**Family Friendly New Mexico – Business Toolkit**

**Breastfeeding / Lactation Support**

**Definition: Policies that support employees who choose to continue providing their milk for their infants after returning to work.**

**According to the U.S. Health and Human Services, Health Resources and Services Administration:**

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| Breastfeeding employees miss work less often |  | Breastfeeding lowers healthcare costs |  | Worksite lactation support contributes to lower turnover, higher productivity and loyalty |

**What are the benefits of offering Breastfeeding support?**

Better infant health means fewer health insurance claims, less employee time off to care for sick children, and higher productivity. Families who follow optimal breastfeeding practices can save $1,500 in expenditures on infant formula in the first year alone. A study published in 2010 in the Journal of Pediatrics estimated that if 90% of US families followed guidelines to breastfeed exclusively for six months, the US would annually save $13 billion from reduced medical and other costs (Bartick & Reinhold, 2010).

Mutual of Omaha found that health care costs for newborns are three times lower for babies whose mothers participate in the company’s employee maternity and lactation program. Breastfeeding has also been shown to influence the cognitive and emotional development of children (Del Bono and Rabe 2012). CIGNA Insurance Case Study found lactation programs resulted in 77% reduction in lost work time due to infant illness (annual savings of $60,000) (Dickson, 2004).

**Employers can help by:**

* Starting or maintaining high-quality lactation support programs for employees, that include milk expression breaks and providing clean places for mothers to breastfeed,
* Providing additional supports such as breastfeeding equipment, education on prenatal and postpartum breastfeeding, and staff support from supervisors and coworkers.
* Establishing paid maternity leave for employed mothers.

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| **Sample Lactation Support Policies** | |
| **Breastfeeding Support** | * WomensHealth.gov <https://www.womenshealth.gov/breastfeeding/employer-solutions/index.html> * <https://www.womenshealth.gov/files/assets/docs/breastfeeding/employer-solutions/samplepolicy.pdf> |

Healthy People 2020 set breastfeeding goals because it is so important to the overall health of babies and mothers. New Mexico has similar breastfeeding prevalence to US and is doing slightly better in exclusive breastfeeding.

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| **Breastfed** | **New Mexico** | **U.S.** | **Healthy People Target** |
| Ever | 85.5% | 81.1% | 81.9% |
| At 6 Months | 51.1% | 51.8% | 60.6% |
| At 1 Year | 29.5% | 30.7% | 34.1% |
| Exclusively through 3 months | 52.0% | 44.4% | 46.2% |
| Exclusively through 6 months | 26.6% | 22.3% | 25.5% |
| CDC National Immunization Survey, 2013 Births | | | |

**Federal Law Regarding Breastfeeding:** [Section 7 of the FLSA](https://www.dol.gov/whd/nursingmothers/Sec7rFLSA_btnm.htm) requires employers to provide reasonable break time for an employee to express breast milk for her nursing child for one year after the child's birth. Employers are also required to provide a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk. **The break time requirement became effective when the Affordable Care Act was signed into law on March 23, 2010.** The Wage and Hour Fact Sheet #73 “Break Time for Nursing Mothers under the FLSA. ” For basic information about the law go to: <https://www.dol.gov/whd/regs/compliance/whdfs73.htm>

**Business Checklist**

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| What are our next steps? | Who is taking the lead? |
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**Citations:**

Bartick, M., Reinhold, R., (2010). The Burden of Suboptimal Breastfeeding in the United States: A Pediatric Cost Analysis. Journal of Pediatrics. March 2010.

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