

OVERCOMING WORKPLACE LACTATION PROGRAM INHIBITORS

Introduction

Research shows that workplace lactation programs reduce short term and long term health costs, reduce absenteeism, improve productivity, boost employee job satisfaction and morale, increase loyalty and retention (lower turnover), and enhance company image. Yet only 26% of employers nationwide offer lactation programs, and only 9% of small businesses offer such programs. Why hasn't this taken off, and what can we do about it?

Six common concerns, and ideas for overcoming each

Based upon our work with employers and working mothers, we've identified six common inhibitors to workplace lactation programs, and we offer the following ideas for overcoming them:

1. Low (stated) demand for lactation programs

Concern: Not enough women are requesting lactation support, therefore employers are investing in other benefits instead.

Solution: The key to addressing this is awareness and education for mothers and employers. The more mothers understand how important breastfeeding is to their babies' health and their own, how feasible it is to continue breastfeeding after returning to paid work, and the fact that Colorado law requires reasonable workplace lactation support, the more mothers will request and expect this support. The more employers recognize the many business benefits of lactation programs, and the fact that Colorado law requires reasonable workplace lactation support, the more employers will get onboard. Outreach, education and support at the state and federal levels will increase awareness and adoption, and momentum will build as success breeds success.

2. Hassle factor

Concern: Employers perceive the logistics of setting aside private space and coordinating staff to cover for the breastfeeding/pumping employee will be difficult.

Solution: A private lactation space needn't be elaborate. The law specifies that a public restroom or toilet stall is not acceptable – beyond that, the law is open to interpretation, in recognition of the broad spectrum of work settings it applies to. Our motto is "be creative!" Working, nursing mothers have pumped in: a designated lactation room, spare/borrowed office, conference room, closet, supplies room, server/IT room, dressing room, inventory room, women's locker room, cubicle area with privacy screen, curtain or "cloak," or a break room (temporarily!). Necessity is the mother of invention – and resourcefulness!

In terms of staffing, the first thing to keep in mind that it is much simpler to coordinate and cover scheduled 15 minute employee pumping breaks than it is to cover unexpected employee absences (of a day or more) to care for a sick child. Breastfed babies are healthier, which is why research shows that mothers who feed their infants formula have more than twice the number of one-day absences to care for sick children than mothers who breastfeed. We recommend that breastfeeding employees work with their supervisors to build pumping time into their daily schedules, adjusting their arrival/departure times or meal/break times as needed. We have found that employees are typically happy to help

arrange back-up coverage and support if needed during their 15-20 minute pumping breaks. Having a written lactation policy helps co-workers understand why the company is accommodating lactation, and how they can assist.

3. Perceived cost

Concern: Employers perceive that lactation programs are cost prohibitive.

Solution: As a matter of fact, workplace lactation programs require minimal investment – as little as \$0 to \$300. Many companies are able to identify and set aside an existing space to serve as their designated lactation area, and furnish it with an existing or donated table, chair, and power strip. Some companies purchase inexpensive privacy screens or curtains. For more sophisticated set-ups, funding assistance (grants) may be available from the Colorado Department of Public Health and Environment, [Colorado Physical Activity and Nutrition Program](#). According to the Business Case for Breastfeeding, from the U.S. Department of Health and Human Services, for every \$1 invested in a workplace lactation program, there is a \$2 return on investment.

4. Awkward / “Ew” factor

Concern: Employers want to avoid thoughts and discussions of breastfeeding in the workplace.

Solution: Granted, we don’t often discuss breasts or bodily fluids at work. However, given the importance of breastfeeding to the health of babies and mothers, and the business benefits of lactation programs, it’s time we make an exception! We have found that when employers and working mothers communicate directly, openly and professionally about this subject, everyone gets past the awkwardness pretty quickly. Generally speaking, we are mature adults, after all. Sometimes it helps to change our language – for example, referring to “lactating employees” rather than “breastfeeding mothers,” or “human milk” (or simply “milk”) instead of “breastmilk.” Focus on the business rationale for lactation support, and back it up with a matter-of-fact written lactation policy. And know that you can count on lactating employees to be very discrete and professional as they go about their business.

5. Potential fairness complaints

Concern: Employers are concerned that co-workers will object to breastfeeding employees having “extra breaks” and “special rooms.”

Solution: Establishing and communicating a written lactation policy from the get-go is key. As mentioned above, communicate directly, openly and professionally, focusing on the business rationale for lactation support (especially the fact that a breastfeeding mother is less likely to be absent from work to care for a sick baby). Emphasize that employees will only participate in the program for a finite period of time. Point to the [Workplace Accommodations for Nursing Mothers law](#). It might also help to position an employee’s lactation break as a medically substantiated break, just as another employee might need time for physical therapy or insulin injections. In addition, it is worth noting that many mothers are able to and choose to complete work while pumping. “Hands-free” pumping devices help make this possible. Depending upon the nature of their work, mothers can listen to conference calls, do e-mail or paperwork, read, study, research, or (gasp) think!

Working while pumping should not be expected or required of employees, as relaxation is important for milk production. Finally, some progressive employers have opted for a “quiet” space instead of a designated lactation space. The quiet space can be reserved and used by any employee for a short block of time for meditation, prayer, and rejuvenation.

6. Liability concern

Concern: Employers are concerned about the employees storing human milk on the premises. They perceive the milk to be a biohazard.

Solution: First of all, many nursing employees store their expressed milk in their own personal coolers, rather than in a shared refrigerator. In fact, breastpumps often come with built-in coolers. We have found that mothers prefer the discreteness and security of keeping their milk close at hand.

That said, if an employee does store her milk in the community refrigerator, rest assured that a germ is not going to magically jump from the sealed breastmilk container to another’s employee’s ham sandwich. Mothers, concerned about cleanliness and hygiene for their babies’ sake (if nothing else), are extremely careful in the handling of breastmilk. Being also concerned about providing enough milk for their babies, mothers are completely determined not to spill a single drop.

Lastly, note that the CDC website states: “No special precautions exist for handling expressed human milk, nor does the milk require special labeling. It is not considered a biohazard. The Universal Precautions to prevent the transmission of ... blood borne pathogens do not apply to human milk.”

Conclusion

We hope this document will help employers throughout Colorado overcome inhibitors to workplace lactation programs. For more information and/or support, please visit www.coloradobreastfeeding.org or contact Cate Colburn-Smith at Moms on Board: catecs@comcast.net or 303-440-7770.