and hatching was preserved in birds) and after their extinction took over the reigns of terrestrial life. Accordingly, uterogenic birth should be a successful model of nature (Figure 1) [1]. However, it should be borne in mind that the erection of the earliest humans made the inner diameter of the pelvis narrow relative to the size of the child's head.

In more recent times, however, we have seen the natural birth process with the assistance of a midwife being increasingly replaced by interventions by obstetricians, with caesarean sections already taking place in the majority of births in some regions. This eliminates the birth trauma that nature intended. A step forward?

In the context of evolution, we should assume that nature - as it has had many millions of years - has optimized a process such as birth, and that birth therefore has advantages for the relationship between the newborn and the mother. And finally, the painful birth process is already mentioned in the Old Testament as a woman's task. Never again will mother and child have such a close relationship as during childbirth.

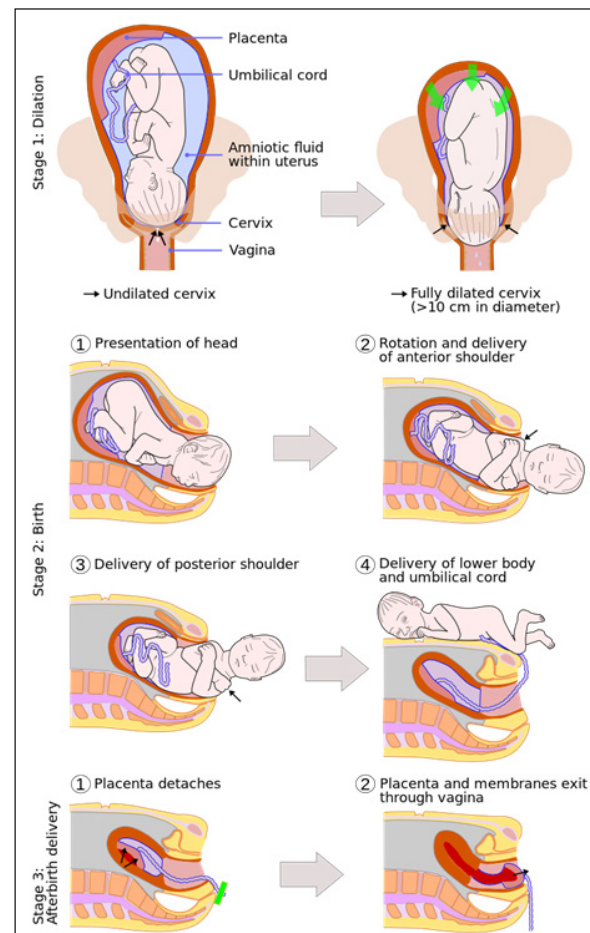


Figure 1: The phases of a birth

### Birth Trauma

For the newborn, leaving the security of the uterus and stepping out into the cold world of the birthing room is a shocking experience. The birth trauma is a lifelong psychological burden and must be dealt with and worked through. However, this trauma can vary greatly. If the birth took place in water at about 30 degrees (in a pool of water or even in a tropical sea), the trauma is not significant and can be overcome relatively easily. Following the birth, a basic trust develops in the child's psyche: "the world is not cold, but warm, and I am not alone, but safe."

However, the birth trauma is considerable and difficult to overcome if the midwife and/or obstetrician do not treat the child with love, as was unfortunately often the case in the past. It was common for the baby to be grabbed by the feet and lifted up, slapped on the buttocks so that it would start to cry. The umbilical cord was cut immediately and the child was placed on a cot in a room with a temperature of 22 degrees. Result: no basic trust. This person would find it difficult in life to trust life or God or fate, but would retain a mistrust: "The world and life don't mean well with me, they are a burden on me."

### Development of the Term Birth Trauma

Apart from physical birth trauma, the term birth trauma is used in connection with the negative psychological consequences of childbirth. It goes back to Otto Rank, who published the book "The Trauma of Birth and its Significance for Psychoanalysis" in 1924. In it, he dealt with the psychological after-effects of childbirth and also with reflections on the prenatal experience of the foetus. Rank assumed that birth leads to an overwhelming experience of fear in the foetus. He suspected that this trauma could be the trigger for numerous later fears, including the fear of the female genitalia, and that the theme of birth could be found in dreams, symbols, myths and works of art [2-4]. Rank attributed some fears to memories of the womb, such as the fear of being alone in a dark room. He further assumed that at least the late prenatal period can be remembered in certain aspects. Rank had thus developed a prenatal psychology that he applied to cultural aspects. For example, he understood the Christian concept of hell as a consequence of the "intrauterine situation with negative signs". Winnicott adopted this in 1949 [5-7].

In "Topography of the Unconscious" from 1975 Stanislav Grof interpreted the experiences of his patients in LSD intoxication directly with the help of his pre- and perinatal psychological concepts (the so-called "perinatal matrices") [8]. Like many prenatal psychologists, in the course of his theoretical developments he increasingly placed these reflections on memories of his own birth in a quasi-mystical context with comprehensive concepts of the world. Grof influenced the work of the American social scientist Lloyd deMause. In an essay from 1981, he compiled both the various psychoanalytical theoretical approaches to the prenatal period and the empirical findings on the physiological characteristics of human ontogenesis. In his approach, he combines prenatal psychology and assumptions about the experience of one's own birth. [9].

### Basic Trust

In 1950, the Freud student and child psychologist Erik H. Erikson introduced the concept of "basic trust" in "Childhood and society" [10]. In the first German edition of Childhood

and Society in 1957, this term was translated as "basic trust" [11,12]. Basic trust develops in very early childhood through the reliable, consistent, loving and caring attention of caregivers. It provides the inner emotional security that later enables trust in one's environment and contact with other people in the first place. Basic trust enables anxiety-free interaction with the social environment [13].

It is therefore the basis for:

*"Confidence in oneself, self-esteem, ability to love ("I am worthy of being loved." "I feel safe.")*

*Trust in others, in partnership, in community ("I trust you." "We love each other." "I know I am understood and accepted.")*

*Trust in the whole, in the world ("It's worth living.")*

### What Would be Optimal?

What would be a better method than the usual? Apart from a logical and sensible water birth, the baby should be placed on the mother's chest immediately, covered with a warm, fluffy blanket. The umbilical cord should only be cut after about 30 minutes. The birth area should be warmed with an infrared lamp. A child born in this way develops a basic trust in life and will have few psychological problems later in life.

Unfortunately, midwives in many maternity clinics are losing their thousands of years of expertise in accompanying and guiding the birth process. Male obstetricians (mostly gynecologists) rarely have the necessary empathy or empathy and also rarely have the patience and time to deal with the birth and the newborn without stress. The caesarean section, which is actually appropriate for problem births, corresponds to this mentality. Unfortunately, it does not follow what nature intended. And nature should always have top priority.

### Conclusions

In the trend of our general mechanization, even the most natural process in the world, birth, is being subjected to rationalization and functionalization. This tendency contradicts what nature intended and what would be right for the psyche of mother and child. Many psychological problems in later life are based on the fact that in the crucial minutes after entering this world, the newborn does not experience the care, love, warmth and security it needs. It would be easy to change if you wanted to.

### References

1. <https://de.wikipedia.org/wiki/Geburtstrauma>
2. Otto Rank. The Trauma of Birth and its Significance for Psychoanalysis. 1924. 61.
3. Otto Rank. The trauma of birth and its significance for psychoanalysis. Fischer, Frankfurt. 1988. 98.
4. Otto Rank. The trauma of birth and its significance for psychoanalysis. Fischer, Frankfurt. 1988. 142.
5. Donald W Winnicott. Birth Memories, Birth Trauma and Anxiety. In: Collected Papers: Through Pediatrics to Psychoanalysis. Routledge, New York. 1949. 174-193.
6. Donald W Winnicott. Birth Memories, Birth Trauma and Anxiety. In: Collected Papers: Through Pediatrics to Psychoanalysis. Routledge, New York. 1949. 177.
7. Donald W Winnicott. Birth Memories, Birth Trauma and Anxiety. In: Collected Papers: Through Pediatrics to Psychoanalysis. Routledge, New York. 1949. 185.

8. Stanislav Grof. Topography of the unconscious: LSD in the service of depth psychological research. Klett-Cotta, Stuttgart. 1975. 122.
9. Lloyd De Mause. The fetal origins of history. In: The Journal of Psychohistory. 1981. 9: 1-89.
10. Peter Conzon, Erik H Erikson. Grundpositionen seines Werkes. Stuttgart. 2010.
11. John Bowlby. The nature of the child's tie to his mother, in: International Journal of Psychoanalysis. 1958. 39: 350-373.
12. Dieter Claessens. Family and value system. [1962], 4th ed, Duncker & Humblot, Berlin. 1979.
13. <https://de.wikipedia.org/wiki/Urvertrauen>