

Presentation Title	Place in Schedule
<p>Barriers Associated with Discontinued Breastfeeding after Returning to Work among NH WIC Mothers</p>	<p>Concurrent Session 2.1 <i>Day 2 – Wednesday</i> <i>May 9th, 2018</i> <i>2:30 – 3:45pm</i></p>
Description of Presentation	Presenter Name(s) And Credentials
<p>Background: In 2011, a collection of health and breastfeeding data for women participating in the federally funded Women, Infants and Children (WIC) Supplemental Nutrition Program demonstrates that, while NH mothers participating in WIC initiated breastfeeding 70% of the time after delivery, only 11% continued breastfeeding through the first year. Healthcare, workplace, community and family support all play a vital role in helping mothers reach their breastfeeding goals. Studies have found that women with a lower income and less education face a variety of barriers, including familial support and workplace accommodations that lead them to stop breastfeeding or early weaning. The goal of this study is to explore the impact of work on breastfeeding disparities among WIC women in NH. This information may help inform policy and practice recommendations for comprehensive lactation support programs as part of overall health promotion programs that support working mothers.</p> <p>2</p> <p>Methods: A random sample of WIC clients from the four NH Agency WIC Programs was surveyed (n = 680) using a combination of electronic survey (Qualtrics) and a two-page paper document. Analysis was done in Qualtrics and Excel, focusing on distribution of breastfeeding status, employment status, occupation and industry, employer lactation policies and accommodations, coworker support, and reasons for stopping breastfeeding.</p> <p>Results:</p>	<p>Karla Armenti, MS, ScD <i>University of New Hampshire</i></p> <p>Lissa Sirois, RD, IBCLC <i>NH Department of Health and Human Services</i></p> <p>Margaret Henning, MA, PhD <i>Keene State College</i></p>

Stay at home mothers were more likely to breastfeed than mothers who work either part time or full time (30%).

Women working

full time were less likely to breastfeed (14%) than women working part time (23%). The majority of those currently working have

jobs in Health Care and Social Assistance, Retail Trade, Accommodation, and Food Service and Other Services industries. 67%

of mothers reported their workplace does not offer maternity leave options. Only 13% of mothers have seen or are aware of their

workplace policy on breastfeeding. 40% of women reported they do not have a private place available to them to pump/express

milk at work. 35% of mothers reported that they would have continued breastfeeding if it was easier to pump at work. 62%

responded that having flexible time or hours would have made it easier to pump at work.

Conclusions:

Our findings indicate that there is much room for improvement in developing supports for breastfeeding moms who work,

particularly in low-income, part time, and service oriented industry groups. While this study does not compare breastfeeding

status among the WIC population to that of the general population, it is evident that going back to work has a substantial

influence on breastfeeding continuation for women enrolled in the WIC program. In addition, many of these women report that

they would have continued breastfeeding longer if it were easier to pump at work. Interventions in the workplace should focus on

a total worker health approach, including the assurance of a safe and healthy place to work and the infrastructure to support a

work-life balance that promotes employee well-being and contributes positively to the workplace.