

***PARENTING BEGINS
FROM A BABY'S TIME IN THE WOMB***

WHAT WE KNOW FROM PRENATAL MEMORIES



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Prologue

You think your baby does't know?



I stayed still because I felt sorry for you, Mom.

Conceiving a child is one of life's big dramas, involving both body and soul. I believe many mothers treasure memories such as their long pregnancy, childbirth, and the moment when they finally hold their baby.

What if the baby himself could remember his time in the womb and his own birth?

Perhaps little children might still remember. With that in mind, in 2000 I conducted a survey of 79 mothers with children aged from 2 to 7 years.

The results were beyond my expectations: almost half the mothers responded that their children had such memories. In the survey I also asked how the children reacted when they talked about their memories of being in the womb; one of the responses went like this:

♠ When one mother asked, “Why didn’t you move very much inside my tummy?” the child answered “Because you said ‘It hurts,’ Mommy. I stayed still because I felt sorry for you”... (Boy - 4 years 9 months)

When the mother heard this, she remembered an incident. When pregnant with her son, she frequently had her hands full looking after her older child and felt irritated with her husband, who seemed uncaring about her physical condition.

In around the 7th month of pregnancy, the fetal movements became very strong, and she felt that the baby was punching her from inside her stomach, so she had said, “It hurts! Don’t move so much!”

She said that when she heard this from her son, she thanked him for caring for her from the time when he was still in her tummy, and at the same time she felt apologetic and guilty.

Babies in the womb are sensitively feeling what the mother is doing and

thinking. *The baby loves and cares for the mother just as much as the mother cares about her baby, or maybe even more.*

And there was another episode:

♥ “I heard Mommy’s and Daddy’s voices. Daddy was singing ‘Little Elephant, Little Elephant, what a long nose you have’”...(Girl - 3_ years)

I heard that this father played music as a hobby and was always singing to his wife’s stomach and even after her birth, he and his daughter were very close.

Babies remember being inside their mother’s tummy

Prenatal memories have been reported all over the world for over 100years. Yet it seems that generally the theory of Freud has influenced many people to think that “It isn’t possible that babies can have memories.”

However, with the development of medical technology in the 1960’s, conditions inside the womb were gradually revealed.

As a result, it was validated that babies are endowed with many more abilities than previously thought, and it is no wonder they have prenatal memories given this scientific data.

While compiling the survey, I came to realize there were certain types of patterns. First, the most common response regarding memories of being inside the womb described brightness and colors, such as “it was dark”, or “it was a bit bright”.

♠ “It was dark. Warm. Floating. Tap tap.”...(Boy - 1 year 8 months)

♥ “It was dark and warm inside Mommy’s tummy. I wanted to stay there forever.”.....(Girl - 2 years 8 months)

♠ “It was comfortable in Mommy’s tummy. It was red. It was warm. I slept a

lot.”.....(Boy - 2 years 6 months)

The next most common response concerned memories of the babies themselves moving, such as “I was dancing” and “I was kicking”.

♠ “I kicked Mommy’s tummy.” (Boy - 3 years)

♠ “I was dancing in your tummy all the time. Ah, I wish I could go back to Mommy’s tummy”(Boy - 3 years)

Some children describe the interior of the womb in detail, and many remembered the position their bodies were in.

♠ (Gesturing by stretching his hand from his belly button) “Inside your tummy, there was something white like this. Babies have a straw in their mouth, and it’s connected to the mommy’s belly. When they snip the baby’s belly button, the baby comes out, doesn’t he?” (Boy - 3 years 4 months)

♠ “When I was in your tummy, I was sucking my fingers”(Boy - 2 years 11 months)

♠ When a mother was pregnant with her second child, her son, on learning that the baby was breech, said “I had my head down”(Boy - 3 years 3 months)

The auditory sense is one of the senses that develop relatively quickly in babies. Perhaps that explains why I received so many reports of babies being able to hear sounds outside the stomach.

♠ “Daddy and Mommy were rubbing and tapping on mommy’s tummy and talking.”(Boy - 2 years 7 months)

♠ “I heard Daddy and Mommy talking, saying ‘When you are born, please

slide out easily, like this: ‘slip, slip, pop.’”(Boy - 3 years)

I was watching through your belly button.

There were some unusual responses to the survey. Some children even replied that they could “see outside”.

♥ When taken for the first time to a park where the mother had been for several walks during her pregnancy, this girl said “I know this place, ‘cause I was watching through your belly button.”(Girl - 4 years)

♠ The child of a mother who used to go for walks in an oceanfront park at dusk said “When I was in your tummy, I could see trees, buildings, lights and things. The clouds were orange like the sunset. The streets were orange, too.”(Boy - 2 years 7 months)

♠ The child of a mother who used to watch scary TV shows with her parents when she was pregnant said “Mommy, that was fun, wasn’t it? You watched those scary TV shows a long time ago. You watched it with Grandma and Grandpa. I was listening from inside your tummy.”..... (Boy - 4 years)

It might be hard to believe in ordinary circumstances, but there are still many scientifically unexplained things about human awareness and the memory system.

Setting aside the question of whether babies can really see ‘from the belly button’, it seems certain that babies in the stomach have abilities beyond our previous expectations and can sense what goes on outside the womb.

The survey also revealed many interesting examples of birth memories. The most common response involved memories describing the birth canal, such as “It hurt,” and “I felt crushed.”

- ♠ I wonder if it hurts when the baby comes out. It hurt me”(Boy - 3 years 9 months)
- ♠ (Gesturing by twisting his neck), “You have to do this to be born.”.....(Boy - 2 years)
- ♠ “I came out with my head first. I opened each door and came out.”.....(Boy - 3 years 3 months)
- ♠ “The Doctor motioned me to come to him. So I went. I wasn’t afraid any more”. (Boy - 2 years 2 months)

These memories vary according to the kind of childbirth encountered. Some children who had experienced easy deliveries answered that they “didn’t remember”, but all the children who had been through difficult births answered that they “remembered”, and furthermore, they had retained negative images.

- ♠ 9 days after the due date, the mother was given oxytocin and the labor took a whole day with the help of a vacuum extractor. “I wanted to get out but I couldn’t. It was hard. It was bright.”(Boy - 3 years)
- ♥ She was a big baby and two nurses got on my stomach to push. “My neck hurt”(Girl - 2 years 7 months)
- ♠ The labor took an hour with oxygen inhalation and straining. “It was dark and my heart pounded. Because it felt like I was falling into a narrow black hole. I wanted to say something but I couldn’t because I lost my voice.”(Boy - 5 years)

In the last case, the mother had written “easy labor” on the survey, but her child’s birth memory clearly described it differently.

When I checked this with the mother, however, she said, “The doctor said it was an easy delivery, but it was hard for me. The baby’s head was big and took a long time to come down, and they gave me oxygen and I strained for an

hour.”

There are no precise medical criteria regarding “easy labors”, but it seems that birth memories are largely affected by the way the mothers felt.

Also there were many children who claimed to remember things right after their births. The most common response was that “it was bright”. Many answers described the idea of being born through a tunnel, with a light shining at the other end.

♥ “My head hurt when I was coming out. It was very bright and cold. Mommy’s face was very strange and I kept looking at it.”(Girl - 2 years 8 months)

♠ When the train we were riding entered the tunnel, he suddenly said, “Ah! the baby’s coming!” When we came out of the tunnel, he said “He’s here!”(Boy - 2 years 11 months)

♥ “When I came out of Mommy’s tummy, it was bright and blinding. I saw many people, Daddy was there, too”(Girl - 3 years 6 months)

There were also cases in which children could remember their surroundings.

♠ “I heard Daddy and Mommy talking, saying ‘When you are born, please slide out easily, like this: ‘slip, slip, pop.’”(Boy - 2 years)

♥ “I could hear Mommy’s voice the best.”(Girl - 2 years 7 months)

Some people might think these memories must have been gleaned from listening to adults’ conversation or TV after they were born. Maybe there are such cases, but we cannot determine all the cases to be so.

As a matter of fact, there were children who vividly remembered things their parents had never told them and things that they couldn’t have known. And among them were children who remembered the rupture of the membranes.

- ♠ Labor with a break of water big enough to make a splashing sound. “When I was born, I peed and it splattered.”.....(Boy - 4 years 8 months)
- ♥ Labor in which the amniotic liquid was cloudy with meconium. “I pooped in Mommy’s tummy. Something stuck in my throat and I went ‘aaack aaack’”(Girl - 3 years 4 months)

As for the last case, her mother said, “Right after the birth, a tube was inserted through her throat to pump out the amniotic fluid. I think she was referring to the process of having something stuck in her throat.”

Start building the bond with your baby as soon as you conceive

Although the survey population was small, it seems that collated findings such as these are somewhat unusual. The results were published in the “Asahi Shimbun” newspaper, generating a much larger response from the public than was expected.

Based upon these survey results, I feel we should think anew about our approach to babies.

If we know that unborn babies are aware of what goes on in the outside world and are capable of responding to external stimuli, we can begin to communicate with them at a more meaningful level than when it was thought that “babies know nothing, anyway”.

Wouldn’t you like to start bonding with your baby from the moment you become pregnant? If you practice communicating with your baby from the time he is in the womb, parenting will be much easier and more enjoyable later on. And the method is so simple.

For example, whenever you see or hear something nice, say things to the baby in your tummy, like “Isn’t this fun, baby?” You can say anything, such as “It’s a beautiful day today, isn’t it?” or “Mommy loves this cuisine”.

Singing the mother’s favorite song is also beneficial, as the baby can sure-

ly hear his mother's voice from inside her tummy.

Whenever you feel lonely or anxious, please remember that your baby is always with you and thinking "I love you, Mommy!" Babies are sensitive to their mothers' mood changes and they share every happiness and sadness with you. Needless to say, fathers should also talk often to their unborn babies, because there is no doubt that these babies will love their fathers once they are born, for having talked to them and sung songs for them.

Furthermore, now that we understand that newborn babies have an acute feeling for the outside world, improved childbirth styles should also probably be considered. With children reporting memories such as "When I was born it was bright and the light hurt my eyes" and "It was scary," we should realize that we need to create a gentler environment from the baby's perspective rather than try to control the birth in terms of adult values. *If we acknowledge the idea that babies can remember their births, we will be able to accept newborn babies as fully-fledged human beings, not objects.*

I can't help feeling that the established childbirth scenario is overloaded with medical procedures out of fear of any potential trouble arising. And ironically, it is this medical intervention that is in fact contributing to difficult labors and deliveries.

We are now reaching a time when we need to reconsider current child-birthing methods and whether they are truly safe for the babies' physical and emotional development.

Childbirth is an important milestone for parenting, which greatly influences the character building of the baby. I hope that an increasing number of deliveries will be in the style of childbirth that welcomes the baby with the joy of living and the sentiment that this is a beautiful and enjoyable world.

PROLOGUE SUMMARY

1. Babies in the womb will retain memories of their birth.
2. Babies in the womb seem to know what is going on in the outside world.
3. Talking to the baby whilst still in the womb is important for enriched bonding.

CHAPTER 1

Babies choose their Mommies and Daddies



Hold your baby as soon as possible after the birth

My interest in life during pregnancy was initially triggered by these words from a certain educator: “The education of children will not improve without the involvement of obstetrician/gynecologists (OB/GYNs).”

On a superficial level, it might seem that there is no correlation between the education of children and OB/GYNs. However, the bond between mother and child is the foundation of parenting, and when this bond is allowed to develop during the pregnancy, the importance of experiencing a childbirth that does not sever this newly-developed bond will be obvious.

It is a fact that childbirth today involves too many routine procedures and tends to interfere with the first contact between mother and child. In many cases, the doctor or midwife will hold the baby for the mother to see, saying “Look! You have a beautiful, healthy baby!” after which the baby is whisked off to be weighed and measured. Worse still, if the baby is taken to the nursery thereafter, a whole day may pass before the mother is able to hold her baby.

Baby birds and animals recognize the first thing they see moving after their birth as their mothers, and follow them. Likewise, right after the birth is the most important time for human babies to build a bond with their mothers. To be held in the arms of the mother, with whom the baby has become familiar during his time in the womb, is much more in tune with the laws of nature than getting rushed off to be weighed and such.

In consideration of these factors, I decided to introduce “kangaroo care” at my clinic. Kangaroo care refers to the method of skin-to-skin contact that takes place naturally when the mother holds her newborn baby and places him on her belly while the umbilical cord is still attached.

This method has its origins in Colombia in South America; it was a method invented to maintain the body temperature of premature babies when there were not enough infant incubators, but the relationships between the mothers

and babies who received kangaroo care were so good that before long, this care was applied to all babies.

At first, mothers seemed surprised when putting kangaroo care into practice, but the benefits were greater than expected. In addition to the physical advantages of being able to sustain the babies' body temperature, these babies had calm expressions on their faces and didn't even cry. It was obvious from the babies' facial expressions that, even right after the birth, they were feeling at peace through this contact with their mothers.

At the same time, these mothers' own facial expressions became instantly 'mother-like' as they held their babies for the first time. The gentle sight of a mother tenderly holding her newborn baby is truly moving.

At one point, however, I had the experience of three mothers, one after the other, saying: "I don't want to hold my baby. I'm tired from the labor, so please take the baby away from here."

Furthermore, although most mothers praise and talk to their babies, saying such things as "It's so nice to finally have you here" and "You're such a beautiful baby," those three mothers didn't even talk to their babies. I couldn't bear to see this and said to them "What a cute baby you have," but they would only say "Mmmm..." and falter.

I handed the babies to their fathers and said "Please talk to your baby", but even the fathers remained mute, as if just meeting a total stranger.

I was extremely shocked by this. Until then I had believed that women were automatically emotionally transformed into mothers once their babies were born, and would naturally want to hold them, but now it didn't seem that this was true.

Practice communicating through your tummy

What should mothers do in order to become 'mothers'? To encourage these motherly feelings, I thought of a method where mothers regularly talked to

their babies from the time they were still in the womb. I thought that the bond between mother and baby would deepen if the mothers spoke to their babies everyday, and it would double as good practice for becoming a mother.

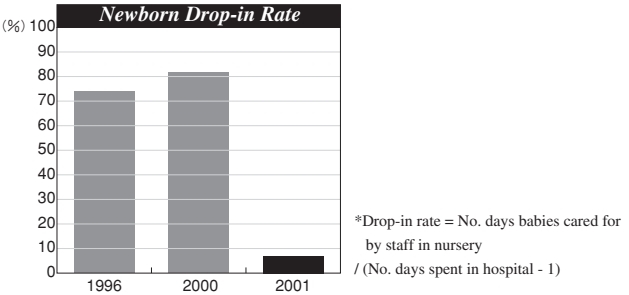
And so I asked the mothers-to-be that visited my clinic to “Please talk to the baby in your tummy.” Some were comfortable with this idea, while others found it difficult because it was hard for them to visualize.

At around this time, I learned that children retain memories of their time in the womb as well as of their birth. So I told the mothers that “The baby in your tummy is aware of his surroundings and understands much of what is going on. They can also hear your voice and all that you say.”

Following this, the number of mothers who talked to their babies increased dramatically in comparison to the time when I only told them to “Please talk to the baby in your tummy.” Some major changes became apparent at my clinic when the practice of kangaroo care was combined with the mental preparation for welcoming their babies that these mothers did by talking to their tummies. The feelings of the mothers towards their babies became noticeably different.

At my clinic, newborn babies can either be cared for by our staff in the nursery or by the mother in her hospital room. Previously, close to 90% of mothers would say “Please take care of my baby because I am tired.”

Interestingly, *while the proportion of babies cared for at night time did not decrease with the introduction of kangaroo care alone, this rate decreased drastically when I also had the mothers talk to their babies during their pregnancy. Currently, the number of mothers who leave their baby with the staff is only one or two a year.* (See the Newborn Drop-in Rate graph).



Mothers did not want to be separated from their babies and began to want to stay close to them all the time so that they could take care of them.

Furthermore, while previously there were always some mothers who reported getting the “baby blues” at their one month postnatal check-up, this no longer occurs.

They all say that “while parenting may often be difficult, it is enjoyable and most of the time, my milk supply alone is sufficient to satisfy the baby.” There has also been an increase in the number of parents who report that “It helps because I can tell what it is the baby wants.”

Babies have facial expressions when they are born

The misconception that babies in the womb have no consciousness may have caused mothers to forget how to practice being a mother by talking to their unborn babies, and may have interfered with the potential to form a bond before the birth. If true, this misconception may have a profound effect on parenting later on.

There is no doubt that the idea of “babies being conscious in the womb” is unorthodox from a pediatric studies perspective. However, just as the concept of antenatal training has long existed in Japan, can we deny that there are some things about the workings of life which cannot be accounted for by modern rationalistic science alone?

Sometimes when I observe a child’s birth, I even feel that birth is a mystery which is very close to death.

Perhaps babies who were living an airy existence in the ‘other world’ have once ‘died’ in order to be born into this world.

If so, just as we are frightened when we face death, babies must be full of fear at the prospect of birth, and perhaps their initial cry is not one of joy at being born, but a cry of anxiety and horror at being cut off from that other world.

I want to congratulate and warmly welcome these babies, who have been through so much to get to this world. Since I began to think in this way, I have noticed that babies have rich facial expressions from the moment they are born.

As a matter of fact, there is something about babies' facial expressions that is very similar to those of elderly people, whose faces seem to tell of their many life experiences and the knowledge gained therein.

The more I observed the satisfied expressions and lack of crying in babies under kangaroo care, the more I began to feel *that although a baby's body may be physically immature, in fact his soul is mature already.*

It is possible that, if babies and young children have just come from this 'other world,' then in a sense, they may be more enlightened about the truths of life than adults.

And, as if to support my hunch, I encountered several mysterious episodes as I further studied prenatal and birth memories. For example, I heard of many accounts in which the older child knew that the mother was pregnant before she herself found out.

Children who can talk to babies in the womb

- ♠ Out of the blue one day, this boy said, "I'm going to be a smiling big brother. When I'm a big brother, I'll sleep upstairs by myself." Four days later, his mother found out that she was pregnant.(Boy - 2 years 8 months)
- ♠ When someone walking from the other direction bumped into his mother, this boy asked "Mommy, is the baby alright?" When the mother asked him in surprise, "Is there a baby in mommy's tummy?" he answered "Yes, it's a girl," and patted her stomach. Several days later, a test confirmed the pregnancy.(Boy - 3 years 4 months)
- ♥ Before this mother knew that she had had a miscarriage, her daughter told her "The baby in your tummy is gone.".....(Girl - 2 years 6 months)

There are many children who definitively claim that they can see babies in their mothers' tummies, and it is not unusual for these children to be able to communicate with these babies.

- ♠ Before this mother knew herself that her breech baby had turned to the normal position, her son said "your tummy went back to normal, didn't it?" Sure enough, this was confirmed at her next check up. Also, he guessed the sex of the baby, saying "it's got no wee-wee so it must be a girl".(Boy - 3 years)
- ♠ This mother and everyone around her believed that the baby in her tummy was a girl, but her son put his face to her stomach and swore that "It's definitely a boy. I could see him."..... (Boy - 8 years)
- ♥ Once, when this mother asked her daughter "What's the baby in my tummy doing now?," she answered "Sleeping", then said "Oh, it woke up." Immediately after this, the baby started moving....(Girl - 4 years)
- ♠ This mother asked her son to "Ask the baby when it will be born." He put his ear to her tummy to listen, saying "Uh-huh, uh-huh", and said "Yay! It said it'll be here tomorrow". The baby was born the next day....(Boy - 2 years)

Also, although not as common, there were some children who answered that they could remember their existence prior to becoming a fetus.

According to the memories of these children, *it is not the mothers who choose the babies but the babies who choose their mothers.*

- ♠ A child whose parents did not conceive until 5 years after they married said "I chose my Mommy and Daddy. I was waiting for a very long time".....(Boy - 2 years)
- ♠ When his younger sibling was born, my son told me that "We were both watching you from the sky together, Mommy, and I said 'I'll go first,' and

I came”.....(Boy - 2 years)

There was also a grown woman who told me “Before I was born, I was playing with some friends on the clouds. One day, a God-like person (*Kamisama* in Japanese) approached me and said “It’s about time for you to go” and I slid down to here.”

It might seem absurd, but actually, such memories are not rare according to the study of regression hypnosis.

Regression hypnosis is a treatment therapy that uses hypnosis to search one’s memory of the past. Patients are able to recall long-forgotten memories of childhood, and some are able to go even further back, recalling and recounting memories of their birth and time spent in the womb.

Such memories seem to have some general themes in common, such as the suggestion that people are reincarnated many times as they work at growing and developing their consciousness. They say that people are born to this world for the purpose of meeting others with whom they have had some kind of relationship in a past life, and to deepen their learning experiences.

The knowledge each person gains depends on their personal objectives. Some people might be aiming to learn to exercise their imagination freely, while others might be trying to learn to forgive someone that they were unable to forgive in a past life.

Though it is difficult to validate the evidence objectively, I can’t help feeling that some kind of psychological truth is being reflected when I consider the number of people that speak of the meaning of reincarnation.

There is a tendency to believe that the decision to become pregnant is a personal one made by the parent(s), but what if there is actually a force beyond our calculations that is, in fact, behind this creation of a new life.

If one day your child should start to talk about his memories of time spent in the womb, please set aside the temptation to validate whether such a statement could be true or false, and accept these words with an open mind and an

open heart. This is because children seldom talk about such things, and you may find that these precious words are never uttered again.

If you later try to confirm this by reminding him with prompts such as “Do you remember when you were talking about...?” you may find that he has already forgotten and only responds with something along the lines of “Did I really say that?”

Our brains can become ‘overloaded’ when trying to store all the information that is accumulated, so fragments that are not immediately required are stored elsewhere within the brain. This information is not completely forgotten and can be cleverly recalled using regression hypnosis, but generally this is stored deep in a person’s memory and cannot be recollected on demand.

Possibly, these memories are forgotten because the brain treats them as having served their purpose once they have been verbalized, after which they are stored elsewhere deep in the brain.

It seems the children speak of these memories - not because they want something from their parents - but because they want their parents to pick up something from this information that they have been keeping in their hearts. Accordingly, once something has casually triggered them to speak about these memories, they can then relax and forget about them.

Thank you for choosing me

Many children love to watch ultrasound images and videos of when they were in the womb. They want to know how they were born. And they want to firmly believe that their birth was anticipated with much love.

Children who speak of happy memories, saying things such as “I was happy,” and “It was fun,” probably want to confirm that they were wanted as babies. When they hear their mother respond with something like “Is that so, darling? We were happy, too,” they are reassured and satisfied.

However, if children start to talk about difficult memories, such as “I was

lonely” or “It was really hard,” I think it’s better to sit them down carefully and reassure them lovingly, face-to-face. Difficult memories that are left unaddressed may possibly lead to many problems later on.

Even if your child’s memories seem unbelievable, accept them at face value and try to sense why they are giving you this special message. The truth in your child’s heart is surely irradiating from within this message.

As you listen to these prenatal memories, you might get an insight into what the special purpose is that your child was born to accomplish. If so, you may find yourself naturally experiencing feelings of thankfulness, such as “Thank you for choosing us over all the other couples,” and “Thank you for coming here to help us grow.”

Even those fathers that are busy at work might try to come home earlier if they knew that the birth of their child(ren) had significant meanings.

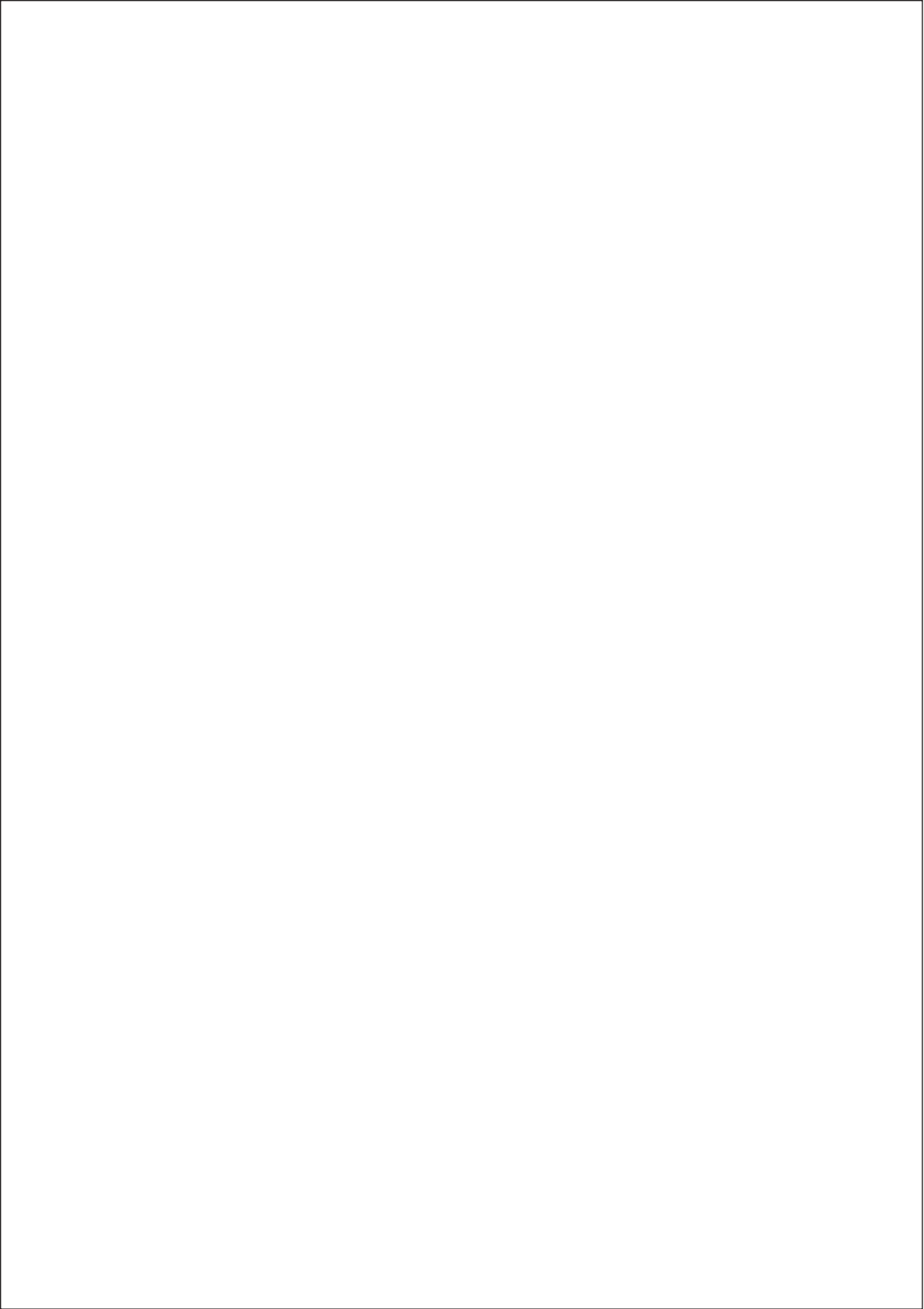
Please remember this. *Your babies were born because they wanted to meet you and be with you. It is not the mothers and fathers that choose their babies.* It was your baby that chose you as parents.

If your baby cries, please ask “What’s the matter?” If your baby laughs, then join in the laughter. Although newborn babies will not be able to talk for some time, they are trying to tell mothers and fathers many things using facial expressions and gestures.

Babies have overcome many difficulties and made a huge effort to be born into this challenging world so that they could meet you, their mother and father. Remember that they love you, the parents, very much and chose you for this role. Please welcome your baby with as much love as possible.

CHAPTER 1 SUMMARY

1. If a mother holds her baby right after the birth (kangaroo care), their relationship will stabilize.
2. If parents communicate with their baby during the mother's pregnancy, communication will be easier after the birth.
3. Some 2- and 3-year olds are capable of communicating with babies in the womb.
4. Some people can remember their existence prior to entering the womb.
5. Babies choose their own parents.



CHAPTER 2

Talk to the baby in your tummy



It's important that the mother stays happy

The concept of 'antenatal training(*taikyo*)' has existed in Japan since ancient days. People from these times must have known from their own experiences that unborn babies have a certain level of awareness.

The primary purpose of antenatal training is to deepen the bond with the baby and to lay the foundations for parenting later on. The important thing is not actually to teach the baby anything, but to make him feel secure and that he is 'loved.' In that sense, antenatal training is also preparing both the mother and father to become parents.

Please be aware of the baby in your tummy as often as possible. It might be beneficial to gently touch your tummy and imagine the baby inside. If you focus your attention on your hand, you may find a spot on your tummy that feels particularly warm. This is the baby's heart. Thermographs show for certain that the temperature of the area where the baby's heart is located is higher, and with a little care, you will be able to feel this with your hand.

If you put your hand over the baby's heart, you may find that babies who have been still up to that moment will begin to move around, or that babies who were moving around become calm.

And more importantly, because babies share their mothers' feelings completely, it goes without saying that they are most comfortable when their mothers spend their days contentedly.

A variety of hormones flow through the mother's body in accordance with her emotions, for example dopamine when she is feeling happy, adrenalin when she is scared, or gonadotropin when she feels love. These hormones are transmitted to the baby's bloodstream via the placenta and umbilical cord.

So when the mother is happy, the baby is happy too, and if the mother is anxious, the baby becomes anxious, too.

Surveys on prenatal memories also reveal this trend with clarity. Children

whose mothers spent their pregnancy contentedly tend to give responses such as “It was comfortable” and “I want to go back in Mommy’s tummy.” For example, one boy aged 2 years 10 months responded that “it was fun in Mommy’s tummy. I was happy. Sometimes it was noisy.” His mother had stopped working while she was pregnant and was very relaxed, and enjoyed spending the days with her two older children, taking them to movies and concerts. Undoubtedly, the baby was able to feel his mother’s happy mood.

His mother said that “his comment about the noisiness may have been because sometimes his older brothers would fight.”

On the other hand, a situation in which the mother is not interested in her baby and has forgotten that she is pregnant, or who has been exposed to stress such as frequent marital quarrels, is uncomfortable for the baby.

When asked about being inside his mother’s tummy, a three year old boy said, “I heard Mommy’s voice, but I didn’t hear Daddy’s. I was lonely. It was dark. I wanted to get out quickly”.

In this case, his mother had just moved to a place where she knew no one, and her months of pregnancy were spent uneasily. In addition, she had to put up with a lot of environmental noise due to some nearby construction, as well as endure frequent quarrels with her husband, which prevented her from relaxing and thinking about her baby. She said her husband never talked to the baby.

Of course, we all have many problems in our lives that we cannot solve and it is not possible to relieve all the stress. Also, to view this from a wider perspective, perhaps the baby himself chose this particular life for the purpose of learning from and rising above the situation.

Having said that, the stress of a mother could be viewed as the first ordeal for a baby to overcome, and I hope that mothers who realize this might be able to help their babies.

Even when we cannot change difficult situations by ourselves, it is true that it becomes possible to see a new way of life by choosing a different perspective. During pregnancy, mothers also have a wonderful chance to learn

this kind of attitude, with their baby as a wonderful ally.

If we become adept at looking at the bright side of painful situations, I believe we will be able to overcome any obstacles in future parenting.

A father's antenatal training is to be kind to the mother

If we can think of antenatal training as being to live life happily for the mothers, then fathers are also perfectly capable of doing this training.

It is quite a big task for mothers to nourish their unborn babies, and it can be taxing both physically and emotionally. Fathers - please be kind to your baby's mother and support her so that she can pass this time comfortably.

If the couple gets along well, the father's bond with the baby will deepen. If the mother-to-be is happy to welcome the father upon his return home, a pleasing hormone will spread throughout her body and be passed on to her baby. The baby then learns that he feels good when he hears his father's voice. Babies who associate their father's voice with comfort and cheerful feelings become very happy when their fathers hold them after their birth and talk to them gently.

On the other hand, if the father continuously comes home late and the mother angrily yells at him "You're late again!" the minute he walks through the door, the baby will share the mother's stress and associate his father's voice with discomfort and negative feelings. Babies will feel uneasy when held by their fathers after the birth.

For this reason, I'd like the fathers also to know that babies have an awareness whilst still in the womb, and ask that they try not to put stress on the mothers.

I'd also like to the mothers to remember that it is because they love the fathers that they want them to return home early, so rather than becoming irritated when they are late, think positively instead and be happy that they have returned home safely.

Perhaps work commitments are preventing the baby's father from coming home early, although he wishes he could do so. If the mother focuses on being happy to see the baby's father, the baby will not become stressed unnecessarily.

It is fair to say that modern-day mothers seem to cook and eat their meals alone many days and it might be emotionally difficult at times. It is quite natural to feel this way. But at such times, please remember that you are not eating alone but with the baby in your tummy. Please make a positive effort to talk to your baby about anything, even just saying things like "We miss Daddy, don't we?"

Another important form of antenatal training that fathers can undertake is to talk to their unborn baby. Babies, by nature, love their fathers. When the father places his hand on the mother's tummy, a baby that has been moving around actively will often calm down.

I have experienced this in my own clinic. If the father has been proactively talking to his baby during the mother's pregnancy, the baby may even smile at him right after the birth. The delivery itself can be quite distressing for babies, and it is quite possible that they feel relieved when they hear their father's familiar and tender voice.

If the baby's father feels self-conscious about talking to the baby, the mother should make the first move by talking to their unborn baby and involving the father that way.

When babies and fathers get along well, it is the mothers who benefit. Fathers who have not built a bond with their babies might not feel confident handling them and withdraw once the baby is born.

However, babies who have become familiar with their father's voice whilst still in the womb feel a connection with their fathers. The fathers will also think fondly of their babies and will not want the mothers to be solely responsible for parenting the baby.

One girl aged 2 years 7 months, whose father had talked to her much more often than the mother had whilst she was still in the womb, told her mother "It

was warm when I was in Daddy's tummy." When her mother replied: "Is that so? But you were in Mommy's tummy, you know," her daughter looked puzzled and said "What?"

As I mentioned in the prologue, one music-loving father frequently played the harmonica and sang songs to his unborn daughter. When his little girl was aged 3 years 6 months, she said "When I was in your tummy, Mommy, Daddy sang me 'Little Elephant, Little Elephant, what a long nose you have.'" Perhaps this explains why this father and his daughter share a close bond even now. As this example shows, it is very important for the fathers to talk to their unborn babies.

Talk to the baby with his older siblings

If you have older children, it will be good emotional preparation for both you and them to talk to the baby in your tummy together.

For an older child, a baby is a rival with whom they must share their beloved mother's affection. At times, an older child may feel forgotten because the parents are preoccupied with the baby.

When a certain mother said to her older child "Our baby will be born soon," the child said "I don't want the baby. The baby's not coming." When the mother approached this differently by saying: "When the baby is born, it's going to be very hard for Mommy. Please help me, OK?" the child rubbed her back as if to make her feel better. As with this case, it may be helpful to put yourself in the older child's position and to try to see things from their perspective.

Talking to your unborn baby with your older child will help to minimize the impact of unexpected changes for them after the baby's birth.

In Chapter 1, I recounted an episode of an older child telling his mother that (before he was born, he and his younger sibling) "were both watching you from the sky together, Mommy, and I said 'I will go first' and I came."

Although as adults we may remember nothing of it now, it is possible that two or more souls who are born with a deep bond as siblings might have made a promise before birth to share their lives and learn together.

I think it would be wonderful if talking to babies in the womb allowed us to unlock and remember such bonds.

There are many things that can be learned from parenting if we pay attention. Although parenting manuals may dictate otherwise, it is important to train your perceptiveness to important messages such as “the baby has a fever but it’s not serious this time,” or “the baby’s temperature is normal but something definitely seems to be wrong.”

When there is communication, you will find that babies can tell you many things. However, if you dismissively think “the baby doesn’t understand what I’m saying anyway”, then babies too, will think “they won’t know even if I tell them,” and might stop trying to send you messages. Although it is generally considered that conversation with babies begins once babies start talking, communication training begins much earlier, when the baby is still in the womb.

If you talk to your baby during your pregnancy, you will already have had 9 months training by the time baby is born, and understanding each other’s feelings after the baby’s birth will be much easier.

In my clinic, the number of mothers who told me at postnatal checkups that they could understand what their babies were trying to tell them increased when they had been talking to their babies during pregnancy.

The baby in your tummy is waiting for you to talk to him. Please do talk to him about anything, for example, “The sunshine feels good, doesn’t it?”, “this meal is delicious, isn’t it?”, or “shall we go to bed now?”

Also, ask your baby directly about his feelings and what he wants you to do. Communication is a skill, so it will improve with training, and before long you will be able to communicate very well.

One pregnant mother called me and said “Around 5:00am, I was feeling unwell, so I asked my baby to kick if I should go to hospital. Then he kicked

me hard.” So I examined her, and found her stomach was actually quite bloated, requiring medication.

Another mother told me that when her due date was near, she asked the baby “When will you be born?” and she kept asking “Tomorrow? The day after tomorrow?” When she said “tomorrow” the baby kicked her stomach to let her know.

Yet another mother said, “I realized it was a girl while I was still pregnant. My husband thought it was a boy and kept calling him “Taro”, but each time the baby responded by kicking my stomach. I felt that she was answering “No, I’m a girl.”

Is classical music a must for prenatal training?

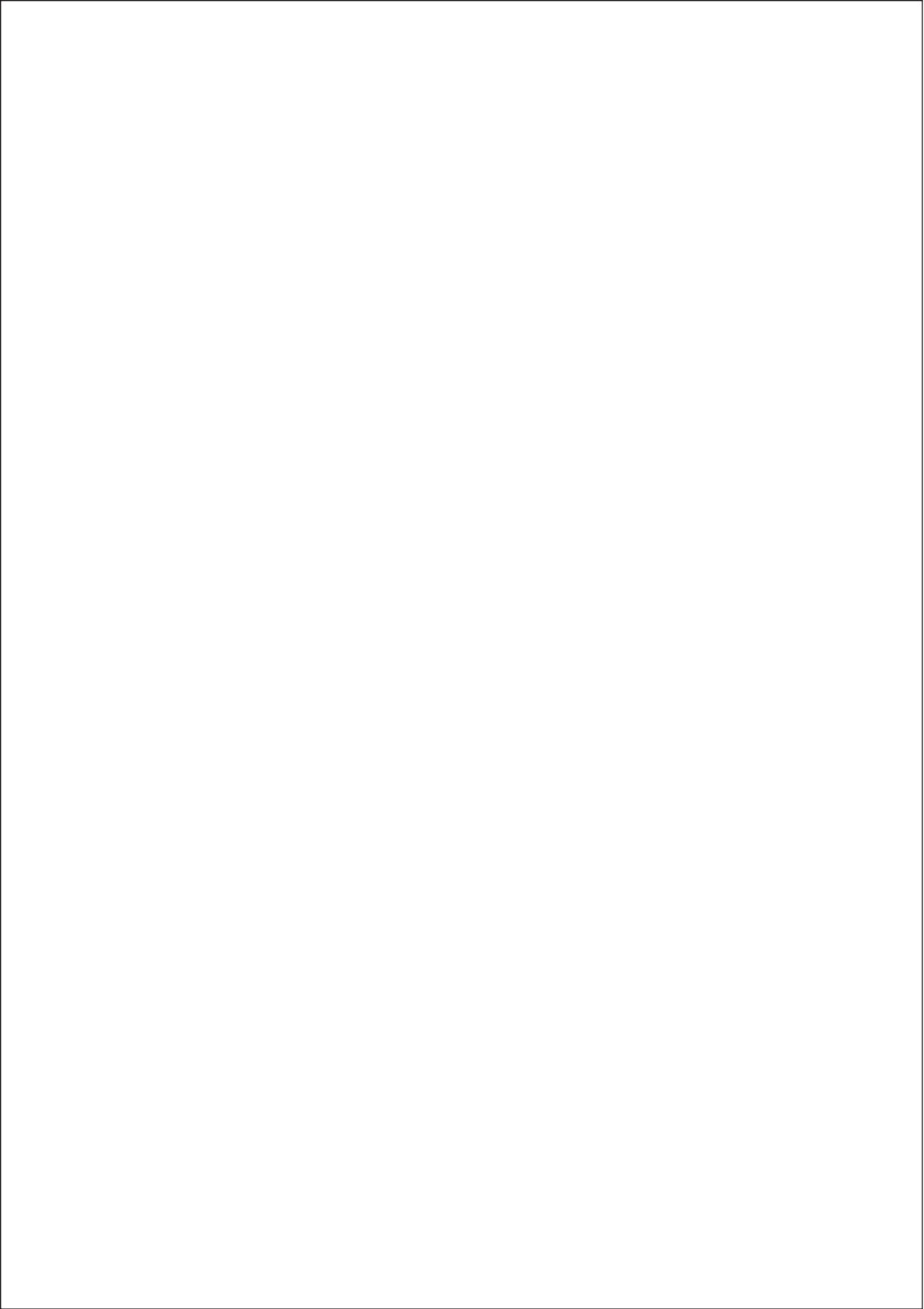
It is well known that listening to classical music is good for the development of the baby’s auditory sense.

The number of brain cells is at its maximum in a fetus of 5 months, after which this number will gradually decrease. However, if the cells network together and are used actively, it becomes harder for them to break down and they will survive.

So it is possible that if a baby regularly hears music whilst still in the womb, the brain cell network which controls his auditory sense will increase and develop. It is said that one generation is not enough to create a ‘true’ musician, that it takes 2 or 3 generations. Perhaps this is due to environmental influence rather than heredity.

Interestingly, some mothers’ tastes in music change when they become pregnant and some may begin to show a preference for classical music despite not having liked it previously.

However, if a mother forces herself to listen to classical music although not really enjoying it, this may do more harm than good. This is because as long as the mother is thinking about how much she dislikes the music, a hor-



CHAPTER 3

Childbirth actually feels good!



Even a newborn baby is a fully-fledged person

Since I began to reconsider my role as a medical professional ‘as being to assist in the births of babies in the manner in which these new lives really want to enter the world’, I have refrained from using excessive medical intervention and turned my attention to strengthening the bond between mother and baby.

On reflection, it was agonizing for me to deliver babies when the emphasis was on avoiding deliveries that deviated from the norm. I had to focus on preventing worst-case scenarios and could not think about the significance that childbirth would have on the lives of the baby and mother.

To be frank, all I could think about was to use the procedures taught in obstetrics textbooks at medical school, in order to complete the delivery as quickly as possible and without incident. I felt so overwhelmed with the sense of responsibility that I could only feel relief once the labor was over, with no ability to feel any other emotion, such as excitement.

Chances are that my nervousness had a negative effect on the mothers, and I may have caused them to be more aware of the anxiety and pain of labor rather than focusing on the joy of welcoming a baby.

There was a specific incident which made me decide that childbirth should be left to nature as much as possible, which I’ll discuss in more detail later. Once this decision had been made, problems such as hemorrhaging decreased drastically and we stopped needing to transfer patients to larger hospitals by ambulance. Many other things that I hadn’t noticed until then also became apparent.

When I observed carefully, even the newborn babies had really expressive faces and were smiling blissfully in their mothers’ arms. Conversely, babies who were taken away from their mothers straight after the birth looked angry, as you would expect. Babies who endured a vacuum extraction also eyed the adults angrily, but their expressions gradually softened when we apologized

and told them “We’re sorry, but your mommy suffered, too.”

I began to find out many things, even certain things which go against the grain of conventional obstetrics knowledge. For example, the textbooks when I was in medical school taught us that newborn babies can only see about 12 inches (30 centimeters) away, and struggle to see even their mother’s face when being held.

However, although it’s true that the baby’s eyes are still closed immediately following the birth, when I disregarded my preconceived notions and looked harder, I realized that the baby will gradually begin to blink his eyes whilst being held in his mother’s arms, and may smile at the first person he sees.

Furthermore, although we are taught that babies can’t track objects with their eyes until they are several months old, some babies actually watch their fathers as they move around the room taking photos, following them with their eyes the whole time.

Babies’ abilities seem to be much more developed than we tend to believe. However we seem to be caught up in these misconceptions, causing us to miss things that are happening right in front of our very eyes.

Believing that childbirth is painful may make it more painful

I feel that many misconceptions about childbirth are affecting the mothers emotionally. Normally, childbirth is considered to be a very painful experience. I wonder if those mothers that refuse to hold their newborn babies are thinking that because childbirth is so painful, and they have just endured a tremendous ordeal, that they shouldn’t have to do anything for a while.

Of course it is true that childbirth is exhausting. However, considering that humans are living beings, mothers should have enough strength left to at least hold their babies.

When we are constantly drilled that “childbirth is painful,” the baby’s birth itself becomes the goal, and parenting thereafter will not proceed smoothly. It

is as if the mother is being brainwashed with this kind of artificial concept.

In fact, there are two types of difficult labor: true hard labor and the kind caused by the mother's feelings.

The human body is equipped with adequate survival capabilities, and at the core of this rite of life that is childbirth naturally lies the knowledge to protect the mother. Although it is not well known, there is more to contractions, or labor pains, than just pain.

This is because hormones called beta-endorphins are released into the brain to counteract pain whenever a contraction begins. Beta-endorphins are hormones that create a feeling of bliss similar to that of the 'runners' high' experienced by marathon runners.

Also, although contractions are certainly painful, they do not last forever. Each contraction will have its peak, but the pain completely disappears in the breaks between each contraction.

In other words, only the beta-endorphins remain in between contractions, so mothers actually have a special opportunity to experience this special feeling of bliss that they would not normally encounter in daily life. Those women who are able to experience this feeling may actually feel so comfortable that they even fall asleep between contractions. However, there is a tendency for contractions to become prolonged in women who are seized by anxiety.

Pain is definitely not the only sensation to be experienced in childbirth. However, women who believe, or who are persuaded to believe, that childbirth is painful will not be able to notice this blissful feeling between contractions. They will not be able to see the positive side of childbirth if they don't realize that, while the contractions do hurt, there may be few times in life when they will have this euphoric feeling.

Is childbirth an epitome of life?

The degree of pain is influenced considerably by psychological factors.

Some women get upset by comments made during labor by their mothers or mothers-in-law such as “My childbirth was easier. You’re not doing this or that right,” resulting in a more difficult labor. What they should really do, however, is to have confidence in their bond with the baby regardless of what those around them say, and talk about it with the baby whenever they become anxious.

Also, those mothers who cannot let go of the pain from the peak of the previous contraction will continue to feel pain even after it has passed and the pain has subsided.

Furthermore, because pain intensifies when we are anxious, mothers who imagine the pain of their next contraction before it actually begins will feel this pain unnecessarily. Similarly, a mother who is constantly worrying about matters such as whether the baby on its way is alright will start feeling pain long before the real pain begins.

Mothers who are distracted by the past and worrying about the future will continue to feel pain even when there is no contraction, and will be unable to benefit from the hormones that are generated to ease the pain. It is ironic that those who continually think about how much they dislike pain are the ones that seem to feel it most.

On reflection, I have the acute impression that contractions are a lot like life. Life also has its ups and downs, just like contractions. No matter how hard the obstacles might be, each time we manage to overcome a hurdle, things seem to get easier and we feel a sense of accomplishment. That is how we manage to grow in life, by overcoming these obstacles one by one.

However, a person who is caught in the hardships of the past or anxious about what the future may hold does not feel happiness from the small events that occur before their very eyes during the peaceful times between each of these hurdles. Irony exists here, too, in that life seems to become harder for those who focus on how much they dislike facing difficulties.

Through childbirth, mothers can experience a condensed form of life itself

in a single day. I think the reason that many mothers wish to have their babies as naturally as possible is probably because they instinctively know this.

Modern society tends to reject negative aspects such as pain and suffering. Accordingly, painless childbirth was developed to alleviate the pain of those mothers suffering through contractions.

However, once the anesthetic is administered, beta-endorphins will no longer be released to either the mother or baby, and they may miss out on the opportunity to experience the blissful feeling these hormones induce. I find it troubling that a baby may be denied the opportunity to experience, at the very beginning of his life, the happiness that awaits him whenever he overcomes a hurdle, no matter how difficult it has been.

Also, if the mother restfully falls asleep in between contractions whilst enjoying this feeling of bliss, overzealous doctors will sometimes recommend that she be given drugs to accelerate the labor, such as an intravenous oxytocin drip, saying “the baby won’t be born while your contractions are this weak. The sooner you deliver the baby, the more quickly you will feel better.”

However, allowing the mother to rest and relax whilst savoring this comfortable time gives her more energy to get through the next contraction, and there are times when it’s more desirable for the baby to take his time to be born and does so naturally. Artificially speeding things up may conversely impose a burden on both the mother and baby.

The mystery of contractions and the accompanying pleasant sensations cannot be viewed simplistically as just ‘pain’ that must be endured. *If it were known that happiness exists between each labor pain, women would be more positive and able to manage their contractions, and know that they would be able to surpass the peak of each pain no matter how hard it seemed.* To me, this process is symbolic of ‘life’ itself.

Choose your favorite breathing method and style

The key to coping with the pain is in listening to your body. It will help significantly if you pay attention to your breathing and adjust your posture to a position that is comfortable.

Firstly, with regard to breathing, you should know that while the Lamaze method is very well-known as a breathing technique for childbirth, many other methods also exist.

Each method has its own theory and brings relief to some women, but there is no such thing as the absolute ideal breathing method. As a matter of fact, sometimes these methods may actually make the mother feel worse. The Lamaze method was originally developed to reduce the mother's tension and make childbirth easier.

However, this method can be difficult and even with prior practice there is no guarantee that it will go smoothly during the actual delivery. Also, the more serious-minded the mother, the more she may become preoccupied with breathing exactly as taught, leading to more stress.

I feel that the focus on concentrating how to breathe properly, when the mother should be allowing her body to feel instinctively how the baby wants to be born, may have a significantly negative impact.

This is why I advise mothers to breathe in the way that is most comfortable for them personally, instead of recommending a particular method. There is just one thing to remember: people tend to hold their breath when in pain, so make a conscious effort to breathe out.

A midwife once said, "There's no need to take things too seriously. You just have to remember the way you breathe when you're climbing a mountain or a steep slope." I think this is perfect advice.

One other very important thing to consider is for the mother to position herself comfortably. At my maternity hospital, we practice 'freestyle' child-

birth, where the mother is allowed to adopt whichever position makes her feel most comfortable.

Mothers can change their position freely. They get through their contractions in whichever position works best for them at the time: on all fours, stooping down whilst supporting themselves against the wall, laying down on their sides, or squatting.

If the mother gives birth lying on a narrow delivery table, she can barely move due to the limited space. With freestyle, however, mothers can change positions as often as they need to during the hours prior to the baby's arrival, and they can move to ease the pain each time, making it much more bearable for them.

With positions, as with breathing, *moving around instinctively as you want to, rather than over-analyzing every little detail, will allow this life process to continue without interference. If you try to consciously match your breathing to the baby's, the birth will be easier on him, too.*

It's important for the father to be there

The father can take an active role in supporting the mother in freestyle childbirth. Sometimes the mother may place her arms around the father's neck so that he can support her weight while she gives birth standing up, or the father might sit on the bed with the mother leaning on him whilst sitting on his lap to give birth in this position.

In some cases, it can be physically taxing for the father if he has to support the mother from behind and she moves violently, but in some manner he can share the burden of giving birth, even momentarily. Even if he is not feeling the pain directly, the father can experience a kind of 'quasi-childbirth' together with the mother.

The father's understanding of childbirth seems to increase significantly if he is present during the labor. If a problem should occur during the delivery, it

will be easier for him to understand the circumstances and accept the situation at face value.

Fathers who have shared the suffering and joy of childbirth can't help but love their babies. When they touch their newborn babies and see them smile, they never want to have to leave. Thereafter, they can't help but become involved in the child's parenting, and their presence at the birth seems to have such a positive influence that I actively recommend it to all fathers-to-be.

Some maternity hospitals do not allow the fathers to be present at the delivery unless they have taken parenting classes, but there is no such particular requirement at my hospital. Life is not a dress rehearsal, and we cannot predict everything that will happen. In many cases, prior training may be ineffective when it comes to the actual delivery. I feel that even if the father has no preliminary knowledge of childbirth, it is being there that counts.

Complications were fewer when we allowed Nature to take its course

Giving birth whilst standing up or sitting allows gravity to take its course naturally, so once the mother becomes accustomed to it, the birth generally proceeds more smoothly than when the mother is on the delivery table. I feel that freestyle childbirth allows us to get back to the basics of delivering babies.

Whilst giving birth on the delivery table facilitates medical intervention, this medical intervention itself can make the labor more difficult.

For example, in medical textbooks, "Prolonged delivery is defined as being when labor is not progressing after 30 hours or more for a first baby. An intravenous oxytocin drip or vacuum extraction should be considered in order to prevent the risk of damage to the mother and baby." There is no doubt that some people may require such intervention, but the vast majority of women do not.

Even when the baby seems to pause or stop after his head has fully

appeared and his heart rate drops, I can check the baby's face to see whether his complexion is healthy and if he has sufficient oxygen. In the early days, I would immediately have considered this to be a difficult labor and instantly have taken preventative action to ensure the baby was delivered as quickly as possible. However, I now take the time to observe the baby's appearance and deliver him at his own pace.

Even if the baby is not yet breathing alone, there is usually no problem as long as the baby is receiving oxygen via the placenta and umbilical cord. I prefer not to pull him out forcefully, but instead observe closely and allow him to be born smoothly with the next contraction.

I recently performed a delivery where a very long time passed in the interval between when the baby's head first appeared and the rest of the body was delivered. The baby, however, looked extremely satisfied, and in fact it was the first time I had seen such a satisfied expression on a baby. I knew this because I had been closely observing babies' facial expressions for the past few years. Babies who are born by vacuum extraction seem to glare angrily at adults, but this baby's expression was quite the opposite. Apparently this satisfied face is known as a 'Buddha Face.'

There is no need to sacrifice safety in order to have a baby-friendly childbirth. Strangely enough, complications during childbirth have actually decreased since I began to allow deliveries to take their natural course.

In the days when we frequently performed vacuum extractions, many women suffered from excess bleeding after the birth, and several times a year we had to transfer patients to a bigger hospital by ambulance. However, this has not happened once since we switched to natural childbirth.

Furthermore, vacuum extraction causes the baby to inhale amniotic fluid, which is a problem. Life-threatening complications can arise if meconium-stained amniotic fluid enters the lungs, so the trachea must be suctioned with a rubber tube through the nose and mouth to suck up the amniotic fluid.

However, if the baby is delivered according to his own rhythm, any amni-

otic fluid accumulated in the lungs will come out naturally with the gradual pressure on his chest as he is born more slowly. Therefore, all the doctor needs to do is to wipe the fluid from the baby's face.

Children who retain memories of their birth recount the experience of this tracheal procedure as being painful, making them cry. Without a doubt it must be an uncomfortable procedure and it is best to avoid this if possible. However, modern medicine dictates that this procedure should routinely be performed on all babies, regardless of whether the amniotic fluid has been contaminated with meconium.

From a broader perspective, and in consideration of how the baby is affected emotionally, it is possible that such procedures performed by doctors 'in the baby's best interests' are actually doing more harm than good.

***Let the mother and baby be together
for as long as possible after the birth***

For straightforward, complication-free deliveries at my clinic, we place the newborn baby on the mother's exposed belly with the umbilical cord still attached. The idea is to allow direct skin-to-skin contact between the mother's chest and tummy and the baby.

Instantly, almost all babies that had been crying until that moment will cease, and look completely relieved and comfortable as they are held close. Shortly thereafter, they will start to climb up the mother's chest in search of her breast. At this time, her body will start to produce abundant quantities of prolactin, the hormone which makes breast milk. Furthermore, as the baby starts to suckle, her body will also produce oxytocin. High levels of both prolactin and oxytocin are said to strengthen the bond between people. Accordingly, breastfeeding the infant benefits parenting later on as well.

Instead of hurrying the formalities such as weighing the baby, I prefer to allow the mother and baby to enjoy this important time right after the birth.

Procedures such as cutting the umbilical cord and any post-episiotomy stitching can be performed while the mother is holding her baby.

In general, the umbilical cord is cut as soon as the baby emerges. It is said that this avoids the risk of organ failure or impaired intelligence due to severe newborn jaundice, both of which may result from neonatal polycythemia (a dangerous situation that can occur if large quantities of the mother's blood run through the umbilical cord to the baby).

However, the reason that this may happen is because newborn babies are often taken away from the mother immediately following a regular childbirth, and placed at the foot of her bed. Common sense tells us that if the baby is placed on a surface that is lower than where the mother is lying, the mother's blood will run downwards through the umbilical cord, causing the baby's blood to thicken.

With kangaroo care, on the other hand, the baby is held on top of the mother's stomach, so there is no need to worry that her blood will run downwards to the baby. This alleviates the need to cut the umbilical cord in a hurry.

Don't rush the cutting of the umbilical cord

There are varying opinions on the best timing for cutting the umbilical cord. The current World Health Organization (WHO) homepage (<http://www.who.int/en/>) discusses how various regions still maintain a tradition of cutting the cord slowly, while the theory in occidental medicine is to cut it immediately, and concludes that neither side poses particular disadvantages.

I believe, however, that it is safer to cut the umbilical cord slowly. This is because babies receive oxygen from the placenta when they are in the womb. Although they must breathe on their own as soon as they are born, the placenta continues to supply oxygen for some time.

Consequently, there is no need for concern about a lack of oxygen to the

baby whilst his respiratory system adjusts itself to the new environment as long as the umbilical cord remains connected to the placenta. However, if the cord is cut, the baby may become anoxic temporarily.

In fact, we have experienced a few cases at my clinic where babies have been born in a pained state with their umbilical cords wrapped around their necks. When we untangled the cord, without cutting it, and placed the babies on their mothers' bodies, their complexions began to improve instantly although they were not yet breathing well.

By untangling the umbilical cord, oxygen was again supplied to these babies from the placenta, and their total physical condition improved. Although not breathing well at first, the babies' color became much healthier, and eventually their breathing also stabilized.

Cutting the umbilical cord too quickly may present another risk. Whilst the baby is in the womb, blood is sent simultaneously from both the mother's and baby's hearts to the placenta to supply and receive oxygen.

This is called fetal circulation, while after the baby is born it is known as neonatal circulation. This oxygen exchange may continue for a period lasting 30 minutes to several hours, while the baby begins to breathe and the mechanism of the heart changes. Therefore, if the umbilical cord is cut whilst it is still pulsating, the flow of blood may become irregular, which could pose some danger.

Furthermore, umbilical cords contain many hematopoietic stem cells, which can be transferred to the baby if the cord is pulsating. Accordingly, we don't cut the umbilical cord at my clinic until it has stopped pulsating and the baby's breathing has stabilized.

As for the timing of cutting the cord, there is a theory that it is also desirable for the baby's emotional growth to cut it slowly, in addition to the argument from a medical point of view.

To enable babies to overcome the ordeal of breathing by themselves for the first time, and to become accustomed to this change, Mother Nature has pre-

pared the placenta with its umbilical cord connection for when the babies are born.

However, if this cord is cut immediately following the birth, a huge quantity of oxygen will abruptly be taken into the baby's lungs before he is ready. It is the terror and surprise that the baby feels at this time that actually gives rise to the first cries of a newborn baby.

After the umbilical cord is cut, it may be life-threatening if the baby doesn't give these first cries, so making the newborn cry in order to stimulate the lungs was always a priority. For this reason, procedures in the past frequently included turning the baby upside down and giving him a smack on the bottom.

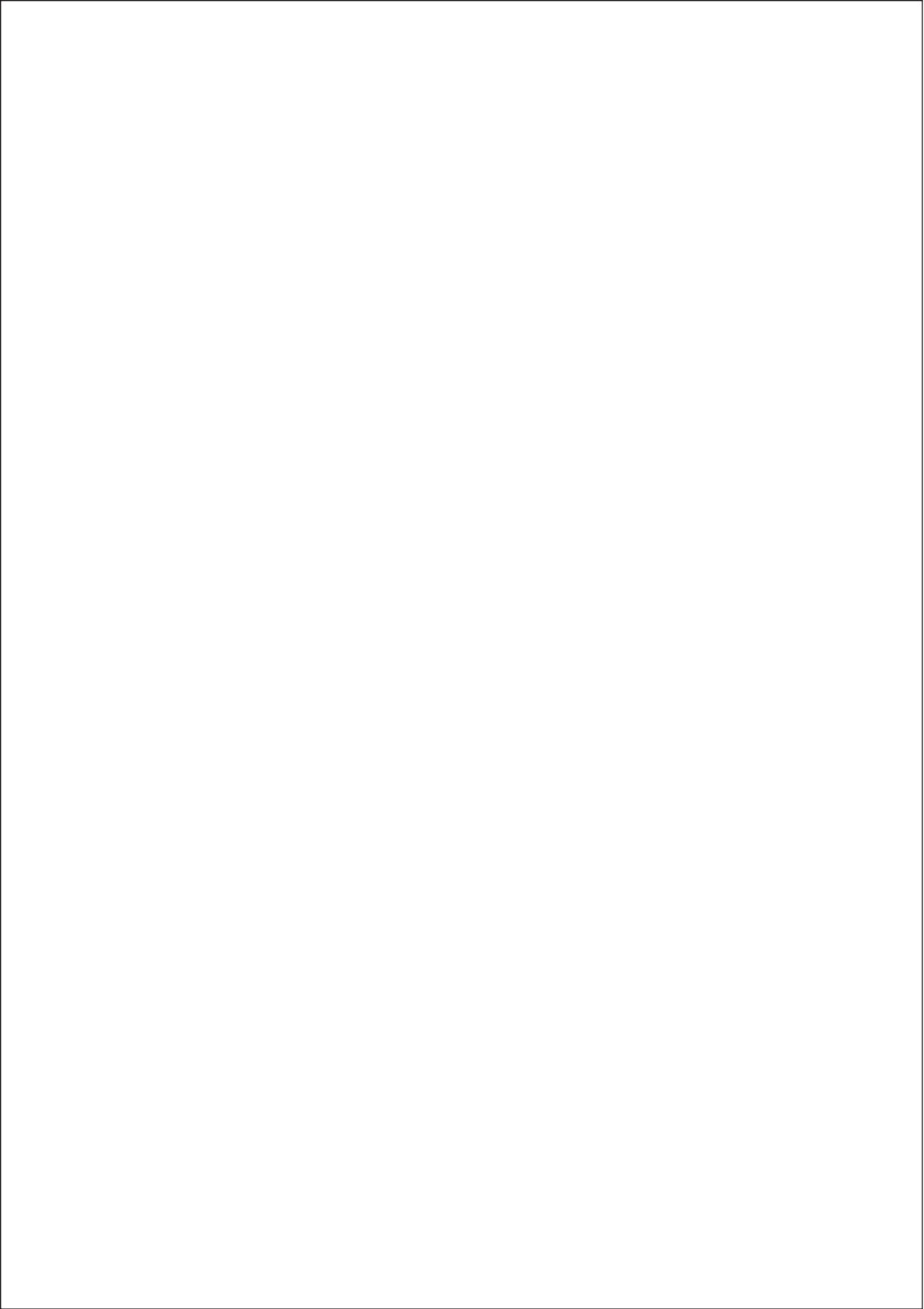
However, there is no problem if the baby doesn't give these first cries if he is connected to the placenta by the umbilical cord, as he will still have sufficient oxygen. Conversely, satisfied babies whose deliveries have proceeded smoothly are actually smiling rather than crying, and there is certainly no need to force these little ones to cry by smacking them.

From a psychological aspect, 'breathing' is firmly connected to life itself, and signifies taking in blessings from the outside and releasing the old from within. Cutting the umbilical cord also gives the baby his independence from the mother, and symbolizes the beginning of his first adventure in life.

This thinking is behind the theory that if the umbilical cord is cut too quickly, the baby's emotions will be scarred, making it difficult for him to deal easily with change whenever he faces a new stage in his life thereafter.

What is truly safe childbirth?

When we dramatically changed the model for childbirth - by having the mothers talk to their unborn babies during pregnancy and waiting patiently for the delivery to proceed at the birth; by having the mother hold her baby close as soon as he is born and waiting for his breathing to stabilize before cutting the umbilical cord - we really started to see happiness in the babies' faces. The



CHAPTER 4

It's not too late to start after the birth



There are no hard and fast rules when it comes to parenting

Modern-day mothers have their own special set of anxieties. In the past, interaction with neighbors and locals was more common, and everyone had contact with people raising newborn babies and toddlers, so women naturally learned first-hand how to look after children.

When a mother actually has her own children, she may be able to raise them without too much trouble if she has occasionally helped look after a neighbor's or relative's baby. However, modern-day mothers may not have had such experiences, and therefore may even need to be taught how to hold their own babies.

Many of these mothers rely on books about parenting to learn the basics. However, information in these 'how-to' manuals is generally only applicable to around 20% of cases, while conforming 'more-or-less' to another 60%, and holding no relevance at all for the remaining 20% of cases. I personally like to refer to this as the '20% Rule' or the '2-6-2 Rule' because it can be applied to almost any situation. Still, many mothers worry that parenting should be 100% as it is in such books, and criticize themselves when things don't go as they expect them to.

As a result, they may lose confidence in their parenting abilities and, for example, will rush their child to the hospital the moment he shows any sign of fever, despite him seeming otherwise happy and having a healthy-looking complexion. These mothers are relieved when we tell them "It is possible for children to have a fever even when they're not really sick. Did your child had an overly-stimulating day yesterday?" It is at this point that the child's temperature will lower instantly!

Small children and babies can reflect their mother's uneasiness like a mirror. There are many cases in which the child will become unwell when the mother's face appears alarmed, but are fine again once the mother relaxes and

reassures them.

Some of the mothers that lack confidence in parenting become obsessed with hygiene to the point of obsession. For example, today in Japan, many mothers sterilize their nipples prior to breastfeeding by wiping with a cotton pad or gauze permeated with alcohol. Mothers never used to do such things in the past.

The areolas are naturally fairly clean due to the secretions from the mammary glands, and it may actually be more beneficial for babies to boost their immunity from an early stage by allowing them to become accustomed to the healthy, good bacteria that can normally be found on the nipples. In any case, the effects of disinfecting with alcohol are uncertain, and may actually do more harm than good if the alcohol gets into the baby's mouth.

I believe that we need to focus more on fostering the baby's natural ability to survive than creating an artificial environment in which all bacteria has been eliminated. In newborn nurseries in hospitals, mothers wash their hands with antiseptic and put on masks prior to holding their infants, but children with memories of when they were babies tell us that not being able to see their mother's face was a very scary experience.

I think the important thing is for mothers themselves to become sensitive towards the workings of nature, and to develop an ability to discriminate between what is necessary and what is not. It is also helpful to have someone close at hand to consult for advice. Furthermore, if the mother becomes more confident and strengthens her bond with the baby, she can also actually try asking him when she is unsure about what to do in a certain situation.

Try asking your baby

A baby's level of intelligence is actually much higher than we imagine, and babies are capable of teaching their mothers how to raise them.

We can learn what our baby is thinking or wanting by being continuously

aware of them and paying attention to their eyes, expression and cries. Children love to be held and cuddled, so try to do this as much as possible. By embracing them not only with your arms, but also with your heart, your baby will try to communicate with you using their whole body.

An investigation conducted in the African country of Uganda revealed that some babies were able to hold their heads up unsupported just two days after their birth, through being held continuously 24 hours a day by their mothers, and would even begin crawling at just 6 to 8 weeks of age. Also, by completely understanding the wishes of their babies, these mothers say that they could tell whether the babies wanted to wee or poo at just 7 days after birth, which meant that the cloths they wrapped their babies in rarely became soiled.

It seems that there are also some mothers in Japan who begin toilet training immediately after birth, so that only around 1 diaper per day is required. Successful communication between mother and baby means that these mothers can tell when their baby wishes to wee or poo, and can take them to the potty in time to prevent the diaper becoming soiled.

Most of us generally believe that diapers are changed after they are soiled, but perhaps it is this thinking which is wrong. Babies may have been unable to get their parents to understand when they needed to relieve themselves no matter how much they protested, and may have eventually given up trying to communicate when their nappy was about to become soiled.

Ways to deepen the bond with your baby

There are various ways for mothers to strengthen the bond with their babies, even if they never talked to the baby whilst still in the womb, or if they had a difficult labor or were unable to have contact with their baby immediately following the birth.

Baby massage is wonderful as a program for creating opportunities in which the mother and baby can share close contact, and reinforce the bond

between parent and child.

In fact, the fetus has a sense of touch from just 8 weeks gestation, and this is thought to be the first sense acquired by human beings. The skin of newborn babies is so hypersensitive that it is sometimes referred to as the ‘second brain.’ Nerve fibers abound directly under the skin’s surface, and send impulses to the brain to let it know when the body’s exterior is warm, cold, or being touched.

When dogs or cats give birth, the parents lick their babies all over to stimulate them. Touching is important for humans, too – not only because it strengthens the immune system by stimulating the body, but also because it helps people to relax mentally. It is also pleasurable for mothers to touch the soft skin of their babies, and feeling this skin-to-skin connection between parent and child kindles affection.

There are even reports that babies in incubators who were very small at birth drank more milk and grew at a faster rate when nurses spent 15 minutes per day touching and stroking them.

In baby massage, mothers use their oiled hands to gently stroke their naked babies all over. The use of oil allows the babies to perspire, which is another advantage of massage.

Skin contains sweat glands, and similarly to the passing of feces and urine, these glands help to eliminate toxins that have accumulated in the body together with the perspiration. In particular, breast milk is made from fat in the mother’s body, and this fat may contain many substances such as dioxin, PCBs (polychlorinated biphenyls), heavy metals or compounds. Therefore, massage is especially useful in helping breastfed infants to perspire and release these toxins, while it also helps to clear up the skin of children prone to eczema.

Another method for strengthening the bond between mother and baby, in which I am particularly interested, is ‘board training.’ Babies who are very shy or have curvature of the spine may not bond easily with their mothers. Board training is particularly effective in these cases.

Board training involves the practice of standing whilst balancing on top of a floating board such as a windsurfing board. Babies will need to be gently supported around the chest by their mother.

I have devised a training method using a tray in place of a board, so that this can be performed at home. This technique involves placing a tray on top of floating plastic containers (such as those used for food storage) in the bath. Newborn babies may only weigh around 3 kilograms, and two 3-liter plastic containers will have a buoyancy of 6 kilograms, so this should be sufficient to support a newborn infant of this size.

When the baby is placed in a standing position on the tray, whilst being supported around the chest, he will firmly grip his feet on the tray and try to stand, after which he will move as though trying to alternate feet.

Actually, when newborn babies are held upright with their feet touching a flat surface, they will move their legs as though walking. This is an instinctive movement known as the stepping reflex (crossed extension reflex).

It is known that training this stepping reflex not only develops physical abilities but also relaxes the emotions. Board training has similar benefits, which actually materialize sooner than those of the stepping reflex.

After 30 minutes of training using a tray, a one month-old baby was able to support his own head, while a 6 month-old baby with Down Syndrome that had always been quite floppy was able to stretch his spine out straight after around 20 minutes.

Babies that initially seem to dislike the idea quickly become accustomed to the training, and may play and frolic by rocking the tray themselves. Even if they don't perform the stepping reflex, it seems that the cerebral nerves are actively stimulated just from the standing and rocking motion. In general, babies will sleep extremely well following this training, and I have also heard many reports of babies that began to sleep through the night as a result.

The mechanism that enables positive influences from both physical and mental perspectives in this kind of training is not yet well understood.

However, I think everyone probably has experienced the feeling of well-being that comes from correcting one's posture or from exercising.

Probably this kind of movement makes the cerebral nerves move animatedly, strengthening those parts of the brain (such as the amygdala, hippocampus and hypothalamus) which are mainly related to emotions, and perhaps this has the effect of being able to better control the emotions.

And yet, I believe that the most beneficial part of board training is not the actual riding of the board, but in allowing the mother and child to spend this time together in complete face-to-face contact.

Babies love the unpredictability of the gentle rocking motion the tray creates on the water. They are able to enjoy this feeling is because they know they are being supported securely by their mother. If the mother were simply observing this activity from a distance (while someone else performed this activity with the baby), the child would undoubtedly feel scared.

When the mother positions her baby on the tray, she gives him her undivided attention, facing him directly at eye-level. In daily life, it is difficult for the mother and baby to have much time to spend simply gazing wholeheartedly at each other.

Board training using a tray provides the perfect opportunity to look into your baby's eyes, speak in a soothing voice and have direct skin-to-skin contact. I would love all mothers to try this at home, but please remember to focus, not only on the technical aspects, but also on the fundamental aspect of communicating your motherly love to your baby.

Do babies born by C-section form stronger bonds?

There are many phases of parenting that do not go according to plan.

For example, the more conservative mothers tend to become too focused on a single aspect of parenting, such as breastfeeding. It should be remembered that breastfeeding is beneficial not only because of its inherent advan-

tages, such as the properties of immunity contained in breastmilk, but also because it allows the mother to have time to hold her baby and gaze at him.

I think it is wrong when some mothers are criticized and tormented and told repeatedly that they must breastfeed their babies. If mothers are going to be driven to the point where they feel guilty simply because they are unable to produce breastmilk, then I feel that a more desirable outcome for the baby would be for the mother to stop stressing, switch to formula and be at peace with her decision. It should be noted, however, that if sufficient care and support is provided from the time of pregnancy, most mothers seem to be able to adequately feed their infants with breastmilk alone.

In hindsight, some mothers may feel sorry about the way they spent their time during their pregnancy when they realize after the birth that in fact their baby was aware of many things whilst still in the womb. Other mothers, knowing the benefits of natural childbirth, may feel guilt and failure if the ideal childbirth they had been anticipating did not end up as they had expected.

As I have mentioned previously, there is no doubt that both the mother's lifestyle during pregnancy and the style of childbirth will have a major influence on the baby's emotional and physical growth. However, there is no absolute rule that dictates the way parenting must be. Parenting requires a degree of flexibility, and while most mothers hope their childbirth will be natural and safe, we need to understand that this may not always be possible.

Childbirth should not be viewed as the 'goal' or destination, but merely as one stop on the parenting journey that the mother and baby will travel together. Continuing to have regrets about the birth may interfere with the parenting process. The important thing is to accept whatever has happened and see what can be learned from the experience.

The problem with mothers having C-Section deliveries or difficult labors is that often they will criticize themselves for not having been able to give birth in the way they had imagined, and think of themselves as bad parents, and this can negatively affect the child.

Nothing positive can be gained by continually thinking “This is all because of the way I gave birth,” “I’m no good at parenting because I couldn’t even give birth properly,” or “It’s all because so-and-so recommended that maternity hospital to me.”

Trying to shift the responsibility to others around you may one day cause your child to blame you when he’s older, saying “I never asked to be born. The reason I turned out the way I did is because of you!”

If you can acknowledge that you would ultimately give birth to your child and accept the way it eventuated, I feel that you will be able to deal with any of life’s obstacles.

To take this one step further, even if you assume that your baby had a difficult time during the pregnancy or was in a lot of pain during the birth, it does not absolutely mean that this will have a negative impact on his life. Consider that this child may have chosen his own life path, full of various obstacles and hurdles, so that he can learn from each experience as he overcomes each challenge.

It may be a case of ‘the higher the hurdle, the more meaningful the experience.’ Your child’s first challenge may have been to overcome loneliness whilst inside the womb or pain during his birth.

Accordingly, rather than torment themselves with guilt, mothers should acknowledge the resilience their child has shown in successfully passing the first of perhaps many difficult ‘tests’ he has set for himself. The mothers and babies can support each other through these difficult challenges.

One researcher carried out a survey on the bonds formed by several hundred pairs of mothers and their children. Interestingly, the results showed that the children in the top three pairs with the strongest bonds had all been born by C-section.

Perhaps these mothers had made a more conscious effort to connect with their child because of the very fact that they had delivered by C-section, and accordingly had been very skilled in their parenting.

Following these results, I don't think we can say definitively that a certain birthing method is good or bad, but it is rather how the bond with the baby is formed and nurtured that is important.

Having a natural birth does not guarantee that the bond with your child will be better or stronger. This will depend on the mother's approach towards the baby.

Share the hard times, too

I think that mothers who had a difficult time during the labor can comfort their babies by sharing their feelings and saying things to them such as "It was really hard for us when you were born, wasn't it."

When a baby has been through a difficult birth, let him know that you understand. Tell him: "I know how you feel; I know it was tough for you. It was hard for Mommy, too." If you communicate your feelings to each other, the baby will understand.

One of the responses I received when I conducted my survey on birth memories was as follows: There was a certain baby who would always cry at exactly the same time of day until she was about 1 month old. Her mother realized that it was the same time of day that she had been born. Inspired, she began to talk to her, saying things such as "Oh, I guess that was a really bad time for you, when you were born." Suddenly, the baby looked at her mother as if to say "Yes, yes!" with her eyes, and she stopped routinely crying from that day onwards.

It is true that this particular baby had been through an extremely tough labor. After the delivery, every muscle in the mother's body began to spasm and cramp, and she was unable to care for her baby straight away because she had to be massaged. The baby herself was immediately placed in an incubator. The mother said that it must have been difficult for her daughter, longing for her mother to give her some affection and not being able to get it when she

needed it most.

If your baby seems to cry continually for no apparent reason, as though something is wrong, perhaps he is trying to let you know about a painful memory. I believe that as the mother, you can heal their pain simply by acknowledging and accepting this painful memory.

This process is very similar to psychotherapy using regression hypnosis. In regression hypnosis therapy, the patient recalls an event in which they became scarred emotionally. By acknowledging this, they are able to erase the symptoms that are contributing to their current issues.

It's not surprising to learn that, when asked about the time they were born, some children try to change the subject or clearly give the impression that they do not want to discuss the matter. It's important not to force these children to speak about their memories, but rather they need to be hugged in a warm embrace as if to silently acknowledge their emotional scarring.

Children born by C-section seem to be particularly prone to these tendencies. Of the 5 children born by C-section who participated in my survey, only 1 responded that he remembered being born, which was a significantly lower proportion than for vaginal deliveries.

Actually, it is thought that the hormone oxytocin, which the body releases to make the uterus contract during labor, may obscure the baby's memory. This hormone is not present during planned C-section deliveries, so the probability that babies born this way retain these memories is thought to be quite high.

It is not known whether or not this theory is correct, but perhaps the reason for so many survey respondents answering that they 'didn't remember anything' was because the shock of birth had been so great that they had locked those memories away.

The only child born by C-section who responded that he could remember his birth was a young boy, who wrote the following composition when he was in 1st grade at elementary school: "When I was in Mommy's tummy, a pair of

scissors came through. A person with glasses wearing white grabbed my legs and smacked my bottom. When I came out of Mommy's pouch, I heard a slapping noise. It was scary and I cried, and then a rubber thing got put down my mouth. It hurt so I cried again."

To imagine this from a child's perspective, it would certainly be shocking to suddenly have a sharp-edged tool come slicing into your home of the last 9 months. It would be very frightening and it is possible that they may even fear for their lives.

The more difficult your child's birth was, the more important it is for you to acknowledge the great determination your child has shown in overcoming such hardship and managing to be born. If the mother continues to criticize and persecute herself for the way events unfolded, she may one day end up rejecting the baby who chose that way of birth for himself.

Unpredictable things happen all the time in the course of raising children, some of which may seem bewildering. However, just as the hormones that create a feeling of extreme happiness co-exist with the pain of contractions, there is the belief that the harder the task, the more enjoyable and rewarding it becomes. We need to nourish and be aware of our emotions so that we can notice the pleasure within the pain.

Even though parents may have their shortcomings, your baby was aware of them all and still chose you to be his parent. By nature, children love their parents unconditionally. And parents become true parents by sharing their wonder, worries and happiness with their child.

CHAPTER 4 SUMMARY

1. There are as many different parenting methods as there are children. It is especially important to strengthen the bond with your baby.
2. Try to hold your baby as soon as possible after the birth. If possible, avoid wearing surgical masks as these scare the baby.
3. Baby Massage and Board Training are useful as methods for strengthening the bond with your baby.
4. Results from a survey have shown that babies born by C-section actually had the strongest bonds with their mothers. This shows that such bonds can be enhanced regardless of the method by which the baby was born.
5. Children speak about their memories of time spent in the womb because there are things they want their mother to realize or understand.
6. Babies love their mothers and fathers unconditionally.

CHAPTER 5

The Truly Important Aspects of Parenting



The goal of parenting

I once read in a book that ‘the purpose of education can be summarized as how well a person can make their living at age 30, and whether they live their life with purpose and vitality.’ I found this to be a really eye-opening statement. I suppose this could be rephrased by saying that a person should feel happy and be able to live life independently by the time they turn 30. In one sense, this seems like a very obvious and achievable goal, but at the same time this sums up the goal of parenting perfectly.

Traditionally, the aim of education has leaned towards ‘cramming a person’s head with knowledge so that they may grow into a fine human being.’ I believe that education gives a person independence and arms them with the ability to determine for themselves in which direction they shall proceed with their life.

These days, people are less likely to concern themselves with stereotypical ideas, and recreating the past is not regarded as important. On the contrary, having the creativity to invent something completely new that reflects one’s encounters with people or new environments is likely to become increasingly more important.

Life is all about truly enjoying one’s self and bringing happiness to others. This process of living is accompanied by many issues, which cannot be resolved simply by having a good memory or problem-solving ability, or by being able to perform calculations accurately: each person needs to discover for themselves how to resolve these issues.

There are actually some educational institutes that train children from a very young age to be good at studying and to perform well in tests. Some kindergarten students are even able to solve University-level problems as a result of this training. However, looking at the world we live in today, it is clear that being good at tests does not guarantee that a child will be happy.

You may already be thinking that your child will be able to get by as long as he attends a school with an established reputation or gets a job in a good company, but if something goes awry or there is a major change in social conditions, he may be left feeling as though he doesn't fit in anywhere.

However, if your child is fully aware of the way in which he wants to live his life, he will realize that there are many possible approaches he could take. He may or may not want to go to University, or he may wish to study abroad. It could be meaningful for him to be able to make decisions from a variety of options.

Parents advise their children to live in a certain way based on their own personal but limited life-experiences. Perhaps they do this out of love because they don't want their children to experience hardship or have to take detours.

However, is this really contributing to the happiness of your child? Children need to experience many things in order to find out what it is they want to do in life. Otherwise they will gain very little from their accomplishments.

It is important for children to adopt the attitude of studying - not because they are scolded or praised by their teachers or parents, but because learning is fun.

The world is filled with beauty. Children want to know how to express this - they want to know how it works and how to communicate this excitement to those around them. I think these 'feelings of happiness' are the driving force behind life.

Love nourishes a sense of independence

Children are born with their own sense of independence. They absorb a lot of knowledge through their behavior and are trying to determine how to live. Although parents need to protect their children from danger, it's important to expose them to as many different experiences as possible.

This can be explained in terms of the development of the brain. The parts

of the brain that control the emotions (feelings) and motivation (assertiveness) are the hypothalamus and the amygdala, and it seems that differences emerge between the two from about 6 months of age. It is known that the nerves in the limbic cortex, particularly in the amygdala, grow very well if the baby receives plenty of affection from his mother in the first 6 months of life.

However, the nerves in these parts of the brain are also easily damaged by negative images such as stress, fear and anger. Furthermore, this damage has a tendency to become suppressed by the action of the cerebral cortex, the part of the brain that controls reasoning. If the amygdala does not grow adequately or breaks down, it can lead to depression or apathy.

Therefore, how the mother relates to her baby and how his amygdala grows in the first 18 months of life will have a huge effect on the easygoing nature of his personality and his spontaneity later on, particularly as he grows and the scope of his activities expands.

As the baby grows, he discovers that he has many different abilities and wants to test them out. These will probably include activities that displease the mother, such as picking up food in his hand during mealtimes and throwing it!

What happens then, when the mother scolds him, “Don’t!”, thinking only from her adult perspective that it is bad manners, instead of realizing that this is an important process in her baby’s growth?

The baby will feel pleasure and discomfort in accordance with his cerebral development. He will learn to distinguish between “I have fun when I do this” and “It feels bad when I do that,” and condition himself to choose pleasure and avoid discomfort.

Although in principle he will gradually stop doing things his mother scolds him for, he is also conditioning himself to remember that “Bad things happen when I try to test my abilities.”

Children expand their scope of behavior gradually, by confirming with each new activity that “It was OK for me to do that, I got praised.” As they grow, they will learn to discover for themselves how they want to live their

life, making choices from a variety of options.

Accordingly, although you may think you are disciplining your child when you put a stop to these first adventures, this action could almost be regarded as abuse. This kind of parenting will weaken your child's strength, little by little, and eventually he will just give in to what you say. He will lose the ability to express himself and act spontaneously.

Remember that children are the mirror image of their parents , and will try to show to others the behavior they have learnt from you. So although your child may appear meek and quiet in your presence, you may be surprised to hear him yell out "Stupid!" when your neighbors are around!

When something like this happens, the mother may think at first that there is something wrong with her child, but in fact the problem lies with the mother herself for having unconsciously encouraged the child to behave in that way.

Expressions of love begin with a 'Hug'

The most important thing you can do to nurture your child's independence is to give him a strong sense of security, and the best way to do this is by developing a close relationship. There is nothing difficult about the basics of parenting: it simply begins with a hug.

When the mother embraces her child warmly, the child stops needing to cling to her. They feel reassured when they know they are being accepted just the way they are, and will feel confident enough to test their abilities in the outside world if they know they can always return to the security of their mother no matter what happens.

However, if the child has minimal communication with his mother and has no real sense of being protected, all his energies will be devoted to trying to acquire this sense of security, and there will be none left to use in new adventures.

If your child comes to you, give him a hug. If he feels scared or sad, just

give him a hug. I would like to stress how important it is for mothers to remember these basics.

When a baby starts to learn how to move around by himself, he will only crawl alongside his mom at first. This is the first step to separating from his precious mother and moving independently. Even when he finally begins to walk, he will sometimes check to make sure his mother is in view, and will not stray very far away.

When he's a little bigger and capable of slightly more distance, he will soon come running back to get a hug from time to time. This is his way of affirming his sense of security and making sure he is being watched over.

Please hug your child tightly at these times. Your child may immediately feel reassured and attempt to run off happily again, but instead of releasing him immediately, hold him tightly for a brief moment more, perhaps until your child even has to tell you "That's enough!" If you release him straight away, your child may think "Oh, she already let go," and feel ever so slightly disappointed.

Eventually, every child will leave home of their own free will. Your children are only under your care for a brief and limited time in life. In a way, 'parenting' can be summed up as the gradual process of separation for a mother and child that have become very close.

For a mother in the throes of parenting, the days go by in a blur of rushed activity. There are no doubt many times when she wishes with a sigh that her children would grow up quickly and be able to take care of themselves. However, it is inevitable that children will leave home one day, and when that happens there will be no reverting to those former days spent inseparably with their mother.

Being able to press your cheek against the tender softness of your baby's is a special privilege reserved just for the parents/Moms. No matter how hard parenting can seem at times, there will no doubt come a day when you nostalgically reflect upon this period as one of the best of your life. Enjoy and

savor this precious time while it lasts.

‘Hug’ your child from your heart

There is more to a close relationship than just physical hugging. Mothers need to hug their child with their whole heart.

It takes practice to be able to listen attentively to what your child wants to say. Small children don’t have a big enough vocabulary, and may find it hard to adequately express themselves. Don’t interrupt him or rush to finish his sentences for him, but take the time to listen carefully and embrace him with your heart.

For example, if your child comes home crying from kindergarten, first ask him gently what happened. If he says “My friend upset me and made me cry,” empathize with his feelings of sadness and frustration.

If your child knows that you share his feelings, you can probably make him feel much better simply by nodding understandingly and saying “Oh, that must have been tough for you.” That’s because it’s very reassuring to have someone who understands you.

Suppressing negative emotions is a major source of stress in children. Allowing them to cry when they need to is an important form of self-expression.

When a child has to have an injection at my clinic, we tell them “Make sure you have a good cry before you go home!” Then as we administer the shot, we tell them “OK, now this might hurt a little, but let’s be brave.” By allowing the children to cry freely, they can release the emotional pain and recover quickly, so that by the time they are ready to leave they are smiling and laughing.

However, if the mother entices her child to the clinic with a bribe, saying “We’ll buy an ice-cream on the way home, OK?” or tries to suppress his emotions with a comment such as “Boys don’t cry,” distorted feelings of anger and sadness will worry him and compound over time.

Being able to open up and freely express your feelings is a very important ability for living a carefree life. Please try to ensure you don't restrict this natural ability of your child to express himself.

To enable true communication, it is important for parents and children to consciously try to understand what the other is feeling. It is ideal if the mother can start talking to her baby from the time he is in the womb, and highly desirable to have established a cycle of communication by the time he reaches 18 months.

However, it is never too late to start building the bond with your child. Just start to value your close relationship and try to synchronize your feelings with your child's.

Once I asked the mother of a troubled 5th-grader to give her son a hug, but she replied "Yuk, no way." I was really surprised by her response, and felt upset to imagine how lonely this boy must have been feeling not to be accepted unconditionally by his own mother.

A senior high school teacher once told me how a boisterous student had stopped protesting and instantly ceased moving when given a hug. After a moment, the student then said "Can I call my friends, too?" The other delinquent students came, and they all took turns getting hugged by the teacher. This simple act allowed those students to regain their composure and calm down. If this is achievable for high school students, I think it should be even more beneficial for younger children.

The 'Baby-boomer' generation in the United States is a perfect example of what happens when children, who weren't able to feel a sense of security through having a close relationship with their mothers, lose their self-esteem out of sheer loneliness.

When this generation of people were babies, it was common in the United States and other developed countries to separate the newborns from their mothers at birth. As an extension of this, in the United States particularly, it was recommended that babies be made to sleep in their own rooms and spend

time alone in order to foster their sense of independence.

However later on it was realized that these actions had not produced the desired sense of independence but in fact had created a great deal of emotional scarring.

The baby boomer generation became quite obsessed with family, and some people began communal lifestyles as 'hippies'. It is thought that this obsession had more to do with the need of these people to form groups to compensate for their inability to live alone, due to their lack of a basic sense of security, rather than with forming spontaneous, healthy human relationships.

Ironically, the rush to accelerate the independence of these children in fact produced a generation of dependent adults.

Children in present-day Japan also tend to form groups and desperately fear not belonging, and I feel that this is caused by the same problem. They form groups in an attempt to re-create the family unit, and are trying to recapture something that is missing from their relationship with their parents.

People who have the confidence to feel glad they were born can survive without having to be part of a group. However, others will have no self-conviction if they have never been hugged unconditionally by their parents or are constantly haunted by the uneasiness of wondering whether it was a good thing that they were born. By conforming and acting the same as others within a group, these people are struggling to find their sense of self.

Authoritative comments such as "Those things happen to you because you are that kind of child" or "You'd be a terrible child if it wasn't for such-and-such" are highly destructive and only serve to make your child doubt their worthiness to live.

On the other hand, children who are told in an easygoing manner that they will be loved no matter how well or badly they perform in a certain activity will naturally grow up at their own pace and be able to demonstrate their capabilities as a result.

Perhaps it is not so important in child-rearing for parents to teach their

children every little thing but for them *to align their feelings with their child and demonstrate their ability to empathize*. Many parents hope their child will behave in a certain way, but such desires can actually impede your child's growth.

Your child's rebelliousness is a sign of parenting success

Even children who would never leave their Mother's side until about 18 months of age will begin to answer "No! No!" to everything their mother says or does once their sense of self begins to emerge. This is the beginning of the first rebellious period.

Although these times are tough for the mother, the fact that a child is now able to rebel is proof that the parents have been raising him successfully. When a child says "No!", he is conveying that, thanks to all the love he has been given by his mother, he has grown enough to have the self-assurance to show defiance. If your child back-answers with a resounding "No!", you can be confident that your parenting skills are on the right track.

Nonetheless, if your child persists in saying "No!" indiscriminately, the need to teach him the difference between things that are OK to do and things that are not will arise. The role of the father becomes particularly important at this time.

During this first rebellious period, it is important to scold him properly for mistakes and help him to remember the rules for living. The appropriate time for him to have acquired social skills is no later than when he has reached the upper grades of elementary school. Things can become complicated if he is still allowed to do as he pleases at the time he enters the second rebellious period of adolescence.

There's no problem if the father has a somewhat authoritative presence if the mother is able to hug her child closely and the child has absolute trust in the mother. Conversely, children that feel a sense of security of being protected

will comply obediently when scolded for their wrongdoings.

Unfortunately, I feel that there are many fathers in recent times who are abandoning their role as the father figure. They seem to have no convictions in life and no standards for determining matters, so they give in whenever their child protests loudly enough.

However, the kind of parent most disliked by children is not actually the parent who scolds their children but the one who indulges them. In the course of dealing with your children, you may find that there are many times when you have to redefine the way in which you live your own life. Therein lies the difficult aspect of parenting, but also its greatest thrill.

I believe it is important for the father to create some kind of strong foundation on which he can base his life, so that he can take pride in the example he sets for his child, and continue to feel inspired by parenting.

The role of the mother - the role of the father

The mother and father are the cogs on the wheels of parenting. The mother provides complete acceptance, while the father gives firm guidance, and the child feels a sense of security from the support of both of them together.

This does not mean that it is not possible to raise children unless both parents are together. It simply means that in single-parent families, either the mother or father will need to perform the dual role of accepting the child as well as teaching him life's boundaries. Although this may be difficult for some single parents, it is certainly not impossible.

It seems that families with 'problem children' are less likely to be single parent families and more likely to be those where there is an over-possessive mother and the father's presence is comparatively weak. In this scenario, the father avoids participating in parenting and the mother harbors resentment towards him. They go around in circles but end up getting nowhere.

It can be a constant source of stress to children when their mother says

things to them such as “Your father’s no good. Whatever you do, don’t grow up to be like him,” and a distorted version of this stress may reappear once they grow older.

I sympathize with the mother who wants to vent her daily feelings of frustration on the father. In Japan in days gone by, there was always some form of support system in place to relieve the mother from the exhausting and unfamiliar task of parenting, such as a kindly neighbor who would be happy to help take care of the baby. These days, however, mothers take care of their babies alone inside their apartment or condominium, feeling trapped because they have no one to talk to or to get advice from.

This situation is a tough one, and the mother might find herself blaming the father despite herself – even more so if he is reluctant to become involved in the baby’s care. No matter how loudly the mother pleads for help, things rarely improve.

If there are moans and complaints awaiting him as soon as he returns from work, time that could be spent in pleasant conversation will quickly turn into a quarrel. This can spiral into a vicious circle where the father becomes less eager to come home each day and starts to avoid the baby.

With the right cues, however, you can turn this around in the other direction. To succeed, you first have to make a conscious effort to really enjoy the time you spend together with your baby. Try not to think of this one-sidedly as simply having to ‘look after’ the baby. You will feel encouraged when you realize the baby is actually trying to communicate with you, too.

When your husband calls you from work in the evenings, you will soon be confident enough to tell him: “Don’t worry, the baby & I are having a great time and we’re doing just fine. There’s no need to come rushing home on our account, but of course we’ll be happy to see you when you get here!” He may surprise you by rushing home straight away.....

Fatherhood is actually a very powerful thing. Once the father begins involving himself in parenting, he often puts more energy into it than the

mother.

Prior to establishing my clinic, I used to take my children to and from kindergarten. It was the highlight of my day to be able to spend this wonderful time chatting with my kids. It made me feel envious of the other mothers when I realized what precious moments they had been experiencing with their children every day.

Parenting must feel especially enjoyable for fathers who have a special affection for their children, and they will undoubtedly begin to go out of their way to make time to spend with their children.

Children take everything their mothers tell them at face value, so it is unacceptable to say bad things about the father in front of them.

It would be a much better idea to speak positively, saying things such as “Daddy works hard so that we can have a nice life. Thank you, Daddy!” The father will be happy to feel that he is a meaningful part of the family, and the baby will feel secure and reassured.

Every moment of parenting is a challenge

The values of the parent’s generation will be accurately reflected in their parenting style. The generation or so prior to the ‘current’ generation of parents lived through times of hardship with very few material possessions. By comparison, this ‘current’ generation has been raised in a world that overflows with possessions, and has been spared from having to repeat that experience. Consider the good fortune of this generation to have been able to grow up in such prosperity, exactly as their parents had hoped.

The downside of this is that now, our children must grow up with the adverse effects of that prosperity. It is easy to blame the parents’ generation, but we must remember that each generation raises their children in the way they think best at the time. Despite this, when problems arise, we need to tackle them head-on and find the solution that our generation thinks is most suitable.

Parents need to provide enough latitude to allow their children to grow up freely and easily. Everyone has unhealed emotional wounds from their upbringing, and without even realizing it we may unintentionally be causing our own children pain.

For better or worse, there is a tendency to repeat with our own children the experiences we had with our parents. For example, those that endured bad treatment as a child may need to learn from those experiences in order to break this cycle.

Every moment of parenting is a challenge. It is easy to say things to your children which you may instantly regret, but once spoken they cannot be taken back. These hasty words can hurt your child, just as you may have been hurt when you were young.

To torment yourself with guilt thereafter, however, will only start another vicious cycle. Although there may be times when children feel hurt in their relationship with their parents, in a way this could be regarded as helping them to deal with life's lessons. The family unit is where children get to practice and deepen their understanding of how they acknowledge and react to being hurt.

Parenting may seem much easier in families where the mother and father get on well together. However, children will continue to grow naturally whether they are raised with a divorced single parent or even with neither parent. This signifies that your child is strong-spirited and has chosen to be born into this family, together with the unavoidable family circumstances, because there are lessons in life that can only be learned there.

There are no defined rules when it comes to parenting - the fact that there is no instruction book is what makes parenting interesting. It doesn't matter which approach you take as long as the child grows up as a result. In fact, it is probably better for the revitalization of society as a whole to have a harmonious blend of strict families and liberal families, in a diverse range of parenting styles.

For humans, life is a never-ending process of learning. When adults who

harbor emotional scarring have their own children, it is a chance for them to free themselves of their own hang-ups by recapturing the experiences of parent-child interaction, communication and conflict.

CHAPTER 5 SUMMARY

1. Educating your children well means raising them in such a way that they are able to live life enjoyably and are capable of earning a living and supporting themselves by the age of 30.
2. You can accelerate your child's independence and confidence by giving them plenty of affection, such as lots of hugs and cuddles, when they are very small.
3. It's important to allow your children to express their emotions, such as letting them have a good cry when they need to.
4. It is a sign of successful parenting if your child displays rebellious behavior. Thereafter, deciding how to instill good values in your child will be an important role for the father.
5. Children's behavior reflects that of their parents. Parents need to have the confidence to break their own bad habits.

CHAPTER 6

Childbirth is an Inevitable Part of Parenting



Childbirth is Changing

Diversity is important in every aspect of life. Just as there are no standards that dictate the correct method of parenting, I think it is fine to have various different styles of childbirth. Everyone has different temperaments and circumstances, so there's no problem if some mothers-to-be arrange for a midwife to deliver their baby while others want to have a home birth.

However, many doctors and mothers these days believe that childbirth must take a certain form in order for it to be considered 'safe.'

Many people's idea of 'regular' childbirth involves lying face-up on the delivery table in a brightly-lit room, being given an intravenous oxytocin drip to accelerate the labor if contractions are not progressing satisfactorily, using vacuum extraction if the baby is slow to proceed down the birth canal, and delivering by C-section at the first sign of risk.

For the past 50 years, we have allowed ourselves to believe that this kind of 'artificial' childbirth is the norm. In fact, hospital births are a new phenomenon that only became mainstream following the Second World War

Prior to this in Japan, almost all women gave birth at home under the care of a midwife. The family and other female relatives would help, so that even those with no personal experience of childbirth would learn what to do, and it was a form of sex education in the broadest sense of the term.

Following the War, the GHQ became concerned with the high mortality rate of mothers and newborns, and began to encourage giving birth in hospital and separating the newborn from the mother. Although it's true that the mortality rate of mothers and newborns fell with the increase in hospital births, we lost many things in the process.

Firstly, consideration for the baby's feelings was casually cast aside in favor of making medical intervention more easily accessible. For example, it has become completely acceptable to use vacuum extraction instead of patiently

waiting for babies to be born in their own time, to routinely suction amniotic fluid from all newborns' noses and mouths, even when not medically necessary, and to take babies away from their mothers as soon as they are born in a rush to weigh and measure them.

C-section deliveries have also become unnecessarily common. Obstetricians fear being held responsible for stillborn babies that have been delivered naturally. They rationalize that if the baby does not survive despite being delivered by C-section, they can at least say that they tried everything and there was nothing more they could do. For this reason, many births become C-section deliveries at the first sign of any risk.

Recently, we have become aware that the emotional effects on the baby can vary greatly between deliveries that warmly welcome him and those that provide a mechanical connection.

Childbirth needs to be safe from an emotional point of view as well as from the physical aspect. Those present at the birth will be part of the baby's first ever impression of this world, which will relate to everything in his life thereafter. For this reason especially, it is important to treat the baby with dignity when making that first connection. Mothers who realize this are more frequently rejecting hospital deliveries and choosing to have their babies delivered by midwives.

Much of the wonderful knowledge that pre-war midwives had gained through their experiences has been lost due to the standardization of hospital deliveries. In maternity centers, however, the midwives continue to meticulously pass down the skills learned from their pre-war counterparts.

If childbirth is the foundation of child-rearing, then midwives have an extremely important role and it could even be said that in a way, they hold the key to Japan's future.

There are many things we still do not understand about the human body, and we certainly cannot guarantee that current medical treatment is the best it will ever be. Given these limitations, doctors are constantly pursuing ways to

improve childbirth practices.

As the child-raising process currently stands, the professionals who help to care for young children begin with the obstetrician, followed by the pediatrician, nursery teacher and then school teacher. The type of professional changes according to the age of the child, and there is little opportunity for these professionals to exchange information. I'm not sure that life should be separated into segments in this way. I believe that a structure needs to be created in the future to connect and give consistency to the three inter-related phases of pregnancy, childbirth and child-raising.

Furthermore, child-rearing is not something that finishes with each generation: it continues unbroken to the next generation. Therefore, it is important to provide feedback if a problem becomes apparent, so that it can be stopped and dealt with to ensure the smooth transition to the next generation.

Even now, there are many areas where cooperation between obstetricians and pediatricians is sadly lacking. There is a strong perception that professionals should not meddle in areas outside their own field of expertise, and there are some pediatricians who believe that obstetricians should not be giving them advice.

For example, obstetricians and pediatricians often have differing points of view. There used to be many lawsuits in which obstetricians were sued because a breech baby was born with cerebral palsy after a vaginal delivery. The obstetricians were accused of poor judgment because they did not make the decision to deliver by C-section, and pediatricians would be called upon to support that view, causing obstetricians to lose their case as a result.

However, an analysis of large volumes of data revealed that there was actually no difference between natural deliveries and C-section deliveries in terms of the incidence of breech babies born with cerebral palsy.

In other words, delivering by C-section was found to be virtually ineffective as a preventative measure for cerebral palsy in breech babies. Accordingly, the opinions of obstetricians began to gain acceptance and the lawsuits began to be

dismissed.

Every era brings radical change to the way we think about childbirth and what is viewed as ‘common sense.’ Accordingly, it will become even more important in the future for the mother to equip herself with the right information and make proactive decisions about the style of childbirth she chooses.

Babies are born to help their mothers and fathers grow

In Chapter 2, I said that babies choose their own mothers and fathers. Similarly, if you can accept the theory that all humans are born because they have certain tasks which they must accomplish during their lifetime, you will be able to view the concept of having a baby from a completely different angle.

In his “Creating the Value of Life” Series (PHP Bunko), Fumihiko Iida, an Professor of Fukushima University, offers a perspective on life from this ‘other’ angle. Human relationships are like a school that imparts vast quantities of knowledge, so the relationship between parent and child is the perfect stage for growth. Accordingly, some children may choose a life for themselves where they can experience the unconditional love of their parents, while conversely, others may choose to be born to parents with whom they will not get along, in order to overcome conflict and grow from the experience.

In any event, babies want to live their future life in a particular way, and have chosen the perfect mother and father to provide them with this opportunity.

Furthermore, the baby presents his mother with various choices on days when he is crying or sick. By overcoming these difficult times herself, the mother is also being given a wonderful chance to grow.

Consequently, babies are born not only to fulfill their own personal development, but also to help their mothers and fathers grow.

In terms of this broader meaning, the basis for parenting is to watch over your child’s growth as he carries out the tasks he came to this life to accom-

plish, and for you, the parents, to grow together at the same time. In other words, you are not actually ‘producing children’ but ‘receiving children.’

No medical care is 100% perfect

I don’t wish to make mothers-to-be feel uneasy, but I would like to say a few words about babies born with disabilities and stillborn babies. I make a point of mentioning this because it was a major turning point for me, both as an obstetrician and as a human being, when I changed my way of thinking regarding these babies.

Wherever possible, we tend to avoid having to deal with disability, illness or death: the negatives in life. As a result, however, we are actually preventing ourselves from savoring the true richness of life.

Life and death are inextricably linked, so by viewing death as ‘taboo,’ we will only be able to understand half of the happiness in life.

The fact that we only view death as failure is one of the reasons for the mother-baby bond becoming broken by childbirth in general today. Accordingly, life itself is given top priority at the delivery and there is no consideration for the quality of life.

Because of this focus on reducing the risk, we rush to administer labor-accelerating drugs or make the decision to perform vacuum extractions, ‘just in case,’ when the baby would be born in his own time if we just exercised a little more patience. After he is born, the baby is taken away from his mother to have the amniotic fluid suctioned from his nose and throat.

Most obstetricians believe that their main role is only to prevent the deaths of the mother and baby, and I myself used to think this way.

So I was really shocked when I heard Dr. Tadashi Yoshimura, an obstetrician in Aichi Prefecture who practices natural childbirth, say that “Stillborn babies are not the fault of the obstetrician.” To tell you the truth, I felt outraged by this statement at first. This way of thinking would surely infuriate the mother

and father of any stillborn baby as well as their families. But over time, I grew to share the deeper meaning of his sentiments.

When I could finally understand what Dr. Yoshimura meant, and was able to accept this concept, I felt like I was seeing childbirth in its true light for the first time. In the remote event that the baby dies, this is because that is the path he has chosen. So I decided that I would trust the baby's instincts and allow him to make this decision for himself to a certain degree.

Once I changed my way of thinking to acknowledge stillborn babies, the anxiety I had previously felt when delivering newborns was swept away by a feeling of excitement and happiness, when I accepted that childbirth was part of the chain of life that links with the next generation.

It goes without saying that Life is important, and medical professionals need to do everything in their power to preserve it. However, sadly some babies will still die despite receiving the best medical treatment.

It will never be possible to reduce the number of stillborn babies to zero, given that life and death are the inevitable workings of nature. By limiting the role of medical treatment to the saving of lives and taking for granted that all babies will be born in good health, those babies that die will be branded as victims of the said medical treatment.

But is this really true? When it has not been possible to save a baby despite the best efforts of everyone concerned, is there any chance of accepting fate in a positive way?

If we accept the theory of reincarnation, it is possible to consider that when the baby is born, he has chosen his own parents, and at the same time he already knows what he hopes to learn during that lifetime.

Perhaps babies that die in the womb are only trying to learn how to grow bigger in the womb, and perhaps babies that die as soon as they are born were simply aiming to experience birth.

For these babies, death is not a failure. They have achieved their objectives and can return to the other world to begin again.

The reincarnation perspective

To lose a child is an extremely painful ordeal for a mother. However, she was chosen by the baby to be his mother because he knew she would be strong enough to overcome this hardship.

It may be that in dying straight away, the baby had specially come to deliver to his parents and those others around him some kind of message. Perhaps the baby wants the mother to consider why he chose to be stillborn, and hopes she will be able to use the significance of his death in a meaningful way in her life.

Although the manner in which each family chooses to accept and deal with the meaning of a baby's death will vary greatly, I am certain that this meaning is actually a gift left behind by the baby.

Accordingly, if the mother persists in blaming herself or the inadequacies of modern medicine for the death of her baby, she may completely miss his important message.

I'm sure that the baby's ultimate wish is for the father to help the mother with words of support such as "I know this is really hard for you, but let's overcome it together," and not to blame her in any way.

Funnily enough, I have heard from some mothers that when a woman miscarries a baby, the same baby may return to her again later on. When that happens, the baby will somehow let you know, perhaps by having the same conception date or due date as the previous baby.

In Chapter 1, I mentioned the pre-birth memories of a woman who had retained these memories even as an adult. She told me: "I was watching my mother from heaven and I chose her and came here. My friend was coming down with me. I said 'Let's go to that Mommy together.' She came but then she said 'I'm tired so I'm going back. But I'll come back again to the same Mommy,' and she went."

When I tell this story to women who have miscarried, I explain that

“although the pregnancy resulted in a miscarriage this time, it was probably something that the baby needed to do, and chose for himself. If you want him to, I’m sure this baby will return again.”

The sadness of miscarriage does not heal overnight, but some mothers have told me how, after hearing this story, that although of course they felt sad about losing their baby, they were able to accept it more easily and the pain felt easier to bear, and they quickly conceived their next baby.

In my earlier days as an obstetrician, I had felt that there was nothing I could say to help these grieving mothers. We grow and learn from painful experiences, and I don’t want these mothers, who still have a long life to look forward to, to spend it looking back and dwelling on the past.

At these times, I feel really rewarded for having investigated pre-birth memories, and thankful to have been introduced to the idea of reincarnation.

All babies, those that are born with good health and those that die straight away, bring with them to this world the same precious gift: that of allowing the mother and those around her to grow.

There is a wonderful significance to conceiving a new life and having this life grow in the womb. As children get older, often the focus will often be on how much they have grown, but the growth of the mother and father actually begins the moment the baby is conceived.

By definition, childbirth poses a risk to the lives of both the mother and baby. Unfortunately, childbirth is not a rollercoaster that can be guaranteed not to crash. We can happily go on rides at amusement parks because, no matter how scared we feel, we know that we are not going to die. With childbirth, however, there is always the risk that this rollercoaster might come off the rails.

If you have decided to have a natural birth simply because you think it’s the fashionable thing to do and a problem occurs, you will feel unprepared for it and blame those around you, and this could hinder your ability to connect with your child. If you choose to have a natural childbirth, I hope it will be

because you understand its significance.

In maternity hospitals that have earned the trust of pregnant women, if a baby is stillborn despite their sincerest efforts, many mothers will still want to return there for their subsequent pregnancies. I think you could say that, despite the painful end-result of the baby dying, the experience of birth has been a satisfying one. I believe that this kind of medical care, based on trust, has to be the starting point of medical treatment.

You never know what may happen during childbirth until it is over. Even when a pregnancy has proceeded smoothly the whole way through, unforeseen problems could potentially occur over and over when it comes to the birth. Everything that has been learned in childbirth education classes or parenting and childbirth manuals may be of no benefit at all in some cases.

Therefore, it is necessary for medical institutions and maternity hospitals to share their roles and at the same time, to improve their understanding and cooperation with each other. I believe that in the truest sense, childbirth that is safe for both the baby's body and soul, is one that combines the knowledge of natural childbirth from long ago with the benefits of modern medical techniques.

One such encouraging medical development is in fetal medical examinations, which have improved remarkably in recent years. These allow us to predict to a certain degree what will eventuate at the births of high-risk babies. A pediatrician examines the baby from the time he is still in the womb, and usually continues to monitor him immediately following the birth.

Fetal echocardiograms, which enable the detection of any cardiac abnormalities, are a good example of these new developments. If such abnormalities are known in advance, preparation can be made prior to the birth for any necessary operations so that the baby can be treated as soon as his condition requires. Prompt attention is the key to success, and many more infant lives have been able to be saved than was previously possible.

In cases where it is evident that the child will not survive, the mother can

prepare herself mentally beforehand and hold her baby until he draws his last breath. If his condition has been confirmed by medical diagnosis, the baby will then not have to be subjected to any unnecessary procedures and can pass his last minutes or hours peacefully.

There is no guarantee that a baby will be born healthy and well regardless of the childbirth method by which he is delivered.

Some people are never blessed with children no matter how much they wish to have one. Perhaps it is just not their time to have children, or perhaps there is something they must experience by not having children. It is also possible that they themselves chose a life without children in order to be able to fulfill some other role.

There is no obstacle in life that cannot be overcome

According to Professor Fumihiko Iida, whom I mentioned previously, all people, including those who return to where they came from before they were born, decide their life for themselves, and prepare a kind of 'task sheet' prior to being born. He hypothesizes that there are no set answers to the problems that we encounter as we go through life, but that the road ahead will branch out according to whichever path we choose to take, and our individual futures will be decided as we proceed down this road.

Whenever we come to a fork in the road, we may be choosing the shortcut or the long way around, it could be a steep slope or a pleasant promenade. In any case, we should savor these experiences that we are here to enjoy, and catch up with any concepts we failed to learn this time around by repeating those in the next life.

The comforting thing about this approach is in believing that we have the ability to choose our circumstances for ourselves, rather than live a passive existence at the mercy of the times or of society, because there shouldn't be any hurdles that we cannot overcome if it is we who create these 'task sheets'

for ourselves.

In one sense, a baby born with disabilities may be the ultimate hurdle. If the disability is severe, he may be unable to take care of himself and have to live life relying on others for all his needs. However, children who have chosen such an extreme level of difficulty for themselves must surely have a heightened spirituality to compensate for this.

Mothers of children with disabilities will also have the challenge of overcoming a bigger hurdle than their counterparts with 'normal' children. For this reason, these babies choose mothers that they know will have the strength to cope with such hurdles.

I have had discussions with mothers of children with Down Syndrome, and told them that I believe some people have souls that are so advanced that they choose to be born into a life that will be fraught with many difficulties. Whenever I ask them what they think of this sentiment, they always tell me that they feel the same way.

We often say "it doesn't matter as long as he is healthy and normal," but is this way of thinking really correct? If it is true that some children must be born with disabilities in order to achieve their objectives in life, then surely this experience in itself has significance.

As doctors, we feel a sinking sense of powerlessness whenever an affected baby is born if we believe that it is inevitable that some will have disabilities. If doctors feel this way, I imagine the mothers themselves would be even more deeply shocked.

I think it is a serious problem for a mother to feel this sense of defeat right from the start, when she will need to sustain the relationship with her baby for the rest of their lives.

Childbirth and parenting provide wonderful opportunities for people to reexamine their lives, so if your baby is born with disabilities, it is vital that you make the most of this precious opportunity.

In the United States, people with disabilities are referred to as 'challenged

persons,’ and I feel this is really fitting. I’m sure it goes without saying that there are many fine examples of ‘challenged’ people living wonderful lives. The role of those of us around these challenged people, who have had the courage and strength of spirit to set such high hurdles for themselves, should be to support them in their mission to overcome any difficulties and to learn and grow together.

Drug-free childbirth and medical care

High-risk births require the best possible medical technology, and accordingly, a specialist doctor to deal with such births. However, I believe that for regular births that are free of complications, we should also have doctors who specialize in caring for the baby’s emotional health and safety.

Furthermore, and almost without exception, I find that the mothers who visit my clinic are under a lot of stress and are trying to do too many things at once. I wish that doctors would try to help alleviate even a little of this stress of daily life, which would lead to better parenting as a result.

Accordingly, I personally prefer to avoid drugs and steer towards medical care that brings out the body’s natural ability for healing. Many people feel that they will get better if they take medication, but there is no single drug that works perfectly for everybody. Drug efficacy shows a normal distribution when represented on a graph. To explain this very roughly, the drug will work very well for around 20% of people and not at all for another 20%, with ill-defined results for the remaining 60% of people. So the ‘twenty percent’ rule applies here.

Furthermore, the 20% who report excellent results will still do so regardless of whether they are given the actual drug or a lactose placebo, while the 20% who report no result at all will do so regardless of the type of drug given. When testing drug efficacy in extreme cases, data is only taken with regard to how a particular medication will affect the intermediate 60% of people.

Depending on the medication, 30% to 60% of people may report that they find a certain drug to be effective. However, even in tests for a sleep medication, 40% of people given the lactose placebo found it to be effective, compared to 60% of people given the real drug. Accordingly, this drug's efficacy could only be recognized as being the 20% difference between the two.

Perhaps I have provided an extreme example, but in consideration of the side-effects that synthetic drugs can have, I feel that they are best avoided except in clear cases of emergency. I think it is better to try alternative therapies which are much kinder to the body.

One such therapy is herbal or aromatherapy. If I feel that a patient should not take pain killers, I recommend they use herbs such as chamomile or lavender, which have analgesic properties, or peppermint to lift the mood, depending on their symptoms. These herbs can be inhaled as a scent or drunk in a tea.

Also, if a mother-to-be is feeling uneasy or stressed out, I recommend Bach Flower Essences in place of tranquilizers. During labor, I get the mothers to drink a glass of high-oxygen water containing a drop of one of these essences, 'Rescue Remedy,' to alleviate the feeling of uneasiness. 'Rescue Remedy' is beneficial for the baby, too, and interestingly, many babies stop crying instantly if you place a drop behind their ears when they are fussing or grizzling.

'Flower essences' are simply diluted solutions made from flowers soaked in water and then left in the morning sun for a few hours, so they have absolutely no side-effects. Common medical knowledge is unable to explain exactly why these essences work, but I can only say from personal experience that they seem to work for almost everybody and have certainly been useful in my practice.

The inventor, Dr. Edward Bach, was a British physician who used the earnings he made from creating a successful vaccine to develop flower essences. In his later years, Dr. Bach is said to have been able to determine exactly which formula a patient required in the time it took for them to open the door, enter

the room and sit down in the chair.

Probably it is not just the pure pharmacological action of medicines that make them effective – this also seems to be related to the communication of feelings. It seems that any medicine can be effective when we are told with confidence that it will work. The conscious mind is extremely powerful, and by learning to use our minds effectively, we may be able to become healthier.

Reflexology is also effective for relaxation. Reflexology therapy uses massage on the soles of the feet, where each organ of the body is represented by a pressure point, and consequently can be beneficial for the whole body.

In my clinic, British-style reflexology is recommended to our patients, both during pregnancy and after the birth. Previously, I have conducted studies to ascertain the benefits of this therapy, in which electrical and chemical measurements were taken both before and after treatments, and the results reported at academic conferences. We were able to confirm that reflexology is quite effective in allowing the patient to become deeply relaxed. The patients were particularly pleased that it was instantly effective in relieving swelling in the feet.

We also hold yoga classes at the clinic. Yoga is good for practicing breathing techniques and helps to make the pelvis more flexible, which can make childbirth easier. In addition, the mothers-to-be become friendly with one another and chat, which is great for reducing stress.

Sometimes, when they find out that one of their yoga classmates is in labor, these new friends will turn up to see how she's going and offer their support. Conversely, mothers who have just delivered their babies will often drop by the class to say hello and show off their babies. Some of them even stay to do the class before returning home.

During these classes, pregnant mothers-to-be will probably observe those friends that have already become new mothers breastfeeding and changing diapers, so that even those women who had never had any prior contact with babies will find that they unconsciously become quite accustomed to dealing

with newborns as time progresses.

It is a great stress-reliever to have friends close by with whom you can talk about parenting, and this in turn makes it easier to enjoy the time you spend with your baby. Also, many of the mothers who come to my clinic live in the neighborhood, so the yoga classes also serve to help them make new friends in the area.

In addition to yoga classes, we also hold Baby Classes for those women who have given birth at the clinic. Every session, around 20 to 30 mothers come with their babies for a chat and to discuss anything and everything.

We recently also began ‘*Reiki*’ workshops. In Japan long ago, mothers used to pass down this ‘hands-on healing’ method to their daughters before they got married so that they would be able to heal their own families. These are the Japanese origins of *Reiki*, which was then spread to Europe and North America via Hawaii before the techniques was re-imported back to Japan several years ago. Our workshops teach these hands on healing techniques, and this is one thing I would definitely recommend for new or would-be mothers.

In addition, we provide new mothers with printouts of ‘*CHARANAVI*’ as ‘*Animal Fortune-telling*’ from the *Kosei Shinrigaku Reserch Institute* (‘Individual Psychology Institute’), which compares people to one of 12 animals and elicits your personality according to your date of birth. Hopefully this will just help mothers a little by allowing them to see their children in a slightly different light.

Of course, we don’t expect that ‘Animal Fortune-Telling’ will completely explain your child’s personality. We just want parents to recognize that everyone is an individual. Even brothers and sisters will have different personalities and it doesn’t matter whether one child is more advanced than another.

There are many types of personalities in children. You may find things easier if your child’s personality seems to be similar to that of your own, but if not, it will be important for you to make a special effort to understand your child so that you are able to relate to him better.

If you can accept objectively that everyone is different, you won't become unnecessarily anxious wondering why, for example, things were so different when his older brother was the same age, and the stress of parenting will be somewhat reduced.

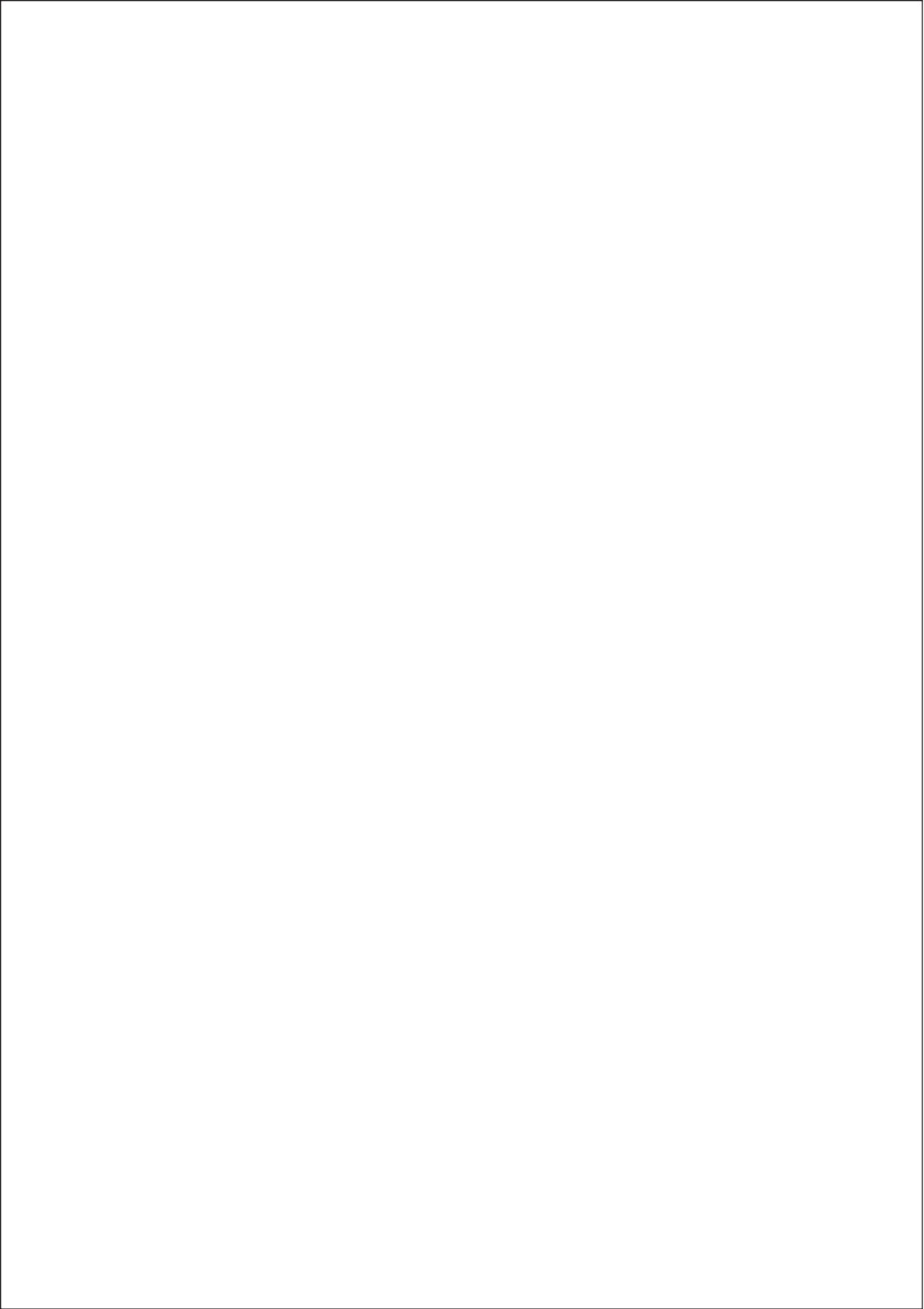
Interestingly, it seems that the way in which you give birth is reflected to some degree in your child's personality. For example, children who are born in as little as 2 or 3 hours are skilled at concentrating and accomplishing things in a short period of time, but tend to dislike having to perform tasks that require them to take a long time.

On the other hand, children who take 2 or even 3 days to be born are extremely patient, and although they are slow to take up new tasks, they always accomplish them in the end.

By understanding that we are all different, and dealing with each child in the manner most suited to their individual personality, parenting should be able to become even more enjoyable.

CHAPTER 6 SUMMARY

1. Childbirth styles change with the times. The true meaning of childbirth should not be misunderstood.
2. Babies are born to make their mothers and fathers grow.
3. It is possible that babies born with disabilities and stillborn babies bring with them an important message.
4. Many things about childbirth can be explained by accepting the concept of reincarnation.
5. Wherever possible, it is important not to depend on pharmaceutical products or artificial force for either childbirth or medical care.
6. The way in which the child is born will seem to have a major influence on his personality.



Epilogue

Now let's listen to the babies!



Pursuing better childbirth and aspiring to be a better doctor

A relationship of trust between patients and doctors is essential to the practice of better childbirth. Since 1999 the Medical Practitioners' Association, an organization of doctors in private practice which I belong to, has been providing free medical consultations "Virtual Doctor" on the internet. Being involved in it myself, I have come to learn many patients' worries.

My role there is to serve as an intermediary. When the patients are distrustful even though their doctors are giving appropriate instructions, I explain "you see, it means this...", then they are satisfied. On the other hand, there are some cases when I see problems with the doctors. In such cases, I answer them just so.

To my surprise, many people asked me things they can find out from their own doctors such as "What the medicine doctor gave them is for". It seems that patients can't ask doctors the questions they would want answered face to face. I also found out that sometimes even the doctors who thought they had explained enough, were not very well understood.

Sometimes, doctors' common sense doesn't get through to patients. In such cases, I remember an incident from the time when I was working at a university hospital.

A woman was hospitalized for terminal cancer. Back then, it was a common practice for universities to teach that "in case of a cancer, it is better not to tell the patient", and many doctors believed so at that time. So the hospital stuffs had kept it secret from her that she had a cancer. But her husband told her.

The physician in charge was critical about it and left a note on the carte "Her husband has told her. What a cold man he is". However, she remained calm until the end, said "thank you, everyone" and passed away calmly.

I felt that if a patient who knew she had a cancer can face death this peace-

fully, there might be a problem with teaching variation that “notifying the patient is wrong”.

Each person is in different circumstances. Shouldn't doctors place themselves in the patient's shoes and think of the best medical practice from the patients' point of view? Though it's a conventional expression, I think a medical practice which puts patients first is desired, rather than following the manuals.

In ancient China, it was considered that a good doctor can tell what's wrong with the patients by just looking at them . It was called *diagnose at glance*, and furthermore a real good doctor was to be able to heal the patients by just looking at them. A doctor who took the patient's pulse was considered to be inferior compared to a good doctor.

Based on that concept, the modern doctors would be all bad doctors. Such considerations apart, I feel the modern medical scene does tend to rely on medications and medical procedures and tend to lack the time to face the patients.

What the medical practice must emphasize from now on is the communication with the patients. In order to really know the patients' conditions, we must open our hearts to each other and talk.

Even if simple symptoms are showing, in some cases there are family problems behind them and illness won't be cured unless the fundamental factors are solved. At such times, maybe talking as much as they'd like helps them relieve the stress of the patients, because the symptoms disappears and they leave saying “ I don't need any medication”.

At such times, I feel lucky as a doctor and feel vitalized. Though I have been taught at the university that doctors heal the sick, maybe doctors themselves are being healed by their patients from engaging in medical practice.

Childbirth will be directly linked to the baby's way of life

For mothers, the passages of pregnancy, childbirth and raising children are occasions which change their lives big time and good opportunities for themselves to grow up.

There might be many mothers who watch what they eat and use since they became pregnant. There must be many people who consider the fact that everything goes into the baby and redefine the overall life style trying to choose organic food and use endocrine disruptor free table wares and detergent and such.

A person's life style is acceded over the generations and affects the global environment. And it is a tiny baby in his mother's arms who teaches us such life truths.

Baby loves his mother and wishes to create a happy family with his mother and father. That is because one of the purposes for a baby to be born is to raise the parents. Though they lose their prenatal memories as they grow older, babies come into this world with so many things from the very beginning.

There is so much that baby wants to tell the mother; why he was born, what kind of gift he brought with him, he wants to tell you more about them.

Now, let's listen to the babies.

Appendix

Parenting Begins From A Baby's Time In The Womb

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Parenting Begins From A Baby's Time In The Womb

—Conceivable Parenting Based On Prenatal And Birth Memory—

Akira Ikegawa, M.D.,Ph.D.

Foreword

Recently it has become widely known that there are memories of the womb and the birth. Such subjects, which ten years ago had been treated at the same level as cults, finally began to see the light of day. These terms are not yet officially defined, but the memory of the womb is called “prenatal memory”, and the memory of birth is called “birth memory” or “nativity (time) memory”. For the time being, the memory of fetuses and newborns of the time lapse from the beginning of the contractions to right after the birth is defined here as “birth memory”, while memories from the time of conception to the beginning of the contractions, right before the baby's birth, are called “prenatal memory”; the memory of living as someone else in the past is referred to as “past life memory”, and memories of the time between the past life and conception are called “pre-conception memory”.

Asking “Do prenatal memory and birth memory really exist?” always entails a risk of straying off into a labyrinth with no answers. And that is because it is considered to be a phenomenon way beyond the categories which are accountable by today's science. The research I personally conducted might become one of the answers to this question. From 2002 to 2003, I conducted a survey at day-care centers in Suwa City and Shiojiri City. This survey, in which 3601 people took part, was probably the first compendium of prenatal and birth memories in the world. With a focus on this survey, I here present additional information gathered by email, letters and fax messages, and report these phenomena.

Retention Rates of Prenatal and Birth Memories

I sent the questionnaire to 3601 people and received 1620 responses. 534 children, or 33.0 %, related prenatal memories, 335 children, which is 20.7 %, spoke of birth memories. 354 children, or 21.9 %, had memories of the both kinds, and 615 children, or 38.0 %, had both or either type of memories. (Figure 1) Furthermore, according to another survey, the retention rates of either prenatal memory or birth memory in adults were 3 out of 33 children, or 9.1 %, in elementary schools, 47 out of 827 children, or 5.7 %, in middle schools, and 16 out of 1407 adults, or 1.1 %.(Figure 2) It is generally believed that these memories are lost at the age of 2-3, but the results of the survey doesn't seem to confirm that supposition.

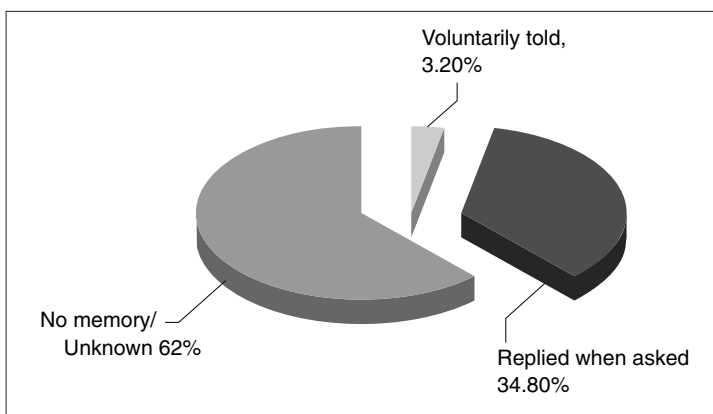


Figure 1 : Prenatal memory / Birth memory Retention

Children who answered they had the memories 615 out of 1620 cases, 38.0%
Children who voluntarily related their memories 51 cases, 3.2%
Children who replied when asked 564 cases, 34.8%
No memory / Unknown 1005 cases, 62.0%

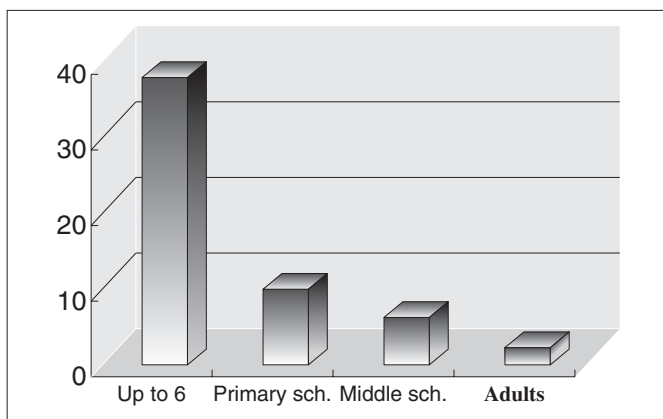


Figure 2 : Prenatal/Birth memory retention rate (%)
It shows that the retention rate decreases with age.

Contents of Prenatal and Birth Memories

The concrete cases collected through the surveys are very interesting. There is a sort of richness of the spirit to the world of fetuses and newborns, which is richer than the textbooks would lead us to believe.

Fetuses and newborns not only possess the five senses but also a bounty of emotions. As fetuses and newborns, they experience joys and sorrows. Most especially, there are clear tendencies: if the expectant mother's life is hard, the child will get a negative prenatal image of a womb; and if her maternity life is a happy one, the unborn baby's image will be a positive one. Furthermore, some children clearly talk about the reason why they were born; others talk about why they chose their parents. Many children view the contractions in an objective light. While some children say that the birth was "hard", many others say that "it was not hard" when they were being born. Generally, we tend to think that labor and parturition are painful and unbearable; however, for babies, it seems that this is not necessarily so. It's what the mothers feel during

labor what seems to affect the feelings of the babies who are being born. These testimonies show us how important it is for children that their mothers feel relaxed and positive from early pregnancy to the time of childbirth.

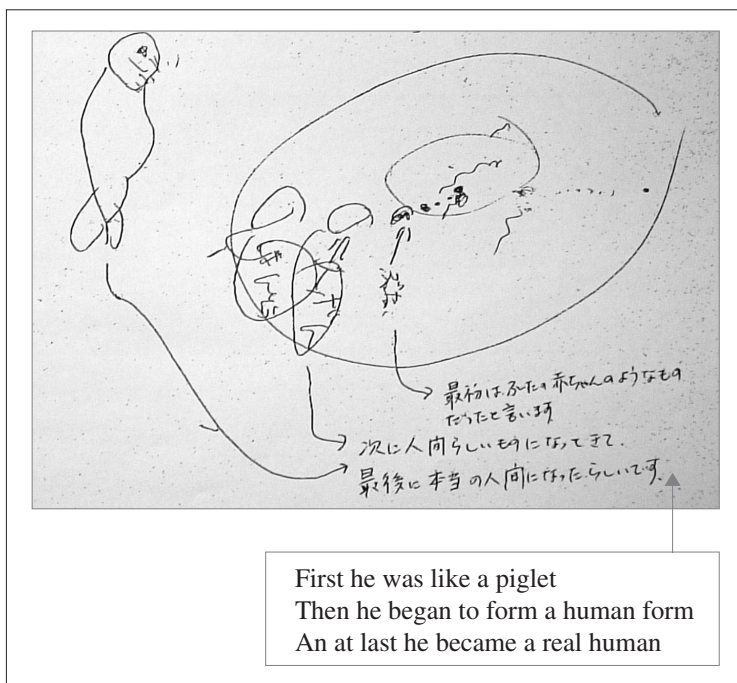
How early the memories start in fetuses

Prenatal memory is often confirmed by the auditory sense, and even the Primate Research Institute at Kyoto University reports that experiments with chimpanzees show that the animals seem to remember the sound of the womb. Although they are quite difficult to confirm by other methods, there are some cases which seem to indicate memories from a very early stage.

My old elementary school once caught on fire. There is a woman who saw it from the second window of the house when she was still in a womb – from inside her mother's womb. She remembers urging her mother from the womb: "Mother, hurry, let's get away". I infer from her birthday that this happened around the 36th week of pregnancy.

One mother reports that when she was playing with her son, he suddenly started to get angry, saying: "Why did you do that? A needle came in when I was in your tummy. It was very scary." She said she had had a Chorionic Villus Sampling for the chromosome test when she was 10 weeks pregnant.

Also, I encountered a boy who said: "I was a sludge worm." (*Figures 3-4*) Since he also said he was a pustular dot before he became a sludge worm, he seems to have a memory of being a primary spermatocyte. He says, "I was swimming against all the others and I came in first. Then the rest of them died." Another man, with a similar memory, says: "We must all make an effort to live well for those who died." When I ask the children, "Where were you before you were born?" some children answer, "In daddy's tummy." Maybe they really remember it.



*Figure 3 : Drawing of a human “rowing” from primary spermatocyte through sperm cells.
 Drawn by a 6 year-old-boy.*

He describes: “At first, I was a sludge worm (primary spermatocyte) and then became a sludge worm (sperm cell), then a piggy (embryo-fetus), and then became a ‘human’, and at last became a real human being.”

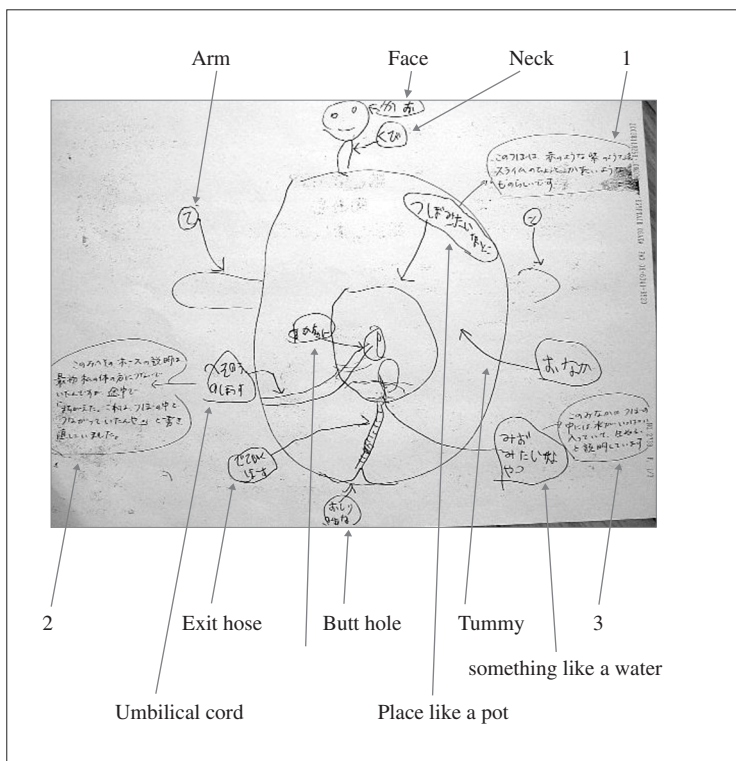


Figure 4 : Drawing of the time of pregnancy

The boy describes the womb as a “place like a pot”.

Also, he describes the “exit hose” as

“a place like a vacuum cleaner hose” (vagina - birth canal).

- 1: He says this pot (Uterus) was reddish-purplish and a little harder than smile.
- 2: Description of the umbilical cord. First he drew it connecting it to mother, then he said, “oops, I messed up. This was connected to the pot” and redid it.
- 3: This pot was full of lukewarm water.

Children who don't want to talk about it

There are children who don't want to answer about either prenatal or birth memories. Since they don't want to talk about it, it is conceivable that their memories may be unpleasant. However, due to lack of information, the details are unknown. There are 326 cases – or 21.1 % – of such children. While 49 cases have prenatal memory but they don't want to answer regarding their birth memories, 15 cases have birth memories but they don't want to answer regarding prenatal memories, and a total of 64 cases have either memories (they don't talk about the other kind). At this moment, the reasons why they refuse to talk about them remain unknown.

There is a child who has a memory which she doesn't like to talk about, but she can describe the situation. This girl, now 12 years old, has considerably detailed memories, but when she was asked, at about three years of age, by her mother about any memories of her birth, she reportedly showed reluctance and said: "Don't ask me any more". As for her mother, she says that labor took long and that the delivery was difficult. Nowadays, however, today this child tells in a straightforward manner: "My head was stuck somewhere narrow and it was almost impossible to come out." While she was telling her mother about the many memories she had, such as pre-conception memory, she began to talk about the painful event. This episode suggests that in some cases even painful birth memories can be considered objectively, if they are related within the proper context, later in life.

Pre-conception memory

Additionally, there are many children who talk about their pre-conception memories, such as where they were (before their mother's) pregnancy and how they chose their parents. The contents vary from child to child. Some children

claim that there had been several children on a cloud, others say there had been tens of thousands of children and they were almost countless. Some children claim that there was an entity they call *Kamisama* (God-like person), who can be male or female, and they draw a picture to describe it. Generally, or in many cases, they say they were watching their parents from the top of the clouds; they say they were looking down from the edge of the cloud, watching them on the TV, or there was a hole on the cloud and they were looking down through that hole. Many children say that when they chose their parents and descended from “the cloud”, they were escorted by angels or had fairies put wings on their backs, and flew down. Also, there are some children who claim they climbed down a staircase leading to the parents; others say they walked down the each child’s “exclusive road”.

It seems that they choose their own siblings and decided about the order of birth while they were “on the cloud”. As for the birth order, some children say they decided it with “rock-paper-scissors”, others say they talked it over and then decided.

As for the criteria for choosing the parents, the vast majority of the children say things like “she (the mother) looked kind.” There was also a child who said: “She looked lonely, so I was sure if I was born she would be happy”; another child says that he/she thought that if he/she was born to the mother, she would “smile”. If they cannot choose their parents by themselves, it seems that sometimes they decide upon “*Kamisama*’s advice”. They report *Kamisama* having said to them things like: “There’s a mother who wants a baby down there. Why don’t you go to her?” Based on this, it seems that either the children choose by themselves or have “*Kamisama* help them decide”; in any case, it seems that choice of the parents are made by children. Furthermore, there is a child who said that *Kamisama* asked him/her: “Do you want to be a healthy child or a sick child?”, and the child answered, “A healthy child”, and that’s how this child chose what he/she is today. In other words, it seems that even when they are born ill, it is the children who choose their own condition. It

seems to mean that when they are born, any children choose conditions to be in by themselves.

Past life memory

A survey of middle school students showed that 14 out of 827 students, or 1.7 %, had past life memories. In his description of a memory, one of the respondents wrote that he was eating yogurt (to which he is allergic now) in an unfamiliar place, where he then died as a consequence of war. Another respondent described himself in a place that looked like a setting from the Stone Age. Because the survey was answered anonymously, I could not learn any further details. Nevertheless I got an impression that the retention rate of memories was unexpectedly high, and that the contents of the memories were rich in variety.

Apart from the survey, among the people I interviewed there was a woman who claimed that she had died when a bomb exploded nearby, and there was a child who said that she lived in what seemed to be the time of the Okinawa War, and her mother was shot to death trying to shield her from a soldier in a military uniform armed with a bayonet gun; and there is a boy who claims he had lived in Britain and died of illness.

The child who “remembers the Okinawa War reports that in the following life she was hit by a car which ran through a red light, and died when she was in the third grade. She is now in the fourth grade, and on the first day of school a year ago, she left for school saying, “I was ran over by a car and died last time, so I have to be careful.”

The boy who says he died of illness in Britain is now 6 years old. He says that shortly before he died, he heard a voice of a news flash on the TV, which said “Breaking news, this just in,” and they reported there had been a train accident with several fatalities.

I was able to confirm that there really had been a train accident and some

people had been killed right before the time at which the boy said he had died.

Another boy says that he lived in a brick house in the United States and that he died while he was dropping bombs from a plane; later a cloud came to rescue him and he came to Japan.

A female doctor, who is a director of a hospital, reported that when she was visiting an Egyptian exhibition at a museum, she remembered she had lived in ancient Egypt as a male, who carved relief of hieratic characters for living, and he died when a stone fell on him. Even without hypnotic regressions, the surveys conducted over the past years show that some people do have memories like these.

Factors which contribute prenatal and birth memories

The hormones oxytocin, cortisol, serotonin, corticotrophin releasing factor (CRF), cholecystokinin and adrenocorticotrophic hormone are known to affect memory. Since oxytocin is known to be an important factor in memory extinction and cortisol, which is a stress hormone, is known to diminish the recollection of traumatic memory, Verny indicates that these two hormones have a stress-prevention role (Verny, T. 1981/2002). The “stress hormone” ACTH affects memory retention. Gulpinar and Yegen report that the peptide cholecystokinin, serotonin and CRF play an important role in the modulation of the recollection process under stressful circumstances (Gulpinar MA, Yegen BC, 2004). Regardless of the mothers’ own evaluation regarding their labor as “easy” or “hard”, in most cases their memories present positive images, which suggest that negative memories tend to be erased. However, when the stress exceeds a certain level, there is a possibility that the defense hormone might not be secreted in quantities enough to have a defense effect, resulting in recollection of negative memories. Therefore, if a baby was born through a natural process and has negative memories, it is conceivable that the “inconvenient” memories – the memories which may not be the most desirable ones to

start a life – are erased by the hormones that are secreted naturally.

Applying the memories from past life to birth to parenting

Validating these pregnancy-related memories as factual truth is extremely difficult. Many people who have such memories testify, “I was hurt when I was denied by my parents whom I trusted the most.” A man in his thirties who one day suddenly recovered the memory of his prenatal experiences says he was relieved to find out that he was not the only one with such memories. Many people with prenatal memories might have been denied, hurt and keeping silence. If so, because of our ignorance, we might have been unknowingly hurting children’s feelings.

I am yet to find a case when a person has an entire series of memories from the past life to birth. In all the cases I have encountered so far, the memories are partially fragmented. However, when something triggers their memory, people sometimes remember the experience in question in full detail. If 40% of children have any such memories, the psychological influence we give to parenting is significant.

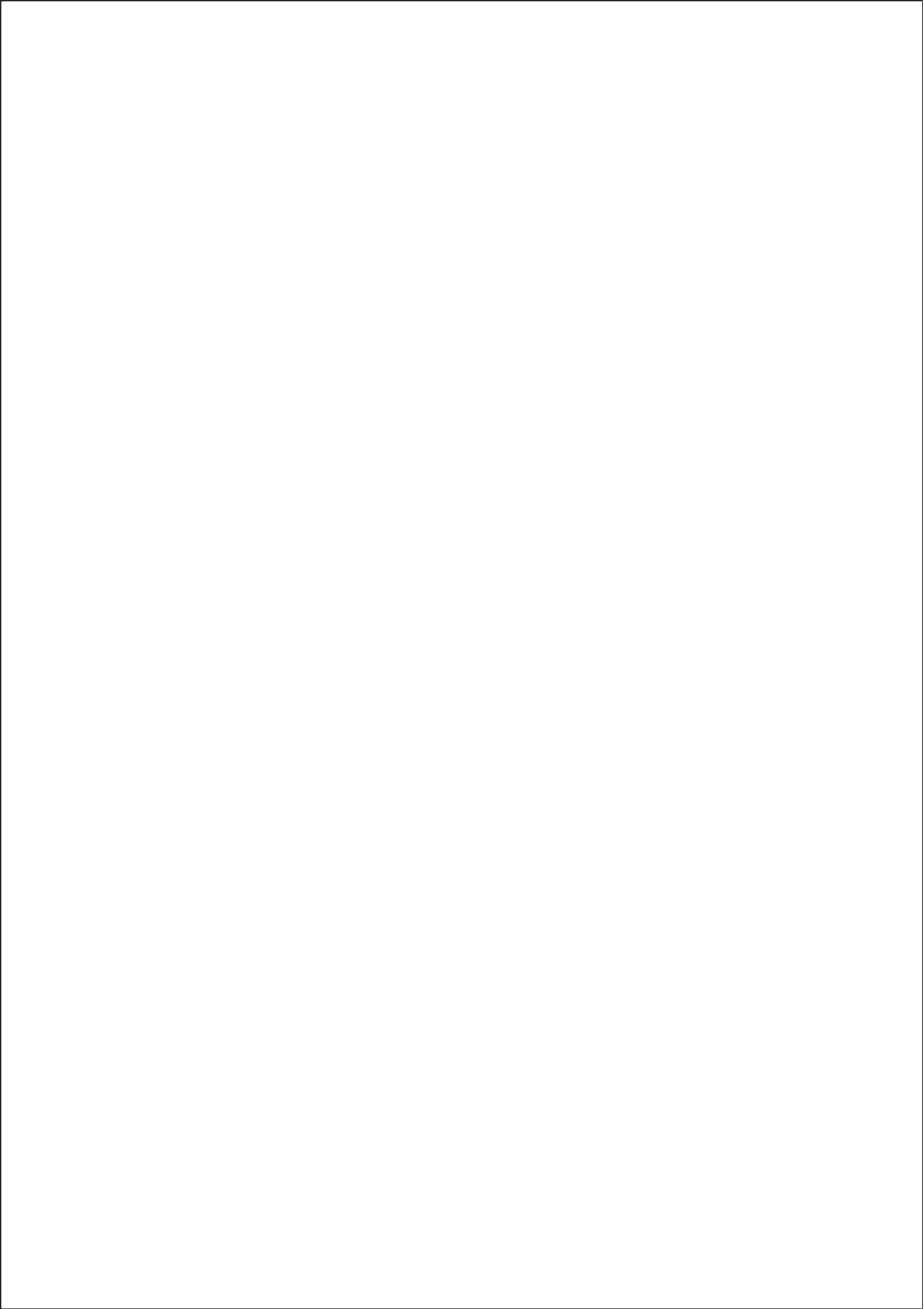
Though it is difficult to scientifically explain the reason and meaning of these memories, when I sum up the testimonies of many children and adults with these memories, a certain pattern of this world begins to emerge. Living means an entity called spirit repeatedly live through an age in bodies, and they alternately exist in the unbodied age. And when they choose a body, it seems that they choose their parents and their environment, the era to live in, whether or not they are born with a handicap or undergo miscarriage, stillbirth or death from diseases – and they are all knowingly born to this world.

It is difficult to evaluate whether this idea is the factual truth. However, in our daily lives, it can be a beneficial tool to live in good spirits. Even if one doesn’t believe in this idea, it is highly possible that it causes behavior modifications, and in fact, many people actually experience a significant change in

their perceived sense of life. Moreover, it causes no harm to anyone. As an item which can be applied to everyday life, I would be glad to see clinicians apply this idea in their work front.

Bibliography

1. *The Secret Life of the Unborn Child* Thomas Verny, MD : Shodensha, 1987
(Summit Books, 1981).
2. *Babies Remember Their Birth* David B. Chamberlain, PHD : Shunjusha,
1991 (Jeremy P Tarcher, 1988)
3. *Birth Without Violence* F. Leboyer : Seiunsha, 1991 (Knopf, 1975)
4. *Creating the Value of Life* Prof. Fumihiko Iida : PHP Institute 1996
http://homepage2.nifty.com/fumi-rin/Value_of_Life2.pdf
5. *Pre-Parenting Nurturing your child from conception* Verny, T., and
Weintraub, P. New York: Simon&Schuster, 2002
6. *The physiology of learning and memory: role of peptides and stress*
Gulpinar M.A., Yegen B.C. : *Curr Protein Pept Sci.* 5(6),457-473,2002
7. *Selective amnesic effect of oxytocin on human memory* Heinrichs M.,
Meinlschmidt G., Wippich W., Ehlert U., Hellhammer D.H. : *Physiol
Behav.* 30;83(1):31-8,2004
8. *Investigation by Questionnaire Regarding Fetal/Infant Memory in the Womb
and/or at Birth* Ikegawa A., : *Journal of Prenatal and Perinatal
Psychology and Health* 20(2)95-182,2005



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*If you or your children have “fetal memory”,
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