

The human rights imperative to understand 'mother' as an exclusively female status

Breastfeeding is a human rights issue. This is recognised by the United Nations Office of the High Commissioner for Human Rights, which has stated that breastfeeding is specifically a human rights issue for both the child and the mother:

Children have the right to life, survival and development and to the highest attainable standard of health, of which breastfeeding must be considered an integral component, as well as safe and nutritious foods. Women have the right to accurate, unbiased information needed to make an informed choice about breastfeeding. They also have the right to good quality health services, including comprehensive sexual, reproductive and maternal health services. And they have the right to adequate maternity protection in the workplace and to a friendly environment and appropriate conditions in public spaces for breastfeeding which are crucial to ensure successful breastfeeding practices.¹

The motherhood referred to in international human rights documents is a state unique to females. That motherhood is a female status is true regardless of any cultural, political or economic context in which a mother exists, and is a necessary foundation on which to base a globally relevant understanding of what provisions and protections are necessary for mothers and their children to survive and thrive.

The current trend in breastfeeding and maternal health policy and advocacy to replace sex-based terminology with a gendered understanding of words is commonly presented as a step which is necessary to advance and protect the human rights of those who identify as gender diverse and prefer a gender understanding of words. However, 'woman' and 'mother' are primarily sex-based descriptors and an approach which prioritises concepts of gender, or which subsumes mothers into the category of parents, has a range of unintended consequences which obscure and obstruct women's and children's human rights in breastfeeding. The disproportionate impact of this language--and the use of breastfeeding advocacy to perform political work for other causes--puts at risk decades of effort to promote, protect, and support breastfeeding, and the lives which depend on that effort.

Much of the tension we are facing arises from a conflict between 1. the need to acknowledge the way in which existing as a female person is of fundamental relevance to the status and vulnerability of mothers, and 2. the claim that such acknowledgement may render some mothers even more vulnerable. However, affirming motherhood as an exclusively female status, and retaining the sex-based status and meaning of motherhood, enables the protection and provision for the reproductive rights of all mothers--even if those mothers do not like to consider themselves to be mothers. It is reasonable to properly interrogate the impact of such significant changes to our language and politics, including weighing up the way in which these changes may be inappropriate or even harmful for large populations of mothers and children. One group is not expendable for the sake of

¹ Joint statement by the UN Special Rapporteurs on the Right to Food, Right to Health, the Working Group on Discrimination against Women in law and in practice, and the Committee on the Rights of the Child in support of increased efforts to promote, support and protect breast-feeding. <https://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=20871>

the other, and it is imperative for the sake of all that we address this dilemma.

It is unfortunately common when this topic is broached, to find ourselves facing claims that those who critique or object to the imposition of gendered language onto breastfeeding are motivated by transphobia, are weaponizing their privilege, or have some other sinister intent. These claims have a chilling effect which stifles the respectful and necessary exchange of ideas, and introduces the risk that information (including research and policy) may be distorted or misrepresented for ideological reasons. It is imperative that we do not allow crucial work for mothers and babies to be derailed by the creation of an intellectual climate in which people are fearful that expressing or even holding views deemed to be 'unsafe' will jeopardise their careers and reputations.

Describing the situations unique and specific to mothers as female parents is essential to removing barriers to breastfeeding. If we cannot accurately describe what a mother is, we cannot properly identify and dismantle the ways in which women's and children's rights are lacking or withheld, or demand various social, economic and political responsibilities to mothers be fulfilled. And yet the question is before us, of how we can enable the greatest possible number of mothers to breastfeed their children while neither erasing them from our advocacy nor overlooking those mothers who prefer a gendered rather than sex-based approach. How we can resolve this remains to be seen, but it is my hope that we can do so without the kind of internecine conflict which ultimately benefits no mothers at all.

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