

A photograph of two women embracing, overlaid with a purple gradient and a red border. The woman on the left has long dark hair and is wearing a dark top. The woman on the right has curly hair and is wearing a plaid shirt. They are both smiling and looking at each other. The text is overlaid on this image.

QUEER & TRANS SUPPORT:

**FIGURING OUT
THE NORM**

OVERVIEW

01

WHAT DOES IT MEAN TO QUEER HEALTH: WHAT DOES LACTATION LOOK LIKE FOR QUEER BODIES

02

WHY IS INCLUSIVITY IMPORTANT

03

A TESTIMONY FROM A LACTATING PERSON AND HOW WE COULD HAVE DONE BETTER

04

HOW CAN WE OFFER CONSCIOUS CARE: A LOOK AT INATKE

05

HOW TO INTEGRATE INCLUSIVITY INTO YOUR PRACTICE AND HOW THIS WILL ATTRACT CLIENTS

06

CONCLUSION | Q&A

DISCLOSURE

As a certified integrative feeding and lactation specialist, I do receive compensation through my private practice from clients and patients as Queer Cherry Health & Integrative Feeding and as an educator and speaker for interested organizations and businesses that are interested in queering and diversifying their curriculum and/or practice.

ABOUT ME

Integrative Feeding and Lactation Specialist from Manhattan Birth and Certified Child Birth educator, Earning my Bachelors of Science in Midwifery and current coordinator for the workforce development department at Health Mothers, Healthy Babies Coalition of Georgia.

Founder of The Postpartum Clinic and Queer Cherry Health, an integrative feeding and lactation private practice and health app centering queer and trans bodies by matching them with providers that understand.

KAYLA BITTEN, IFLS-C, CCE



LET'S LOOK AT

01

02

03

04

LANGUAGE

STATISTICS

COMMUNITY

DIVERSITY

FOUR KEY POINTS

LANGUAGE

The use of language that doesn't exclude but includes a wide range of populations.

“BODYFEEDING IS OFTEN DESCRIBED AS BREASTFEEDING OR IN SOME CASES AS CHEST FEEDING. I’VE OPTED FOR USING THE TERM NURSING.” - QUEER NURSING: THE PHASING SYSTEM

STATISTICS

“Breastfeeding or chestfeeding are neglected health problems in the transgender and gender-diverse population and many socio-demographic factors, transgender and gender-diverse-related factors, and family environment are correlated with it. Better social and family support is necessary to improve breastfeeding or chestfeeding practices.”

Yang H, Na X, Zhang Y, Xi M, Yang Y, Chen R, Zhao A. Rates of breastfeeding or chestfeeding and influencing factors among transgender and gender-diverse parents: a cross sectional study. *EClinicalMedicine*. 2023 Feb 16;57:101847. doi: 10.1016/j.eclinm.2023.101847. PMID: 36864982; PMCID: PMC9971548.

COMMUNITY

Acknowledging the many communities, acknowledges that not all people that lactate identify as woman or femal. It helps you as the perinatal professional or practitioner to provide a more inclusive approach that affirms the diversity and expressions of all people that can make or supply milk.

DIVERSITY

Diversity is not linear. Diversity includes but goes beyond race and class. It is imperative that it includes a wide range of diverse identities. We must make it our job to disrupt disparities and exclusions in all ways possible for our patients and clients to thrive.



It challenges us to look at all communities and the complexities of the body and lived experience.

**SO HOW DOES THIS
ALL PUSH US TO
QUEER HEALTH?**

INCLUSIVITY

This not a buzzword,
rather a consious way of
pratice inside of our
offices or the hospital and
outside.

- Top Surgery
- Gestational Parent
- Dry nursing



DEEP DIVE

Binding



- How would you approach counseling?
- If you're thinking of nursing and are also planning to bind, this may decrease milk
- Many parents who bind have found allowing the milk supply to become established (about one month) without binding then returning the binding reduces this risk

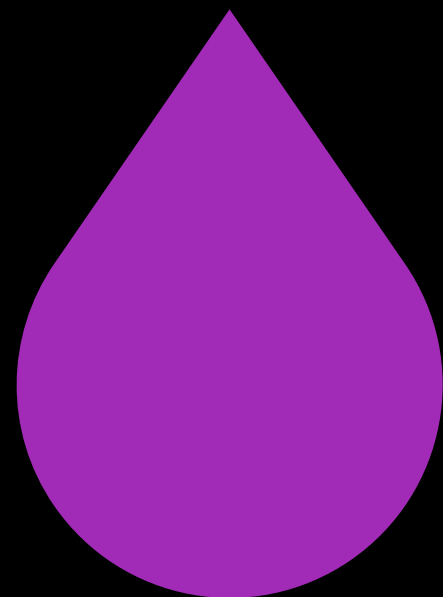
- Someone who doesn't produce milk nurses the baby and part of parenting journey
- Provides comfort and bonding
- May be considered controversial in some circles

However, the lactating journey is heavily part nourishment/nutrition and bonding.

Dry Nursing



TESTIMONY



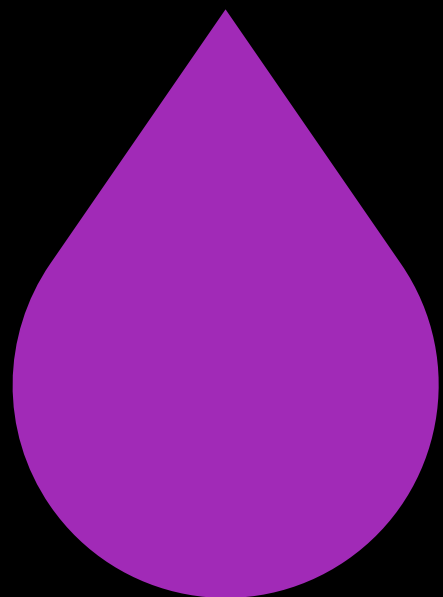
Dr. Laura Arrowsmith D.O., 68, Tulsa, OK

I think it strongly reinforced my sense of womanhood. I had some great inner satisfaction in knowing that I could do what a cisgender woman could. It was very important to me, and I'm proud and happy that I did that.

TESTIMONY

Anonymous, Queer Cherry Health Client

My partner and I didn't have much assistance in the beginning. Bottles and formula were pushed on us because of our want to both nurse our daughter after her time in the NICU. QHC felt affirming for us and settled a lot of the stress we had around wanting to nurse her.



Chief Complaint

A couple identifying as queer presented with concerns about inducing lactation in the non-gestational parent, as well as seeking assistance in managing a successful sharing of the breastfeeding relationship.

Management

Breast massage, milk expression, acupuncture, hormone therapy, and galactagogues, including domperidone, goat's rue, and malunggay (*moringa oleifera*) were used to initiate and establish lactation by the non-gestational parent.

Parents shared the breastfeeding relationship equally and carefully managed milk expression when the other parent was breastfeeding to maintain or increase lactation.

Overview

With professional lactation support, commitment to a lactation plan, responsive parenting, and strong communication and cooperation between parents, two parents were able to successfully co-lactate for more than a year. Breastfeeding was shared equally and supplementation of breastfeeds was rarely needed.

Schnell A. Successful Co-Lactation by a Queer Couple: A Case Study. *J Hum Lact.* 2022 Nov;38(4):644-650. doi: 10.1177/08903344221108733. Epub 2022 Jul 6. PMID: 35795891.

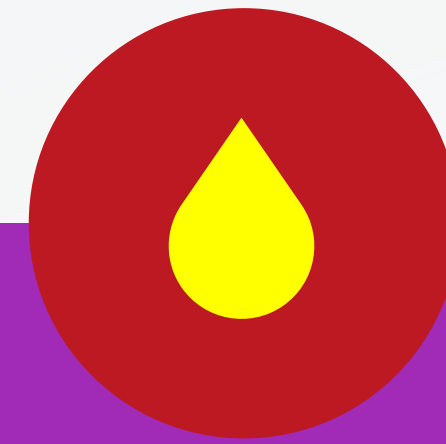
GLANCE AT CONSIDIOUS CARE



PERSPECTIVES



NEEDS



ACCESSIBILITY

GLANCE AT CONSCIOUS CARE

Client Intake Form

Please complete as much as you can.

*If you'd prefer to chat about some of these things with a human
just note it on this form.*

BRIEF PELVIC HISTORY

- | | Yes | No |
|-------------------------------------------------|-----------------------|-----------------------|
| 1. Have you ever had a pelvic exam before? | <input type="radio"/> | <input type="radio"/> |
| 2. Have you had a provider in the last 3 years? | <input type="radio"/> | <input type="radio"/> |
| 3. Are you sexually active? | <input type="radio"/> | <input type="radio"/> |
| 4. Is there a chance you could become pregnant? | <input type="radio"/> | <input type="radio"/> |
| 5. Do you menstruate? | <input type="radio"/> | <input type="radio"/> |
| 6. Have you been pregnant before? | <input type="radio"/> | <input type="radio"/> |
| 7. Do you use a tampon or menstrual cup? | <input type="radio"/> | <input type="radio"/> |

GLANCE AT CONSCIOUS CARE

CONNECTION HISTORY

- | | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|
| 1. Are you currently married? | <input type="radio"/> | <input type="radio"/> |
| 2. Are you currently in a relationship? | <input type="radio"/> | <input type="radio"/> |
| 3. Are you currently sexually active? | <input type="radio"/> | <input type="radio"/> |
| 4. Is your relationship structure poly or non-monogamous? | <input type="radio"/> | <input type="radio"/> |
| 5. Anything you would like to share about your partnership(s)/relationship(s) that may be important during this consult or visit? | <input type="radio"/> | <input type="radio"/> |

GLANCE AT CONSCIOUS CARE

Name	<input type="text"/>	
DOB	<input type="text"/>	Occupation <input type="text"/>
Preferred Name	<input type="text"/>	
Gender	<input type="text"/>	Pronouns <input type="text"/>
What brings you to us today?	<input type="text"/>	
What is the gender of your current sexual partner(s)	<input type="text"/>	
How much do you know about your reproductive health?	<input type="text"/>	

INTERGRATION

- With the increasing acceptance of gender and sexual minorities, family composition has changed. A new group of parents, consisting of lesbian, gay, bisexual, transgender, and queer (LGBTQ), has gradually emerged in society.⁷ “Transgender” is an umbrella term that refers to individuals whose gender identity is inconsistent with their gender assigned at birth, including transgender men (TM, female to male), transgender women (TW, male to female), “gender-diverse” is a wide-ranging inclusive term for describing individuals with identities outside or beyond the gender binary,⁸ including non-binary individuals, gender mobility, and genderqueer individuals. In the United States, approximately 18.8% of transgender and gender-diverse (TGD) individuals are parents.⁹

Yang H, Na X, Zhang Y, Xi M, Yang Y, Chen R, Zhao A. Rates of breastfeeding or chestfeeding and influencing factors among transgender and gender-diverse parents: a cross sectional study. *EClinicalMedicine*. 2023 Feb 16;57:101847. doi: 10.1016/j.eclinm.2023.101847. PMID: 36864982; PMCID: PMC9971548.



**“RECOGNIZING THAT
FORMS OF OPPRESSION DO
NOT IMPACT ALL
INDIVIDUALS EQUALLY OR
IN THE SAME WAYS.”**

Lee R. Queering Lactation: Contributions of Queer Theory to Lactation Support for LGBTQIA2S+ Individuals and Families. *J Hum Lact.* 2019 May;35(2):233-238. doi: 10.1177/0890334419830992. Epub 2019 Mar 6. PMID: 30840521.



Human Milk: Anthropology, Ecology, and Racism

- Language
- In-person consultations
- Diversify your knowledge
- Speak to your community and learn
- Training
- Deeper understanding of human milk production
- Compassionate advocate

**Human milk is a process of lactation
and should be treated strictly as such.**



“The anthropological literature offers many challenges and alternatives to biocapitalist models and highlights ways in which lactation builds persons, kinship, and broader networks of community.”

Biocultural Lactation: Integrated Approaches to Studying Lactation Within and Beyond Anthropology.
E.A. Quinn, Aunchalee E.L. Palmquist, Cecília Tomori
Annual Review of Anthropology 2023 52:1, 473-490

Which makes bodyfeeding in all capacities for all bodies a necessity and right.



CONCLUSION

Please feel free to ask any questions you may have.



REFERENCES

- Schnell A. Successful Co-Lactation by a Queer Couple: A Case Study. *J Hum Lact.* 2022 Nov;38(4):644–650. doi: 10.1177/08903344221108733. Epub 2022 Jul 6. PMID: 35795891.
- [Biocultural Lactation: Integrated Approaches to Studying Lactation Within and Beyond Anthropology](#)
- E.A. Quinn, Aunchalee E.L. Palmquist, Cecília Tomori
- *Annual Review of Anthropology* 2023 52:1, 473–490
- Lee R. Queering Lactation: Contributions of Queer Theory to Lactation Support for LGBTQIA2S+ Individuals and Families. *J Hum Lact.* 2019 May;35(2):233–238. doi: 10.1177/0890334419830992. Epub 2019 Mar 6. PMID: 30840521.
- Yang H, Na X, Zhang Y, Xi M, Yang Y, Chen R, Zhao A. Rates of breastfeeding or chestfeeding and influencing factors among transgender and gender-diverse parents: a cross sectional study. *EClinicalMedicine.* 2023 Feb 16;57:101847. doi: 10.1016/j.eclinm.2023.101847. PMID: 36864982; PMCID: PMC9971548.
- Weimer AK. Lactation Induction in a Transgender Woman: Macronutrient Analysis and Patient Perspectives. *J Hum Lact.* 2023 Aug;39(3):488–494. doi: 10.1177/08903344231170559. Epub 2023 May 3. PMID: 37138506.
- Wamboldt R, Shuster S, Sidhu BS. Lactation Induction in a Transgender Woman Wanting to Breastfeed: Case Report. *J Clin Endocrinol Metab.* 2021 Apr 23;106(5):e2047–e2052. doi: 10.1210/clinem/dgaa976. PMID: 33513241.
- Liesel Burisch, 2021, *Queer Nursing: The Phasing System*, 3rd Edition ; Gorilla Milk Publishing House