

## **Paid Family Leave: A Crucial Support for Breastfeeding**

Breastfeeding is best for both mothers' and babies' health.<sup>1</sup> 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.<sup>2</sup> Despite this recommendation, **nearly 85 percent of women** do not breastfeed exclusively for the first six months.<sup>3</sup> These suboptimal rates are largely due to a lack of support for breastfeeding in American culture. Although workplace supports for breastfeeding are increasingly gaining attention, and the new federal healthcare law is already changing employer practices in this regard, balancing work and breastfeeding continues to be a major challenge for new mothers. One crucial support that most American women lack is paid maternity leave.

*To help achieve optimal breastfeeding rates, it's time for a national paid family leave policy.*

## **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.<sup>4</sup>
- **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 more likely to stop breastfeeding than women who return later.<sup>5</sup>
- **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.<sup>6</sup> Low-wage workers are least likely to have paid maternity leave and often have jobs characterized by inflexibility.<sup>7</sup>
- **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.<sup>8</sup> According to 2008 Centers for Disease Control survey data, only 59 percent of black infants had ever been breastfed, compared to 75 percent of white infants. At six months, this discrepancy continues: just 30 percent of black infants continued to be breastfed, compared to 47 percent of white infants.<sup>9</sup>
- **The association between return 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.<sup>10</sup>

## **Every Week Counts**

- **Additional weeks of leave lead to longer breastfeeding duration.** One study found that each additional week of maternity leave increased duration of breastfeeding by nearly half a week.<sup>11</sup>

- **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.<sup>12</sup> 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).<sup>13</sup>
- **Evidence from California.** California is one of three states (along with New Jersey and Rhode Island) with a paid family leave program. In California, the median duration of breastfeeding doubled among new mothers who took paid family leave, including an increase from five to eleven weeks for mothers in higher-paying jobs and five to nine weeks for those in lower-paying jobs.<sup>14</sup>
- **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.<sup>15</sup> In one survey, 58 percent of women cited breastfeeding as a challenge in working at a paid job since their baby's birth.<sup>16</sup>

## Without Pay, Workers Struggle to Take the Leaves 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.<sup>17</sup>
- **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.<sup>18</sup>
- **Unpaid leave places significant financial strain on families.** Although about half of U.S. workers are covered by the Family 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.<sup>19</sup>
- **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.<sup>20</sup> Fifty percent of workers reported that they returned to work following a leave because they could not afford to take more time off.<sup>21</sup>

## The Surgeon General has Called for Paid Maternity Leave

- Experts are calling for action. In her 2011 Call to Action to Support Breastfeeding, the United States Surgeon General included the following action item: “Work toward establishing paid maternity leave for all employed mothers.”

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## Notes

<sup>1</sup> United States Breastfeeding Committee. "Benefits of Breastfeeding." 2002.

<http://www.usbreastfeeding.org/LinkClick.aspx?link=Publications%2fBenefits-2002-USBC.pdf&tabid=70&mid=388>

<sup>2</sup> See for example, American Academy of Pediatrics Section on Breastfeeding. "Breastfeeding and the Use of Human Milk (Policy Statement)." *Pediatrics* 115, no. 2 (2005): 496-506; American Academy of Family Physicians. "Family Physicians Supporting Breastfeeding (Position Paper)." <http://www.aafp.org/about/policies/all/breastfeeding-support.html>; Academy of Breastfeeding Medicine. "Position on Breastfeeding." *Breastfeeding Medicine*, no. 4 (2008),

<http://online.liebertpub.com/doi/pdfplus/10.1089/bfm.2008.9988>; World Health Organization and United Nations Children's Fund.

"Global Strategy for Infant and Young Child Feeding." World Health Organization. 2003.

[http://www.who.int/nutrition/publications/gi\\_infant\\_feeding\\_text\\_eng.pdf](http://www.who.int/nutrition/publications/gi_infant_feeding_text_eng.pdf); U.S. Department of Health and Human Services. "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>

<sup>3</sup> Department of Health and Human Services, Centers for Disease Control and Prevention. "Breastfeeding Report Card--United States, 2013." 2013. <http://www.cdc.gov/breastfeeding/pdf/2013BreastfeedingReportCard.pdf>

<sup>4</sup> 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](http://transform.childbirthconnection.org/wp-content/uploads/2013/06/LTM-III_NMSO.pdf)

<sup>5</sup> 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, no. 1 (2009): e38-e46.

<sup>6</sup> 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, no. 1 (2006): 19-26.

<sup>7</sup> See for example, 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>;

<sup>8</sup> 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.

<sup>9</sup> Centers for Disease Control and Prevention. "Progress in Increasing Breastfeeding and Reducing Racial/Ethnic Differences – United States, 2000-2008 Births." *Morbidity and Mortality Weekly Report*. (2013)62 (05); 77-80.

[http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6205a1.htm?s\\_cid=mm6205a1\\_w](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6205a1.htm?s_cid=mm6205a1_w)

<sup>10</sup> Rachel Tolbert Kimbro. "On-the-job moms: work and breastfeeding initiation and duration for a sample of low-income women."

<sup>11</sup> Brian Roe, Leslie A. Whittington, Sara Beck Fein, and Mario F. Teisl. "Is there competition between breast-feeding and maternal employment?" *Demography* 36, no. 2 (1999): 157-171.

<sup>12</sup> Michael Baker and Kevin Milligan. "Maternal employment, breastfeeding, and health: Evidence from maternity leave mandates." *Journal of Health Economics* 27, no. 4 (2008): 871-887.

<sup>13</sup> Ibid.

<sup>14</sup> Eileen Appelbaum and Ruth Milkman. "Leaves that pay: Employer and worker experiences with paid family leave in California." Washington: Center for Economic and Policy Research. 2011. <http://www.cepr.net/documents/publications/paid-family-leave-1-2011.pdf>.

<sup>15</sup> 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, no. 3 (2013): e726-e732.

<sup>16</sup> Eugene R. Declercq, Carol Sakala, Maureen P. Corry, Sandra Applebaum, and Ariel Herrlich. *Listening to Mothers III: New Mothers Speak Out*.

<sup>17</sup> Sarah Jane Glynn and Jane Farrell. *Latinos Least Likely to Have Paid Leave or Workplace Flexibility*. Center for American Progress. <http://www.americanprogress.org/issues/labor/report/2012/11/20/45394/latinos-least-likely-to-have-paid-leave-or-workplace-flexibility/>. Table 1.

<sup>18</sup> Abt Associates Inc. *Family Medical Leave in 2012: Technical Report*. 2013.

<http://www.dol.gov/asp/evaluation/fmla/FMLATEchnicalReport.pdf>, Exhibit 7.2.7.

<sup>19</sup> 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. *Employment Status of the civilian noninstitutional population by age, sex, and race (Table 3)*. 2013.

<http://bls.gov/cps/cpsaat03.htm>

<sup>20</sup> Ibid.

<sup>21</sup> 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.