Guide for Establishing a Federal Nursing Mother’s Program
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INTRODUCTION

Section 4207 of the Patient Protection and Affordable Care Act (ACA) revises the Fair Labor Standards Act (FLSA) by requiring employers to provide nursing mothers with 1) reasonable break time to express milk for one year after her child’s birth each time such employee has need to express breast milk; and 2) a private space, other than a bathroom, that is shielded from view and free from intrusion of others, to express breast milk. This legislation has significant impact on worksite accommodations for nursing mothers. In the United States, over one-third of all mothers working outside the home have children younger than two years of age. Many of these mothers desire and intend to exclusively breastfeed until their babies reach six months of age, at minimum. However, according to the Centers for Disease Control and Prevention, while 75 percent of mothers in the United States breastfeed from the start, only 22% of babies are still breastfed by the twelve-month mark.

There are many reasons why nursing mothers are unable to breastfeed for as long as they desire and returning to work is a primary factor (Wenjun, & Acosta, 2002). When working mothers receive workplace support, such as adequate space and time to express milk, support from supervisors and colleagues, and education, they are often able to continue to successfully breastfeed their child. Another complicating factor is lack of privacy in the workplace, as well as the commonly held fear that nursing mothers will be perceived as less productive if they choose to express breast milk during the workday. The ACA addresses these concerns.

The American Academy of Pediatrics recommends breastfeeding exclusively for at least the first six months after birth and, ideally, until or after the child is twelve months of age. The World Health Organization, the U.S. Surgeon General’s Office, and the American Academy of Family Physicians agree. For example, the Surgeon General released a Call to Action in 2011 to support breastfeeding. Several action items were directed toward employment, such as ensuring that employers establish and maintain comprehensive, high-quality nursing mothers support programs for employees. In addition, the Healthy People Initiative, managed by the Office of Disease Prevention and Health Promotion at the Department of Health and Human Services (HHS), includes a goal for increasing the number of workplaces that provide nursing mothers support services from 25% to 38% of workplaces.

Continued breastfeeding offers a variety of noted benefits for mothers, their babies, and their employers. The ACA facilitates the continuation of breastfeeding and helps nursing mothers to better integrate their work and family needs. Many agencies go beyond the requirements of the legislation to actively support nursing mothers through various programs, resources, and facilities.
DEFINITIONS

Breastfeeding
It is difficult to assign a single definition to the term “breastfeeding,” because there are multiple behaviors that constitute breastfeeding. The term may be used in reference to full breastfeeding, partial breastfeeding, token breastfeeding, or exclusive expression of milk using a breast pump (Labbok & Krasovec, 1990). Moreover, within the categories of full and partial breastfeeding are further subtopics. Full breastfeeding is understood to be either exclusive breastfeeding (no other liquid or solid is given to the baby) or almost exclusive breastfeeding (vitamins, water, or other liquids are given to the baby occasionally in addition to breastfeeding). Partial breastfeeding includes varying levels of breastfeeding. Token breastfeeding refers to breastfeeding that is not for nutritive purposes. Rather, it is breastfeeding conducted for comfort and consolation to the infant. Token breastfeeding is minimal, infrequent, and irregular. The final category of breastfeeding is exclusive pumping. Some women may choose to exclusively pump breast milk for a variety of reasons. For example, it is sometimes more difficult to nurse babies with cleft palates or those born prematurely, or the mothers had early difficulties getting the baby to latch at the breast.

Workplace Support
As the Nation’s largest employer, the Federal Government strives to be a groundbreaker in the development of wellness programs and policies, including support for breastfeeding. The level of support provided to nursing mothers currently varies across workplaces. Support for breastfeeding in the workplace is defined by a variety of characteristics. These may include offering benefits and services to employees; educating employees about breastfeeding; providing time and space for nursing mothers to express breast milk; allowing flexible schedules for break time; providing mothers with the option to telework or work part-time; providing access to or resources for childcare; providing breast pumps or discounts to purchase breast pumps; offering lactation services and consultants; and providing an effective nursing mother’s program and facility. OPM urges agencies to support all nursing mothers to the fullest extent possible.

Private Space
A room for nursing mothers is private space a nursing mother can use to express milk. This space must be shielded from view and free from intrusion of others. A nursing mother’s room must be functional, with a private space with a place to sit and a flat surface, other than the floor, to place the breast pump and other supplies. Although there are no size or permanency requirements, these rooms should provide access to electricity for the use of a breast pump, as well as good lighting, a comfortable temperature, and proper ventilation. Further, a room for nursing mothers should be clean and agencies should provide cleaning wipes and paper towels. Nursing mother’s rooms with exceptional accommodations may include a breast pump provided
by the agency, refrigerator, microwave for sterilization of breast pump parts, comfortable chair, table, clock, mirror, and sink.

**LEGISLATIVE BACKGROUND**

The Affordable Care Act added a new subsection (r) to section 7 of the Fair Labor Standards Act (FLSA), requiring employers to provide nursing mothers with:

1) a reasonable break time to express milk for one year after her child’s birth each time such employee has need to express breast milk; and

2) a private space, other than a bathroom, that is shielded from view and free from intrusion of others, to express breast milk.

Subsection (r) applies only to employees who are non-exempt from Section 7 of FLSA. However, on December 20, 2010, President Obama delegated his authority to regulate the conduct of Executive Branch employees (see 5 U.S.C. 7301) with reference to this topic to the U.S. Office of Personnel Management (OPM), to provide appropriate workplace accommodations for Executive branch civilian employees who are nursing mothers. In accordance with this authority, Director John Berry, in a memorandum dated December 22, 2010, established that it is the policy of the Federal Government to apply the same procedures specified in subsection 7(r) of the FLSA to Executive Branch civilian employees who are exempt from section 7 of the FLSA, as well.

**Time for Breaks**

As implemented for the Executive Branch, agencies should provide nursing mothers with a reasonable break time to express breast milk whenever needed throughout the workday. The frequency and duration of time necessary to express breast milk may vary depending on the needs of the nursing mother.

**Location of Breaks**

Agencies should provide nursing mothers with a private space, other than a bathroom, that is shielded from view and free from intrusion of others to express breast milk. While the space does not need to be exclusively dedicated to this purpose, a temporary space that meets the other requirements listed above is appropriate.

**Compensation**

The legislation does not require employers to compensate nursing mothers for breaks taken to express breast milk. However, if a nursing mother chooses to use an established compensated
break time as a time to express breast milk, then she must be compensated as she normally would.

For more information, please see:

The United States Department of Labor fact sheet:

http://www.dol.gov/whd/regs/compliance/whdfs73.htm

The Office of Personnel Management Memorandum, as well as answers to frequently asked questions regarding break time and space for nursing mothers:


BENEFITS

Supportive breastfeeding policies and practices in the workplace not only benefit the working mother but also provide a number of benefits to the baby and the employer. Listed below are some of the benefits for each of the three groups.

For Agencies

Supportive breastfeeding policies and practices in the workplace can positively impact an agency’s mission. Some benefits agencies may experience include the following:

- **Productivity** – Agencies that support their employees’ use of this program facilitate greater workplace productivity. When such support is established, employees who breastfeed tend to have fewer absences and fewer instances of tardiness (than mothers who do not nurse their infants) because their infants are more resistant to sickness.

- **Organizational Loyalty** – Employees often feel increased loyalty to the agency because the implementation of an effective support program demonstrates that the agency supports the employee, her family, and her health.

- **Recruitment and Retention** – Worksite support programs serve as an attractive recruitment tool for employing top-notch candidates. These programs can facilitate positive public relations, which improve the agency image and its ability to recruit employees of the highest caliber. Agencies that offer effective programs often have higher retention rates of female employees. Such agencies have demonstrated a 94.2 percent retention rate of female employees, compared to the national average of 59 percent (Gartner, Morton, Lawrence, Naylor, O’Hare, Schanler, & Eidelman, 2005).
• **Job Satisfaction** – Having effective programs demonstrates support for employees and their health. Agencies that display support for their employees facilitate greater workplace satisfaction. There is improved morale in the workplace as well as a greater feeling of unity and closeness (Slavit, 2009).

*For Mothers*
Supportive breastfeeding policies and practices in the workplace provide significant benefits to nursing mothers, including the following:

• **Productivity** – Nursing mothers who use these programs and facilities in the workplace often demonstrate higher productivity than new mothers who do not (Berger, Hill, & Waldfogel, 2005). This is frequently attributed to a lessened emotional and psychological burden associated with being away from the baby, as well as higher energy and greater optimism.

• **Fewer Distractions** – Nursing mothers who are able to express breast milk in the workplace are better able to concentrate during the workday. A breast infection and/or a drop in her ability to produce milk can result if a mother is unable to express breast milk each time she feels the need to do so.

• **Absenteeism** – Nursing mothers who use these programs and facilities exhibit lower absenteeism (Slavit, 2009). Both mothers and fathers take fewer sick days for children’s illnesses because infants who are breastfed are often healthier and better protected from various sicknesses and infections.

• **Overall Health** – There are several noted benefits to a mother’s health if she nurses her child, including lower risks of breast and ovarian cancer, as well as a lower risk of diabetes (Labbok & Krasovec, 1990).

*For Babies*
Supportive breastfeeding policies and practices in the workplace have immediate and long-term benefits for the children of female employees who breastfeed. Some of these benefits include:

• **Health** – Babies who are breastfed experience positive impacts on their health as adults as well as better immune system development and functioning. Breastfeeding passes on antibodies to babies, which help protect their immune systems from disease. Breastfed babies tend to have fewer and less severe instances of certain short-term illnesses, including bacterial meningitis, diarrhea, ear infections, respiratory infections, urinary
tract infections; and certain chronic illnesses, including diabetes, lymphoma, leukemia, hypercholesterolemia, and asthma (Murtagh, & Moulton, 2011).

- **Obesity** – Babies who are breastfed have a reduced risk of both childhood and adult obesity (Drago, Hayes, & Youngmin, 2010).

- **Reduced Risk of SIDS** – Exclusive or partial breastfeeding is correlated with a decreased risk of sudden infant death syndrome (Vennemann et al., 2009). Exclusive breastfeeding for the first month of the baby’s life reduces the risk of SIDS by 50 percent, and partial breastfeeding for the first month of the baby’s life also considerably reduces the risk of SIDS, though slightly less so.

**AGENCY GUIDANCE: ESTABLISHING A WORKSITE PROGRAM**

To implement a successful program which meets the needs of employees and increases workplace satisfaction, the following regimen is recommended:

1. **Assess the agency’s environment** – Before creating a break time space in the workplace, assess the agency’s workforce and environment to determine the necessary logistics of a program. Consider the number of women who are likely to use the program, who should be responsible for overseeing the program, what space should be available, whether additional resources should be made available to nursing mothers, and what record-keeping by the agency will be necessary.

2. **Create a team** – If resources are available, create a team of work-life and wellness coordinators, facilities and building staff, a nurse, and a current or recent breastfeeding mother to identify the necessary components of the program and tailor the program to the specific needs of your agency’s employees. Other important staff members may include a member from the communications division, a representative supervisor or manager, and a representative co-worker to foster buy-in and support of the program. If possible, also incorporate the opinions of subject matter experts.

3. **Access resources** – Seek advice and review available resources, such as the Business Case for Breastfeeding, which is the main resource developed by HHS to address these issues. The information from this program can be downloaded from [http://www.womenshealth.gov/breastfeeding/government-in-action/](http://www.womenshealth.gov/breastfeeding/government-in-action/).

4. Other resources include OPM’s Work/Life/Wellness Office, Health Resources and Services Administration’s Maternal and Child Health Bureau, the United States Department of Agriculture Special Supplemental Program for Women, Infants, and Children (WIC), International Lactation Consultant Association (ILCA), state or local
breastfeeding coalitions, breastfeeding support professionals, and La Leche League
International.

5. *Create a break time space* – Work with the facilities and/or property management staff to
make space available for employees. Some potential spaces include a sectioned off area
of a larger room (either by permanent walls or portable partitions) or a vacant office. If
possible, the space should have an electrical outlet and be lockable from the inside, and it
should include or be near a source of hot and cold running water. Also, the room should
be cleaned frequently and employees should be provided with cleaning wipes and
disinfectant spray to wipe off the breast pumps after use.

6. *Provide Reasonable Break Time* – An agency should provide nursing mothers with
reasonable time to express breast milk. The amount of time that an employee needs to
express milk, as well as the frequency of these breaks, will vary according to each
individual’s needs. However, many mothers typically need to express their milk every 2-
3 hours. Allowing a nursing mother to express breast milk each time she has the need to
do so will help to maintain her milk supply and lower the risk of a breast infection.

7. *Establish room flexibility* – It is difficult for most nursing mothers to maintain a schedule
that can always be anticipated; therefore, the scheduling procedure for room access
should be flexible (while most nursing mothers will likely follow a daily pumping
schedule, it is important that the room have flexible access).

8. *Consider the purchase of breast pump equipment* – Determine whether the agency will
provide breast pump equipment, and if so, the type which will be provided. This is not a
requirement under Federal law, although it provides greater convenience for employees
and could therefore improve employee satisfaction. Agencies may also benefit from
providing the equipment. For example, a nursing mother will be able to express milk
more quickly and, therefore, she will have more time to focus on her work. It is
important to make sure that breast pumps are regularly calibrated and checked for proper
functioning.

9. *Publicize the program* – To ensure that nursing mothers know about the program,
publicize the program well throughout the building, on the intranet, and/or through email
updates. Providing information about the program supports employees and allows co-
workers to understand the importance of pumping breast milk for nursing mothers.
Agency recruiters should be informed of the program to discuss it with potential
employees and applicants.

10. *Educate Staff at Initial Points of Access* – Security guards or other employees located at
agency points of access should be educated about the location of the break time rooms, as
well as the name and contact information of the program coordinator. In most instances,
nursing mothers will look to these individuals for assistance in locating a private space to pump milk. Additionally, security guards should be educated about the screening procedures for breast pumps and milk. Mothers should not have to put their breast milk through a metal detector or X-ray screening machine. Security guards should use their discretion and examine the actual pump manually.

11. Educate Nursing Mothers – Many mothers, particularly new mothers, desire the education needed to establishing nursing, as well as to sustain it over time. Consider providing this information through the dissemination of education materials, onsite prenatal breastfeeding classes, postpartum support groups, orientation sessions for the program, and/or consultations with consultants.

12. Request feedback – After creating a break time space, seek input from employees to ensure their needs are being met, as well as to demonstrate the agency’s investment in the program. Such feedback could be collected via surveys or focus groups. It is important to communicate to employees that the agency is always looking for ways to improve the program and facilities.

There are a variety of options for creating a successful program in the workplace. In this regard, there are three lists below. The first list represents, at minimum, what agencies are expected to provide in their nursing mother’s programs. The second list represents provisions that go beyond the standard break time space. Finally, the third list represents provisions that are typical of state-of-the-art facilities.

**What is Expected in a Nursing Mother’s Program**

- A clean, private space (which can be temporary depending on the agency’s circumstances and employee demographics) created for the use of nursing mothers, which includes a place to sit and a flat surface other than the floor for the mothers to place their breast pump and other supplies

- Reasonable break time that supports an employee’s need to express breast milk – both in frequency and duration

**Going Above and Beyond the Standard Nursing Mother’s Program**

- In addition to the requirements of the law, a room that locks from the inside (which still allows entry from Emergency Response Personnel) or other way to secure the room from intrusion while being used

- A sink with hot and cold running water
• Access to a refrigerator to store milk, with freezer section, if possible, to freeze ice packs
• Access to electricity
• Multi-user hospital grade breast pumps provided for quick and efficient pumping
• Access to cleaning supplies (e.g., paper towels and cleaning wipes)
• Natural lighting in the provided space
• The room is kept at a comfortable temperature to ensure that nursing mothers can initiate milk flow
• A sign-up sheet, either online or posted, for use of the nursing mother’s room

Best Practices
• A clean, permanent nursing mother’s room created for the use of nursing mothers (assuming there are enough nursing mothers to warrant one)
• A room that locks from the inside (which still allows entry from Emergency Response Personnel) or other way to secure the room from intrusion while being used. A sink with hot and cold running water with high neck faucet and handle(s) and separate taps to control temperature of the water
• A refrigerator with a freezer section to freeze ice packs provided exclusively for the storage of breast milk
• Access to electricity
• Multi-user hospital grade breast pumps for quick and efficient pumping
• A daily cleaning regimen, provided by the agency
• Comfortable seating (e.g. ergonomic chairs, recliners)
• Soft lighting and calming décor
• Access to pregnancy and breastfeeding pamphlets, books, videos, and other resources
• Natural lighting in the provided space
• A sign-up sheet, either online or posted, for use of the nursing mother’s room
• A comfortable temperature to ensure that nursing mothers can initiate milk flow
• A microwave for the sterilization of materials and supplies
• Contact information for consultants and guidance counselors
• Posted information on events and classes for one or both parents
• Prenatal education during lunch breaks for both mothers and fathers (i.e., “lunch and learns”)
• Breastfeeding literature for nursing mothers that addresses common issues (e.g., maintaining milk supply)
• Prenatal and breastfeeding education for co-workers to demonstrate the necessity and benefits of pumping in the workplace
• A handbook for management that details the policy of the nursing mother’s program
• A program manager or point of contact who is available and easily accessible for information regarding the nursing mother’s program
• Opportunities for feedback to the agency from employees about the nursing mother’s program and/or rooms
• A full-length mirror to allow mothers to check/adjust their clothing before leaving the nursing mother’s room
• A clock
• A bulletin board for posting pumping schedules, notices, and photos of the mother’s babies which can encourage milk flow
• Hooks to hang mothers’ bags of attachment kits and additional items needed when using the room
FEDERAL AGENCIES WITH SUCCESSFUL WORKSITE PROGRAMS

Many Federal agencies are working towards implementing outstanding programs in their workplaces. Some Federal agencies have already succeeded in doing so and have been recognized as having outstanding programs and facilities available to nursing mothers:

National Security Agency:

- Exceptional, award-winning program in existence since the 1980s
- Breast pumps are available, as well as refrigerators and microwaves
- Over 150 women are enrolled in the program at any given time
- Over 25 on-site rooms with individual room points of contact to ensure smooth operation
- Supervisors and employees work together to provide feedback regarding the program and improve as necessary, including an annual program survey
- Monthly Nursing Mothers Program overview sessions for soon-to-be or recently returned nursing mothers
- Robust Nursing Mothers Program website and Nursing Mothers Network blog and email aliases
- Twenty-four hour access with cipher locks
- Telephone to call 911 or receive emergency calls
- Prenatal educational kits that include breastfeeding information
- Lending Library with many materials regarding breastfeeding, as well as parenting
- Live, online, and DVD educational seminars on topics such as nutrition during pregnancy and breastfeeding
- Expectant and new parent open house
- Preservation-free flu shots that are offered to expectant and nursing mothers exclusively
National Institutes of Health:

- On-site prenatal breastfeeding education classes ("How to Get Started with Breastfeeding?" and "Breastfeeding and Return to Work")
- Telephone support for those on maternity leave seeking advice and solutions to problems
- Return-to-work consultation

**On-site rooms equipped with breast pumps for employees, contractors, and visitors**

- On-site lactation consultants
- Room schedule and sign-up access
- Cleaning supplies provided in each room
- Information on the statistics and benefits of breastfeeding

Department of Energy Headquarters:

- Demonstrates support for mothers returning to work who wish to continue to breastfeed their baby
- Advocates for nursing mothers who wish to take breaks during the workday to express breast milk
- Provides a separate room within each of its health clinics
- Provides assistance or consultation for nursing mothers; one nurse is a Certified Lactation Specialist

The Congressional Program:

- A policy for the utilization of the rooms includes a sign-up for three-month increments to maintain accountability and keep a record of usage
- Twenty-four-hour access with a security code to private rooms
- Hand air dryers, paper towels, and antibacterial wipes provided to assist with cleaning
• The rooms have daily cleaning service and are checked on a daily basis for supplies and cleanliness
• Each nursing mother’s room has a sink
• Locations in multiple buildings for convenience of employees
• Comfortable leather seating and vinyl surfaces for easy clean-up with spills
• Refrigerators and microwaves in each nursing mother’s room
• Televisions for employee viewing
• Telephones without caller ID to protect privacy of the employee
• To provide the best experience for nursing employees, the Legislative Branch determined the most universally used breast pumps and have provided them in the nursing mother’s rooms
• Calming décor with soft lighting, neutral wall colors
RESOURCES

Aside from your health care provider and local consultants, the following organizations can provide additional information on breastfeeding. These organizations represent a few of the commonly-known resources and their inclusion in this Guide is for information purposes only and does not imply an endorsement of their programs or products.

American Academy of Pediatrics

The American Academy of Pediatrics provides important information and initiatives about breastfeeding for parents, professionals, and breastfeeding advocates. The website features information about the use of breast milk, the benefits of breastfeeding, and the correlation between childhood obesity and breastfeeding. Its Breastfeeding Residency Curriculum is utilized by employers and pediatricians attempting to develop an effective program in their workplaces. Additional family, community, professional, and external resources are available on the Breastfeeding section of the website.

Website: www.aap.org
Email: lactation@aap.org

National Headquarters:
141 Northwest Point Blvd.
Elk Grove Village, IL 60007
Phone: (847) 434-4000

Washington, D.C. office:
Department of Federal Affairs
601 13th Street NW, Suite 400 North
Washington, DC 20005
Phone: (202) 347-8600

LAMAZE International

LAMAZE International supports breastfeeding by promoting a natural and healthy approach to early parenting and child development. This resource provides a wealth of information on breastfeeding, as well as information for new parents on what to expect during the first months of a baby’s life. Through its toll free line, it serves as a resource to parents on childbirth classes, pregnancy, and overall parenting.

Website: www.lamaze.org
Email: Use the “Submit a Contact Request” tab under “Contact Us” on website to email the organization at:

2025 M Street NW, Suite 800
International Lactation Consultant Association (ICLA)

This association is an international organization representing lactation consultants and other health care professionals in the realm of breastfeeding care. The ILCA website also features a directory for locating a lactation consultant to assist mothers, a Worksite Lactation Support Directory for employers, and a directory to identify speakers to spread awareness about breastfeeding care and lactation.

Website: www.ilca.org
Email: info@ilca.org

2501 Aerial Center Parkway, Suite 103
Morrisville, NC 27560
Phone: (919) 459-2075
Toll free: (888) ILCA-IS-U (452-2478)

La Leche League International (LLLI)

This international organization is recognized as an authority on breastfeeding. LLLI focuses on the importance of breastfeeding as it relates to the health and development of the baby. The organization also encourages health care professionals, mothers, parents, and community members to attend any of the frequent national and international events and seminars hosted by the organization, which are posted on the website. The toll free help line is also available, as well as professional and lay publications and mother-to-mother support groups in many communities.

Website: www.llli.org

1400 N. Meacham Road
Schaumburg, IL 60173
Phone: (847) 519-7730
Toll free: (800) LALECHE (525-3243)
Fax: (847) 969-0460

National Center for Education in Maternal and Child Health

This organization is a national resource which provides information and educational sources as well as technical assistance to organizations, agencies, and individuals with maternal and child
health interests. The organization emphasizes the importance of program development, education, and knowledge as being crucial for improving the development and health of children and families.

Website: www.ncemch.org  
Email: MCHgroup@georgetown.edu

MCH Library  
Georgetown University  
Box 571272  
Washington, DC 20057  
Phone: (202) 784-9770  
Toll free: (877) 624-1935  
Fax: (202) 784-9777

**National Healthy Mothers, Healthy Babies Coalition (HMHB)**

The HMHB is a renowned leader in maternal and child health, with over 100 national, professional, voluntary, and government organizations that share a common interest in growing healthy families at the core of its collaborative efforts. The HMHB provides an innovative forum for the partnership of public and private organizations, employers, policymakers, and consumers to promote and improve culturally and linguistically appropriate, community-based services that foster healthy mothers, healthy babies, and healthy families.

Website: www.hmhb.org  
Email: info@hmhb.org

2000 N. Beauregard Street, 6th Floor  
Alexandria, VA 22311  
Phone: (703) 837-4792  
Fax: (703) 684-5968

**National Business Group on Health (NBGH)**

The NBGH is working to improve health care financing and delivery. In the realm of breastfeeding and lactation, this organization strives to improve maternal and child health status, benefits, policies, and programs with web-based resources for employers and a model health benefit plan that includes lactation support services.

Website: http://www.businessgrouphealth.org/  
Email: info@businessgrouphealth.org

20 F Street NW, Suite 200  
Washington, DC 20001  
Phone: (202) 558-3000
U.S. Department of Agriculture Women, Infants, and Children Program (WIC)

The WIC program promotes breastfeeding as being important for the healthy development of the baby, as well as the health of the mother. The program caters specifically to pregnant women who are struggling financially, women who are breastfeeding, and children under the age of five. The program distributes vouchers and also entails mandatory nutrition education, so as to promote healthy early childhood development.

Website: http://www.fns.usda.gov/wic
Email: wichq-web@fns.usda.gov

3101 Park Center Drive, Room 520
Alexandria, VA 22302
Phone: (703) 305-2746
Fax: (703) 305-2196

National Women’s Health Information Center, U.S. Department of Health and Human Services

The National Women’s Health Information Center provides information and resources on how to improve the health and overall well-being of women and girls, which includes the advocacy and promotion of the benefits of breastfeeding. The National Breastfeeding Helpline is available on the website for information on breastfeeding and lactation, and the various partnerships with other major organizations allows for the sharing of a greater wealth of information and community knowledge. One focus of these partnerships has been to understand and alleviate the disparities in the realm of breastfeeding related to race and ethnicity.

Website: http://www.womenshealth.gov
Email: Use “contact and customer feedback form” on website to email the organization

Womenshealth.gov
8270 Willow Oaks Corporate Drive, Suite 101
Fairfax, VA 22031

Office on Women’s Health
200 Independence Avenue, SW Room 712E
Washington, DC 20201
Phone: (202) 690-7650
Fax: (202) 205-2631

Helpline: (800) 994-9662
TDD: (8880 220-5446
Local Breastfeeding Specialists

Call the hotline below to find local breastfeeding specialists who can provide you with further information, resources, and programs in your area.

1-800-TELL-YOU
REFERENCES


Appendix A: Check List for Creating a Nursing Mother’s Room

What Agencies Must Provide:

☐ A non-bathroom space to express breast milk
☐ A space free from intrusion of co-workers and the public
☐ Flat surface or table (not the floor)
☐ Place to sit

What Agencies Should Provide Whenever Possible:

☐ Lock from the inside of the nursing mother’s room
☐ Sink with hot and cold running water
☐ Refrigerator
☐ Access to electricity
☐ Multi-user hospital grade breast pumps provided for quick and efficient pumping
☐ Daily cleaning regimen provided by the agency, or cleaning supplies (e.g. paper towels and cleaning wipes)
☐ Soft and/or natural lighting
☐ Calming décor
☐ Pregnancy and breastfeeding pamphlets, books, and other resources
☐ Bulletin board of posted information on events and classes for one or both parents
☐ Sign-up sheet (online or posted) for use of the nursing mother’s room
☐ Comfortable temperature
☐ Management handbook detailing the policy of the nursing mother’s program