

The Plan of Breast Feeding Friendly Work Place

Dr Yogesh Choukikar¹, Dr Shrinidhi Kumar K.², Dr Raj Kumar³

^{1,3}M. D. Scholar, ²Associate Professor,

Department of Kaumarbhritya, National Institute of Ayurveda, Deemed to Be University, Jaipur, Rajasthan

Corresponding Author: Dr Yogesh Choukikar

DOI: <https://doi.org/10.52403/ijhsr.20231007>

ABSTRACT

Government gives 6 months of maternity leave Breast milk is right of the baby. Even U.S didn't have this. India is better than other country for as breast feeding awareness is considered. But many private sectors will not follow this rule. We can reduce leave in the antenatal period and same will be added to post-natal life. The uneducated will feed the bay problem with educated or half educated Breast feeding is great investment because that child will be good in study, he we not fall sick he has got good emotional relationship with family members what else you need? Mother with breast fed to baby will have great self-esteem. After 6 months she has to resume to works she may stop, although dependency of the baby is less but need to continuity. After 6 month you can continue with expressed breast milk working place have a private room to express the milk and provide to the baby. Even in the home also she can express the breast milk and keep it in the refrigerators by storing it in a vessel which is also sterilized and label it.

Keywords: Breast feeding, EBM, working place, EBF

INTRODUCTION

Workplace accommodations for breastfeeding moms are mandated by law. This includes adequate break time for milk expression and a private location other than the bathroom for milk expression. Strategies for giving moms enough time to breastfeed or express milk. Flexible work schedules and locations, pumping breaks, on-site child care facilities, and job sharing are some examples. There has been a significant increase in the number of women in the employment with young children during the previous few decades. In 2012, 67.8 percent of women with children under the age of six were employed, which was more than double the ratio in 1976, when just 31.4% of these mothers worked outside the home¹.

Importance of breast feeding-

Breastfeeding is widely accepted as a method of protecting, promoting, and supporting the

health of newborns and young children. Human breast milk promotes healthy brain, immunological system, and general physiological development in babies. Breast milk has been demonstrated in studies to be an essential element in lowering the risk of common illnesses such as diarrhea and infections of the respiratory system, ear, and urinary tract. Breastfeeding may also reduce the incidence of obesity, diabetes, and several pediatric malignancies, according to research².

Breastfeeding offers obvious health benefits for mothers as well. Breastfeeding appears to lessen women's risk of breast and ovarian cancer, as well as the risk of acquiring Type 2 diabetes and osteoporosis later in life³. These advantages have led the World Health Organization and Health Canada to suggest that newborns be exclusively breastfed for the first six months, and then continue nursing with appropriate complementary

meals until they are 24 months old. As a result, more moms seek to combine job and breastfeeding and are returning to work following paid maternity leave. These women require supportive environments in order to be successful⁴.

MATERIALS & METHODS

The four structural elements of a breastfeeding-friendly workplace: -

1. Confidentiality- Employees who wish to express breast milk during the workplace requires a specific location in which to do so comfortably and safely. The necessary space is small, and the room should be strategically positioned.

Basic elements include: a private room or area with a lockable door; a clean and well-ventilated environment; and a comfortable chair, table, access to running hot and cold water, as well as soap a power outlet, refrigerator (or nearby access) for breast milk storage, adequate illumination Wastebasket Information on support services. Features that are ideal: electric breast pump/breast pump storage area Working and breastfeeding book lending library Bulletin board Access to a breastfeeding expert.

Other factors to consider- The use of a sign-up sheet for room scheduling, use of a first-come, first-served approach, disinfecting solution for clearing up spills, employee responsibility for room care and cleaning.

2. Adaptability- A job assignment should be flexible enough to allow a mother to express her milk 2-3 times during the work day (each time taking about 15-20 minutes).

Basic Characteristics- Utilize existing break and meal times, optimal features include: using lactation breaks in addition to existing break and meal periods without having to make up the time.

Other factors to consider include- the availability of on-site or "close-by" child care where a woman can go to feed her child; the ability for a child care provider to bring a child to the workplace to be fed; and the ability to work from home. Ability to "ease-back" into full-time work.

3. Instruction- Breastfeeding education should begin before to or throughout pregnancy so that all employees can make informed decisions regarding infant feeding and assist breastfeeding mothers at work. Basic characteristics include pregnancy and nursing leaflets, books, and videos. Employees have access to a variety of internal and external breastfeeding resources.

Optimal Features- Breastfeeding promotion prenatal package for all expectant employees Onsite breastfeeding classes for all expectant employees. Lactation support from an outside source Specific resources for balancing nursing and job commitments.

4. Support- Assistance from a variety of sources is an important determinant of success for a mother who wishes to continue breastfeeding after returning to work. Family, friends, coworkers, managers/supervisors, and senior management are all important sources of support for breastfeeding employees.

Basic features include- manager/supervisor training that includes information on meeting the needs of breastfeeding staff. List of community breastfeeding resources accessible, communication of how the workplace supports breastfeeding mothers, formal written policy Internal mother-to-mother support group. Development of a lactation support programme that includes employee (mothers, coworkers, etc.) participation, electronic communication channels for breastfeeding employees designated breastfeeding resource person.

Determine the Need for a Program- Gather and examine material to learn what can be done at your workplace to support breastfeeding mothers. You can accomplish this by holding focus groups with employees, distributing questionnaires, or evaluating existing information at your business. Before determining what is required, describe the program's aims and identify who should be participating and who would benefit from such assistance. Here are some examples of objectives: Prepare employees to return to work following their child's birth, boost and sustain high levels of productivity, improve

staff morale, lower absenteeism, reduce worker turnover by providing assistance to families with small children.

Create a Policy on Breastfeeding Accommodations- A formal policy describes program me aspects for managers and staff and sets the program. Employers can encourage breastfeeding women without a formal policy by educating them and providing lactation rooms. However, in the absence of a policy, these activities may only be sustained for as long as the original players are involved. Collaborate with those in your organization who are in charge of human resources policies. The policy should be adjusted to the organization's and its employees' needs.

Consider the following when designing the policy- Explain why offering assistance to breastfeeding mothers is vital to the organization and its staff.

Participation Criteria- identify who is qualified to participate in the program, what is necessary, and how to participate (flex time or paid time). Describe which department of the organization is in charge of managing support, the type of support required from supervisors, and the obligations of participating employees.

Speaking with Your Boss⁵: -

Prior to your appointment: Obtain your family's permission to continue breastfeeding after you return to work. Speak with other mothers who have continued to breastfeed after going back to work. Discover what works for them. Practice what you intend to say to your boss. Explain why breastfeeding is important to you, your baby, and the employer at your appointment. Discuss your return-to-work date and whether you can work part-time at first.

Discuss with your employer the possibility of nursing your child or expressing breast milk at work. Bring a list of things you would need to fulfill your demands, including: A private and safe setting. Availability of a washbasin with hot and cold running water if feasible, keep your breast milk in a refrigerator. Discuss any concerns or queries your employer may have.

Other Things to Think About When Returning to Work- When you return to work: If possible, return to work in the middle of the week. Working two or three days at start is easier than working a full week. If possible, return to work gradually, beginning with part-time job and eventually increasing too full-time. Take each day as it comes. Make every effort to keep up with the workload. Express your milk according to your regimen, and try to breastfeed at least once before leaving for work and as soon as possible after work. Discuss how things are going with your boss. Look after yourself. Make sure you get adequate sleep and consume a nutritious diet. Keep an additional shirt on hand and some breast pads at work.

Other suggestions for when you return to work- Plan lunches, pack the diaper bag, and lay out clothes the night before. If you use a breast pump, make sure to clean it thoroughly. Remember to freeze any ice packs you intend to use the following day. While you express or pump, listen to music, gaze at a picture of your child, or consider feeding your child. Breastfeed your infant as frequently as possible whenever you are together. When the mother arrives home from work, it is not uncommon for the infant to desire to nurse more regularly. Breastfeeding often on days off can also aid in the maintenance of your milk supply. The first few weeks will most likely be the most difficult. Following that, most mothers settle into a routine.

Breast Milk Expression and Storage- Breast milk is the best source of nutrients for your baby. Breast feeding is the most natural and usual approach to give your baby breast milk. Separation from your baby after birth, softening engorged breasts that are too firm for your infant to latch onto, or increasing milk production are all reasons to express breast milk. You can express breast milk either by hand or with a pump.

Breast Milk Expressing Suggestion- Express yourself early and often. If your infant is not breastfeeding, you should begin expressing milk as soon as possible to build your milk supply. Express yourself at least 8

times throughout 24 hours, including during the night, to maintain and/or increase your milk supply. Express each breast until it is completely drained. Make use of your hands. According to new research, gently squeezing your breasts while pumping and hand expression after pumping will assist empty your breasts and significantly enhance your milk volume.

Choose a high-quality pump. Check that the pump fits. High-quality pumps come with a variety of flange/breast shield sizes (which may need to be purchased separately). It is critical to consider your nipple size rather than your breast size. If you can see some room around your nipple as the pump is dragged into the flange/breast shield tunnel, the pump is a good fit. If your nipple rubs, the tunnel is too narrow; if more than the areola is dragged into the tunnel, it is too large. Breast milk expression is not the same as nursing. Every lady is unique. Many factors influence the amount of milk expressed, including the baby's age, the time of day, the amount of milk in your breasts, and your comfort level. A baby nursing at the breast usually does a better job of extracting milk from your breasts. More milk equals being at ease. Before turning on the pump, set it to the lowest setting. You can progressively adjust the suction setting until you reach a comfortable level. Using a higher suction setting will not result in more milk being pumped and may cause nipple injury. Imitate your baby's sucking rhythm. Babies suck quickly at the start of a feed and then gradually slow down as the milk is consumed.

DISCUSSION

Breastfeeding policies (Exosystem) Most workplaces did not have breastfeeding policies (Bridges et al., 1997; Brown et al., 2001; Dunn et al., 2004; Witters-Green et al., 2003), while some organisations that did not have a formal policy made accommodations for lactating staff members as needed (Brown et al.). 22 (14%) of the 157 Colorado firms had rules permitting the working mother to have her infant brought to her for

breastfeeding, whereas only 7 (4.4%) of the employers had a particular breastfeeding policy regarding worksite support.

Relevance to research-This overview of the literature identifies studies on human ecology in both the social and natural contexts. Longer breastfeeding periods have been associated with significant factors such as maternal characteristics, employer features, and workplace variables. Discuss findings of your study with relevant reasoning along with proper citations/references. These traits may be clarified in more detail, and it might be investigated how and when they affect duration. Research gaps can be seen at different ecosystem levels. At the personal level, studies on which traits of

Practise implications-Health care professionals must be aware of the elements that affect a mother's capacity to successfully combine breastfeeding with employment if Healthy People 2010 goals are to be met. Preconception breastfeeding counselling and promotion could be carried out through the use of flyers, films, and booklets as well as recommendations for lactation consultants. During pregnancy and postpartum visits, healthcare professionals should encourage working women and address any concerns they may have.

CONCLUSION

The rate of exclusive breastfeeding and lactation practice among female employees remains low. This could increase the risk of several health-related problems, resulting in an increase in the number of children who could benefit from exclusive breastfeeding. Furthermore, moms who did not breastfeed would not benefit from the health benefits of breastfeeding. Female employees do not receive appropriate information or support regarding breastfeeding and continued nursing after returning to work. Lactation facilities and programs in the workplace are still lacking, which may impede lactation practice. As a result, it is critical to priorities research in order to design an optimum workplace-based lactation promotion model

and assess its influence on the health and productivity of female workers.

Declaration by Authors

Ethical Approval: Not Required

Acknowledgement: None

Source of Funding: None

Conflict of Interest: The authors declare no conflict of interest.

REFERENCES

1. Employment and Social Development Canada. Indicators of well-being in Canada: Work-employment rate. Ottawa: Employment and Social Development Canada; 2014.
2. Health Canada, Canadian Paediatric Society, Dietitians of Canada, and Breastfeeding Committee of Canada. Nutrition for Healthy

- Term Infants: Recommendations from Six to 24 Months. Ottawa: Health Canada; 2014.
3. Riordan, J., Wambach, K. Breastfeeding and Human Lactation Fourth Edition. Toronto: Jones and Bartlett; 2010.
4. American Academy of Pediatrics. Policy Statement: Breastfeeding and the Use of Human Milk. Pediatrics. 2012; 129(3): 827-841.
5. Reprinted and adapted with the permission of Texas Department of State Health Services.

How to cite this article: Yogesh Choukikar, Shrinidhi Kumar K., Raj Kumar. The plan of breast feeding friendly work place. *Int J Health Sci Res.* 2023; 13(10):57-61.
DOI: <https://doi.org/10.52403/ijhsr.20231007>
