



BIRTH PLAN FOR FUTURE TRANS AND NON-BINARY PARENTS

A birth plan is a document that you create. It is used to inform stakeholders who work in perinatal care (midwives, doctors, nurses, doulas, etc.) of your needs and preferences regarding the care you want. It will also contain details of how you would like your baby to be cared for after birth.

Since we know that much that touches and surrounds assisted birth is based on cis-heteronormative norms emphasizing the idea that giving birth automatically equates to motherhood, the LGBT+ Family Coalition wanted to make sure there would be a form designed for you so that you can access respectful care when you give birth.

This birth plan, which was created thanks to a project subsidized by the *Bureau de lutte contre l'homophobie et la transphobie*, will allow you to foster a caring environment in the peri or postpartum context. You can use it as a guideline for procedures before, during and after birth. You can adapt it according to

your needs and modify it along the way if you wish. You can fill it in as it is, make copies or rephrase it as needed. We encourage you to share it with other future trans and non-binary parents.

There are multiple birth plans available on the internet (see resources at the end of this document). We were ourselves inspired by several of these guides when writing this document. Whichever model you choose, remember that a good birth plan is clear, brief and flexible. When your birth plan is written, bring it to a follow-up visit to discuss it with your perinatal professional. Remember to bring a copy of your birth plan the day you give birth.



COALITION DES
FAMILLES LGBT+
LGBT+ Family Coalition

En partenariat avec :



FAMILLESLGBT.ORG

My information

Legal name

Chosen name

I am a person who is
(ex. trans, non-binary, gender non-conforming, etc.)

My pronouns are
(ex. he, she, they, etc.)

In relation to my parental role,
I would like to be referred to as
(ex. father, parent, mother or other chosen name, etc.)

NB: it is important to respect my chosen name and pronouns so that I feel safe, and to avoid dysphoria.



I will be accompanied by:

Person 1

Name _____

Pronouns _____

Link to me _____
(ex. partner, friend, chosen family, spouse, cousin, etc.)

Link to the child _____
(ex. father, social parent, legal parent, mother, involved adult, etc.)

Personne 2

Name _____

Pronouns _____

Link to me _____

Link to child _____

Personne 3

Name _____

Pronouns _____

Link to me _____

Link to child _____

Personne 4

Name _____

Pronouns _____

Link to me _____

Link to child _____

My family is
(ex. single-parent, solo-parental, two-parent, homoparental, transparental, multi-parental, poly-parental, co-parental, other)



Important words for me

I would like these words to be used to designate the parts of my body (ex. chest instead of breasts, uterine cavity instead of uterus, genital organ instead of vulva, etc.); or I don't I have any preference for the words used for the parts of my body:

If I'm misgendered (use of wrong pronouns or first name) while I am giving birth, I want (ex: that person X defends me in such and such a way; it is not important for me who will defend me or in which way; I would prefer that this be ignored while I deliver or a caesarean is being performed, etc.):

My expectations of the people accompanying me (ex: that they ensure that my requests are respected by the rest of the nursing staff; that they use the right words while I'm pushing; that the vocabulary used by the doctors /the staff does not generate misgendering or dysphoria; etc.):

During Labour

1 For the ambience, I would like:

- To listen to music
- That the lights be dimmed
- That aromatherapy be used
- That I can move around freely
- Other: _____

2 To feel comfortable, I prefer to dress in: (ex. clothes chosen by the people accompanying me; the hospital gown; being naked, etc.):

3 My requests vis-à-vis the birthing staff:

- No residents/students for internal exams
- To only be seen by people who are at ease with trans and non-binary realities
- To be discreet when speaking about me outside my room
- That my chosen name be respected during exchanges
- That we limit the comings and goings of staff in my room
- Other: _____

4 I would appreciate if internal exams were done:

- Only when I request them
- After a discussion to explain to me why this is deemed necessary

5 If labour slows down, I would prefer that certain methods are given priority to encourage it:

- Walking and movement
- Nipple stimulation
- Baths
- Artificial rupture of membranes
- Intravenous infusion of oxytocin
- Other: _____



Pain Relief

1 To relieve pain, I would like to use these means:

- Walking, movement and changing positions
- Self-hypnosis
- Baths
- Therapy ball
- Massages
- Acupressure
- Breathing and relaxation techniques
- Hot or cold compresses
- Sterile water injection
- Epidural
- Nitrous oxide
- Pudendal block (local anesthesia)
- Other: _____

2 When it comes to medical pain relief like nitrous oxide and epidurals, I would like to:

- Have access as soon as possible
- Have them be offered to me when needed
- Have you wait for me to ask

3 If possible, I would like to avoid:

- An epidural
- A pudendal block
- Setting up an intravenous line
- Other: _____

4 I would like the persons accompanying me to be involved:

- In helping me with pain relief
- In helping me to push
- For a particular role (fill this in, in the comments section at the end of the document)



Other elements

1 For pushing, I would like to favour certain positions:

- Squatting or kneeling
- On all fours
- Lying on my back
- Semi-seated
- On my side

2 To help me push, I would like:

- To use a mirror to see the progress of my baby's head
- To be advised on how to push
- That we favour instinctive and non-directed pushing
- Other: _____

3 If a caesarian section is necessary, I would prefer:

- To receive a local anesthetic (equivalent to an epidural) rather than a general anesthetic
- That the urinary catheter is installed after the administration of anesthesia
- That the person who accompanies me be by my side during surgery



Birth

1 At the birth of my baby, I would like:

- To do skin-to-skin contact right after birth;
- To help bring the baby out once their shoulders are clear
- That the person who accompanies me helps to bring the baby out once their shoulders are clear
- To cut the umbilical cord myself
- That the person who accompanies me cuts the umbilical cord
- That the placenta be given to me after birth (to discuss with your health-care provider)

2 Instructions regarding the gender of the baby (ex. do not assume gender based on their genitals; tell me if they have a vulva or a penis; I prefer to find out for myself, etc.):

3 To feed my baby, I would like:

- To feed the baby directly with my own milk only
- Use a mix of my milk (ex. chest-feeding + bottle feeding with my milk)
- Mixed feeding (human milk + commercially prepared formula)
- To use commercially prepared formula
- A nursing aid (tube)

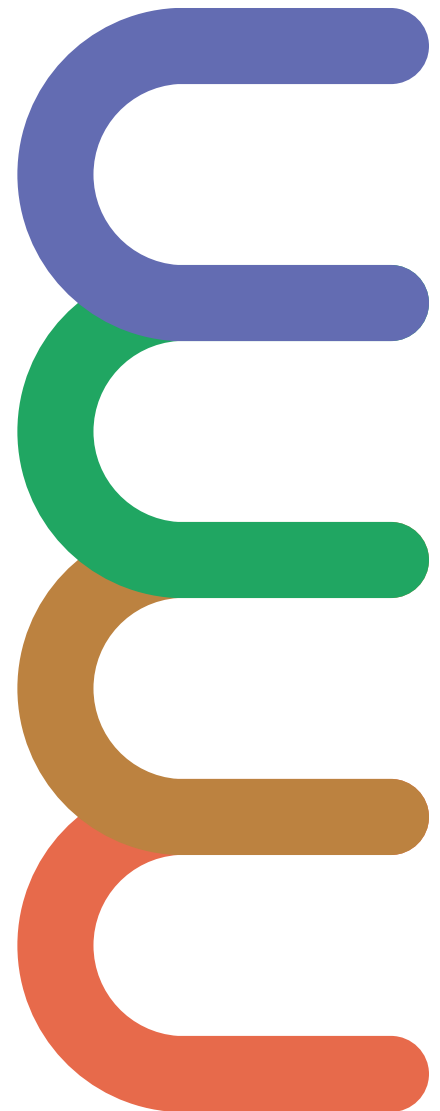
4 For help with feeding, I would like (ex. that my chest is not touched; that appropriate words are used for my body; that I am not forced to nurse the baby; that I am offered alternative solutions; that my co-parent(s) helps with feeding the baby; etc.):



Postpartum Room

1 Instructions for my postpartum room:

- I would like a private room if possible
- I don't mind a shared room if the other person is at ease with my gender identity





Consent

N.B. Everything in this plan may fluctuate. I can therefore change my mind about certain procedures during childbirth or caesarean section. My consent must be continuous in order to respect my needs.

Questions/comments:

Signature of the delivering parent

Signature of the coparent(s)/partner(s)/accompanying person(s)

Signature of practitioner and delivery support person

Lexicon

Family Types

Single-parent

Family with only one parent who is involved in the life of the child. Single parenthood can be the result of a separation, the death of a parent or an unplanned pregnancy, for example.

Solo-parental

Situation in which a person chooses to have a child alone, despite the fact that they are without a partner, often by resorting to a medically assisted procreation technique or adoption

Two-parent

Family with two parents.

Homoparental

Family in which at least one parent identifies as gay or lesbian.

Transparental

Family in which at least one parent identifies as a trans person.

Pluri-parental

Family with more than two parents

Poly-parental

Family in which at least one parent has the capacity to have several partners at the same time in an ethical and consensual way.

Co-parental

Family with two or more parents who are not necessarily in a romantic or conjugal relationship.

Other words

Cis-heteronormative

Institutions that welcome parents and future parents are cis-heteronormative, that is to say that they renew, often unconsciously, very strong expectations/assumptions relating to the gender identity and sexual orientation of their clients/patients. A person is thus expected to identify in terms of a gender in accordance with the sex assigned to them at birth, and to express their gender according to gender stereotypes. It is taken for granted that everyone comes from a family with a father and a mother, and is heterosexual and cisgender.

Misgender

The act of referring to a person by a gender that does not correspond to their gender identity.

Dysphoria

Gender dysphoria is a medical term used to describe the distress of a transgender person when faced with a mismatch between their sex-assigned-at-birth and their gender identity. For a dysphoric person, this perceived incompatibility between anatomical sex and identity can cause considerable discomfort, especially when it is misunderstood by those around them.



Other birth plan resources (French only)

Sainte-Justine Hospital

Practices:

chusj.org/fr/Soins-services/A/Accouchement

Birth plans (multiple choices):

chusj.org/CORPO/files/f1/f1ebe94c-82eb-4016-8f1c-5b7a46ad9def.pdf

Birth plans (open questions):

chusj.org/CORPO/files/2c/2ca31975-7763-4f7f-9481-bdd1f07da6b8.pdf

CIUSSS de l'Estrie

santeestrie.qc.ca/clients/SanteEstrie/soins-services/Themes/Grossesse-accouchement/Plan_de_naissance.pdf

CISSS de Lanaudière

ciss-lanaudiere.gouv.qc.ca/fileadmin/internet/ciss_lanaudiere/Documentation/Autres_publications/Fiches_d_information_prenatales/PlanNaissance_web.pdf

CISSS de Chaudière-Appalaches

genevieve-rancourt.com/doc/accouchement/plan_de_naissance.pdf

Naître et grandir

naitreetgrandir.com/documentsng/pdf/plan_naissance.pdf

Mère et Monde (Doula)

mereetmonde.com/wp-content/uploads/2016/09/plan-de-naissance.pdf

Mieux-Vivre - INSPQ

inspq.qc.ca/mieux-vivre/grossesse/preparation-l-accouchement/plan-naissance