



Resolution: Chestfeeding Friendly Campus

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The Associated Student Government (ASG) Senate calls for the adoption of Chestfeeding Friendly Campus policies.

Whereas, in Envisioning 2024 and The Horizon Project USD mentions many aspects where they would like to be inclusive, diverse, and equitable. Presently the Envisioning2024 nor The Horizon Project do not explicitly mention lactation inclusivity. By providing resources to lactating community members and supporting their chestfeeding journey, they will be accomplishing said goals.

Whereas, when discussing lactation in order to be inclusive to all gender identities, we must use gender inclusive language. This requires us to not use the cis-normative way of speaking and instead a more inclusive rhetoric. For this reason we will not assume pronouns nor parental titles. We will instead use they/them and caregiver unless otherwise specified by the lactating community member.

Whereas, lactation spaces that are presently inside gendered restrooms are not only unsanitary, but inaccessible to all gender identities. Lactation spaces should have a high regard for cleanliness as well as accessibility.

Whereas, it should be noted that research has established the connection between chestfeeding difficulties and postpartum depression. (Jones, 2014) Postpartum



depression is a serious mental health condition which results in feelings of sadness, worthlessness, and/or hopelessness among other symptoms. Furthermore, the BIPOC community has lower rates of chestfeeding compared to its white counterparts. (Howell, 2005) Though it should be noted that the statistics of chestfeeding among the white community is lower than the targeted rate. The United States has one the lowest chestfeeding rates in the world in comparison to its other global counterparts. (Wolf, 2003) The United States constantly goes against the WHO's guidelines that promote chestfeeding. (Jacobs, 2018)

Whereas, the understanding that lactation is not only occurring during the first-year of life, but until the person who lactates decides. The WHO recommends that exclusive chestfeeding occur the six months of life followed by solid foods added complementary to a human milk diet for babies. They further recommend that children when possible should be chestfed for the first two years of life at minimum if not longer. (WHO) Duration that each lactating community member utilizes these spaces will not factor in the continued availability of these spaces. Whether someone uses it for a few weeks or a few years the spaces will be available. It is no one's job to comment on anyone's choice to cease or continue to chestfeed, but rather support their choice.

Whereas, Title IX has a summary on their website expliciting stating that students cannot be discriminated against for lactating and that they are entitled to resources.

Be it resolved, USD should actively label itself as a "chestfeeding friendly" campus. There should be tour guides who are able to give tours of the lactation spaces during campus tours if asked. Chestfeeding community members should be encouraged to chestfeed on campus whether it is through electric pumps, hand expression, or nursing. Chestfeeding community members should not be told to cover up when they



are nursing if it is in a shared space. They should be treated with dignity and respect because it aligns with USD's mission of fostering a Culture of Care, inclusivity, and accessibility without any form of discrimination. If a chestfeeding community member chooses to chestfeed privately in a lactation space their privacy should be respected. Chestfeeding community members will never be told “to hold in their milk” or that their lactating is “an inconvenience”. Nor is it practice to say that “breast is best”, community members are urged to keep similar comments to themselves. Their presence will be wholeheartedly accepted by the USD community.

Be it further resolved, at least one lactation space per building on-campus will be standard. The understanding that these spaces are for the campus-wide community-Faculty, Staff, Students (Undergraduate and Graduate), Alumni, and other members of the community who are visiting campus. For this reason we are unable to properly serve the campus community presently with the four listed single-occupancy spaces on our campus website.

Be it further resolved, each lactation space will have access to a door that shuts and locks, a working power outlet, water, microwave, sink, table, and chair (both at proper heights for pumping and nursing depending on what the person needs). As well as all spaces follow the specific measurements that ensure compliance with ADA guidelines.

Be it further resolved, no lactation spaces inside bathrooms. The KIPJ will need to create a new suitable lactation space that is not in a restroom.

Be it further resolved, the lactation spaces that are available consistently in each department are added to the USD map that is available via the MySanDiego mobile app and website for greater accessibility.



Be it further resolved, the addition of the Law School's Lactation Space be added to the website.

Be it further resolved, gender inclusive language be used on the website, such as chestfeeding instead of breastfeeding as well as referring to lactating community members as "caregivers" instead of "mothers". And the use of "they/them" pronouns when referring to lactating community members instead of "she/her".

Be it further resolved, the adoption of a campus wide reservation platform that is online which would allow community members to reserve spaces. As well as, during regular hours of operation could function to let community members know whether or not a space is available thus allowing them to drop-in if necessary. This could become a Federal Work Study position(s) as someone will need to manage the booking systems and ensure that the lactation spaces are clean.

Be it further resolved, resources for chestfeeding support should be mentioned during orientation and other appropriate events to ensure that community members are aware. It is our job to ensure that community members are outreached to and feel included as a part of USD's mission to foster a Culture of Care.

Be it further resolved, ALL Faculty and Staff should be knowledgeable of the resources available. No more referring students to Womxns Commons and stating it is their job to provide resources. We need campus-wide support.

Be it further resolved, Chestfeeding/Breastfeeding training be added to Faculty and Staff's Diversity Training covering topics such as proper terms to use, types of accommodations lactation spaces may need, and the legal rights students and workers



have to lactate. Faculty are also encouraged to provide a statement about lactation spaces and accommodations in their syllabi.

Be it further resolved, each department should have at least one Faculty or Staff member that can refer a community member to the consistent space available in their respective building or create a makeshift space (i.e. an empty office that can serve other purposes). This Faculty/Staff should feel comfortable working directly with students who may need accommodations throughout their time at USD. Said Faculty/Staff shall be referred to as Chestfeeding Champion and their contact information will be listed on the website. Chestfeeding Champions are active members of the USD community who support the goal to make USD a chestfeeding friendly campus. (Vancour & Griswold, 2015)

Be it further resolved, the University should be able to provide lactating students with an on-call International Board Certified Lactation Consultant (IBCLC) through the Student Health Center. Lactating students needing medical assistance with any issues relating to lactating should be able to seek treatment through the Student Health Center similarly to other students.

Be it further resolved, the Counseling Center should have therapists who are equipped to support students who are experiencing postpartum depression.

Be it further resolved, the creation of a university childcare that begins at six weeks of age to better promote chestfeeding relationships within the community. If children are able to be closer to their lactating caregiver, especially during their first critical months, they will be able to better establish and sustain their chestfeeding relationships. (Office of the Surgeon General US)



Be it further resolved, childcare is not to be seen as a luxury, but rather as a necessity. The adoption of vouchers to ensure that the childcare provided on-campus is accessible to all members of the USD community irregardless of their socioeconomic status. USD should take a note from other local Hispanic Serving Institutions which allow for affordable options and lower age requirements at their childcare facilities, such as [San Diego State University](#), [Grossmont Community College](#), and [CSU San Marcos](#). USD should strive to be more accessible in order to follow the Catholic Social Justice teaching of The Life and Dignity of the Human Person.

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5/6/2021

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5/6/2021

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Date



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