











Photo credit: Office on Women's Health US Department of Health and Human Services (left) and California WIC Association (right)



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Introduction

Breastfeeding improves maternal and infant wellbeing and reduces health care costs worldwide.¹⁻³

However, returning to work presents significant challenges to breastfeeding for many women. Over time, social and economic factors have brought more women into the labor force,⁴ disproportionately into low-wage jobs.⁵ Most employed women, who are separated from their infants, need accommodation so they can take breaks to pump and store their milk.³ In California, the number of employers providing support for lactating women has increased, but fewer low-wage workers have benefited.⁶ In order to help infants have a strong start in life and reduce health disparities, employers can ensure that low-wage workers receive the same advantages as women with higher earnings. Nearly 94% of California mothers initiate breastfeeding after birth.⁷ Therefore, effective accommodation is needed throughout the state. This brief describes the challenges faced by low-wage workers and actions needed to ensure that all working mothers in California reach their breastfeeding goals.

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Breastfeeding Reduces Health Care Costs

Breastfeeding offers vital health benefits to mothers and infants, significantly reducing health care costs. 1-3 In addition to promoting maternal and infant bonding, breastfeeding reduces maternal risk of developing cardiovascular disease, diabetes, hypertension, and some cancers.¹⁻² Human milk is also the optimal source of nutrition for infants and promotes the development of newborn immune systems. Infants who are fed human milk have reduced lifelong risk for asthma, allergies, obesity, and diabetes.1-2

Because of the many health benefits and economic advantages associated with human milk, health organizations around the world endorse exclusive breastfeeding for the first six months of life (exclusive breastfeeding means a baby receives only breast milk, no other foods or fluids).¹⁻³ The American Academy of Pediatrics recommends "exclusive breastfeeding for about 6 months, followed by continued breastfeeding as complimentary foods are introduced, with continuation of breastfeeding for 1 year or longer as mutually desired by mother and infant." Both the Healthy People 2020 and projected Healthy People 2030 initiatives include objectives to increase the proportion of infants who are exclusively breastfed for 6 months.^{8,9} To improve rates nationally, the US Surgeon General has called for increased breastfeeding support from communities, health care workers, public health agencies and employers.³ Meeting these goals would save billions of dollars in health care expenditures in the US.²

Employer Support is Needed

Support from employers is essential for working mothers to continue breastfeeding. One of the most common barriers to continued exclusive breastfeeding is the lack of support for mothers when they return to the workplace.^{3, 10} Because of California's laws and the return on investments, lactation accommodation has become more common across the state. However, this vital support is least likely to be available for low-wage workers.^{6,14}

Low-Wage Workers are Unlikely To Have Time Off to Establish Breastfeeding

About 33% of California's workforce is made up of low-wage workers and more than half are women.⁵ In 2017, Black and Latina women were about 1.5 times more likely to be working in low-wage positions in California than White or Asian/Pacific Islander women.⁵ Even when working full time, wages earned by Black and Latina women often are low enough to classify them as the working-poor, which leaves them vulnerable to loss of pay.¹⁵

As of July 1, 2020, California's Paid Family Leave program provides 8-weeks of partial pay for eligible employees to bond with a new child (birth or adoption). However, low-wage workers are less likely than higher wage earners to be aware of this benefit. Many low-wage workers cannot meet living expenses with only part of their wages and may return to work, sooner than they would like, simply to pay rent or buy food. 14,17

CA Lactation Accommodation Laws: 11-13

- It is unlawful for an employer to discriminate against someone because of breastfeeding.
 Cal. Gov't Code § 12926(r)(1)(c)
- Employers must provide a written policy about employees' rights to:
 - A reasonable amount of break time to express milk each time they have a need to express milk
 - A room or other location for the employee to express milk in private that is clean, safe, and free from hazardous materials. Must not be a bathroom
 - A location containing a surface to place the pump, a place to sit and access to electricity or alternative device
 - Access to a sink with running water and refrigerator or cooling device suitable for storing milk
- Employers shall provide a process to their employees on how to request lactation accommodation, including the right to file a complaint if their rights have been violated. Cal. Lab. Code §§ 1030 - 1034



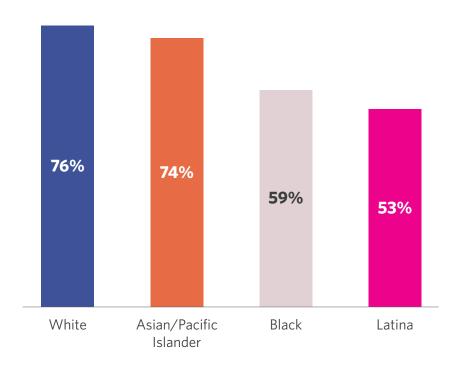




Low-Wage Workers are Left Behind for Workplace Breastfeeding Support

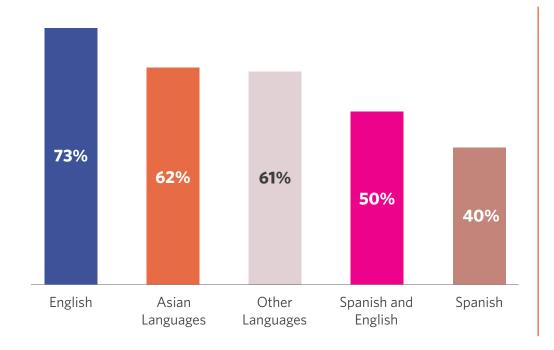
Researchers have found that working mothers who do not have workplace lactation support are less likely to initiate breastfeeding, have shorter breastfeeding durations, and begin formula supplementation earlier. ^{10, 14} In California, the proportion of women reporting receiving lactation accommodation has increased from 52% in 2011 to 66% in 2016, but significant disparities exist among race/ethnicity and income. ⁶ Less than half (42%) of women living in poverty reported having workplace breastfeeding support compared to the 83% of women with higher incomes. ⁶ While about 75% of White and Asian/Pacific Islander women have workplace accommodation, only 59% of Black and 53% of Latina women have similar support (Figure 1). ⁶

Figure 1. Workplace Breastfeeding Support by Race/Ethnicity⁶



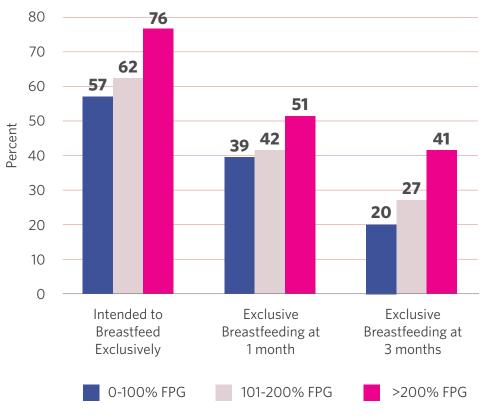
^{*} A widely used metric to define a low-wage worker is an individual who earns 2/3 the median wage for full time workers. In 2015, the average hourly wage for low-wage workers in CA was \$11.05 vs. \$19.71 for all workers

Figure 2. Workplace Breastfeeding Support by Primary Language⁶



Disparities are greater
when comparing lactation
accommodation by
women's primary language,
with 73% of Englishspeaking women and
only 40% of Spanishspeaking women
reporting workplace
support (Figure 2).6

Figure 3. Breastfeeding Practices by Income¹⁸



The federal poverty guidelines (FPG) are issued by the federal Department of Health and Human Services.

Without enough leave to establish breastfeeding and limited accommodation to maintain lactation,^{5,16} fewer low income women breastfeed exclusively.18 While more than 56% of women living in poverty intend to breastfeed exclusively, only 38.7% are doing so at one month after delivery, and only 20.3% at three **months**. These proportions are lower than women in higher income categories (Figure 3).18

Support can be Simple

In order for women to maintain their milk supply upon returning to work, they must express milk at regular intervals throughout the day, similar to intervals they would use to feed their babies at home (Figure 2). They need the time to travel to the space to pump, pump their milk, clean and store the pump, and have a safe place to store their milk during their shift before transporting it home. Thousands of employers in California already provide these accommodations every day. However, many low-wage worksites provide little or no support for breastfeeding mothers. Each missed opportunity for mothers to pump or feed their babies during the workday increases the risk that their milk supply will decrease, reducing milk available for their babies., and potentially increasing the need for formula supplementation. This can result in increased risk of illness for both mothers and babies.



Laws are Not Enough for Low-Wage Workers

For low-wage workers, legal protections may not be enough to increase breastfeeding rates. California and Federal laws mandate that employees can use break time for pumping. Low-wage workers are less likely than higher wage workers to have knowledge of their rights, and they are unlikely to report employer violations across all employer types.¹⁷ Low-wage working mothers are vulnerable to lost wages and have few resources to protect themselves against discrimination or retaliation. For many low-wage workers, lack of employer or co-worker support, embarrassment or fear of losing their jobs may prevent them from even asking for accommodation.²²⁻²⁵

Creative Strategies are Needed Due to Constraints in Low-Wage Environments

For many high wage worksites, practices beyond the minimum legal requirements have been implemented to promote working women's ability to continue to produce milk including: extended paid leave, bring your baby to work policies, telecommuting, on-site childcare, worksite breastfeeding policies, flexible scheduling, and access to more than one private area to pump and store expressed milk.¹⁹⁻²⁰ While these practices may be helpful in extending breastfeeding, significant barriers exist to accomplish similar practices in many low-wage workplace settings. Creative strategies are needed in low-wage workplaces so that women can continue to breastfeed their babies despite constraints in the availability of space and employee time.^{20,26,27} The US Office of Women's

Health (womenshealth.gov) provides resources so that a variety of employers can learn from others' success. For example, pop up tents have been used to create private spaces for outdoor and agricultural workers, scheduled breaks in supervisors' offices have been used in manufacturing, and floaters have been brought in to support customers in retail environments while workers are taking lactation breaks.²⁰ Information is also available on the website about specific cost savings, often thousands of dollars, that have been achieved by a variety of employers providing lactation support to their workers.²⁰

Lactation Accommodation: A Worthwhile Investment

Employers providing lactation support experience lower health care costs and reap the benefits of decreased employee absenteeism and decreased lost work productivity due to mothers attending to sick children. All of these outcomes positively affect employers' bottom-lines. Employers are in a unique position to make an impact on maternal and child health by promoting lactation practices among their workers. Employers of low-wage workers may need education to understand the various federal and state laws protecting an individual's right to workplace lactation accommodation. Workers may not ask for accommodation without clearly expressed outreach efforts by the employer. Developing and informing workers of lactation policies during pregnancy can make a difference in increasing lactation initiation and duration. These efforts are a worthwhile investment for a healthier, happier workforce.



Photo credit: United State Breastfeeding Committee

Comprehensive Strategies to Address Disparities in Lactation Accommodation

Strategies to ensure low-wage workers receive the quality accommodation needed for lactation include:

- A. Increase knowledge and awareness of California Paid Family Leave and lactation accommodation laws.
 - Inform employers of low-wage workers about Paid Family Leave.
 - 2. Inform employers of low-wage workers about state and federal lactation accommodation laws including developing and implementing a written lactation accommodation policy.
 - 3. Encourage employers to protect the jobs of low-wage workers with the birth or adoption of a child.
 - 4. Provide clear, accessible multilingual education on-line for low-wage workers and employers to easily obtain information about their lactation accommodation rights and how to report violations.
- B. Increase access to breast pumps, counseling and appropriate lactation accommodation for low-wage workers, including access to a safe pumping space, time to pump, electricity, a sink, and a refrigerator.
 - 1. Educate all employers of low-wage workers on the benefits of lactation accommodation and how to accommodate lactating workers.
 - 2. Educate employers on how to write their lactation accommodation policy and when to distribute it to workers.

- 3. Encourage health care providers to support breastfeeding parents who are returning to work by:
 - a. Assisting breastfeeding parents during pregnancy to make a plan for returning to work.
 - b. Providing breastfeeding education and support.
 - c. Providing employers education about the benefits of and practical steps required for lactation accommodation in the workplace.
- 4. Improve health plan benefits to cover quality electric breast pumps, pump supplies, essential in-person lactation support services, and resources such as numbers to warm lines.
- 5. Educate employers about the role of local WIC programs to ensure low-wage workers have access to breastfeeding supportive services, in addition to their health plan benefits.
- C. Develop creative strategies for low-wage environments to support breastfeeding.
 - 1. Promote solutions to workplace breastfeeding accommodation barriers, such as:
 - a. Proximity and conditions of pumping location that offer sufficient privacy, cleanliness, and safety.
 - b. Flexibility in scheduling and timing as returning workers adapt to their working and pumping schedules.

- 2. Encourage building standards that include guidance for lactation accommodation in new building construction.
- 3. Support family leave and lactation accommodation for workers with children with special needs, including infants born prematurely.
- 4. Recognize employers of low-wage workers that provide exemplary lactation accommodation at the state and local levels.
- 5. Expand lactation accommodation beyond all workers to include visitors.

Resources for Employers:

- California Department of Industrial Relations Labor Commissioner's Office (https://www.dir.ca.gov/dlse/Lactation_Accommodation.htm)
- The California WIC Association advocates for breastfeeding, including lactation accommodation http://www.calwic.org/what-we-do/breastfeeding-advocacy/lactation-accommodation-resources/)
- The California Breastfeeding Coalition for information on legislation regarding workplace lactation accommodation and paid family leave (http://californiabreastfeeding.org/)
- The California Department of Public Health/Breastfeeding for toolkits and information on lactation policies (https://www.cdph.ca.gov/Programs/CFH/DMCAH/Breastfeeding/Pages/General.aspx)
- Office of Women's Health/Supporting Nursing Mothers at Work/Employer Solutions for comprehensive information, training videos, sample policy templates, toolkits, and answers to common logistics to providing lactation accommodation (https://www.womenshealth.gov/)
- Legal Aid at Work: Work and Family Resources/Support for California parents (http://legalaidatwork.org/our-programs/work-and-family-program/)
- CA Work and Family Coalition for tools and resources (http://www.workfamilyca.org/resources)
- Center for WorkLife Law for guidance for employers and university administrators interested in best practices for complying with the law. (https://worklifelaw.org/)
- The Federal Department of Labor (https://www.dol.gov/whd/nursingmothers/)
- Community Outreach and Resource Planning Specialists (CORPS) Contact List. The CORPS work to organize compliance assistance and outreach, provide planning and enforcement support, and more. (https://www.dol.gov/whd/corpsFlyer.pdf)

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