Assessing Lactation Support at Select Public Employer Worksites

Highlights from the Mother-Friendly Worksite Policy Initiative Technical Assistance Pilot Program 2011 Employee Survey

About the Survey

In 2010, The Texas Department of State Health Services (DSHS) was awarded a two and one-half year competitive grant from the Centers for Disease Control to implement the Texas Mother-Friendly Worksite Policy Initiative (MFWPI) to facilitate statewide implementation of best-practice worksite policies that support breastfeeding. A key component of this initiative was to provide select employers with training, technical assistance, and material support to develop sustainable, effective worksite lactation policies and programs. Lessons learned through the MFWPI Technical Assistance Pilot Program were used to develop tools and messaging to expand the reach of the Texas Mother-Friendly Worksite Program to employers across the state.

Participating employers, including state agencies, local public health departments, public hospital districts, and WIC Local Agencies, conducted assessment activities to inform their program and policy planning efforts. An employee survey was conducted to assess attitudes, needs and assets for development of work environments that are supportive of continued breastfeeding for employees who return to work after giving birth and who choose to breastfeed. The survey included close-ended questions for employees, parenting employees, and management staff. Respondents were also able to provide additional information through open-ended responses. The survey was voluntarily self-administered by web-based survey in May, 2011.

This report includes survey highlights from 17 public employers that participated in the MFWPI Technical Assistance Pilot Program, including from five state agencies, one state university, five public hospital districts, five local public health departments, and one WIC Local Agency administered by a local public health department. Select open-ended comments are included to illustrate employees’ reported experiences, attitudes and needs related to worksite lactation support.

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Survey Highlights

- The survey was completed by 11,777 public employees, approximately 12% of the employee population from the represented worksites (including five state agencies, one state university, five public hospital districts, five local public health departments, and one WIC Local Agency administered by a local public health department.)

- As in the target population, the majority (80.7%) of respondents were female. About one-tenth of the responding population (10.2% of female respondents and 11.4% of male respondents) reported having a baby two years old or younger.

- The vast majority (93.5%) of female survey respondents who have had a baby in the last two years initiated breastfeeding, but most (65.3%) reported that they did not breastfeed for as long as they wanted.

- The most commonly (40.0%) reported reason for stopping breastfeeding was “I could not continue to breastfeed because of my work.”

- While some breastfeeding supports exist in many locations, breastfeeding employees reported varying access to supports such as break time and private space, other than a bathroom, for the purpose of milk expression during the work day.

- Most managers reported having supportive attitudes toward the practice of worksite lactation. Most reported wanting additional support for the business processes involved with providing appropriate lactation space and breaks.

- The vast majority of responding employees recognized the importance for their breastfeeding co-workers of providing private, non-bathroom lactation space (88.3%), flexible scheduling to allow for milk expression breaks (85.0%), a written and communicated breastfeeding support policy (84.2%), and supportive attitudes from managers (93.0%) and co-workers (91.4%).
Childbearing Employees

• Of the female survey respondents, 10.2% report that they have had a baby within the last two years and 24.4% report that they plan to have a baby within the next 2 years. For those who are actively planning to have a baby within the next year, 95.7% report they are somewhat or very likely to breastfeed if they have a child in the future.

• Of the male survey respondents, 11.4% report having a child ≤ 2 years old in their household. Of these children, 89.7% were breastfed, even if only once.

Female Employees With a Child Two Years or Younger: Experiences and Needs Related to Worksite Lactation Support

• Mothers most frequently returned to work before twelve weeks after giving birth. The average age of the mothers’ babies at return to work was 10.9 weeks old.

• The vast majority of respondents who had given birth in the previous 2 years chose to breastfeed their infants.

• While some employees reported that their workplace had provisions for milk expression breaks, many reported limited access.

<table>
<thead>
<tr>
<th>Support available?</th>
<th>YES</th>
<th>NO</th>
<th>DON’T KNOW</th>
</tr>
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<tbody>
<tr>
<td>I am allowed to take a 15-minute paid break during my workday for each four hours I work. [note: lactation breaks may take longer than 15 minutes. Time used over employer-provided paid breaks is typically unpaid.]</td>
<td>71%</td>
<td>13%</td>
<td>8%</td>
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<tr>
<td>I am able to take my breaks at times that are convenient to me.</td>
<td>64%</td>
<td>21%</td>
<td>6%</td>
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<tr>
<td>There is a private space (other than a bathroom) with a chair, a sink and an electrical outlet where employees can go to breastfeed or pump.</td>
<td>37%</td>
<td>55%</td>
<td>8%</td>
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<tr>
<td>There is a refrigerator to store breast milk.</td>
<td>66%</td>
<td>34%</td>
<td>n/a</td>
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Breastfeeding Status, Female Respondents who Gave Birth in the Last 2 years

Q: Did you breastfeed for as long as you wanted to?

In their own words—Select excerpts from open responses to question, “What was the main reason you stopped breastfeeding?”:

“The only place available for me to pump at work was in the shower room and it didn't seem like a clean place to pump milk. It also was very hard for me to take breaks because of my work load.”

“My baby was needing more milk daily and I didn't have time to pump at work. I would fall behind at work and I would get stressed about it and it caused my milk supply to be less.”

“Although I was allowed to pump any time at the office, I could not pump as often as I wanted due to the work load I had, and my milk dried up after a month of limited pumping.”

“I wasn’t producing enough from pumping and my baby was still hungry. I wasn’t with her enough for her to directly breastfeed to help stimulate enough milk production so i had to stop and give her formula.”

“I had to return to work when baby was 4 weeks old and did not feel like there was a comfortable and private enough space to work. I also felt that it was frowned upon if I needed to take extra time to pump.”

“I could not be away from the work area long enough, work became too demanding…”

“I didn't have time to pump at work. I would fall behind at work and I would get stressed about it and it caused my milk supply to be less.”

“Was not comfortable asking for time to pump at work.”

“My milk supply began to dry up because I could not keep up with pumping consistently while I was at work.”
Q: What is the main reason you stopped breastfeeding?

R: I didn’t think I had enough milk.

R: My baby had trouble sucking or latching on.

R: My baby lost interest in nursing or began to wean him or herself.

R: I could not continue to breastfeed because of my work.

All other reasons combined.

In their own words—select excerpts from open responses to question, “What was the main reason you stopped breastfeeding?”:

“I don't think supervisors and employees are informed about the accommodations necessary to help a breastfeeding mother to continue to pump or nurse at work..(ex. designated area specifically for pumping). When I was pumping I had to create my own area on a daily basis, which was very inconvenient and I suspect contributed to my reduced milk supply over time.”

“Education to employers [is needed] about pumping frequency and not enforcing on employee to pump only at certain hours of day or putting that employee on a schedule to pump.”

“Though the entire agency may allow for certain accommodations (flexible scheduling, etc.), some individual division directors choose to not allow those options.”

“While management was supportive…, co-workers would often make inappropriate comments about my being unavailable several times during the day while pumping, and trying to make me feel guilty or as if I were not performing my job adequately. My work productivity never suffered, and management was completely supportive, but the pressure from co-workers was uncomfortable…”

“...I did not receive any support from upper administration in my office. I was told to express milk in the bathroom or my car and not offered any solutions.”

“I had to return to work to busy for breast feeding was a front desk clerk at the time. Was not able to pump or take leave for a 15 min break due to lobby being busy.”

“When I came back to work after maternity leave there was never anytime to pump in private without interruptions or phone calls. I then started decreasing in milk supply because I wasn’t able to pump enough in a 13hr shift. :(

“I didn't have a private space to pump and it became difficult to pump at work. Also, I felt that some staff members frowned upon my breaks that I took for pumping.”

“Combined issues [caused me to stop breastfeeding]: privacy was an issue at work but my baby also became less interested as my supply went down because I wasn't able to feed her as much milk and she received more formula.”

“The way some people have attitudes and look at you funny or say things behind your back just isn't necessary.”

“Milk ran out due to stress.”
**Managers Needs Related to Worksite Lactation Support**

Q: Managers: I have one or more of employee [male or female] who has had a new baby in the last 24 months.

**Respondents’ Reported Management Status**

- Senior Management/Administrator: 80%
- Middle Management/Supervisor: 17%
- Staff Member/Not a Manager: 3%

**MANAGERS REPORTED QUESTIONS OR CONCERNS ABOUT MEETING FLSA “REASONABLE BREAK Time FOR NURSING MOTHERS” REQUIREMENTS RELATED TO:**

<table>
<thead>
<tr>
<th>Question</th>
<th>Percentage</th>
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<tr>
<td>Finding adequate, accessible private space free from intrusion</td>
<td>58%</td>
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<tr>
<td>Employees would complain/think accommodation of additional break time is unfair</td>
<td>42%</td>
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<tr>
<td>Employees may abuse or misuse the break time accommodations</td>
<td>37%</td>
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<tr>
<td>Assuring adequate coverage during employee break time</td>
<td>33%</td>
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<tr>
<td>Maintaining productivity</td>
<td>29%</td>
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<tr>
<td>Managing work flow</td>
<td>27%</td>
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<tr>
<td>How to talk with employees about their needs related to breastfeeding or milk expression</td>
<td>24%</td>
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MANAGERS REPORTED THE FOLLOWING ITEMS WOULD BE USEFUL TO THEM:

<table>
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<tr>
<th>Item</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>A maternity leave packet to provide to employees to inform them of their rights and options.</td>
<td>90%</td>
</tr>
<tr>
<td>A standard communication tool or protocol to help employees communicate their need to set up a milk expression break schedule.</td>
<td>79%</td>
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<tr>
<td>Plans for finding space for employees to express breast milk during the workday</td>
<td>77%</td>
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<tr>
<td>Talking points or scripts to deal with other employee concerns</td>
<td>72%</td>
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<tr>
<td>Recommendations for how to manage workflow while providing breaks</td>
<td>53%</td>
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In their own words-select excerpts from managers’ open responses about questions or concerns about meeting requirements of the “Reasonable Break Time for Nursing Mothers” provision of the Fair Labor Standards Act:

- “I honestly don't know anyone against it.”
- “I do not know how supportive the workplace is. I do not support this at all.”
- “This is a highly variable topic depending on the Dept. Manager- without top-down parameters there will be wide variability in which employees get to use this benefit and the fairness of how it is offered.”
- “I think employers should provide a level of reasonable accommodation to mothers who are working. It's the right thing and way past due.”
- “The research on breastfeeding is beyond question; any perceived lack of support for breastfeeding mothers would be a black mark on the city and its reputation.”
- “This workplace is a [public] hospital which provides care 24 hours a day, 7 days a week. The majority of the employees do not have positions where they can just stopped their job and leave the area...I totally support breast feeding but it is more difficult for this population than a group that all work in offices.”
- “As a manager I would like specific guidelines and a way for a breastfeeding mother to communicate her needs and a way to document how we are meeting them.”
- “I support having some flexibility and capability to accommodate breastfeeding employees. ...Good policy needs to be written so it can be enforceable both with the breast feeder and other employees.”
- “There is a lack of consistency across the organization. Policy must be written so that managers know what is is and is not allowed, required, prohibited. Positive talk from leadership about the need for this benefit.”
- “I would stress clearly communicated and enforced policies regarding breastfeeding so that mothers can reap the benefits of being able to express milk at work with the employer losing minimal productivity.”
- “Without a current policy in place, it's been difficult to enforce any restrictions. I am supportive of pumping and breastfeeding, but we need to ensure that productivity doesn't suffer.”
- “Laws are wonderful but without management support and facility accommodation for breastfeeding we will not be compliant and this will be just another ignored law.”
- “I do not think this should be done during work hours.”
- “No one should feel they can't take care of basic physical requirements when necessary. And expressing milk is a basic physical requirement for a breastfeeding mother...”
All Employees

Q: In your opinion, how supportive of breastfeeding is your place of employment?

**In their own words: Q: Is there anything you would like for us to know about needs, opportunities, concerns, or barriers in the workplace for supporting breastfeeding?:**

**Employees reporting their worksite is “very supportive” of breastfeeding:**

“I currently have flexible hours, which is one of the main reason's I've stayed at work here...“

“I feel like in just the short time i've been here and watching one mother return from work that the environment is completely supportive and i wish i had been fortunate enough to work here while i was having children.”

“I was able to return to work sooner and have not had as much of a problem with loss of milk supply as I had with my other children. Thank you for making this possible.”

“Senior management totally supports breastfeeding. The only barrier to date - other than one building in our complex - is the private space for nursing mothers to use.”

“The transitioning back in to the workplace for new mothers both in terms of scheduling and workflow needs formalization at [our agency].”

“I feel that my office is very supportive of breastfeeding mothers- we currently have a room designated for breastfeeding moms.”

“Creating a culture that is just as supportive of taking a break to pump as it is to take a break for meals is very important.”

“The lab I supervise would be very supportive if this situation arose for one or more of my employees. However, I sense that responses to this issue will vary widely from supervisor to supervisor.”

“A great deal of women do not come back to work after giving birth for various reasons. Eliminating interference with a mother's need to breastfeed her child may break the barrier between the workplace and motherhood. …The most important point is the breastfeeding mother is an employee with organizational knowledge. The loss of this knowledge has a cost to the agency. This small accommodation will save the department costs and help keep up productivity...”
Employees reporting their worksite is “supportive” of breastfeeding:

“The only place that I had to go pump was a small bathroom which I felt was unsanitary and I would frequently dispose of expressed milk from fear on contamination.”

“Currently - our department is not set up to provide a private location for mother's to pump.”

“There is no place in our building for mothers to breastfeed/pump while at work aside from the bathroom which isn't appropriate.”

“I certainly support a new mother's options - a co-worker 'leaked' pretty substantially in her blouse a few years ago and no doubt she would have preferred a different outcome.”

“We definitely need a written policy that supports breastfeeding. A co-worker I sit next to was breastfeeding last year and she was embarrassed to tell our male supervisor.”

“[My supervisor] did her very best in accommodating me, although much was out of her control. I did not have an office, w/ a door that could be closed, so she allowed me to use the supply room. This did pose an inconvenience to those who may have needed supplies or to fax at that time. I did feel awkward and like an imposition.”

“Our area has had 5 pregnancies over the past 3 years. Only one person had an office where they could close the door for privacy. Other people have had to use the public restroom, go down to their cars or have been completely discouraged for lack of privacy. I'm currently expecting and I would really appreciate a small area to pump during my breaks and at lunch time.”

“I think that the supportive atmosphere will start at the local management level. If the support locally is not there, this program will suffer and that is not fair to the breastfeeding mothers.”

“I think this is a personal preference for a mother that should be supported to the extent is doesn't interfere with job performance.”

“Our agency is well-served to work with people's personal needs, be it breastfeeding or caring for a sick family member... Good employees will do it responsibly, but we unfortunately need guidelines for the employee that would abuse it.”

“Each mother is different and I feel that as long as the mother puts in her 40 hours a week, she should be [worked with to] set her schedule for that week. She should have an open communication with her supervisor. I wish that had this when I had my children.”

“Our office doesn't have anyone of birthing age. However I feel breastfeeding is vital to a baby's developmental needs and would support it as long as it is done with privacy, modesty, and in a timely manner. I think that...mothers would appreciate it so much that work productivity would actually increase.”
Employees reporting their worksite is “somewhat supportive” of breastfeeding:

“Overall there IS an effort put forth by our hospital…to allow opportunities for staff to breastfeed following childbirth (in theory). But unless you work a 8-5 shift and have access to a private office - the likelihood of being able to following through with pumping and breastfeeding in the workplace…will be hit by negative feedback from management.”

“...if we are supposed to be supporting breastfeeding in our organization the employee should be able to take breaks and have a private, comfortable room to pump in instead of being told that pumping can wait and the clients come first and that getting a room to pump in will get worked on later...we should also have a pumping schedule so everyone in the office can know when in employee is pumping instead of sometimes only being able to pump just once daily during a 9hr work day.”

“Our "mom's room" is attached to the bathroom. Sometimes it really stinks in there and it is hard to relax and express milk when it smells like a toilet. Also, 3 of us had custodians walk in on us while pumping...”

“While there is space to pump, it is not sufficient for the number of women in the building who need to pump.”

“Field worksites are diverse and need to be considered when planning for supportive work environments. A working group of...employees who successfully managed breastfeeding after returning to work, along with those who did not, and a cross section of peers and supervisors probably could address how to develop a mother-friendly work environment.”

“It should be remembered that some women at this agency work in a warehouse environment and away from locations where the lactation rooms are offered. What about them? Are they just out of luck because of the job that they have?”

“The ability to schedule a time to pump and know you have a place to go for this that is clean, private and on-site are paramount to successful breastfeeding. With my last child, I was only able to make it to 4 1/2 months with my breastfeeding because it was too difficult to find a place to pump at work or block my calendar for it due to not knowing if a place would be available.”

“In the beginning I worked part-time and did not have any problems with my milk supply. When I changed to full-time it was more difficult because I was not able to pump at work regularly. I had to begin to supplement with formula. If I had been able to break free for 20 or 30 minutes in the morning, lunch, and afternoon, then I would have had a sufficient pumped milk.”

“Presently, nursing mothers are at the mercy of their supervisors. Some are supportive, but most consider it just an excuse to be a slacker and do everything they can to make it as difficult as possible on these women… They need to have their right to CHOOSE TO BREASTFEED protected. Reasonable accommodations for nursing mothers do not put any additional hardship upon the agency or those of us who work with these mothers. Most of these mothers would be happy with nothing more than their supervisor's active support. They're not asking for special treatment, just some flexibility during the day and support from management. … Supervisors need to be educated on treating these mothers equitably, fairly, and with the dignity and respect allegedly all employees deserve. And then ENFORCE the policies.”

“The current arrangement of breastfeeding stations in the restrooms is not very private or sanitary. It discourages breastfeeding.”
Employees reporting their worksite is “not at all supportive” of breastfeeding:

**Female employee with child aged two or younger**

“I did attempt to speak with the program manager regarding a place other than the bathroom… and was told that I would just have to use the bathroom or stop all together.”

“I tried to pump at work however with my job being so unpredictable taking consistent breaks and finding a place to pump comfortably was not offered. In addition, I was never aware of the options I had as a breastfeeding mother.”

“I was told that I could not continue to go to court and take breaks to pump. I found this discouraging so I felt as though I had to quit.”

“Having to stop breastfeeding my son took a heavy emotional toll on me…”

“It is especially difficult for direct-care workers in the...hospitals...to get breaks to breastfeed, when they don't always even get a lunch break due to poor coverage and high acuity.”

“I don't work in an office and my day consists of traveling to and from establishments so it would be difficult unless one of my establishments had a place to pump. It would be unrealistic to pump in my vehicle.”

**Managers**

“I think that our organization has not been supportive, because there has not been a request expressed by any employee because they did not know that it was possible.”

“I don't think this issue has come up before - but if it did, there would not be a plan in place or readily available answers.”

“While some areas are supportive the agency as a whole is not. Glad to see this basic need is finally going to be addressed.”

**Non-managerial staff, no child aged two or younger**

• “In the hospital where I work one department will have flexibility with breastfeeding mothers, and the next will totally disallow it, making it very unfair in the overall picture. Standardized policy statewide would be beneficial in eliminating the "pick and choose" type of administration that most of us ‘workers’ deal with.”

• “No interest in this. Many of us at the work place have to carry the underproducers as it is. This only adds fuels to that fire, besides, we have done very well without this since the beginning of work. Women should do that on their own time...”

• “The time to take to educate and shift the culture of ‘why do these women get extra time off that I don't get to have?’ will be approximately 100 years. Gotta start some time.”

• “There is no support at this time, a policy needs to be developed.”

• “I have seen new mothers have to express milk in the bathroom as there was no other place to go. Management at the time tried to be supportive but there was absolutely no resources avail to help. As a mother myself I did not breastfeed due the fact the workplace with the state is not very supportive of the matter.”

“It would be nearly impossible to be a breastfeeding mother and working in direct delivery staff in order to keep your work assignments up.”

“Sometimes workload does not allow for this, but if upper management is really serious about this opportunity I am sure it can be worked out.”

“We are grossly understaffed and any amount of absence for any reason puts a huge burden on the rest of the staff. They are not supportive here. In fact they are quite hostile.”

“Teach women life is unfair. Get used to it.”

“A co-worker of mine recently left the Agency due to this specific issue. She went on maternity leave, had the baby, the baby has issues taking formula and needs to have breast milk and the workplace is not supportive of this fact so she quit and it is quite unfortunate as she was a highly regarded worker.”

“I am pregnant now and due in November, I HAVE to work, I do not have a choice … and would appreciate some sort of support for at least the first year that would allow for me to be able to keep my job and still be the mother I want to be to my child.”