

Public Policies to Support Breastfeeding

Paid Family Leave and Workplace Lactation Accommodations

Breastfeeding is associated with significant health benefits for both mothers and babies.¹ Every major medical organization recommends that babies be breastfed exclusively through the first six months of life, followed by continued breastfeeding and complementary foods over the rest of the first year and beyond.² Despite this recommendation, **78 percent of women** do not breastfeed exclusively for the first six months.³ These suboptimal rates are largely due to a lack of support for breastfeeding in the American culture.

Fortunately, workplace support for breastfeeding is increasingly gaining attention. The Affordable Care Act (ACA) is already changing employer practices in this regard; four states have established paid family leave programs; and a growing number of employers are voluntarily offering paid leave and improved lactation accommodations for their employees. However, balancing work and breastfeeding continues to be a major challenge for new mothers, particularly lower-income women, as working mothers tend to stop breastfeeding shortly after returning to work.

The majority of American women lack paid family leave and adequate workplace lactation accommodations. To help improve breastfeeding rates, it's time for a national paid family leave policy and stronger workplace lactation accommodation laws.

Short Maternity Leaves Are a Major Obstacle to Breastfeeding

- **Plans for employment after birth affect breastfeeding decisions.** In a survey of new mothers, about half said that their plans for employment had an impact on their baby-feeding decisions.⁴
- **Early return to work often means ending breastfeeding sooner.** Researchers have found that mothers who return to work before six weeks postpartum are more than three times as likely to stop breastfeeding than women who return later.⁵
- **The effects of short maternity leaves on breastfeeding are compounded by other job quality factors.** When they take short leaves, women who work in inflexible or non-managerial jobs and those in manual or administrative positions are even more likely to stop breastfeeding.⁶ Low-wage workers are least likely to have paid maternity leave and often have jobs characterized by unpredictability and inflexibility.⁷
- **Access to paid parental leave is stratified along racial lines—and so are breastfeeding outcomes.** According to one study, while about 50 percent of White women have paid parental leave, only 41 percent of Black women have paid parental leave.⁸ According to 2013 and 2014 Centers for Disease Control survey data, only 66.4 percent of Black infants had ever been breastfed, compared to 83 percent of White infants. At six months, this discrepancy continues: just 35.3 percent of Black infants continued to be breastfed, compared to 55.8 percent of White infants.⁹

- **The association between returning to work and stopping breastfeeding suggests that delaying return to work will boost breastfeeding.** In the month that a mother restarts work, she is more than twice as likely to quit breastfeeding as a mother who is not restarting work in that month.¹⁰

Paid Leave Boosts Breastfeeding

- **Paid leave leads to longer breastfeeding duration.** In a national study, mothers who had 12 or more weeks of paid maternity leave had nearly 3 times the odds of initiating breastfeeding and 2 times the odds of breastfeeding for 6 or more months when compared to mothers who had no paid leave.¹¹
- **Evidence from Canada.** A Canadian study on the effects of increasing paid maternity leave from six months to one year found that breastfeeding duration increased by one month among mothers eligible for the longer leave.¹² Compared to those with the shorter leave, 39 percent more women who took the year-long leave reached six months of exclusive breastfeeding (the widely agreed-upon recommendation).¹³
- **Evidence from New Jersey and California.** Four states have established paid family leave programs: California, New Jersey, Rhode Island, and New York. Research from the states with the longest running programs—New Jersey and California—demonstrates a clear effect on breastfeeding. In New Jersey, mothers who took paid leave under the state Family Leave Insurance program breastfed for one month longer on average.¹⁴ In California, the median duration of breastfeeding doubled among new mothers who took paid family leave, including an increase from 5 to 11 weeks for mothers in higher-paying jobs, and 5 to 9 weeks for those in lower-paying jobs.¹⁵
- **Longer leaves could help women achieve their breastfeeding goals.** Approximately 60 percent of women stop breastfeeding earlier than they would like. One of the key reasons for this is the effort associated with pumping milk. Women with longer maternity leaves can delay pumping, potentially increasing their breastfeeding duration.¹⁶ In one survey, 58 percent of women cited breastfeeding as a challenge in working at a paid job since their baby's birth.¹⁷

Without Pay, Workers Struggle to Take the Leave They Need

- **Most women do not have paid parental leave.** According to the American Time Use Study, only 47 percent of women have paid parental leave.¹⁸
- **Nearly a quarter of women who took parental leave in 2012 took 10 or fewer days of leave.** Nearly half took 40 or fewer days.¹⁹
- **Unpaid leave places significant financial strain on families.** Although about half of U.S. workers are covered by the Family and Medical Leave Act (FMLA), this legislation only provides for job-protected *unpaid* leave—an option that is out of reach or very difficult for many families. In 2012, more than 6.3 million workers found it difficult to make ends meet while on

leave. These workers were either on unpaid leave or were losing income while on leave, despite drawing on some existing benefits.²⁰

- **Workers cut leaves short because they can't afford to go without pay.** Close to half of employees would have taken longer leaves if they had received additional or any pay.²¹ Fifty percent of workers reported that they returned to work following a leave because they could not afford to take more time off.²²

Moms Need Breastfeeding Support Once They Return to Work

- **The ACA requires employers to provide lactation accommodations—but only to some workers.** Employers are not required to provide time and space for breastfeeding or expressing milk to "exempt" or salaried employees, including executives, administrators, school teachers, and others.²³ Nearly 40 percent of women workers are salaried.²⁴
- **Many breastfeeding workers still lack needed accommodations.** A study conducted after the ACA rule went into effect found that only 40 percent of respondents had access to both adequate break time and a private space in which to express milk. Lower-income women and women with less education were less likely to have access to private space and break time.²⁵
- **Workplace breastfeeding support significantly increases breastfeeding.** A 2016 study found that women with adequate break time were 2.6 times as likely to breastfeed exclusively and 3 times as likely to breastfeed at all at 6 months postpartum when compared with women without access to break time or private space. Women with private space at work breastfed for 1.36 months longer than women with no break time or private space.²⁶
- **Lactation accommodations pay significant dividends for businesses.** Businesses that support breastfeeding save on health care expenses, reduce absenteeism among working parents, and are able to retain high-quality employees, avoiding the high cost of turnover. For example, CIGNA Insurance Company reports \$240,000 in annual savings in health care expenses and \$60,000 in annual savings due to lower absenteeism among women who breastfed their infants. Mutual of Omaha reports \$115,881 in annual savings for mothers who participate in the company's lactation program.²⁷

The Surgeon General has Called for Paid Maternity Leave and Lactation Accommodations

Experts are calling for action. In a 2011 Call to Action to Support Breastfeeding, the United States Surgeon General included the following action items: "Work toward establishing paid maternity leave for all employed mothers" and "Ensure that employers establish and maintain comprehensive, high-quality lactation support programs for their employees."²⁸

Public Policies on Paid Leave and Lactation Accommodation Support Breastfeeding

- **Existing Laws**

- **The Family and Medical Leave Act:** The federal FMLA enables some workers to take up to 12 weeks of unpaid, job-protected leave to care for a new baby or a sick family member, or to recover from serious illness.²⁹ Nineteen states and the District of Columbia have established their unpaid, job-protected leave policies to cover more workers or to cover workers for longer periods of time than the federal law.³⁰
- **Temporary Disability Insurance:** California, New Jersey, Rhode Island, New York, Hawaii, and Puerto Rico have public disability insurance programs that women can use to take partially paid leave after the birth of a child.³¹
- **Paid Family Leave:** California, New Jersey, Rhode Island, and New York have established paid family leave programs.³² Several states and cities have established paid leave policies for their public employees.
- **Break Time for Nursing Mothers:** This provision of the U.S. Fair Labor Standards Act (FLSA), established under the Affordable Care Act in 2010, requires employers to provide nursing mothers who are hourly wage earners ("nonexempt" employees) reasonable break time and a private, non-bathroom location to express milk for one year after the child's birth.³³

- **Proposed legislation**

- **State paid family leave legislation:** Numerous states are considering paid family and medical leave proposals. Proposed California legislation (SB 1166, The New Parent Leave Act) would provide up to three months of job-protected maternity and paternity leave for many more California employees than are currently covered.
- **Federal paid family leave legislation:** The Family and Medical Insurance Leave (FAMILY) Act would create a national paid family and medical leave insurance program, enabling workers to take up to 12 weeks of paid leave to bond with a new baby, care for a sick family member, or recover from serious illness.³⁴
- **Federal lactation accommodations legislation:** The Supporting Working Moms Act (SWMA) would extend the existing Break Time for Nursing Mothers provision in the FLSA to cover executive, administrative, and professional employees, including elementary and secondary school teachers.³⁵

Notes

- ¹ Labbok M, Taylor E, *Achieving Exclusive Breastfeeding in the United States: Findings and Recommendations*, United States Breastfeeding Committee, 2008, <http://www.usbreastfeeding.org/p/cm/ld/fid=197>.
- ² See for example, "Breastfeeding and the Use of Human Milk (Policy Statement)," *Pediatrics* 115 (2005). "Family Physicians Supporting Breastfeeding (Position Paper)," *American Academy of Family Physicians*, <http://www.aafp.org/about/policies/all/breastfeeding-support.html>.
- ³ "Position on Breastfeeding," *Breastfeeding Medicine* 4 (2008), <http://online.liebertpub.com/doi/pdfplus/10.1089/bfm.2008.9988> *Global Strategy for Infant and Young Child Feeding*, World Health Organization and United Nations Children's Fund, World Health Organization. 2006, http://www.who.int/nutrition/publications/gi_infant_feeding_text_eng.pdf; *The Surgeon General's Call to Action to Support Breastfeeding*, U.S. Department of Health and Human Services, Office of the Surgeon General, 2011, <http://www.surgeongeneral.gov/topics/breastfeeding/calltoactiontosupportbreastfeeding.pdf>.
- ³ *Breastfeeding among U.S. Children Born 2002–2012*, CDC National Immunization Surveys, Center for Disease Control and Prevention, July 2015, http://www.cdc.gov/breastfeeding/data/nis_data/index.htm.
- ⁴ Eugene R. Declercq, Carol Sakala, Maureen P. Corry, Sandra Applebaum, and Ariel Herrlich, *Listening to Mothers III: New Mothers Speak Out*, Childbirth Connection, June 2013, http://transform.childbirthconnection.org/wp-content/uploads/2013/06/LTM-III_NMSO.pdf.
- ⁵ Sylvia Guendelman, Jessica Lang Kosa, Michelle Pearl, Steve Graham, Julia Goodman, and Martin Kharrazi, "Juggling work and Breastfeeding: effects of maternity leave and occupational characteristics," *Pediatrics* 123 (2009).
- ⁶ Ibid.; Rachel Tolbert Kimbro, "On-the-job moms: work and breastfeeding initiation and duration for a sample of low-income women," *Maternal and Child Health Journal* 10 (2006.)
- ⁷ See for example, Liz Ben-Ishai, *Access to Paid Leave: An Overlooked Aspect of Economic & Social Inequality*, Center for Law and Social Policy, 2014, http://www.clasp.org/resources-and-publications/publication-1/2014-04-09-Inequities-and-Paid-Leave-Brief_FINAL.pdf; Liz Watson and Jennifer E. Swanberg, *Flexible Workplace Solutions for Low-Wage Hourly Workers: A Framework for a National Conversation*, Georgetown Law and University of Kentucky, 2011, <http://workplaceflexibility2010.org/images/uploads/whatsnew/Flexible%20Workplace%20Solutions%20for%20Low-Wage%20Hourly%20Workers.pdf>.
- ⁸ Sarah Jane Glynn and Jane Farrell, *Latinos Least Likely to Have Paid Leave or Workplace Flexibility*, Center for American Progress, 2012, <http://www.americanprogress.org/issues/labor/report/2012/11/20/45394/latinos-least-likely-to-have-paid-leave-or-workplace-flexibility/>. [Table 1]
- ⁹ "Rates of Any and Exclusive Breastfeeding by Socio-demographics among Children Born in 2012 (Percentage +/- half 95% Confidence Interval)," *Center for Disease Control and Prevention*, http://www.cdc.gov/breastfeeding/data/nis_data/rates-any-exclusive-bf-socio-dem-2012.htm.
- ¹⁰ Rachel Tolbert Kimbro, "On-the-job moms: work and breastfeeding initiation and duration for a sample of low-income women," *Maternal Child Health* 10 (2006.)
- ¹¹ Kelsey R. Mirkovic, Cria G. Perrine, and Kelley S. Scanlon. "Paid Maternity Leave and Breastfeeding Outcomes." *Birth* (2016). Advance online publication. doi: 10.1111/birt.1223
- ¹² Michael Baker and Kevin Milligan, "Maternal employment, breastfeeding, and health: Evidence from maternity leave mandates," *Journal of Health Economics* 27 (2008).
- ¹³ Ibid.
- ¹⁴ Suma Setty, Curtis Skinner, and Renée Wilson-Simmons, *Protecting Workers, Nurturing Families: Building an Inclusive Family Leave Insurance Program: Findings and Recommendations from the New Jersey Parenting Project*, National Center for Children in Poverty, Columbia University, March 2016, http://www.nccp.org/publications/pdf/text_1152.pdf.
- ¹⁵ Eileen Appelbaum and Ruth Milkman, *Leaves that pay: Employer and worker experiences with paid family leave in California*, Center for Economic and Policy Research, 2011, <http://www.cepr.net/documents/publications/paid-family-leave-1-2011.pdf>.
- ¹⁶ Research shows that the majority of women are not meeting their own breastfeeding objectives. Erika C. Odom, Ruowei Li, Kelley S. Scanlon, Cria G. Perrine, and Laurence Grummer-Strawn, "Reasons for earlier than desired cessation of breastfeeding," *Pediatrics* 131 (2013).
- ¹⁷ Declercq et al, *Listening to Mothers III: New Mothers Speak Out*.
- ¹⁸ Glynn et al, *Latinos Least Likely to Have Paid Leave or Workplace Flexibility*.
- ¹⁹ *Family Medical Leave in 2012: Technical Report*, U.S. Department of Labor, 2014, <http://www.dol.gov/asp/evaluation/fmla/FMLATEchnicalReport.pdf> [Exhibit 7.2.7.]
- ²⁰ Ibid. Exhibit 5.3.14. These figures are for all leave takers, not just those covered by FMLA. We calculate 7.5 million workers based on the size of total workforce in 2011 as reported by the Bureau of Labor Statistics. 60 percent of workers that took unpaid leave or who lost some income while on leave had difficult making ends meet. 51 percent of workers who took leave, took unpaid leave or lost some income while taking leave.
- "Labor Force Statistics from the Current Population Survey," *Bureau of Labor Statistics*, 2014, <http://www.bls.gov/cps/aa2013/cpsaat01.htm>.

²¹ Ibid.

²² Ibid. Exhibit 5.5.3 These figures are for all leave takers, not just those covered by FMLA. Figures calculated based on BLS data on size of labor force.

²³ “Breastfeeding at Work: Let’s Make it Work!” *United States Breastfeeding Committee*, <http://www.usbreastfeeding.org/p/cm/ld/fid=338>.

²⁴ Aditi Sen and Connie Razza, *Hour by Hour: Women in Today’s Workweek*, Center for Popular Democracy, May 2015, http://populardemocracy.org/sites/default/files/HourbyHour_final.pdf.

²⁵ Katy B. Kozhimannil, Judy Jou, et al. “Access to Workplace Accommodations to Support Breastfeeding after Passage of the Affordable Care Act,” *Women’s Health Issues*, (2015).

²⁶ Ibid.

²⁷ “The Business Case for Breastfeeding Support,” U.S. Department of Health and Human Services, January 2015, <http://www.womenshealth.gov/breastfeeding/employer-solutions/business-case.html>.

²⁸ Office of the Surgeon General. Centers for Disease Control and Prevention. *The Surgeon General’s Call to Action to Support Breastfeeding*, Office of the Surgeon General, Centers for Disease Control and Prevention, Office on Women’s Health, 2011, <http://www.ncbi.nlm.nih.gov/books/NBK52691/>.

²⁹ “Family and Medical Leave Act,” United States Department of Labor, Wage and Hour Division, <https://www.dol.gov/whd/fmla/>.

³⁰ States with expanded unpaid family and/or medical leave laws are: California, Colorado, Connecticut, Hawaii, Iowa, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Montana, New Hampshire, New Jersey, Oregon, Rhode Island, Tennessee, Vermont, Wisconsin, Washington, and the District of Columbia. See: *Expecting Better: A State-by-State Analysis of Laws that Help New Parents*, National Partnership for Women & Families, 2014, <http://www.nationalpartnership.org/research-library/work-family/expecting-better-2014.pdf>.

³¹ *Existing Temporary Disability Insurance Programs*, National Partnership for Women and Families, 2015. <http://www.nationalpartnership.org/research-library/work-family/paid-leave/existing-tdi-programs.pdf>.

³² *Overview of Paid Family Leave Laws*, A Better Balance, 2016, http://www.abetterbalance.org/web/images/stories/Documents/familyleave/fact_sheets/familyleavechart.pdf.

³³ “Section 7(r) of the Fair Labor Standards Act – Break Time for Nursing Mothers Provision,” *U.S. Department of Labor*, https://www.dol.gov/whd/nursingmothers/Sec7rFLSA_btmn.htm.

³⁴ Liz Ben-Ishai, “*The Family and Medical Insurance Leave Act: A FAQ for Businesses*,” Center for Law and Social Policy, 2014, <http://www.clasp.org/resources-and-publications/publication-1/2014-FAMILY-Act-Business-FAQ-FINAL.pdf>.

³⁵ “Breastfeeding at Work: Let’s Make it Work!”