

**Written Statement of
the Academy of Nutrition and Dietetics
Before the United States House of Representatives
September 27, 2021**

Dear Speaker Pelosi, Minority Leader McCarthy, members of the U.S. House of Representatives:

The **Academy of Nutrition and Dietetics** submits this letter to the U.S. House of Representatives in full support of the **Providing Urgent Maternal Protections (PUMP) for Nursing Mothers Act (H.R. 3110)**.

Representing more than 112,000 credentialed nutrition and dietetics practitioners, the Academy of Nutrition and Dietetics is the world's largest organization of food and nutrition professionals. The Academy is committed to improving the nation's health and advancing the profession of dietetics through research, education and advocacy. Our vision is a world where all people thrive through the transformative power of food and nutrition. Our mission is to accelerate improvements in global health and well-being through food and nutrition.

The Academy's impact goals include increasing equitable access to food, nutrition and other life-style related services. As an organization that is overwhelmingly composed of women in the workforce, the struggle to balance professional responsibilities and motherhood is well-known to our members as is the nutritional case for breastfeeding and its continuance despite returning to work. Thus, for the Academy, the issue of workplace accommodations for breastfeeding women is both personal to our members and their health and professional given the unquestionably essential role of human milk in early nutrition for infants.

For over a decade--truly since the passage of the Affordable Care Act--the Academy has advocated for legislation addressing workplace accommodations for mothers doing their best to meet the demands of earning a wage, caring for their infants and protecting their own health but who work for employers not included in existing law.

Women choosing to continue breastfeeding after returning to work should be supported in this very personal yet consequential decision that carries life-long outcomes for both mom and infant.

It is unfortunate that such an important decision is often not supported or understood by employers who benefit directly. In one study, only 40% of mothers reported having access to both break time and a private space to pump while on the job.¹ There is also inconsistency regarding how employers meet legal requirements to accommodate breastfeeding workers, even for those currently covered by the law. As shared in the media, stories from women employees report janitorial and other closets as the designated pumping location and reveal barriers faced by moms requesting an unpaid break.²⁻⁴

A key recommendation of the *2020-2025 Dietary Guidelines for Americans* is, "For about the first 6 months of life, exclusively feed infants human milk."⁵ Sadly, among women who work full-time, only 10% of those who started breastfeeding their babies will still be breastfeeding by the time their infant reaches six-month of age.⁶ The anticipation and apprehension associated with how to continue to breastfeed after returning to work prevents some moms from even initiating breastfeeding.⁷

There are three key reasons that Congress should pass the PUMP for Nursing Mothers Act: 1) Human milk offers superior nutrition and health benefits compared to infant formula, 2) employers benefit from breastfeeding moms who return to work and 3) increasing breastfeeding initiation and duration are public health priorities of the United States. Examining the rationale more closely demonstrates the positive outcomes expected with passage of the bill.

1. Human Milk Offers Superior Nutrition and Health Benefits Compared to Infant Formula

The Academy has previously noted that "...exclusive breastfeeding provides optimal nutrition and health protection for the first 6 months of life and breastfeeding with complementary foods from 6 months until at least 12 months of age is the ideal feeding pattern for infants. Breastfeeding is an important public health strategy for improving infant and child morbidity and mortality, improving maternal morbidity, and helping to control health care costs. Breastfeeding is associated with a reduced risk of otitis media, gastroenteritis, respiratory illness, sudden infant death syndrome, necrotizing enterocolitis, obesity, and hypertension. Breastfeeding is also associated with improved maternal outcomes, including a reduced risk of breast and ovarian cancer, type 2 diabetes, and postpartum depression. These reductions in acute and chronic illness help to decrease health care related expenses and productive time lost from work."⁸

2. Employers Benefit from Breastfeeding Moms Who Return to Work

Aside from nutrition and the health benefits to the mother and baby, employers gain from women who continue to breastfeed after returning to work. First, breastfeeding employees miss work less often. One-day absences to care for a sick infant or child happen twice as often for mothers who chose to feed their infants formula.⁹ Second, since breastfeeding is associated with lower health care costs for mother and baby, employers also benefit from lower medical insurance claims. One insurance company, CIGNA, found that 343 employees participating in a worksite lactation support program resulted in an annual savings of \$240,000 in health care expenses, 62% fewer prescriptions and \$60,000 savings related to absenteeism rates over a two-year period.¹⁰ Finally, for businesses that offer a worksite lactation program, there are even greater tangible benefits to the employer. These include lower turnover rates and absenteeism for working women, fathers and partners; additional health care savings; higher productivity and loyalty; as well as a positive public image.¹¹⁻¹³

3. Increasing Breastfeeding Initiation and Duration are Public Health Priorities of the United States

Across federal agencies, significant resources are appropriated and authorized to encourage mothers to initiate breastfeeding and to continue after returning to work. A few examples include:

Health and Human Services

- In 2011 a landmark policy document, *The Surgeon General's Call to Action to Support Breastfeeding*,¹⁴ outlined measurable goals and objectives for stakeholders' efforts to align national policy with public health goals. While progress has been made over the past decade because of the recommended actions, there continue to be gaps and

opportunities to address policies that support breastfeeding including those related to employment and the workforce.

- The Office of Women’s Health offers support for women through published guidance¹⁵ and notably for employers through its “*Business Case for Breastfeeding*.”¹⁶

U.S. Department of Agriculture

- The Women, Infants and Children’s Program receives appropriated funds to support its peer counseling program and the program extends participation to women who continue to breastfeed for one-year post-partum.
- The 2020-2025 U.S. Dietary Guidelines for Americans led by the USDA recently added new recommendations for children from birth to two years of age. As noted, a key recommendation is that for the first 6 months of life, infants should be fed human milk. After 6 months of life, complementary foods and breastfeeding are recommended until one year of age.⁵

Centers for Disease Control and Prevention

- The Centers CDC has made breastfeeding a public health priority and encourages state health departments, hospitals and local communities to implement public health goals and align resources to support breastfeeding rates for communities of color. “Because of the importance of breastfeeding for the health of mothers and babies, CDC supports breastfeeding through hospital initiatives, work site accommodation, continuity of care, and community support initiatives.”¹⁷

The federal government advocates for breastfeeding and its continuance for working women, but laws and regulations don’t make it easy for women in all sectors of the workforce to fulfill breastfeeding public health goals and objectives.

Why will the PUMP Act help?

It is reasonable to expect that if breastfeeding and workplace accommodations are seen as public health priorities by the federal government and tax-payer dollars are used to fund programs designed to encourage and support breastfeeding for the public, that policies protecting and advancing the interest of the government’s investment should be implemented. The PUMP Act is one such policy that will eliminate barriers for women who are teachers, flight attendants and other exempt workers.

The bi-partisan PUMP Act will bring equity to nearly nine million women in the workforce and their families who currently lack protections as they seek to provide recommended nutrition to their new babies.

Women in the workforce are striving for economic stability to help support their families. The country benefits from their contributions to our economy. Instead of focusing on what happens when employees need unpaid time to feed their baby as their doctor, nutrition experts, and the U.S. government recommend, consider what happens and the cost to our nation when they do not. Through WIC, the US government provides services to approximately 53% of all US infants¹⁸. Infant formula is the most expensive item in WIC food packages and costs to the government exceeded \$927 million in fiscal year 2010.¹⁹ The direct cost to the government of providing infant formula and the related indirect cost of employee turn-over, absenteeism and most importantly, the increased health care costs of formula-fed infants make this bill a win for all parties and protects the economic interest of the U.S.

Perhaps then Federal Reserve Chair and current Secretary of Treasury Janet Yellen said it best in an essay following her 2017 remarks at the “125 Years of Women at Brown Conference” sponsored by Brown University in Providence, Rhode Island:

“...a number of factors appear to be holding women back, including the difficulty women currently have in trying to combine their careers with other aspects of their lives, including caregiving. In looking to solutions, we should consider improvements to work environments and policies that benefit not only women, but all workers. Pursuing such a strategy would be in keeping with the story of the rise in women’s involvement in the workforce, which has contributed not only to their own well-being but more broadly to the welfare and prosperity of our country.”²⁰

The Academy of Nutrition and Dietetics urges all members of Congress to vote in support of this bill because it is the right step to support babies, mothers, employers and ultimately the health and prosperity of our nation.

Thank you for your consideration,

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