



Breastfeeding Update

“Good health begins with breastfeeding.”

Workplace Lactation

Support for Breastfeeding Employees
Susan Kobara, CLE, Corporate Lactation Consultant

Every company needs to make a profit to stay in business. Consequently, there is a constant search for ways to retain good employees and control costs. One way to do this is to implement a Corporate Lactation Program. But you may ask, "Why should a woman's personal infant feeding choice concern corporate America?" When women who return to work after maternity leave are encouraged to continue breastfeeding their babies through a company's lactation program, that company experiences many positive benefits. Those "bottom line benefits" include:

- * Reduced staff turnover and loss of skilled workers after the birth of a child (especially important in a tight labor market).
- * Reduced sick time/personal leave for breastfeeding women because their babies are more resistant to illness.
- * Higher job productivity, employee satisfaction and morale.
- * Added recruitment incentive for women.
- * Enhanced reputation as a company concerned with better business practices and the welfare of employees and their families.
- * Lower healthcare costs associated with healthier, breastfed babies.

The benefits to companies have been documented in studies done at two corporations - Aetna and CIGNA Corp. Over one year, Aetna Inc. realized savings of \$1435 in medical claims and three days of sick leave per breastfed baby. That was a total savings of over \$108,000 which represented an almost 3-to-1 return on investment in claims alone. Reduced absenteeism for breastfeeding mothers at CIGNA resulted in savings of \$60,000 annually

along with savings of \$240,000 per year in lowered healthcare expenses for mothers and their babies.

For babies, there is a myriad of documented benefits including everything from increased IQ to decreased ear and respiratory infections, allergies, childhood cancers, diabetes, obesity, diarrheal illness and SIDS. Mothers with healthy children stay on the job, have fewer insurance claims, higher productivity and lower their risk of breast and ovarian cancer and obesity.

Since 1997, the American Academy of Pediatrics has recommended that all babies receive breastmilk for a one-year minimum. The AAP guidelines also urge employers to provide a place for women to nurse or pump their milk.

What can your company do? Employers can accommodate their employees by providing a lactation program. This program should include a dedicated, private area (preferably not a bathroom or medical office for hygiene/safety reasons) to express milk during the workday. Ideally, the room should be equipped with a comfortable chair, a refrigerator for storing milk, electrical outlets, a sink for washing hands and safety guidelines. A breast pump can be provided by the employer or can be the responsibility of the employee. With outreach, more women will use the program which will result in more cost savings. Promotion of the program and lactation education (both prenatal and postpartum) provide that essential outreach. Managerial support, resource materials and information on local breastfeeding organizations can complete the program.

So with a small investment of time, space and money, a company can not only provide the support their breastfeeding employees need, but can realize a significant return on their investment. Workplace lactation programs are a "win - win" situation for all!

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Ask the expert

Question: I am breastfeeding my baby and plan to return to work when she is four months old. What do I need to know about pumping and storing while I'm at work so that my baby gets only my milk?

Answer: First of all, congratulations for making the decision to continue breastfeeding after returning to work! Here are some helpful tips to consider:

Speak with your employer. Ask about locations where you can pump (a clean, private area) and rearranging your break/lunch schedule to accommodate your pumping sessions. You will need approximately 15-20 minutes from start to finish to express your milk, and will probably need to pump 2-3 times in an 8-hour day.

Use a good pump that expresses milk efficiently, comfortably, and allows you to express from both breasts at the same time. This will cut pumping time in half and help make the most of your pumping sessions.

Start pumping and storing your milk 2-3 weeks prior to your return, pumping around your baby's schedule, being careful not to interrupt her nursing routine. Store all the milk you express in the freezer in bottles or freezer bags made especially for storing mother's milk.

Prepare the baby's bottles, your pump, and the necessary equipment the night before. If you don't have access to a refrigerator at work, take an insulated cooler and a clean, airtight container to store your milk until you get home.

Leave about 16-20 ounces of breastmilk daily with your baby's caregiver for about the first week or two (until you figure out how much

the baby consumes while you are away). Explain to your caregiver that the container of breastmilk should never be heated in the microwave, but placed in warm water to warm to room or body temperature.

When you get to work, set up your "pumping station" so that it is ready to go when you are. After the pumping session, just rinse the pump parts in hot water and let them air dry. Take them home at the end of the day to wash them with hot soapy water.

Providing breastmilk for your baby and working can be done successfully, with a little patience, planning, flexibility and commitment. Your baby is worth the effort! Good Luck!

For more information on breastfeeding resources available in San Diego County (e.g. where to rent or purchase a breast pump), call the San Diego County Breastfeeding Coalition at (858) 966-5981 to request a free copy of the Breastfeeding Resource Guide.



Jo Ann Shaw, RD, IBCLC

Jo Ann Shaw is a registered dietitian and board certified lactation consultant. She is employed as a Breastfeeding Promotion Coordinator for SDSU Foundation WIC Program. She is the working mother of two breastfed children.

Breastfeeding Fact :

CALIFORNIA Assembly Bill #157, 1997

Adds Section 43.3 to the Civil Code, which states: "Notwithstanding any other provision of law, a mother may breastfeed her child in any location, public or private, except the private home or residence of another, where the mother and child are authorized to be present."

Community spotlight

HealthShare Lactation Services, Inc.

Ask any mother returning to work after the birth of a baby about her toughest obstacles. Along with the apprehension over childcare, stands the worry of how to continue breastfeeding her baby. Meanwhile, employers wrestle with the dilemma of managing healthcare costs while attracting and keeping valuable employees. HealthShare Lactation Services, Inc. helps companies implement lactation programs that meet the mother's needs while producing significant company savings. HealthShare Lactation Services, Inc. is a national company with a local office in Carlsbad. HealthShare's corporate lactation specialists develop organized, detailed, professional lactation programs for any size company. Personal on-site consulting services are offered in addition to a unique "do-it-yourself" lactation program kit. Program materials include safety standards, policies, promotional materials, lactation room requirements, lactation education and breastfeeding resources. For more information, call (800) 887-5428 or visit www.hsls.com.

Birth Resource Network

Birth Resource Network is a nonprofit association of independently practicing doulas in the San Diego area. Our mission is to: make services affordable for every woman who wants a doula; educate parents, the community and health care professionals as to the benefits of a doula; and provide on-going training to our members. A "doula" is a woman professionally trained to provide continuous emotional, physical, and informational support during childbirth. Most doulas have an independent or group practice and are hired directly by the parents. To learn more about doulas and Birth Resource Network, take a look at our website www.BirthResourceNetwork.org or phone our information line at (619) 525-7753.

Breastfeeding friendly workplace award application form

We are presently accepting applications for the Breastfeeding Friendly Workplace Award. This award is presented annually to the business/organization that shows the greatest commitment to supporting breastfeeding employees. The award will be presented during World Breastfeeding Week on August 1-7, 2001. Past recipients include: Aetna US Healthcare (2000), Qualcomm & People's Organic Foods Market (1999), Sea World (1998), US Naval Medical Center (1997), and Hewlett-Packard (1996).

Company Information:

Name of Business: _____ Type of Business: _____

Number of Employees: _____ Contact Person: _____

Telephone: _____ Fax: _____

Email Address: _____

Location of Business: _____

Please answer the following questions:

How does your business provide work schedule flexibility including scheduling breaks and work patterns to provide time for expression of breastmilk by employees who are breastfeeding? (Most moms will need approximately 30 minutes every 3 to 4 hours during the work-day to express milk. These employees can add 15 minutes to their morning and afternoon breaks by shortening their lunches by 30 minutes or by arriving 15 minutes earlier to work and by leaving 15 minutes later) _____

How does your business provide a private, accessible location for expression of breastmilk? (Any clean private room with a locking door, electricity and a comfortable chair can function as a breastpump room) _____

How does your business provide a clean, safe water source and a sink for handwashing and cleaning of breastmilk collection devices? (A nearby break area or restroom can be used) _____

Application continued on next page

Breastfeeding Friendly Workplace Award Application Form *continued*

What type of hygienic storage options for pumped breastmilk are provided to breastfeeding employees? (A refrigerator, ice chest, or a cool safe area free from contamination may be used) and how will the employee access these areas? _____

How does your business provide a clean, safe water source and a sink for handwashing and cleaning of breastmilk collection devices? (A nearby break area or restroom can be used) _____

What type of hygienic storage options for pumped breastmilk are provided to breastfeeding employees? (A refrigerator, ice chest, or a cool safe area free from contamination may be used) and how will the employee access these areas? _____

Does a Policy and Procedure or Human Resource Document exist explaining that this is a Breastfeeding Friendly Business? (if yes, please attach a copy) How do you inform employees about your Worksite Lactation Program? _____

Do you offer prenatal or postpartum classes on breastfeeding to employees or have a wellness program? _____

Do you utilize the services of a Lactation Consultant? _____

Do you have on-site day care? _____

Please fill out the application form and fax or send to:

**Teresa Echegaray, SDSU Foundation WIC
7323 Engineer Rd., Ste B
San Diego, CA 92111
Ph. (858)505-3066/Fax (858)569-7906**

Sdcbc membership

Become a member of the San Diego County Breastfeeding Coalition!

What is the San Diego County Breastfeeding Coalition?

The San Diego County Breastfeeding Coalition is a non-profit association whose mission is to promote and support breastfeeding through education and outreach in our community.

What are the benefits of being a San Diego County Breastfeeding Coalition member?

As a member of the San Diego County Breastfeeding Coalition you will:

- Network with a growing body of people dedicated to the promotion and support of breastfeeding.
- Have access to lactation professionals and the most up-to-date breastfeeding resources.
- Receive a supply of free Breastfeeding Resource Guides in English and Spanish.
- Receive a discount for Coalition sponsored education programs.
- Receive our newsletter, "Breastfeeding Updates".
- Be listed, as appropriate, in the "Breastfeeding Resource Guide" without a fee.
- Have a home page or link, as appropriate, on the SDCBC website: www.breastfeeding.org

You can show your support of the San Diego Breastfeeding Coalition by:

- Making a monetary contribution to support coalition activities.
- Donating your time by serving on a committee:
 - Community Outreach
 - Professional Outreach
 - Resource Guide
 - Research and Evaluation
- Attending Coalition meetings and providing your expertise and experience.

We offer the following types of membership with the SDCBC:

- Sponsor - \$100 (Business/Organization /Professional);
- Contributing Member - \$50 (Individuals);
- Friends of the Coalition - any amount under \$50.

If you are interested in becoming a member of the SDCBC for the year 2001 please visit our website at www.breastfeeding.org or contact our office to request a brochure or more information. Ph: (858) 966-5981, Email: cerickson@chsd.org.

Your feedback is appreciated and welcomed! Please forward all comments and suggestions to:

Claudia Erickson
San Diego County Breastfeeding Coalition
Children's Hospital
3020 Children's Way, MC 5073
San Diego, CA 92123-4282
cerickson@chsd.org

Job center

Volunteer Opportunities: Looking for worthwhile volunteer opportunities? Have experience with coordinating membership and fundraising activities? We need you! Any amount of time you can offer, we need!

Paid Opportunities: Are you IBCLC certified? We need presenters for our in-office lactation education program. (\$100/session)

Interested in having your jobs posted here? All lactation related jobs can be posted here for free! For more information, please call us at (858) 966-5891 or email us at cerickson@chsd.org.

Breastfeeding in the Workplace: Employer Attitudes and Practices

Continued from page 8

someone who had breastfed were more likely to have a positive attitude towards breastfeeding in the workplace. Most respondents believed that supportive policies and facilities would be in the best interest of the company and stated that they would personally assist employees wishing to continue breastfeeding.

These studies suggest that the concept "Breast is Best" is already accepted by company management, but implementation of workplace lactation support is an issue. Increasing lactation support in the workplace is, therefore, dependent upon both persuading the employer that such support is cost effective for the company, and persuading the individual breastfeeding employee to take the initiative in instituting change. As health care professionals we can *empower mothers* to request lactation support at work and *educate employers* about the very real cost benefits of encouraging and supporting breastfeeding employees.

Save the date

La Leche League of Southern California/Nevada Area Conference—Costa Mesa Hilton, May 26-27, 2001.

“Breastfeeding: The Art of Parenting from the Heart.” Featured speakers include: Kathleen Kendall-Tackett, PhD; Pauline Sakamoto, RN, MS; Chele Marmet, MA, IBCLC; Lisa Marasco, MA, IBCLC; Nancy Williams MA, MFT, CCE, IBCLC; Lois Nightingale, PhD; Diana Lynn Barnes, PsyD, MFT; and more. 13.7 CERPs have been applied for from the IBLCE; 10.5 CE hours have been applied for from the BBS; 10 CEUs have been applied for from the BRN; and 12 CPE hours have been applied for from the ADA. For a Registration Book, contact Donna Hooyen at 866-818-CONF. E-mail: hooville@pacbell.net. For CE information contact Linda Kingsley at 661-942-0476. E-mail: Ckinglsey22@cs.com. LLL Conference website: www.AttachUSA.com/LLL.

Human Milk Banking Association of North America—Best Western Richmond Inn, Vancouver, British Columbia, June 7-8, 2001.

“Human Milk: Cutting Edge Research.” Sponsored by the Mother’s Milk Bank at BC Women’s & Children’s Hospital. Speakers include: Richard Schanler, MD, FAAP; Ruth Lawrence, MD, FAAP; Thomas E. Young, MD, FAAP; Nancy Wight, MD, FAAP, IBCLC; Mary Rose Tully, MPH, IBCLC; and Molly Pessl, RN, BSN, IBCLC. There is also an optional day-long workshop, “Baby Friendly: A Continuous Process,” June 9 with Molly Pessl, RN, BSN, IBCLC. Website: www.hmbana.org.

La Leche League International 29th Annual Seminar for Physicians on Breastfeeding—Chicago Hilton and Towers, Chicago Illinois, July 5-7, 2001.

“2001 Breastfeeding for Health: Looking to the Future, Mindful of the Past.” La Leche League International, the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists co-sponsor this Seminar for Physicians to provide education in effective lactation management using a variety of techniques and approaches. This three-day intensive seminar covers the latest breastfeeding research and features a faculty of experts in the fields of lactation and family health care. The information presented will enable physicians to provide the education and support necessary to facilitate successful and fulfilling breastfeeding experiences for their patients. For further information contact Carol Kolar, Director, La Leche League International. Phone: (847) 519-7730, ext 218. Fax: (847) 519-0003. E-mail: Ckolar@llli.com. Website: www.lalecheleague.org.

2001 Conference and Annual Meeting of the International Lactation Consultant Association—Acapulco Princess Hotel, Acapulco, Mexico, July 17-20, 2001.

“Breastfeeding in the 21st Century: How Policy Can Affect Practice.” The preconference day, July 17, includes a day-long workshop on feeding the infant with cranio-facial anomalies. There will be several sessions on the UNICEF Baby Friendly Hospital Initiative, as well as introduction of complementary feeding, doing a cost-benefit analysis of breastfeeding promotion, and current clinical issues and breastfeeding research. Featured speakers include, Miriam Labbok, MD, MPH; Jane Heinig, PhD, RD, IBCLC; Laurie Nommsen-Rivers, MS, RD, IBCLC; Elsa Giugliani, MD, PhD, IBCLC; Samuel Flores-Huerta, MD; and Molly Pessl, RN, BSN, IBCLC. Website: www.ilca.org.

2001 American Academy of Pediatrics National Conference and Exhibition—San Francisco Marriott/Moscone Center, San Francisco, California, October 20-24, 2001.

Attend the National Conference and you will: hear comprehensive updates from experts in the field of pediatrics; practice your techniques and apply new skills; view the latest technological advances in products and services; discuss your challenging cases; network with your colleagues from both the United States and abroad; and earn hour-for-hour AMA PRA Category 1 CME credit hours. Registration Program is scheduled to be available on-line at www.aap.org in June 2001.

Sixth International Meeting of the Academy of Breastfeeding Medicine—Wyndham Hotel, Washington DC, November 1-5, 2001.

The Sixth International Meeting of the Academy of Breastfeeding Medicine provides physicians the opportunity to meeting other physicians from around the world dedicated to an interest in breastfeeding and human lactation; share experiences on physician education, and clinical management of breastfeeding patients; and attend workshops, abstract presentations, and lectures regarding relevant, controversial topics such as human milk banking, maternal depression, breastfeeding advocacy and more. For further information please contact ABM Executive Office. Phone: (877) 836-9947. Fax: (619) 295-0056. E-mail: abm@bfmed.org. Website: www.bfmed.org.

Business Perspective

How KYOCERA implemented a Lactation Program

Question: When and why did you start up a Lactation Program at Kyocera?

Answer: We started up the program about five months ago because we realized we had younger women of child bearing years that were not able to come back to work very easily due to breastfeeding issues and the challenges of pumping their milk.

Question: How did you go about setting your program up?

Answer: Susan Kobara of *HealthShare* told us about the benefits of starting up a program and how to do it. She presented information on why this type of program is important, showed us equipment we might want to purchase, gave us justifications we might need to use when trying to get internal approval, and helped us set up a nursing library for the mothers.

Question: What sort of accommodations did you have to set up for your lactating staff?

Answer: We already had an extra room available where we added a refrigerator, nursing library, table and pump station. It was really easy.

Question: What costs were involved?

Answer: It cost around \$1,000 - \$1,500 to set up the Lactation Program. We spent \$700 for a Medela dual Pump and the rest of the money went for the library, refrigerator, etc.

Question: What has been the overall response from staff and management to your program?

Answer: Staff and Management really like the program and are using it. Kyocera has a “Family Friendly” approach to its employees so it didn’t take much to convince the management that this would be a good program. The mothers who use the program are more focused on their work and have less hassles since they can pump and take care of their lactating needs here. We haven’t seen anything but a positive response from this program.

Eileen Mahoney is with the Health and Safety Dept. at Kyocera.

Legislative update

Nancy E. Wight MD, IBCLC

Women make up nearly 50 % of today’s workforce – approximately 63 million workers. Two-thirds of those women have children younger than 6 years old prompting issues such as maternity leave and childcare to be commonly addressed at the workplace. Unfortunately, many employers do not consider the need for proper facilities and break time to express breastmilk. Women are forced to hide in bathroom stalls and supply closets as they try to provide what is best for their babies’ nutrition and health. This is not only unsanitary, but also extremely discouraging to mothers trying to fulfill the American Academy of Pediatrics recommendations to breastfeed for AT LEAST one year.

The **International Labor Organization (ILO)** has created labor standards for working women around the world that include:

- 12 weeks maternity leave, with extension if necessary
- cash benefits during leave of at least 66% of previous earnings
- breastfeeding breaks totaling at least 1 hour per day
- prohibition of dismissal during maternity leave.

Unlike ¾ of the other countries of the world, the US does not meet ILO standards.

Recent legislation, both state and federal, are addressing these needs. In California, Assembly member Dario J. Frommer (Glendale) has submitted **AB 1025 (Lactation Accommodation)** which provides for extra unpaid break time concurrent with existing break time so a woman can express milk during the workday. The bill also requires employers to provide proper facilities for pumping and storing milk. However, the employer is exempt if providing the break time would “unduly disrupt the operations of the employer”.

On a federal level, **Congresswoman Carolyn Maloney (NY)** has reintroduced the most comprehensive breastfeeding rights bill yet. **HR 285**, if enacted, will protect a woman’s right to continue to express milk at work, will provide tax incentives to employers who make expenditures for breast pumps and other lactation accommodations, and will regulate performance standards for breast pumps.

Senator Olympia Snowe (Maine) introduced **S. 256**. This bill, if enacted, will protect a woman’s right to express milk at work by amending the Pregnancy Discrimination Act to include breastfeeding. The bill does not, however, include all the provisions of HR 285.

To learn more about these and other bills, and how to contact your legislators and effect change, go to www.house.gov/maloney/issues/breastfeeding.

Breastfeeding Update

May 2001



San diego county Br east feeding coal it ion

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"Good health begins with breastfeeding."

VISIT US ON THE WEB AT
www.breastfeeding.org

Research corner

Breastfeeding in the Workplace: Employer Attitudes and Practices

Efforts to promote extended duration and exclusivity of breastfeeding must consider that fifty percent of mothers of infants under one year of age work outside the home. A recent study [*J Hum Lact* 2001;17(1):39-40] surveyed the attitudes of a small group of Texas Human Resource (HR) Professionals towards breastfeeding support in the workplace. These professionals acknowledged the superiority of breastmilk when compared to formula and recognized that breastfeeding reduced infant illnesses, related health care costs, and maternal absenteeism due to infant illness, but none had a formal policy supporting breastfeeding. Rather, individual employees were accommodated on an as-needed basis. Perceived barriers to lactation support included lack of space (or "appropriate" space), lack of time or scheduling availability, negative effects of "special treatment" on other employees and productivity, and financial implications of providing adequate facilities. On the other hand, being "mother-friendly" was seen as an important recruitment tool and potential cost-savings for the company. Most importantly, **HR personnel felt that if employees themselves expressed a need for lactation support, the employers would be likely to respond positively by implementing appropriate policies and facilities.**

Recently, a survey of 37 San Diego "High Tech" companies (e.g., biotechnology, communications, computer related, electronics, pharmaceutical) was conducted (S. Jones, Y. Vaucher, unpublished). Representatives, mostly HR personnel and working women, responded to a questionnaire about employer policies, attitudes, and practices towards breastfeeding in the workplace. These companies were selected because they tend to employ a high proportion of young, well-educated women who are likely to breastfeed and return to work. Large and small (≤ 50 employees) companies were equally represented; most employed between 25-50% women. Although half of the health insurance plans did cover lactation counseling, very few covered the cost of a pump for a working mother. Workplace facilities were limited: only 28% had a comfortable, private space for pumping; 11% had lactation counseling available. None provided an electric pump or had daycare on site or nearby. However, most (89%) had flexible breaks or lunch time and 39% provided breaks specifically for breastfeeding. **Companies who employed nursing mothers in the past 5 years were more likely to have lactation support including private space and breastfeeding break policies.** The health benefits and nutritional superiority of breastmilk were common knowledge. Respondents who knew

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