



World Breastfeeding Week 2019

Protect Breastfeeding in the Workplace

Maternity Protection is key to enable breastfeeding and empower parents for a successful implementation of recommended breastfeeding practices.

Breast milk is the best food and the safest option to ensure good health and ideal growth of young children. The World Health Organization (WHO) recommends initiation of breastfeeding within one hour of birth, exclusive breastfeeding for the first six months of life, and continued breastfeeding for up to two years or beyond, along with nutritionally adequate and safe complementary foods.

Women who breastfeed their babies have a lower risk of breast and ovarian cancer, improved birth spacing, and may also have a lower risk of diabetes and overweight/obesity.^{1,2} Breastfeeding protects children against morbidity and mortality due to infectious diseases. Further, breastfed children have a lower risk of dental malocclusion and have higher intelligence scores than children breastfed for shorter periods of time or not breastfed.^{1,3} The scaling up of breastfeeding, in accordance with best practice recommendations, to a near universal level could prevent 823,000 deaths in children under age 5 and 20,000 deaths in women from breast cancer, annually.^{3,4,5}

It has been found that babies who start breastfeeding more than one hour after birth have a higher risk of dying (1.3 times higher if breastfeeding initiated between 2–23 hours after birth, and 2 times higher if initiated at 24 hours or after). The protective effect of early initiation is therefore highly significant, whether or not there is exclusive breastfeeding subsequently.²

Despite available evidence, worldwide only 45% of children begin breastfeeding within the first hour after birth; two out of five children under 6 months of age are exclusively breastfed, and only 45% of young children continue to be breastfed during their first two years of life. The situation in the Region of the Americas is not very different: 54% of children are breastfed within the first hour of life, 38% are breastfed exclusively until 6 months of age, and 32% continue to be breastfed for the first two years of life.⁶ Significantly scaled-up measures must be taken in order to achieve the global breastfeeding target for 2025, of increasing exclusive breastfeeding in the first six months to at least 50%.

These low rates of breastfeeding are mainly due to the lack of adequate implementation and monitoring of regulatory measures to protect, promote and support the right to breastfeeding. These include the adoption and monitoring of the International Code of Marketing of Breast-milk Substitutes, as well as relevant resolutions of the World Health Assembly; implementation of the Baby-friendly Hospital Initiative, and the implementation of a maternity rights policy compatible with the Maternity Protection Convention and Recommendations of the International Labour Organization (ILO), which is the focus of the current World Breastfeeding Week.

Enabling Breastfeeding through Maternity Protection

In order to support breastfeeding, PAHO/WHO recommends that employers implement policies including paid maternity leave, flexible or reduced working hours for breastfeeding mothers, paid breaks for breastfeeding, and a dedicated room for breastfeeding in the workplace that is private and hygienic.

In addition to the implementation of these policies, PAHO/WHO advises that governments should also implement maternity protection legislation and related measures consistent with the International Labour Organization's 2000 Maternity Protection Convention and Maternity Protection Recommendation. This Recommendation calls for at least 18 weeks of paid maternity leave for new mothers as well as paid breastfeeding breaks and hygienic facilities in the workplace.

In multivariate statistical models, paid break guarantees for at least six months were associated with an 8.9 percentage point increase in exclusive breastfeeding. Findings from an USA study showed that lactation rooms and breaks to express breastmilk increased breastfeeding at six months by 25% (95% CI 9–43).^{4,7}

The benefits to employers supportive of breastfeeding in the workplace include a more contented and productive workforce with lower absenteeism, increased loyalty and lower staff turnover. A review by Labbok (2015) found that maternity leave, paid leave and/or workplace accommodation were important factors in mothers' decisions about when to return to work. These factors also impacted

positively on breastfeeding duration, resulting in improved health and development outcomes for children, reduced health care costs for the company and the nation, with resultant lower morbidity and mortality rates.^{8,9,10}

However, women who plan to return to paid work after giving birth are less likely to initiate or continue breastfeeding, especially if the workplace support is minimal or absent. Short maternity leave (less than six weeks) leads to a fourfold increase in the odds of either not establishing breastfeeding or early cessation of breastfeeding.¹⁰

International Labour Organization (ILO) Conventions have been powerful tools to protect the maternity and breastfeeding rights of employed women. The Conventions refer to direct health protection, maternity leave, cash and medical benefits, health protection, employment security and nondiscrimination. ILO Convention No. 183 adopted in 2000, extended the period of maternity leave and emphasized that it is applicable to all employed women, including those in atypical forms of dependent work (e.g., agricultural workers).¹¹

These protections mean that while pregnant or breastfeeding, a woman is not obliged to perform work prejudicial to her health or that of her child, that she should be entitled to at least 14 weeks of paid maternity leave, including 6 weeks of compulsory postnatal leave and cash benefits which ensure that the woman can maintain herself and her child in proper health conditions and with a suitable standard of living.¹¹

Employment security—including protection from dismissal during pregnancy, maternity leave, leave for maternity-related illness or complications, and for a period after the woman returns to work—is also essential, as well as breastfeeding breaks or a reduction in working hours to accommodate breastfeeding.^{11,12}

The current situation in the Region of the Americas (presented in Table 1) is:

- Only three countries—Chile, Cuba, and Venezuela—provide paid maternity leave for 18 weeks or longer, while another eight countries have paid maternity leave for 14 to 17 weeks.
- 15 countries have paid paternity leave, ranging from 2 to 14 days. In Chile, mothers and fathers may share 12 weeks in addition to 18 weeks maternity leave. In Cuba, 18 weeks maternity leave may also be shared by the father.
- 17 countries have paid breastfeeding breaks for at least an hour.

Maternity Leave

Compared to its predecessors, Convention No. 183 mandates a longer minimum leave period: 14 weeks, up from 12 weeks in the previous Conventions.¹¹ Its accompanying Recommendation No. 191 suggests that the members should try to increase the period of paid maternity leave to at least 18 weeks.¹³

All three Conventions on maternity protection (No. 3 of 1919, No. 103 of 1952 and No. 183 of 2000) provide for a compulsory leave period of six weeks after the birth of a child, during which the mother should not be required to work. This is intended to protect the woman from being pressured to return to work. With the adoption of Convention No. 183, some flexibility was introduced concerning the

provision of compulsory leave; the Convention opens the possibility for agreements to be made at the national level on the arrangement of compulsory leave.

Except for the period of six weeks' compulsory postnatal leave, Convention No. 183 does not stipulate how the maternity leave should be distributed before and/or after childbirth, and Recommendation No. 191 emphasizes the advantages of providing women with flexibility in this regard.

Breastfeeding Breaks

Since the first Convention on maternity protection (No. 3 of 1919), nursing breaks for breastfeeding mothers during working hours have been part of the international standards on maternity protection. Convention No. 3 stated that a nursing mother should be allowed 30 minutes twice a day during her working hours for this purpose. Convention No. 103 of 1952 and Convention No. 183 of 2000 leave it to national laws and regulations to decide the number and duration of nursing breaks, as long as at least one break is provided. Convention No. 183 also introduced the possibility of transforming daily breaks into a daily reduction of hours of work.¹¹

Nursing Facilities

Recommendation No. 191 suggests that provision be made for the establishment of facilities for breastfeeding under adequate hygienic conditions at or near the workplace. Concerning the financing of such facilities, as formulated, Paragraph 9 of the Recommendation leaves the question open about whether such facilities should be established through public or private means.¹³

Women in Informal Employment

Informality is associated with changes in the employment relationship which shift the risks associated with variations in product demand and labor market adjustment to the worker. Such changes have led to the increasing frequency of employment without contract, as well as increases in fixed term and temporary employment, subcontracting and other flexible forms of employment.¹⁴ Increasing informality is also associated with reduction in employer-provided social protection arising from welfare reforms. In terms of self-employment, informality is associated with the exclusion of the self-employed from formal social protection programs, and their vulnerability to changes in product demand.

The earnings of women in informal employment are low relative to those of women in formal employment, and closer to the poverty line. This is especially the case for domestic work. Secondly, there is a large gender earnings gap in informal employment, which is pronounced for the self-employed, although less pronounced for workers in microenterprises.¹⁴

In Latin America, Uruguay passed domestic labor laws in 2006 that created regulations to protect domestic workers, which included maternity benefits as well as access to social security benefits.¹⁵ In the Caribbean, Jamaica has provisions to allow domestic workers who contribute to the National Insurance Scheme to claim a maximum of eight weeks maternity leave allowance.¹⁶

Guaranteed Monetary Support

Convention No. 183 includes an article which states that guaranteed monetary support shall be provided, in accordance with national laws and regulations, or in any other manner consistent with national practice, to women who are absent from work on leave. To conform with Convention No. 183, the guaranteed monetary support paid during maternity leave should be at least two-thirds of a woman's previous earnings, or a comparable amount if other methods are used to determine cash benefits, for a minimum of 14 weeks.¹⁶

Paternity Leave

Not many countries in the Americas have legislation for paternity leave. In a few countries, the available leave is shared between mother and father. However, it should be recognized that paternity leave can be very beneficial to families, as the fathers can also establish a relationship with the newborn as well as play a major role in supporting mothers post-delivery and throughout the lactation period.¹⁶

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What Should Governments Do?

Governments should ensure that the following measures are in place for maternity protection:

- 1) Ratification, implementation, and monitoring of the ILO Conventions to provide at least 18 weeks of paid maternity leave, paid breastfeeding breaks or reduction of hours, hygienic nursing facilities;¹³
- 2) National legislation reflecting the terms of the Conventions;
- 3) Widespread campaigns to inform employers and the women they employ about the entitlements; and
- 4) The extension of protections into all employment sectors.

Some countries already have stronger regulations in place than those specified in the Convention, and these regulations should be maintained and monitored. The Maternity Protection Convention, which is active in many countries, may be able to assist in advocacy work with employers, trade unions, etc.

Table 1. Maternity Protection Situation in the Americas

Country	Maternity Leave	Salary Earned during Maternity Leave (%)	Paternity Leave	Breastfeeding Breaks
Antigua and Barbuda	13 weeks	60	0	N/A
Argentina	13 weeks (90 days)	100	2 days	Two 30-min breaks until 1 year old
Bahamas	12 weeks	100	7 days (unpaid)	N/A
Barbados	12 weeks	100	0	N/A
Belize	14 weeks	100	0	N/A
Bolivia	13 weeks (90 days)	90	3 days	N/A
Brazil	17 weeks	100	5 days	Two 30-min breaks until 6 months
Canada	17 weeks	55	0*	N/A
Cayman Islands	12 weeks	100	0	N/A
Chile	18 weeks + 12 weeks (for mother/father)	100	5 days (and may share the 12 weeks)	1-hour break until 2 years
Colombia	14 weeks	100	8 days	Two 30-min breaks until 6 months
Costa Rica	16 weeks	100	0	15 min every 3 hours
Cuba	18 weeks	100	Parents can choose who stays home until child is 1 year old	One 1-hour break until 1 year old
Dominica	12 weeks	60	0	N/A
Dominican Republic	12 weeks	100	2 days	Three 20-min breaks per day
Ecuador	12 weeks	100	10 days	2 hours per day until 9 months old (private)/12 months (public)
El Salvador	12 weeks	100	2 days	1-hour paid (can be split into 2 breaks)
Grenada	12 weeks	8 weeks at 100% + 4 weeks at 60%	0	N/A
Guatemala	12 weeks	100	2 days	Two 30-min breaks until 10 months
Guyana	13 weeks	70	0	N/A
Haiti	12 weeks	100	0	N/A
Honduras	12 weeks	100	0	Two 30-min breaks until 6 months
Jamaica	12 weeks	100% for 8 weeks	0	N/A
Mexico	12 weeks	100	5 days	Two 30-min breaks
Nicaragua	12 weeks	100	0	15 minutes every 3 hours
Panama	14 weeks	100	0	15 minutes every 3 hours
Paraguay	12 weeks	100	3 days	Two 20-min breaks
Peru	14 weeks	100	10 days	1 hour per day until 1 year old
St. Kitts and Nevis	13 weeks	65	0	N/A
St. Lucia	13 weeks	65	0	N/A
St. Vincent and the Grenadines	13 weeks	65	0	N/A
Suriname	0	0	0	N/A
Trinidad and Tobago	14 weeks	100	0	N/A
United States of America	0	0**	0	0
Uruguay	12 weeks (private) 13 weeks (public)	100	3 days (private) 10 days (public)	Two 30-min breaks
Venezuela	18 weeks	100	14 days	Two 30-min breaks (if nursery available); Two 1-hour breaks (if no nursery available).

N/A: not available

* Unpaid leave of absence up to 37 weeks, which may be shared by both parents, but shall not exceed the aggregate period of 37 weeks for both employees.

** The United States legislation provides 12 weeks of disability, which can sometimes be used for maternity leave.

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