

Breastfeeding and Lactation in the Workplace

Recognizing the fact that breastfeeding is the optimal form of infant nutrition, AWHONN supports legislation and initiatives that promote and protect lactation in the workplace. AWHONN believes that employers should provide lactating women with break time that permits adequate frequency and duration of milk expression. It is critical that women have a safe, clean, private location for breastfeeding or milk expression within the workplace.

AWHONN supports legislation and policies that would facilitate increased breastfeeding rates. Specifically, AWHONN supports:

- Provision of tax credits or other incentives for employers to facilitate lactation in the workplace;
- Enhanced family medical leave policies that provide opportunities for women to have extended maternity leave in order to fully establish breastfeeding;
- Legislation that supports breastfeeding in appropriate public locations. AWHONN supports generally permissive policy regarding breastfeeding in public locations, but recognizes that not *all* public locations may be considered suitable for breastfeeding
- Legislation and facility policies that accommodate breastfeeding and in a safe, clean and private location within the workplace.
- Expansion of the U.S. Department of Agriculture (USDA)'s Women Infants Children (WIC) breastfeeding promotion program;
- Reimbursement by health plans and other payers for breastfeeding services and supplies including the rental or purchase of hospitals grade pumps and certified lactation consultant services; and
- Exclusion of breastfeeding from state and federal indecency legislation.

AWHONN supports the expansion of education programs to teach women strategies for successful maintenance of breastfeeding on return to work.

Background

Currently, working women in the United States are significant contributors to the workforce. The workforce employment rates for women ages 16 years and older indicate that 60 percent are in the labor force.ⁱ These women are either currently working or seeking employment. Women are also significant contributors to labor force growth; women are projected to comprise 49 percent of the total growth in the labor force in the United States between 2006 and 2016.ⁱⁱ The largest increase in the labor force for women is the entry of married women into the workforce.ⁱⁱⁱ Today most mothers including those with the young children participate in the labor force.^{iv} The growing numbers of mothers, including those with very young children, in the workforce argues for the implementation of breastfeeding friendly workplace policies in order to keep these important workers in their jobs.

AWHONN actively works to support the promotion of breastfeeding through collaboration with other national and international maternal child health organizations that promote breastfeeding.

AWHONN supports the promotion of breastfeeding and recognizes the importance of working in concert with national and international maternal child health and breastfeeding promotion organizations. Specifically,

AWHONN supports the Healthy People 2010 initiative to increase the proportion of mothers who breastfeed their babies including efforts to raise the rate of breastfeeding initiation in the early postpartum period to 75%, to increase to 50% the percent of women who continue breastfeeding until their infants are six months of age, and to 25% the number of infants who are breastfed until one year of age.^v

Recognizing that not all women can or will make a choice to breastfeed, AWHONN advocates a higher federal goal related to national breastfeeding rates. AWHONN supports an exclusive breastfeeding initiation rate of 90%, a 75% six month breastfeeding rate and a 50% one year breastfeeding goal by 2025. For AWHONN's position statement on *Breastfeeding*, please visit the [website](#).

Breast milk is the optimal nutrition for infants, providing a complete nutritional balance as well as much needed immunity from infections. Studies indicate that breastfed infants have lower incidence of gastrointestinal, respiratory, urinary and ear infections. Breast milk is thought to provide some protection against a variety of childhood and adult-onset diseases, including insulin-dependent diabetes mellitus, asthma, lymphoma, leukemia and Hodgkin's disease; ulcerative colitis, Crohn's disease and celiac disease as well as hypertension and elevated serum cholesterol levels.^{vi}

Breastfeeding has been shown to have a number of economic benefits to employers, including decreased parental absences from work due to infant illness. Studies have shown fewer days lost from work among those who breastfeed compared to those who formula feed their infants.

Breastfeeding and Lactation in the Workplace position statement approved by the AWHONN Board of Directors, June 1999.

Breastfeeding and Lactation in the Workplace revised and reaffirmed by the AWHONN Board of Directors, June 2008.

ⁱ <http://www.dol.gov/wb/stats/main.htm>

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ⁱⁱⁱ <http://www.pay-equity.org/PDFs/ProfWomen.pdf>

^{iv} <http://www.pay-equity.org/PDFs/ProfWomen.pdf>

^v Department of Health and Human Services. *Healthy People 2010*. Obtained on 9/10/2007 at:

<http://www.healthypeople.gov/document/html/objectives/16-19.htm>

^{vi} Association of Women's Health, Obstetric and Neonatal Nurses. (2007). *Breastfeeding Support: Prenatal Care Through the First Year, Second Edition*: <http://www.awhonn.org/awhonn/store/productDetail.do?productCode=EBF-2>