

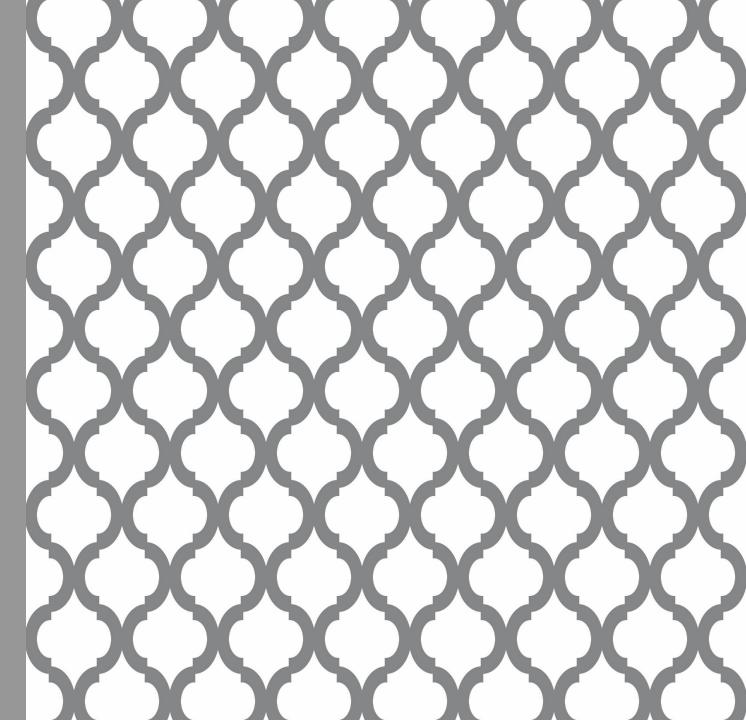
How Birth & Breastfeeding Professionals Can be Impactful in Helping to Heal Sexual Abuse

Presented by Laura Maria Gruber, IBCLC Laura@BreastfeedingHousecalls.com (210) 646-1570 call or text



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Breastfeeding Housecalls' **PASSION STATEMENT:** To be God's heart and hands in the lives of new families.



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- I am not being paid to give this chat.
- I am not a sexual abuse expert.
- I am an expert at breastfeeding, who has experience working with Survivors of sexual abuse during their birth and breastfeeding seasons.

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- Share stories shared by me or attendees at today's chat

The birth and breastfeeding season is not only about the birth of a baby...it is also about the **rebirth** of a mother's **heart** and **body**.

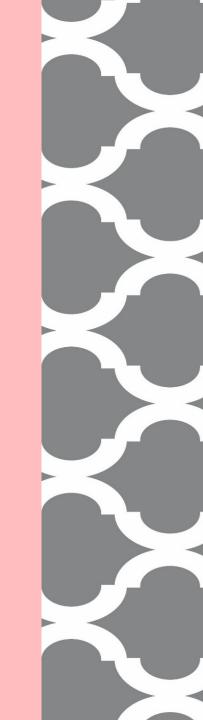
Objectives

- To understand how sexual abuse plays a role in how a mother births, breastfeeds & parents
- To understand how your approach as a professional can compound the trauma of sexual abuse, or help heal it
- To learn counseling and reframing strategies that empower Survivors



How can sexual abuse impact birth?

- Impacts a mother's body image
 - Distorts her perception of her **body's cleanliness**, **function**, **purpose** and **abilities**
- Can give feelings of complete loss of ownership over their bodies
 - To the extent a woman may be "programmed" to seek approval of what her body can do
- May be sensitive to necessary touch by healthcare providers during the pregnancy and birth season



How can sexual abuse impact breastfeeding?

This is a complex question, which leads to more questions than concrete answers

- Will she want another person appropriating her body?
 - What if her baby is male?
- What about the demands of night feedings? Of someone waking her up for the purpose of using her breasts?
- If breastfeeding doesn't go as planned, will it compound her feelings of inadequacy about her body's ability to "perform"



An Survivor's Perception

- Breastfeeding is an interaction in which a mother's anatomy enters her child's
 - Sexual abuse often involves a body part penetrating a child
 - If a vagina is only sexual for a mother, what does a baby passing through her vagina mean to her?
- In the case or early abuse, it's likely that a Survivor's breasts may have been used for sex before they were used for nutrition
 - A mother may feel like she is perpetuating abuse by using her breasts with her baby in the way she was first shown them to be used

- Because breastfeeding sometimes causes sensual sensations, a Survivor may feel guilt, as if she is perpetuating abuse
 - Can we normalize this by telling mom that sensations like these are well documented in many nursing mothers, and are physiological
 - Could a Survivor be more stoic about nipple pain, because she doesn't want it to feel good?
- Breastmilk is body fluid, and letdowns come with baby's suction
 - Explaining the science of breastmilk ingredients and how breast milk is made available to moms could help normalize
 - When working with a mother prenatally, encouraging that she attend a lactation class could proactively prepare her with this knowledge

What if things get even more complicated?

- A Survivor who had unexpected birth outcomes, such as:
 - Emergency procedures during birth
 - Previous pregnancy loss
 - Present loss or still-birth
- A Survivor whose baby was conceived from sexual abuse/rape?
 - Providers need to explore first their own opinions and misperceptions surrounding this

actical Techniques for Discovery

ke asking about history of sexual abuse a part of ir intake paperwork about concessions she would like you to make en, listen, listen come a trusting source via your consistency and ow-through tch for no control, or too much control

Counseling Considerations

- Take the "hands-off" approach as much as possible
- If you must touch ALWAYS, ALWAYS, ALWAYS ask for permission to touch her BEFORE touching (not on your way to touching)
- Avoid all unnecessary touch for other things not related to normal "Hello" or "Good bye" (side hugs, hand shaking, etc.)
- Avoid using patronizing terms of endearment like "Honey", "Sweety" or "Baby"





- Would mom feel better pumping?
 - Remind mom that latching can indeed be had later, contrary to Google, and popular belief
 - Plenty of moms exclusively pump and DO feel fulfilled by providing expressed breastmilk
- Approriate touch means touching shoulders and knees only, and only if a mom seems open to affection
- Avoid trigger words or phrases like "Is he sucking?", "Grab your breast.", or "Shove it in."
- Ask permission to enter her personal spaces (or baby's spaces) such as her bedroom, or when using her personal space, such as sitting on her bed
- NEVER EVER broach trauma topics around other family members or friends—even her partner

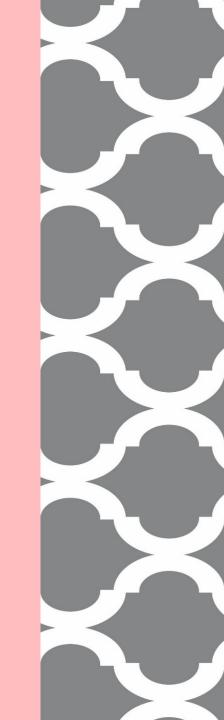
Offering Alternatives

If a mom says that she doesn't want to birth vaginally or breastfeed...

- How much of that is really our business?
 - Could imposing our values make things worse?
 - Could you approach education about vaginal birth and breastfeeding as giving her balanced information
 - "You know, other Survivors I've worked with have preferred to have balanced information about birth and breastfeeding. I can give that to you so that when you can make sure you're making the best decision for yourself and your baby."

Things to Explore

- Could exploring therapy be an option?
- Could a nipple shield be enough to reduce sensation of her baby's mouth and add a comfortable level of separation she can work with?
- Help mom arrive at peace with bottle-feeding, if nursing is a source of guilt for her



Reframing Experiences

Verbally...

- "You're body is doing/did exactly what it was created for."
 - "Incredible what our bodies are capable of..."
 - "
- "You're protecting your baby for a lifetime with the antibodies you're body is making specifically for your baby."
- "What's happening here is so special. No one else can protect/birth your baby this way."

Pro-Active Preparation

- Encourage Survivors to **take birth and breastfeeding classes** well before birth, since classes can plant seeds of thoughts, and help prepare hearts for what is to come
- Encourage Survivors to attend breastfeeding support groups (prenatally) so that she is comfortable with a community well before she needs them
- Encourage Survivors to explore their concerns, anxieties or traumas prenatally
- Encourage Survivors to establish care with a mental health professional experienced prior to delivery

Resources

Local Sexual Abuse Resources

- Alamo Area Rape Crisis Center
 <u>www.rapecrisis.com</u>
- San Antonio Sex Crimes

<u>www.sanantonio.gov/SAPD/Sex-</u> Offenders

Online Trafficking Resources

- National Sexual Abuse Hotline: 1-800-656-4673
- Truckers Against Trafficking
 <u>www.truckersagainsttrafficking.org</u>
- Trafficking Resource Center National Hotline; 1 (888) 373-7888

Breastfeeding & Sexual Abuse

- EXCEPTIONAL ARTICLE for Survivors and Providers: <u>www.pandys.org/articles/breastfeeding.html</u>
- La Leche League Article about Sexual Abuse & Breastfeeding: <u>http://www.lalecheleague.org/llleaderweb/lv/lvaprmay97p27.html</u>
- Best for Babes Article:

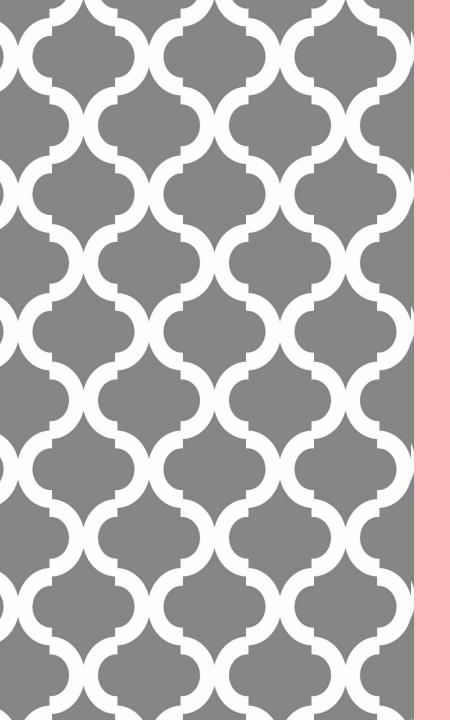
http://www.bestforbabes.org/booby-traps-series-a-history

<u>-of-sexual-abuse-can-be-an-invisible-challenge-for-some-moms/</u>



Remind a Survivor that ...

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