

Inclusive Communication Surrounding Childbirth, Lactation, and Infant Feeding

Breastfeeding Curriculum, updated 2021

This curriculum tool is free to use within educational settings. Please credit the AAP Breastfeeding Curriculum without altering the content.



Self-reflection Moment

Take 2-5 minutes to list all the words you use or association with childbirth, lactation counseling, or infant feeding



Here are a few examples

- **Mother-baby unit**
- **Maternal care**
- **Mom's own milk**
- **Breast**
- **Breastfeeding**
- **Breast pump**
- **Breast milk**
- **Expressed breast milk**
- **Skin-to-skin**
- **Donor milk**
- **Kangaroo care**
- **C-section**
- **Vaginal delivery**
- **Labor and delivery**
- **Mom/Mother**
- **Dad/Father**
- **Son/boy**
- **Daughter/girl**
- **Baby**
- **Formula**
- **Bottle**
- **Nipple**
- **Many more ...**



Further evaluation

**Look at your list and think
about the implied gender of
each term.**

Engendering the childbirth experience

- **Mother-baby unit**
- **Maternal care**
- **Mom's own milk**
- **Breast**
- **Breastfeeding**
- **Breast pump**
- **Breast milk**
- **Expressed breast milk**
- **Vaginal delivery**
- **Mom/Mother**
- **Daughter/girl**
- **Many more ...**



Engendering the childbirth experience

- **Mother-baby unit**
- **Maternal care**
- **Mom's own milk**
- **Breast**
- **Breastfeeding**
- **Breast pump**
- **Breast milk**
- **Expressed breast milk**
- **Vaginal delivery**
- **Mom/Mother**
- **Dad/Father**
- **Son/boy**
- **Daughter/girl**
- **Many more ...**



Engendering the childbirth experience

- **Mother-baby unit**
- **Maternal care**
- **Mom's own milk**
- **Breast**
- **Breastfeeding**
- **Breast pump**
- **Breast milk**
- **Expressed breast milk**
- **Skin-to-skin**
- **Donor milk**
- **Kangaroo care**
- **C-section**
- **Vaginal delivery**
- **Labor and delivery**
- **Mom/Mother**
- **Dad/Father**
- **Son/boy**
- **Daughter/girl**
- **Baby**
- **Formula**
- **Bottle**
- **Nipple**
- **Many more ...**



The inherent “woman-ness” of our language can alienate

(Click the words to see alternatives & explanations)

- [Mother-baby unit](#)
- [Maternal care](#)
- [Mom’s own milk](#)
- [Breast](#)
- [Breastfeeding](#)
- [Breast pump](#)
- [Breast milk](#)
- [Expressed breast milk](#)
- [Vaginal delivery](#)
- [Mom/Mother](#)
- [Daughter/girl](#)



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Mother-baby unit**

Non-Gendered Alternatives

- **Parent-Child Unit**
- **Peripartum Unit**
- **Postpartum Dyad**
- **Birthing Center**

*The non-gendered options eliminate the gendering of the gestational parent, allowing each parent to utilize their affirmed title.

*Additionally, this can be seen as more inclusive of the non-gestational parent regardless of sexual orientation or gender identity.

[Click to return to all the word choices](#)



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Maternal Care**

Non-Gendered Alternatives

- **Family Care Unit**
- **Peripartum Care**
- **Center for New Parents**

*The gendered term “Maternal Care” implies the parent on the unit identifies as mother. This is exclusive of transmasculine and gender expansive communities.

*The non-gendered terms above focus on the family unit. This allows families of all dynamics to feel welcomed.

[Click to return to all the word choices](#)



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Mom’s Own Milk**

Non-Gendered Alternatives

- **Human Milk Initiative**
- **Human Milk is Best**

*Many institutions have moved to mom’s/mother’s own milk, however, these initiatives are implying that all lactation parents identify as the mother of the infant.

*By eliminating the word “mom” these terms are more inclusive of all lactating parents. It also is more welcoming to parents who are unable to lactate.

[Click to return to all the word choices](#)



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Breast**

Non-Gendered Alternatives

- **Chest**
- **Lactating Organ**

*While anatomically both anatomical males and females have breasts, culture has created a shift to feminizing this term to refer only to the female body.

*For many transgender or gender diverse individual terms such as “breast” can contribute to a sense of gender dysphoria, even if they are not the gestational parent. It is necessary to never assume that all lactating parents refer to this part of their body as a breast. Many centers have created an “Organ Inventory” tool to enable providers to document how an individual refers to sensitive parts of their bodies.

[Click to return to all the word choices](#)



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Breastfeeding**

Non-Gendered Alternatives

- **Chestfeeding**
- **Nursing**
- **Lactate**

*It is necessary to never assume that all lactating parents refer to this part of their body as a breast. Making the assumption can lead to feelings of gender dysphoria for some patients.

*While “breastfeeding” is anatomically accurate, it is not culturally sensitive. Chestfeeding has become the accepted terminology if the lactating parent refers to their lactating organ as their chest (see Organ Inventory tool). If a gender-neutral term is preferred nursing eliminates the reference to any sensitive body part.

[Click to return to all the word choices](#)

Breastfeeding Curriculum



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Breast pump**

Non-Gendered Alternatives

- **Human milk pump**
- **Electric pump/Manual pump**

*An easy fix when referring to this equipment is to eliminate the organ which is being pumped and to focus on the product (human milk) or method (electric versus manual). When teaching a parent how to use the pump, refer to the “Organ Inventory” tool to determine how they refer to this particular part of their body.

[Click to return to all the word choices](#)

Breastfeeding Curriculum



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Breast milk**
- **Expressed Breast milk**

Non-Gendered Alternatives

- **Human Milk**
- **Expressed Human Milk**

*While direct breastfeeding is appropriate if the lactating parent refers to their lactating organ as a breast, once the milk has been expressed or when referring to the type of feed provided rather than the mode of feeding, it is more appropriate to refer to the milk as human milk. This terminology is supported by current lactation and infant nutrition literature as the standard.

[Click to return to all the word choices](#)



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Vaginal**

Non-Gendered Alternatives

- **Delivery via birth canal**
- **Non-surgical birth**

*While at times the term “vaginal” cannot be avoided, particularly within documentation. When speaking with the parent it is easier to find culturally sensitive ways to refer to the mode of delivery without referring to the gestational parent’s organs.

[Click to return to all the word choices](#)

Breastfeeding Curriculum



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Mother/Mom**

Non-Gendered Alternatives

- **Parent**
- **Gestational Parent**
- **Parent’s Name**
- **“How do you expect your baby to refer to you?”**

*By using gender neutral naming, you eliminate the risk of misgendering a parent. Additionally, to be more inclusive of the family, asking each parent how they expect their child to refer to them will allow the parents the opportunity to provide you with their affirmed terms which you can then adopt when speaking with them.

[Click to return to all the word choices](#)

Breastfeeding Curriculum



The inherent “woman-ness” of our language can alienate

Gendered Term

- **Girl/Daughter**

Non-Gendered Alternatives

- **Child**
- **Infant**
- **Baby**
- **The child’s name**

*Though not thought of as much, members of the gender expansive community may also see the sex assigned at birth and the gender identity of their child as two separate entities.

*When at all possible it is best to use the infant’s given name when speaking with parents. This improves the parent/provider relationship and avoids the potential for misgendering. If the parents have yet to name the child, gender neutral options are available as noted.

[Click to return to all the word choices](#)



The male “other parent” assumption

- It is important to also remember that just as all gestational parents may not identify as female, not all non-gestational parents will identify as male or as “father”.
- Do not assume that a male or male presenting person in the room is automatically the second parent.



Language is more than spoken

Gendered language can be found in many places throughout the hospital

- Signage
- Restrooms
- Welcome packets
- Registration forms
- Birth certificates
- Artwork
- Parent badges/bands
- And many more



Time to take action

- Take a moment to think of a specific component of your current clinical environment that could be seen as gendered or exclusionary to a member of the LGBTQIA+ community.
- Now think of a simple step that could be taken to improve this element.

Time to take action, my commitment

- After reflecting on my current practices and habits in interacting with parents, I realize that _____ could be seen as insensitive to my LGBTQIA+ parents.
- To help improve on this I plan to:



Sample Organ Inventory

Organs the patient currently has:

breasts

cervix

ovaries

uterus

vagina

penis

prostate

testes

Organs present at birth or expected at birth to develop:

Same as current organs

breasts

cervix

ovaries

uterus

vagina

penis

prostate

testes

Organs hormonally enhanced or developed:

breasts

Organs surgically enhanced or constructed:

breasts

vagina

penis



Acknowledgement

This slide deck was supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$200,000 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by American Academy of Pediatrics, CDC/HHS, or the U.S. Government.

Thank you to the Project Advisory Committee organizations:

- American Academy of Pediatrics (AAP), Lead Organization
- Academy of Breastfeeding Medicine (ABM)
- American Academy of Family Physicians (AAFP)
- American College of Obstetricians and Gynecologists (ACOG)
- American College of Osteopathic Pediatricians (ACOP)
- Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)
- National Hispanic Medical Association (NHMA)
- National Medical Association (NMA)
- Reaching Our Sisters Everywhere (ROSE)
- United States Breastfeeding Committee (USBC)

Thank you to the many expert reviewers of these curriculum resources!

Contact lactation@aap.org to request PowerPoint version. Please note: altered content must be approved by AAP.

Thank you to the Project Advisory Committee members:

- Joan Meek, MD, MS, RD, FAAP, FABM, IBCLC
- Julie Ware, MD, MPH, FAAP, IBCLC
- Lori Feldman-Winter, MD, MPH, FAAP
- Tara Williams, MD, FAAP, FABM
- Julie Wood, MD, FAAFP
- Lauren Hanley, MD, IBCLC, FACOG
- Sharon Mass, MD, FACOG
- Michal Young, MD, FAAP
- Sahira Long, MD, IBCLC, FAAP, FABM
- Jason Jackson, DO, FACOP
- Amelia Psmythe Seger
- Kelly McGlothen-Bell, PhD, RN, IBCLC
- Jennifer Nelson, MD, MPH, FAAP, DipABLM
- Susan Rothenberg, MD, IBCLC, FACOG, FABM
- Judith Flores, MD
- Sara Oberhelman, MD, CLC, FAAFP
- Caitlin Weber MD, MS, IBCLC, FAAFP
- Leslie Cortes, MD
- Kelsey Sullivan, MD
- Emily Fishman, MD, MSCI
- Melissa Hardy, MD
- Mau Assad, MD
- Ariana Rudnick, MD
- Whitney Lieb, MD

Breastfeeding Curriculum

