

the work and family legal center

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FACT SHEET:

Adding Workplace Protections to New York's Breastfeeding Mothers' Bill of Rights -- S-5183 (Hannon) and A-7202A (Gunther)

New York's mothers are often provided with information about the health benefits of nursing, yet many are unaware that they have rights in the workplace as breastfeeding mothers. This bill, S-5183/A-7202A, addresses this lapse by adding an explanation of workplace nursing protections to the Breastfeeding Mothers' Bill of Rights, a required educational brochure currently furnished to women by their health care providers. By educating women on their legal rights, this bill will improve the health of mothers and their babies while ensuring that a woman does not have to choose between her job and breastfeeding her child.

What the Bill Would Do

- Maternal health care facilities in New York provide the Breastfeeding Mothers' Bill of Rights (BMBOR) to new moms before and after they give birth. The brochure explains the benefits of nursing, but does not mention the legal protections for breastfeeding at work.
- S-5183/A-7202A would add a section to the BMBOR about workplace protections for breastfeeding; providing critical information to mothers and a boost to public health:
 - "You have the right to take reasonable unpaid breaks at work so you can pump breast milk for up to three years following childbirth under Section 206-c of the Labor Law. Your employer must make reasonable efforts to provide a room or other locations where you can express breast milk in privacy. Your employer may not discriminate against you based on your decision to express breast milk at work. Complaints can be directed to the New York State Department of Labor."

Why New York Needs this Bill

- Mothers who face pushback at work about nursing decisions often discontinue breastfeeding their babies for fear of losing their job or other consequences. In fact, 32% of new mothers give up breastfeeding less than seven weeks after returning to work. iii
 - Yet, continuing to breastfeed is crucial because it significantly contributes to both better maternal and infant health outcomes.^{iv} In addition, higher breastfeeding rates also provide economic savings to families, employers, and public benefit programs.^v
 - Women also face health consequences from being forced to express breast milk in an unsanitary location or being forced to wait lengthy periods before being allowed to express milk.^{vi}
- Many New York mothers stay at home or are forced out of their jobs because they do not think
 they will be able to breastfeed at work. In fact, New York has one of the worst female labor
 force participation rates in the country. vii
 - One New York working mother, Clarissa, was unaware of her rights, so she used her lunch break to pump breast milk in a restroom. When this situation became intolerable, she went to her employer who refused to provide break time and proceeded to discriminate against Clarissa for being a breastfeeding mother. In the end, Clarissa left her job because she did not realize she had legal protections to help her.



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- All mothers should have the right to choose how to feed their children with full knowledge of their legal rights. This issue affects us all, since promoting breastfeeding is "one of the most powerful tools policy-makers have at their disposal to improve the health of their people and their economies." ix
- Passing S-5183/A-7202A will help ensure our mothers and children stay healthy; thereby, improving our economy, advancing our quality of life, and reducing health care costs.

For more information or to get involved contact Dina Bakst at 212-430-5982 or dbakst@abetterbalance.org or visit our website at www.abetterbalance.org.

i N.Y. Pub. Health Law § 2505-a.

ii N.Y. Lab. Law § 206-c.

The National Women's Health Resource Center & Medela, Inc, *Breastfeeding at Work Toughest for Younger Moms and Retail Workers*, (May 2, 2007), at http://www.medelabreastfeedingus.com/media-center/13/breastfeeding-at-worktoughest-for-younger-moms-and-retail-workers.

iv Dept. of Health & Human Services, *The Surgeon General's Call to Action to Support Breastfeeding – Fact Sheet*, (Jan. 2011), at http://www.surgeongeneral.gov/library/calls/breastfeeding/factsheet.html.

V Ibid.

vi See, e.g. eMedicineHealth, Mastitis While Breast-feeding, (last accessed May 12, 2015), at http://www.emedicinehealth.com/mastitis_while_breast-feeding-health/article_em.htm.

vii New York Women's Foundation, Statement and Recommendations on The Economic Status of Women in New York State, (June 2008), http://nywf.org/wp-content/uploads/2012/05/NYEcon_Status_Report_Statement.pdf.

viii A Better Balance, *The Pregnancy Penalty: How Motherhood Drives Inequality & Poverty in New York City*, (Oct. 2014) at http://www.abetterbalance.org/web/images/stories/Documents/ABB PregnancyPenalty-Report-2014.pdf.

ix World Health Organization, WHA Global Nutrition Targets 2025: Breastfeeding Policy Brief, (2014), at http://www.who.int/nutrition/topics/globaltargets_breastfeeding_policybrief.pdf.