Children's Hospital of Philadelphia PolicyLab

No Time to Pump the Brakes… The Need for Workplace Lactation Policy is Now

Health Equity

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As we welcome World Breastfeeding Week 2022, we support the World Alliance for Breastfeeding Awareness's campaign to focus on the significant role of "workplaces being informed, educated and empowered to strengthen their capacity to provide and sustain breastfeeding-friendly environments for families." And we take this opportunity to call attention to the need for comprehensive workplace lactation policies as families continue to face barriers in breastfeeding* and lactation-based support across America.

In the last few months, the ongoing infant formula shortage and inability of our federal government to pass legislation, the PUMP for Nursing Mothers Act, has resulted in increases to families not meeting their personal breastfeeding goals.

If you haven't heard, here's what you need to know:

U.S. Infant Formula Shortage

- If you've walked by any infant formula grocery aisle in the last months, you'll notice a shocking lack of infant formulas. In a recent story by the Wall Street Journal, it is estimated that approximately 30% of infant formula products remain out of stock (as of July 3) in U.S. markets. What caused this shortage? Analysts have attributed three major components: bacteria outbreaks in infant formula products and production facilities; the Covid-19 pandemic and supply chain disruptions; and regulatory and trade policies (restricting

the importation of infant formula products).

PUMP for Nursing Mothers Act

- The U.S Senate failed to pass the PUMP for Nursing Mothers Act last month. This bill, introduced by Sen. Jeff Merkley of Oregon, would have closed existing loopholes in the 2010 Break Time for Nursing Mothers Law (expansion of the Fair Labor Standards Act) to increase workplace lactation protections for an estimated 9 million women.

Why are workplace lactation policies urgently needed?

We know that return to work presents a major barrier for people in meeting their personal breastfeeding goals (much less the two years of breastfeeding recommended by the American Academy of Pediatrics (AAP)). In the last Centers for Disease Control and Prevention (CDC) breastfeeding report card, only 46.9% and 25.6% of women were exclusively breastfeeding at 3 and 6 months, respectively.

Without comprehensive federal protections for breastfeeding in the workplace, we can look to state-level legislation. Sadly, only 30 states, the District of Columbia and Puerto Rico have laws related to breastfeeding in the workplace. So next we looked to existing city-level legislation protecting breastfeeding rights of women in the workplace. Our research revealed only 1.3% (n=2/151) of major cities in the U.S. have specific legislation outlining workplace protections. In data collection for this research, we were quite taken aback when speaking to city representatives and their lack of generalized knowledge. We heard comments such as: “What do you mean a law that applies to breastfeeding women at work?” and “To do what? Breastfeed while at work?”

Without a national paid parental-leave program and with 63% of women with children under 3 years old in the workforce, how are they able to maintain breastfeeding when returning to work? These gaps, at the federal, state, and local levels, open a door of opportunity for employers to establish and sustain comprehensive workplace lactation policies, including paid leave, to increase breastfeeding protections.

So, what makes for a good workplace lactation policy?

In addition to paid parental leave, a comprehensive workplace lactation policy should include:

- All people – no loopholes!
- Specified amount and frequency of break times
- Outlined responsibilities of the lactating person AND the person they report to (workload/coverage)
- A duration that matches the AAP’s recommendations for breastfeeding: two years or more

Does this kind of policy really make a difference?

Following employees’ feedback and a hospital-wide needs assessment, Children’s Hospital of Philadelphia (CHOP) implemented a comprehensive employee lactation policy in 2010. In our own research, we saw, among CHOP employees, breastfeeding rates far surpassed national data. But our qualitative data showed us that even when working in a setting with a strong lactation policy, employees are faced with numerous challenges including non-supportive environment/work culture and a lack of accessibility to resources. This attention to employer-provided lactation resources in the workplace was echoed in another of our research studies, in which we found that the number one priority for lactating women in the workplace was access to a hospital-grade electric breast pump. We need to be paying close attention to this kind of data and further advocating for the strengthening of workplace lactation policies to reflect employees’ needs.

Although we can’t celebrate the passing of the PUMP for Nursing Mothers Act, we can use this time as a call to action! A tangible next step is to focus our advocacy for hyper-local, supportive, and comprehensive workplace employee lactation policies to promote and protect breastfeeding. Employers should play a pivotable role,

actively encourage informed decision-making (regarding infant feeding choices) and be a true partner in helping their employees meet their personal breastfeeding goals.

**While we use "breastfeeding" throughout this piece to align with the awareness week and for consistency, we recognize some parents prefer the terminology of "chestfeeding."*

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