

# A TALE OF TWO JOBS: WHEN THE BODY IS THE WORKPLACE...

## WHAT THIS SOCIAL WORKER LEARNED ABOUT BREASTFEEDING ALONG THE WAY AS A WORKING MOTHER

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*This narrative describes the socio-cultural enlightening of a social worker from her personal experiences as a breastfeeding worker. It locates breastfeeding as both a workplace issue as well as an issue of labor in itself. The lessons she learns about breastfeeding as a work-based issue are organized into three broad areas: the reframing of breastfeeding as unpaid labor; dialogue and education on breastfeeding issues as they relate to women's ability to remain engaged in the workforce; and development and dissemination of laws and policies that support breastfeeding as a work-based practice.*

Within all the attention that breastfeeding garners, the most central issue seems to get lost in the fray. We talk about a woman's right to breastfeed in public. We talk about the American Academy of Pediatrics (AAP) findings of the superiority of human breast milk. We repeatedly counter Puritanical discourse that frames breasts as sexual objects instead of being designed for feeding infants. We even talk about breast milk as a frontier of environmentalism with the high levels of toxins now affecting women's breast milk. But the central issue of breastfeeding is almost never addressed: breastfeeding as labor.

Breastfeeding is hard work. Mothers can burn over 600 calories a day from breastfeeding and must consume more food and water in order to produce an ample supply. Breastfeeding women also need rest. The most common advice received by a woman trying to increase her milk supply is to get in bed and keep from doing any other work. Breast milk is also produced by stimulus and response so the more one nurses or "expresses," the more one produces. And this takes a lot of time - another element of work besides physical labor. Mothers can spend well upwards of four hours breastfeeding around the clock daily. This nursing time tapers off, but pumping or expressing breast milk is a slower process; so a net gain of time may not ever be achieved

throughout the span of lactation. Thus, breastfeeding is a physical, necessary *job* that is often difficult to maintain within the context of paid employment.

I came to write this article specifically about its labor force implications so that I could reach out to men and women, parents and non-parents alike, and to acknowledge a gap between work and breastfeeding. For while there are many exhortations from the health sector promoting breastfeeding, few are the policies or laws that would support it as a work-based practice. From my own experiences at work I encountered many of the taboos and socially fraught arguments about where breastfeeding "belongs" while learning about becoming a professional social worker and a working mother. I want to discuss some alternative ways to frame breastfeeding that might bridge some of the gap between what's good for babies (feeding them) and the perils of being a person who tries to do so and maintain employment.

In my case as a job-attached new mom, I found myself after eight weeks of family leave back at my old desk with two jobs: my old job as a teen education worker, and my new one as a human milk lab. Anyone unconvinced that breastfeeding is not a job should know a few facts. First, the sheer work of breastfeeding was only comparable to the time I worked as

a deckhand on a salmon tender, when I could throw 500 pounds of fish in one day. I was all muscle and always hungry that summer in Alaska, and I joked that there was a neon sign in my brain demanding a steady flow of protein and anything else that could be turned into energy. Yet I have never wolfed down meals with the kind of gusto that breastfeeding produced. I wasn't standing on deck hauling fifteen-pound fish under a cold midnight rain but I may as well have been for the exertions of my calorie-consuming body.

I had been bracing myself and strategizing how to balance my "two jobs" in part because I didn't have a private office, yet was determined to breastfeed after my maternity leave. I was the only full-time employee in an office consisting of one small room with three desks and no partitions and several part-time employees and colleagues who came and went as needed. If it had seemed inevitable since my first day back at work that I would be "walked in on" at some point, it had not occurred to me that this would not be an isolated event, and that no where would be safe from interferences from nursing, pumping, or some other act of lactation. Yet before long, I was being interrupted regularly: signs were ignored, keys used in locks, forgotten side-doors used, you name it. I had scoped out every private hidden or underutilized spot at work in a rambling neo-gothic building from attics to turrets to closets, and found none that would suffice.

Work is a communal setting which makes privacy seem almost ridiculous to plan for, so with this newfound need for—if not privacy a lack of interruption—was simply trial and error. I could sometimes arrange to close my office door, but some people would just enter without warning, and that was always a shocker for all parties...like a handshake with one of those trick buzzers. After that I started to hang a sign, but it wasn't always seen and this had ways of backfiring. Once I called my department head at home to ask her a question and she asked, "Are you still at work?" As it turns out she had closed the office early and sent everyone one home, everyone but me, because my office door had been closed, and it was assumed I was not there. (Fortunately

that was not the day we were evacuated because of structural damage due to earthquake activity).

I also thought that public restrooms would be an adequate place to pump while sizing up my options, until the director of my department pointed out: "Ever notice where the electrical outlets in bathrooms are?" That was when I noticed they were by the door, which is exactly where I didn't want to stand while I was pumping breast milk. In fact, whether you are pumping breast milk or nursing an infant, you don't want to stand at all. And even if you cared to stand, no one wants to linger in a public restroom, let alone produce food there. In fact, the more time I spent expressing milk in bathrooms the more perturbed I grew about the sights and smells of the only place where I could privately pump, and the more I knew I was going to write about it.

Over time I became a sort of "lactivist," not because I think everyone should breastfeed, but because I think everyone including breastfeeding mothers should be able to work. And as a social worker, I became a person who thinks everyone should care just a little bit more about feeding babies. Even and especially coworkers and professional helpers.

In an interview, Marrit Ingman has noted that parenting is its own form of activism (Greenberg, 2005). Birth style, vaccination, sleeping arrangements, childcare plans, and many other choices (and non-choices) in parenting become the minefield of social politics in which I—leaky and sleep-deprived—began the tender and brutal foray into replicating the human species. Furthermore, as I dared to take all those messy needs and feelings to work, I soon realized it was not only a burden for me to make breastfeeding work; it could have a confounding effect on others, as well. Colleagues and strangers alike became unwittingly involved in lactation when they least expected it.

The first time I was walked in on in the restroom at work, it started out like any other lactation break. I walked down the hall to the bathrooms, a matching set of single-use rooms with one toilet and sink, and no stalls. The women's bathroom was occupied and had

been several times that morning already, so I went into the men's room; identical, except that the doorknob was installed upside down. Without my knowing, I hadn't latched it properly. Shortly thereafter, a man opened the door while I stood there expressing milk. I looked at him: a tall man in a baseball cap, Carharrrts, and western style boots with his mouth agape in confusion. He looked at me: a small brunette with one large, veiny breast attached to a handheld breast pump. (On second thought, maybe he didn't notice my haircolor). It felt like the mental equivalent of ripping a Band-aid off my face. Even if I could have known what to say, I would not have been capable of getting words out. And although nothing was said, I have a feeling it was no less horrifying for him. I felt shocked, ridiculous, and determined all at once; unlike him, I had been bracing myself for that moment. By necessity, choice, and preparation, I had studied breastfeeding. In my efforts to learn it, I had become utterly at home with it and everything it required of me, including inserting body parts into whooshing contraptions. Because breastfeeding is not framed as a public or social behavior (Wolf, 2008), no one but breastfeeding mothers ever sees or hears a whirring electric breast pump, or a squeaky handheld. They don't see what an infant latching on to a breast looks like. In fact, we don't see much breastfeeding at all. Images of infant feeding are often presented as bottle feeding (Frerichs, et al, 2006), even sometimes when paired with messages that are about breastfeeding.

Naturally, some of us are squeamish to hear such details laid bare, and are perhaps relieved that there is not more breastfeeding going on at work. Yet the absence of breastfeeding images is a disservice if it preserves the expectation that mothers should wait to be alone to feed their infants and somehow keep their milk supply going despite these limitations. I have been in the workforce for 22 years, and in this time I have seen only two people breastfeed at work. One of them was my haircutter, and we were at her job.

If I could go back to that moment standing in the bathroom, I think I would throw a sweater over my pump and try to normalize it

for us both, laugh it off and tell this stranger: "Whoever thought up this way to feed humans is a nut job, am I right?" It might have spared him years of wondering if he had witnessed a sexual act or some kind of perversion. He might have been able to think: "Wow, what would I do if I had to feed my kid in the john?" Maybe not, but I think we can all agree that as both nursing workers and involuntary witnesses, everyone could benefit from workplace lactariums in the way that everyone currently benefits from workplace restrooms: toilet, sink, mirror, door. It's not that radical, is it? And no one needing to wait 8 hours to perform basic, necessary biological functions, either.

Breastfeeding may look effortless and serene and private—and it can be—but it is also a unit of labor that benefits society in myriad ways. Breastfeeding provides better health outcomes to mothers and infants alike, and the long and short term benefits are many; so many that the American Association of Pediatrics recommends that mothers breastfeed exclusively for six months and continue breastfeeding for a minimum of six more months. The World Health Organization recommends breastfeeding for two years. All of this suggests a picture of a social breastfeeding culture that I have yet to experience. We don't have what I have come to think of as "supported lactation" in any of our public spheres, and I spend most of my time in the one that is the workplace, yet I have never seen a sign saying "lactation room."

I did hear of one once, which is why I know this story doesn't have to end with me persuading the young cowboy to forgive me for holing up in the restroom and then giving him an eyeful (and a heart attack, I'm sure). During my son's first year I participated in a collective blog of women who wrote about the political and personal intersections of mothering, and when I wrote about my bathroom experience, we received this response:

*"Ah yes, the 'potty pumping' experience. My sister had to do that after each of her pregnancies, too. But for her there were at least*

multiple stalls. She had an office with a locking door, but since interruptions were routine there, the bathroom was really her only option. I happened to luck-out because I work at a progressive medical research non-profit in the Pacific Northwest. Here, we've had on-site pumping stations (that's right folks, plural -more than one on-site), since the mid 1990s.

*Let me show you how much more humane it could be - if others followed this lead. These pumping stations are single use rooms, known within our institution as 'The mom's rooms' equipped with sinks, paper towels, soap, a mini fridge for storage, cupboards for accessories, and a trash can (that housekeeping empties regularly). We sign up monthly to use certain time slots, based on our various schedules. They also provide hospital-grade breast pumps on a pedestal with wheels (because they're proven to decrease the time it takes to pump and thus in the long run saves the institution money). In addition, there's a small table provided so you have a place to put your water bottle and whatever scatter-shot meal you're munching as you pump. They also recently added two magazine subscriptions so there's something relevant to read while you pump, one is Working Mother. My sister says I'm spoiled and I agree.*

*I would think that such conditions as you've described would really challenge your commitment to the breast feeding while working (which I'll add can be challenging even under good circumstances). I wanted to describe what was possible here and now and today, not gloat about my good luck. And I want employers to do more for*

*their working mom employees - and the on-the-job lactation facilities (or the lack thereof), is one place to start. There's a major return for such an outlay on their part: almost inexhaustable job loyalty, and that's money in the bank of our capitalist system. There's a core of hardworking full and part time moms at my job - and we aim to pay back our bosses for putting up with us at our most biologically challenged."*

Her description was so different from anything I had experienced or even imagined, that I nearly memorized the words as I read them. They still remind and inspire me now of the sense of possibility that, as a social worker, I am charged with providing to colleagues or clients alike when solutions are few and hope is dim.

Due in part to my own experiences and those of women I have worked with or at other times on behalf of, I have needed to reflect upon the purpose and the challenges of breastfeeding, to respect the sheer determination it takes in the current slice of time, and begun to challenge how I think and behave, and to actively promote the change needed. Even when I felt frustrated or out of options in that period of my working life, I always felt a strong sense of resolve in my decision to continue breastfeeding after returning to work. This resolve made me both willing to risk and capable of coping with humor, rather than feeling fear or shame or resentment. My resolve was also due, in part, to working in a supportive environment. There were no breastfeeding policies or practices (supportive or otherwise) at my job, but I did feel an ongoing sense of support and collegiality that I can easily imagine lacking in jobs commonly held by women, and in many high-demand and high-wage careers, as well.

At its most simple level, breastfeeding is feeding babies, and no human endeavor can follow without food. Yet there is much that can be done to improve the limited perspectives of breastfeeding offered to us. An understanding of breastfeeding as a public

benefit rather than a private behavior would do much to facilitate the kind of change at work and in our professional lives (where we spend the most time and have the most opportunity for dialogue), that we all need in order to produce a society that nurtures and empowers its most vulnerable members: infants and mothers of infants.

Finding a way to preserve the ability to breastfeed and to work is only one of several of the obstacles women who choose to breastfeed face, although many of them are beyond the scope of this discussion. It is worth mentioning in many of the 44 states that have breastfeeding laws, several of those frame breastfeeding as an issue of public nudity and include it under public indecency laws, rather than an issue of public health or basic human rights. Twenty-four states have workplace breastfeeding laws (fourteen of them specifically rule out bathrooms or toilet stalls as acceptable accommodations). But only a handful of states back up their lactation laws by making it illegal for people to interfere with the right to breastfeed publically (Cruver-Smith 1998). As of today, there are four states that explicitly prohibit anyone from interfering with the right to breastfeed in public or give a mother the right to sanction such prohibitive behavior (Connecticut, Maryland, Massachusetts, and New Hampshire). There are roughly three other states that indicate this more broadly by framing breastfeeding as a protected human right or subject to discrimination. The other thirty-seven states offer a more flaccid declaration that public breastfeeding is legal, when one might say that the act of feeding a hungry infant has always been "legal." Such laws aren't likely to generate practices and policies that endow mothers with much confidence to breastfeed, and indeed, women are routinely escorted from restaurants and other public establishments because of this lack of explicit license. I think of it this way: eating in public is legal for adults and children, but no law is needed to state this because there are no significantly negative social ideas about the meaning of feeding oneself, and so no one requires that act to be protected.

All of this means that if this person who walked in while I was breastfeeding had

misunderstood the meaning or the purpose of my breast pump—as most laws tend to do by framing breastfeeding as a private and personal act to be publically *tolerated*, rather than social behavior that is performed for reasons of basic biological survival—and had he complained or protested, I would have had no recourse and no legal foundation to sanction him. Nor did any policy of my public employer protect my actions.

I called around, finally getting a public health nurse who had recently conducted a survey of public employers to see what the state of workplace breastfeeding was in my home state of Montana (interestingly, she was not in our capital city). It wasn't good, she told me, but she said they were headed to the state house with a new bill to that would require public employers to provide lactation spaces for employees.

That bill passed almost two years ago, and I have never seen a public service campaign or heard a PSA disseminating this news. I had to dig, but I did find a very good work-site breastfeeding promotion tool developed by the Department of Public Health and Human Services and heard of a "license to breastfeed" card that our WIC programs disseminate. In fact, I now work in a public employment agency where breastfeeding has just made it onto the pregnancy workplace rights and discrimination materials. Since only public employers in the state of Montana are required to offer accommodations, the Human Rights Bureau has not released new materials, although they are closely following the laws as they arrive, and they currently direct private employers to that law as guidance for their own practices.

Through some of the dialogue created while writing this narrative, I was able to find and to share models with some of these agencies such as DPHHS's "How To Become a Breastfeeding Mother Friendly Employer," and to recommend ones such as California's all-in-one brochure: "Five Key Laws for Parents: These California Laws Allow You to Take Time to Nurture Your Child," that overviews the rights of parents.

As with so many human rights, the laws tend to follow rather than to precede the need

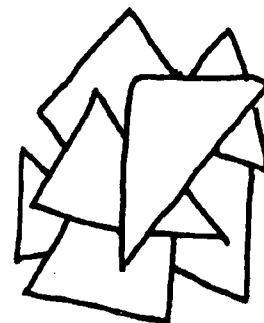
for them. They grow out of awareness raised by people living the practices as best they can, as if the needed laws already exist in pen and ink. Until these evolving breastfeeding rights take hold and dissemination of breastfeeding policies become common knowledge, I just have an old Word document in which I have cut and pasted our state breastfeeding laws from the Montana Code Annotated, just in case someone asks. It's not much, but I have to start somewhere.

Since writing this narrative, the controversial Federal healthcare reform has passed which includes a provision requiring workplace breastfeeding accommodations for all employers with more than 50 staff members. With the stroke of a pen, we go from 24 states possessing workplace breastfeeding laws to, well, *all* of them, at least as it affects large employers. Just yesterday I called the Human Rights Bureau to ask when Montana will adopt its own law. Suddenly, it feels like an end is in sight. Until then...you might want to think about knocking before you enter the bathroom at work.

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