

**NC Office of State Human Resources  
Lactation Policy Training for  
HR Managers and Supervisors**



# Objectives

- ▶ The participant shall:
  - Increase knowledge of the July 2010 OSHR Lactation Policy
  - Identify at least three benefits to employers for supporting breastfeeding in the workplace
  - State three benefits to the breastfeeding employee
  - Identify ways to implement the requirements of the NC OSHR Lactation Policy for state employees

# NC Office of State Human Resources

## Lactation Policy

- ▶ Workplace Environment, Health, Wellness and Work/life
  - **Lactation Policy effective July 1, 2010**
  - “It is the policy of North Carolina State Government to assist working mothers with the transition back to work following the birth of a child by providing lactation support. A lactation support program allows a nursing mother to express breast milk periodically during the work day”

# Lactation Policy

## State Personnel Manual, Section 8

- ▶ Responsibilities
  - Office of State Human Resources
  - Agency
  - Employee

# Lactation Policy

## State Personnel Manual, Section 8

- ▶ Office of State Human Resources Responsibilities
  - Designate a program coordinator to assist agencies with questions regarding this policy

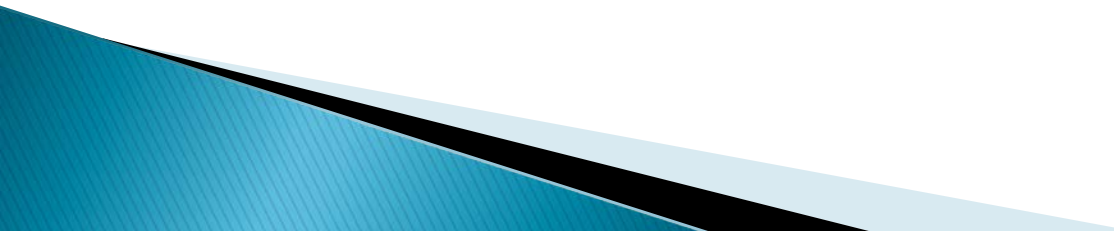
# Lactation Policy

## State Personnel Manual, Section 8

### ▶ Agency Responsibilities

- State agencies shall provide **space**, privacy and time for nursing mothers to express breast milk

- **Designated Space**

- Private
  - Not a restroom
  - Door that can be secured/locked
  - Adequate lighting and seating
  - Electrical outlet
- 

# Lactation Policy

## State Personnel Manual, Section 8

- ▶ Space–Advisory Note
  - When identifying a designated **space** consider:
    - Proximity to the employees’ work area
    - Distance of the space to a source of running water

# Lactation Policy

## State Personnel Manual, Section 8

- ▶ Agency Responsibilities
  - State agencies shall provide space, privacy and **time** for nursing mothers to express breast milk
    - **Time**
      - Employee may use paid break time to express milk
      - Reasonable efforts to allow employees to use paid leave or unpaid time if necessary



# Lactation Policy

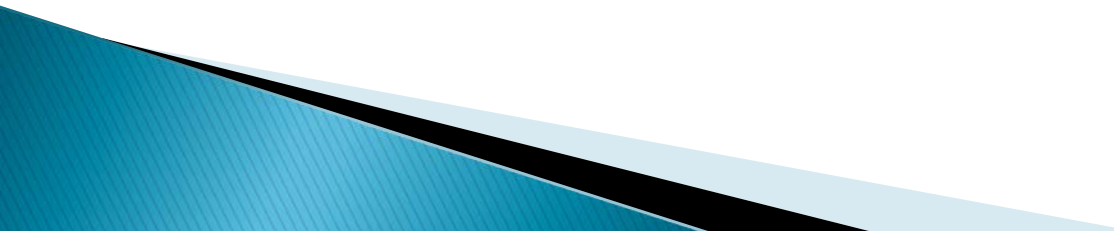
## State Personnel Manual, Section 8

- ▶ Employee Responsibility
  - Storage: the employee will be responsible for storage of expressed breast milk

# Why Should We Support Breastfeeding?

- ▶ Support breastfeeding is a WIN–WIN for companies and employees (HRSA)
  - Lower absenteeism rates
  - Lower health care costs
  - Lower turnover rates
  - Higher employee satisfaction
    - Increased productivity and morale
    - Higher loyalty
  - Recognition as a “family friendly” business
    - Recruitment and retention

# Experts Agree....

- ▶ US Surgeon General
  - ▶ American Academy of Pediatrics (AAP)
  - ▶ American Academy of Family Physicians (AAFP)
  - ▶ American College of Obstetrics and Gynecology (ACOG)
  - ▶ American Dietetic Association (ADA)
  - ▶ Association of Women's Health, Obstetric, and Neonatal Nurses (AWHONN)
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**Breastfeeding is  
the normal way to  
feed a baby**

# Recommendations

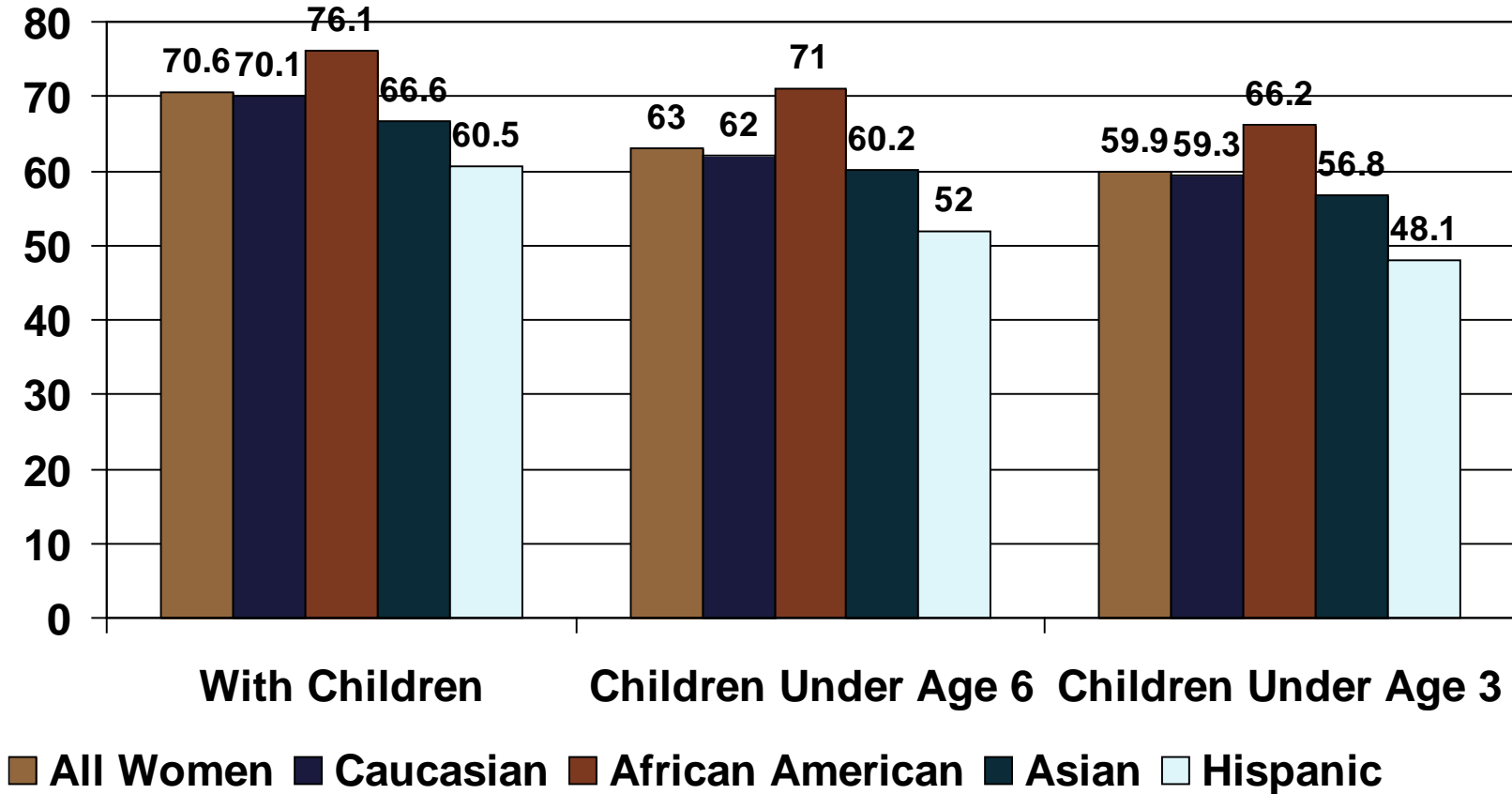
Breastfeeding is best for babies

- ▶ Exclusively breastfeeding for the first 6 months of life
- ▶ Gradually add complementary solids after 6 months of age
- ▶ Continue breastfeeding for at least one year
  - And as long as mutually desired for mom and baby
  - The World Health Organization (WHO) recommends breastfeeding for at least 2 years

# Women in the Work Force

- ▶ Nearly 60% of women are in the work force; of these, 62% are of childbearing age
- ▶ Women comprise nearly half of the U.S. labor force
- ▶ Women with children are the fastest growing segment of the work force
  - Over 70% of women with children are in the work force

# Women in the Work Force



# North Carolina Breastfeeding Rates 2009 CDC Report Card

	Healthy People 2010 Goal	Nation %	North Carolina %
“Ever” Breastfed	75%	74	65
Breastfed 6 mo	50%	44	35
Breastfed 12 mo	25%	23	17
Exclusivity for 3 mo	40%	34	31
Exclusivity for 6 mo	17%	14	13

Values for Nation and North Carolina have been rounded

Based on 2006 National Immunization Survey (NIS) Final Data

Data Source available at: <http://www.cdc.gov/breastfeeding>



# North Carolina Breastfeeding Rates 2010 CDC Report Card

	Healthy People 2010 Goal	Nation %	North Carolina %
“Ever” Breastfed	75%	75	74
Breastfed 6 mo	50%	43	36
Breastfed 12 mo	25%	22	19
Exclusivity for 3 mo	40%	33	28
Exclusivity for 6 mo	17%	13	9

Values for Nation and North Carolina have been rounded  
Based on 2007 National Immunization Survey (NIS) Provisional Data  
Data Source available at: <http://www.cdc.gov/breastfeeding>

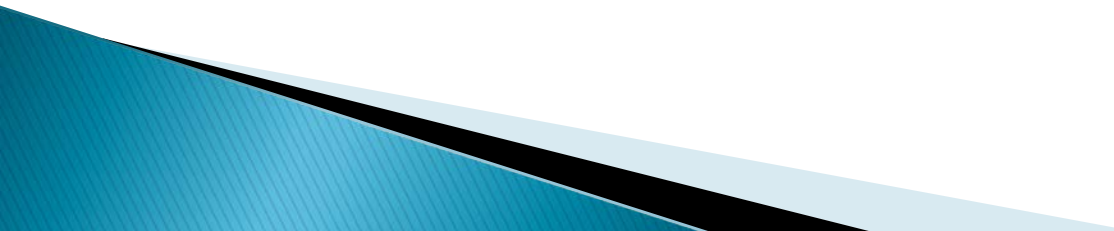
# Why We Care

- ▶ Breastfeeding initiation is high, but duration and exclusivity rates are low in North Carolina.
- ▶ There is a rapid decline in breastfeeding when women return to work or school.
- ▶ Family-friendly policies assist in providing the support women need to meet their breastfeeding goals.



*Photo credit: Mutual of Omaha*

# Impact of Employment on Breastfeeding

- ▶ Full-time employment shortens breastfeeding duration (*Fein and Roe 1998*)
  - ▶ Most women wean before end of first month back at work (*Cardenas 2005*)
  - ▶ Full-time employment an economic necessity for many (*Galtry 1997*)
- 

# Health Implications for Babies



- ▶ NOT breastfeeding increases risk of:
    - Obesity
    - Ear infections
    - Respiratory infections
    - Gastrointestinal infections
    - Skin conditions
    - Type 1 and Type 2 diabetes
    - Leukemia
    - Sudden Infant Death Syndrome
- (AHRQ 2007)*

# Increased Risks for Babies of Employed Mothers

- ▶ Infants in child care centers are at 69% increased risk of hospitalization for respiratory infection  
*(Kemper 2006)*
- ▶ Being in a child care setting doubles odds of needing antibiotics by age 1.5–5 years *(Dubois 2005)*
- ▶ Exclusive breastfeeding at least 4 months had protective effect for 2.5 years
- ▶ Among infants of employed mothers who were *never* sick during the first year, 86% were breastfed  
*(Cohen 1994)*

# Health Implications for Employed Mothers



- ▶ Mothers who do NOT breastfeed have a higher risk of:
  - Premenopausal breast cancer
  - Ovarian cancer
  - Type 2 diabetes

*(AHRQ 2007)*
- ▶ Breastfeeding mothers:
  - Recover from pregnancy faster
  - Enjoy a delayed menses
- ▶ Healthier employees are more productive



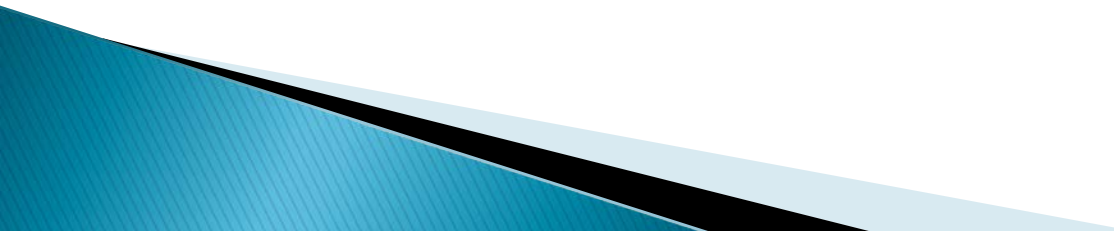
# Support in the Workplace



*Photo credit: Centers for Disease Control and Prevention*

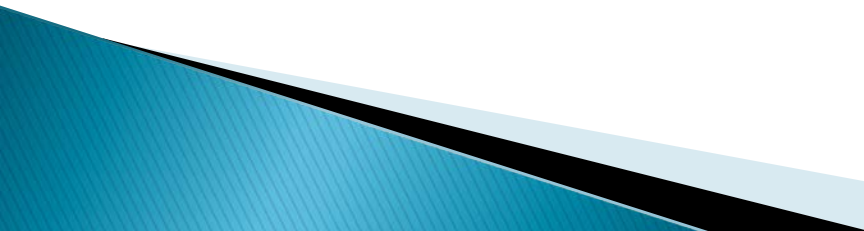
- ▶ Maternity leave
- ▶ Flexible return to work options
- ▶ Onsite child care
- ▶ Private areas to breastfeed or express milk
- ▶ Managerial support

# Easy Ways to Support Breastfeeding Employees

- ▶ Time and space to express milk regularly
  - ▶ Support from managers, supervisors, and colleagues
  - ▶ Information on how to successfully combine breastfeeding with employment
  - ▶ Access to health professionals who can assist with breastfeeding questions and concerns
- 



# Milk Storage Options

- ▶ Many personal use pumps come with a bag/cooler for milk storage
  - ▶ The employee may supply her own cooler
  - ▶ Office may choose to provide a small college dorm room sized refrigerator located in the designated lactation space
  - ▶ A public shared refrigerator could be used if desired by employees and co-workers
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# Time to Express milk

- ▶ Suggested Time Needed
  - Two to three 15–20 minute breaks during a typical 8 hour work period (plus travel time to the designated lactation space)
- ▶ Options
  - Use regular allotted breaks and lunch period
  - Allow flex time
  - If excess time is needed it should be negotiated between supervisor and employee

# Resources

- ▶ *Eat Smart North Carolina: Businesses Leading the Way in Support of Breastfeeding*
  - <http://www.nutritionnc.com/breastfeeding/PDFS/ESMMBreastfeed-HiRez.pdf>
- ▶ North Carolina Breastfeeding Coalition
  - Trained “Business Outreach Workers”
  - Referral source for local health care experts and breastfeeding support
  - <http://www.ncbfc.org>
- ▶ HRSA Business Case for Breastfeeding
  - Employee/Employer materials
  - <http://www.womenshealth.gov/breastfeeding/government-programs/business-case-for-breastfeeding/index.cfm>

# References

- ▶ Health Resources and Services Administration. *Implementing The Business Case for Breastfeeding in Your Community*. 2008
- ▶ Agency for Healthcare Research and Quality (AHRQ). (2007). Breastfeeding and maternal and infant health outcomes in developed countries. Evidence Report: Technology Assessment, Number 153.
  - [www/ahrq.gov/downloads/pub/evidence/pdf/brfout/brfout.pdf](http://www.ahrq.gov/downloads/pub/evidence/pdf/brfout/brfout.pdf)
- ▶ American Academy of Pediatrics. (2005). Breastfeeding and the use of human milk. *Pediatrics* 115(2), 496–506.
- ▶ Mason G. Roholt S. 2006. Promoting, Protecting and Support Breastfeeding: A North Carolina Blueprint for Action. North Carolina Division of Public Health, Raleigh, NC.  
<http://www.nutritionnc.com/breastfeeding/PDFS/bf-stateplanFINAL.pdf>
- ▶ U.S. Centers for Disease Control and Prevention. (2010). National Immunization Survey. Available online at:  
<http://www.cdc.gov/breastfeeding/data/reportcard.htm>

# Contact Information

- ▶ For additional information related to the North Carolina Office of State Human Resources Lactation Policy please contact Charlene Shabazz at:
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