

Background

Although many public health agencies recommend breastfeeding,¹ it can be difficult to find opportunity to do so in the preservice education setting. A 2005 qualitative study of McMaster University's family medicine residency program found that "[p]regnancy and early parenting were made more stressful by the long and unpredictable hours of work, psychological pressure to avoid 'giving in' or 'asking for help', and occasionally, unsympathetic preceptors."² In addition, many residents had work-related difficulties producing milk, "which they attributed to heavy workloads and sleep deprivation that led to premature weaning."² Half of those surveyed would have liked to have been able to breastfeed longer but could not do so due to the demands of their job and to the lack of supportive workplace infrastructure (e.g., scheduled breaks, breast pump, etc.).

Description

The Cambodian and American governments require large employers to provide time for mothers to breastfeed. In Cambodia, "Labor Law Article 186 states that enterprises with at least 100 women are required to provide day-care centers or pay child-care fees, provide one hour of paid time off for breastfeeding mothers, and provide nursing rooms at or near the workplace."³ In the US, the Patient Protection and Affordable Care Act requires all US employers with 50 or more employees to "to provide reasonable break time for an employee to express breast milk for her nursing child for one year after the child's birth each time such employee has need to express milk. The employer is not required to compensate an employee receiving reasonable break time for any work time spent for such purpose."¹

This is also practiced in the health and medical field. In McMaster University's family residency program, some residents' placements have lactation facilities on-site. Whereas "[t]raditionally, physicians do not have scheduled breaks in their working day,"² residents in these placements can negotiate with their supervisors to take breaks to pump or breastfeed.

Results

Reviewers rated this practice as featuring the following gender transformative characteristics:

- Transform family, school, and/or work arrangements so that women are not economically or socially penalized/disadvantaged for caregiving (*critical criterion*)
- Change or attempt to change an imbalance of power or otherwise level the playing field (*critical criterion*)
- Introduce, make use of, or further the (existing) legal protections for women.

By legitimizing caregiving in the workplace, this practice levels the playing field for breastfeeding women. The legislative provisions for this practice in Cambodia and the US also strengthen protections for breastfeeding women in the legal system. In practice, little evidence is available on its implementation or its ability to transform arrangements in preservice education settings. However, an article on McMaster University's family residency

program did note that not all residency placements support lactation breaks, so lactating residents' experiences vary widely.²

Summary conclusions

More documentation is needed on the practice's implementation in educational institutions and its effects on faculty and students. However, lactation breaks have the potential to facilitate the dual roles of faculty members and students who are also lactating mothers.

Reference(s) and source(s)

1. National Conference of State Legislatures. September 2010. Breastfeeding Laws. <http://www.ncsl.org/default.aspx?tabid=14389> (accessed June 8, 2011).
2. Walsh, Allyn, Michelle Gold, Phyllis Jensen, and Michelle Jedrkiewicz. 2005. "Motherhood during residency training: Challenges and strategies." *Canadian Family Physician* 51(7): 990-991. <http://171.66.125.180/cgi/reprint/51/7/990> (accessed June 8, 2011).
3. Greater Access to Trade Expansion (GATE) Project. 2009. Promoting Gender Equitable Opportunities in Agricultural Value Chains: A Handbook. USAID Office of Women in Development. http://www.usaid.gov/our_work/cross-cutting_programs/wid/pubs/GATE_Gender_Ag_Value_Chain_Handbook_11-09.pdf (accessed June 10, 2011).