UNITED STATES BREASTFEEDING COMMITTEE

STATEMENT ON PAID FAMILY LEAVE

It is the position of the United States Breastfeeding Committee that guaranteed paid leave associated with the birth or adoption of a child is a vital component of maternal and child health and should be available for all parents across the United States.

The U.S. Breastfeeding Committee affirms the critical need for guaranteed paid family leave to support family bonding and caregiving, allow women to successfully combine their reproductive and employment roles, and to prevent unequal treatment in the workplace. Paid family leave provides crucial protections to preserve the health of both mother and child, as well as to provide job security, maintenance of wages and benefits, and the right to resume paid employment. Additionally, paid family leave is linked to increased employee retention, reduced employee turnover and worker replacement costs for employers, increased worker productivity, reduced health care costs, and a reduced need for public assistance.

All major medical authorities recommend exclusive breastfeeding for the first six months of life, followed by continued breastfeeding until at least one year of age. While 80 percent of babies born in the United States start out breastfeeding, six in ten breastfeeding mothers stop breastfeeding earlier than they intend. By six months of age, only 22 percent of U.S. infants are exclusively breastfed.

A major barrier to breastfeeding in the United States is the social and economic pressure for women to return to paid employment soon after birth. More than half of mothers enter or return to the labor force before their children turn one year old, with as many as one in four women returning within two weeks of giving birth.

Research shows a relationship between a woman’s decision to start and continue breastfeeding and the length of maternity leave available to her. Mothers who return to work before six
weeks postpartum are over three times more likely to stop breastfeeding than women who did not return to work.¹¹ Research also shows that mothers who return to full-time employment shortly after giving birth are less likely to breastfeed as long as they intend.¹² In California, access to paid family leave doubled the median duration of breastfeeding for all new mothers who used it during the first six years after the state’s law went into effect in 2004.²

Increasing access to paid family leave is especially crucial among low wealth and vulnerable populations. Only 13 percent of workers in the United States have access to paid family leave. Among low-wage workers (those in the lowest 25 percent of wage earners), this number drops to 5 percent.¹³ Further, there are significant disparities in access to paid family leave between racial groups.¹⁴ At the same time, disparities in breastfeeding outcomes between racial groups persist. In 2012, 66 percent of black infants had ever been breastfed, compared to 83 percent of white infants.⁷

The United States currently ranks 57th globally in infant mortality¹⁵ and 48th in maternal mortality.¹⁶ In both developed and developing countries, paid maternity leave has been found to be associated with significantly lower neonatal, infant, and child mortality rates.¹⁷ Newborns whose mothers take longer leaves are more likely to be taken to the pediatrician for regular check-ups and more likely to be breastfed.¹⁸ Men who take two or more weeks off after the birth of a child are more involved in the direct care of their children nine months later compared with fathers who take no leave.¹⁹

Maternity protection has been a core issue for the International Labor Organization (ILO), recognizing that expectant and breastfeeding mothers require protection to ensure adequate time to give birth, recover, and breastfeed their children. Current ILO Conventions call for a period of maternity leave of no less than 14 weeks (Convention No. 183, Article 4(1)), with cash benefits at no less than two-thirds of the woman’s previous earnings (Convention No. 183, Article 6(3)), provided through compulsory social insurance or public funds (Convention No. 183 Article 6(8)). These Conventions apply to all employed women including those in atypical forms of dependent work such as part-time, informal, casual, or seasonal; contractual, remote, or
piecework; or self-employed. The USBC calls on policymakers and leaders in business, government, and labor to support implementation of these Conventions in the United States.

A supportive workplace environment means more than paid family leave following the birth or adoption of a new child. Universal access to paid family leave, coupled with workplace lactation accommodations that include break time and a private space for breastfeeding employees to express breast milk during the work day are crucial steps toward preserving the opportunity for both parents to meet their caregiving goals and advancing the rights, health, and economic security of women and their families.

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