

Prenatal Sentience, Psychedelic Healing, and the Future of Therapy

Serge Marc Lazard

Abstract: A traumatic prenatal event was uncovered following a ceremony with the Amazonian medicine ayahuasca. Further ceremonies revealed abundant details about the contents of that event. What had started as an unsolicited discovery about my early history gradually became a process of deep psychotherapy as I found numerous connections between the event and my adult life. Practical principles for this type of investigation are outlined. I briefly discuss the implications of psychedelics for the future evolution of psychotherapy, as well as our culture's resistance to the notion of prenatal sentience and the role of psychedelics in expanding our understanding of human life.

Keywords: prenatal sentience, trauma, psychedelics, psychotherapy

The Child is father of the Man. - William Wordsworth

Eleven years ago, I learned that I had received a heavy trauma while in my mother's womb. The information first came as an intuitive insight after an ayahuasca ceremony and was later confirmed by outside sources. As a member of a spiritual community that uses this decoction as a sacrament, I was drinking it regularly. Shortly afterwards, I started noticing that, in every ceremony, I was journeying towards the recorded traces of that event and experiencing the emotions, even the "conclusions" that were an integral part of it. This article is based on hundreds of those journeys.

Those emotions, being associated with an immediate threat to survival, were extremely intense, but due to the peculiar nature of the ayahuasca shamanic trance, I was able to perceive them in detail and map out the configuration of the whole incident. The associated "thoughts" can

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be hard to accept within a materialist paradigm of development. At that prenatal stage, the prefrontal cortex doesn't exist yet. In the triune model of the brain, the thoughts had to have been generated by the limbic system. As "conclusions" regarding my survival, they were then faithfully imprinted and available to me decades later. An alternative interpretation would be that we are spiritual beings and don't need a physical substrate to have thoughts.

I was amazed to find that actual decisions can be made and recorded at that developmental stage of life. Even more amazing was their immense impact on the later unfolding of that life. I had always had a drive to know myself. Since the youngest age, I had experimented with various schools of therapy and healing, hoping to get at the roots of my limitations and difficulties. The exploration of that prenatal incident gave me a skeleton key to that understanding. Countless physical, mental, emotional, sexual, and social patterns in my biography took their place as the natural "descendants" of that original trauma. They formed a logical, illuminating tree. Realizing the extent of that incident's impact was a surprise, but also a sort of relief, as so many pieces of the puzzle fell into place. In a weird sense, I felt home. Later, I came to understand that its power was only matched by the equal and opposite force that had kept it out of my awareness for my whole life to that point.

Prenatal psychology already has a long and illustrious history that includes Otto Rank, Nandor Fondor, Carl Gustav Jung, Frank Lake, Stanislav Grof, Lloyd DeMause, Arthur Janov, Joseph Chilton Pearce, Francis Mott, William Emerson, Athanassios Kafkalides, Ludwig Janus, David Chamberlain, Alessandra Piontelli, Thomas Verny, Michael Gabriel, Leonard Orr, and Sondra Ray, not to mention folk wisdom from around the world. Yet it has failed to gain acceptance in the mainstream of the field of psychology. Prenatal events are rarely mentioned as possible etiological factors in the genesis of life difficulties. Even the more obvious trauma of birth itself is usually glossed over. In medicine, it is almost universally assumed that embryos and fetuses are not sentient beings. A reversal of that assumption would invalidate many common medical procedures and much of obstetrics in general. Perhaps one cause of the resistance to prenatal psychology can be found there, since medicine functions as an institution whose main purpose is to survive and expand, and which is subject to the law of inertia.

The implications of this domain for the future of psychotherapy are broad and deep (Grof, 1975/2009; Naranjo, 1973/2013). It may be possible to locate with precision the primary incident in long chains of occurrences that were thematically linked but still puzzling, for instance accident-proneness or disease-proneness. Clinical mysteries would yield to this broadened view of human unfoldment. Reminiscing on another time in my life when I lived and worked with schizophrenic and autistic adolescents, I am intuitively convinced that many of them were prenatal injury cases. We

might also be able to solve the enigma of the “bad seed” (Hitler, Stalin, etc.) who didn’t have uniquely difficult growing years, but turned into a monster.

Contrary to the dominant view, prenatal life is not passive. Equal to its amazing receptivity, the limits of which we have yet to explore, it is the most creative state we will ever experience. Every external impression, emotion, thought, sensory input, and physiological message is processed through this responsive medium and participates in shaping the main themes and personality patterns of the beginning life. It could be called, in James Joyce’s (1916) phrase, *the smithy of the soul*. This is the space where popular but easily criticized sayings like “you create your own reality” could not only be concretely understood, but even become directly actionable. In other words, the study of core beliefs and their effects might become a science.

All of this, it goes without saying, could equally be said of the infant state, but it is much less controversial there in the eyes of our science and in the popular beliefs it fosters. We have a taboo against postulating a continuity between the prenatal and the postnatal state. Why?

In these potential advances in psychology, intentional work with psychedelics has a central role to play. Psychedelics are a uniquely efficacious key to that door. Previous methods of individual exploration like dreamwork, free association, bodywork, artwork, and countless therapy and healing techniques merely knock at the door, hoping that the inner world will yield material that can be interpreted and acted upon. In contrast, focused psychedelic journeys with extensive preparation and training can provide a direct path to the heart of the most stifling cases. Hypnotic regression and shamanic journeying, under expert guidance, might also be exceptions.

In exploring my own trauma, I was greatly helped by knowing to some extent where I was going prior to each journey. I had already located the original incident and was familiar with its unique vibrational “flavor.” Without that kind of brush-clearing, engaging in this work could turn into a fishing expedition, with disappointing results. To avoid that risk, various preparatory exercises and techniques can be used: life inventories, introspective writing, meditation, talk therapy, personal myth work, family systems therapy, and so on. Their overall purpose is to get as clear as possible about what one is really working on in one’s life. A practice that reinforces this preparation is simply to *incubate* one’s question, issue, or dilemma by sitting alone, on the day of the ceremony, in nature if possible, and deeply impregnating oneself with it.

I cannot overemphasize the importance of a ceremonial setting and attitude. As we deal with psychic energies of an unfamiliar intensity, it is essential to deliberately create a sacred space with clear physical boundaries and a sacred time defined by an opening and a closing. Ideally, the attitude should be one of joyful expectancy, humility, curiosity, and reverence.

Another very helpful technique for me has been to fast before the journey. The fast acts as a tune-up of one's vehicle; it declutters our physiology, not only from the toxic residue of our daily civilized life, but also from the low-level mental and emotional stress associated with it. By doing this, it allows us to go more directly to the heart of the matter without having to wade through irrelevant content.

Over the years of this research, a few drills and exercises imposed themselves on me as being particularly suited for confronting heavy material with equanimity and an open heart. They have in common the ability to develop empathy, self-compassion, openness to our own shadow side, and the willingness to yield to feeling. By facilitating the processing of the uncovered inner content, they demonstrate an excellent synergy with the psychedelic healing work. One of the greater satisfactions of this inquiry has been my personal discovery that those are skills that can be cultivated with assiduous practice.

Finally, I found it crucial to build a two-way relationship with the psychedelic that one is working with. To a Western mind, the idea that those medicines are *beings* with whom we can communicate can be disconcerting. Yet it has been shown again and again that this is the most effective approach to healing work with them. It is the approach of the indigenous cultures that have been doing this for thousands of years. They know something. It allows us to ask for specific help and direction, and to listen for answers. Whatever path a Western explorer takes to achieve this paradigm shift, it is well worth the effort.

Of course, the prenatal period is not only a world of trauma. It also contains the whole range of transpersonal and mystical experiences. In the womb, when all was going well, we were in a state of transcendent cosmic union that would be impossible to re-experience without the assistance of psychedelics, except for a very few yogis and meditators. It is a vast realm inhabited by archetypes, gods, goddesses, and demons. For the purpose of personal transformation, literacy in the language of metaphor and myth is helpful.

The work is difficult and the results may not correspond to one's fantasy about "curing" or "healing." It does not erase the trauma and bring one back to a previous, perhaps imaginary, state of wholeness. Words like completion or integration better describe a successful outcome. It is not radically different from the outcome of a winning conventional therapy. Beyond preparation and technical training, the integration phase still requires intensive introspection, other healing or psychotherapeutic modalities as needed, and the hard grind of implementing the new insights in everyday life. It is a field of study in itself. Here we are a long way from the "recreational" use of drugs. But once the appropriate skills are understood and codified, this approach could become the gold standard of therapy in the future.

With psychedelics, we confront the “unconscious” head-on instead of its epiphenomena like dreams and neurotic behaviors in daily life. I use quotes around the word “unconscious” because, in my view, it should more accurately be called *the broader consciousness that is our heritage, but is suppressed by human civilization as an integral part of its operation*. The basic process of creating the unconscious could be described as follows, in a nutshell. Something traumatic happens. The response to it is incomplete and does not restore full functionality. The vibrational imprint of the event remains and impinges on the tasks of living. In order to be available to the demands of relating to the world, we suppress it and it becomes unconscious. However, that suppression also makes us smaller. It diminishes our access to our naturally expansive state of being.

Since we have been doing this for hundreds of thousands of years, we carry a vast store of inherited, species-wide trauma to which our individual misfortunes are but a modest contribution. This enormous mass is extremely toxic and explosive, but eventually it has to be dealt with. It is necessary in order for us to finally live the real life that is legitimately ours.

This perspective might help us understand what we have done to this planet and the insane predicament we find ourselves in today. It also sheds light on mainstream science’s resistance to the abundant evidence for prenatal consciousness. What there is to find in that realm is wonderful, but also terrifying—not necessarily in this order. That resistance, it could be said, is a reflex of survival on the part of our current civilization. The unwillingness to confront the negative aspects of our heritage is everywhere on display in the news, as well as in our individual lives.

Thus, in the constantly-intensifying transformation of society, psychedelics have a key role to play. It is no accident that they are sacred in cultures all over the world, but demonized in ours. The obvious fact that ours is the dangerous one at this point in history is linked to its rejection of the revealing, transforming, and regulating function that a conscious use of these substances can have. Today, more than ever, we need them as guides and allies on our path.

References

- Grof, S. (1975/2009). *LSD, Doorway to the Numinous: The Groundbreaking Psychedelic Research into Realms of the Human Unconscious*. Rochester, VT: Park Street Press. (Original work published 1975 by Viking Press, New York, under the title *Realms of the Human Unconscious*.)
- Joyce, J. (1916). *A Portrait of the Artist as a Young Man*. New York: W.B. Huebsch.
- Naranjo, C. (1973/2013). *The Healing Journey: Pioneering Approaches to Psychedelic Therapy*. Santa Cruz, CA: Multidisciplinary Association for Psychedelic Studies (MAPS). (Original work published 1973 by Pantheon Books, New York, under the title *The Healing Journey: New Approaches to Consciousness*.)