



The Rt Hon Nicky Morgan MP
Minister for Women and Equalities
House of Commons
London SW1A 0AA

16th September 2014

Dear Nicky Morgan MP

Shared parental leave – absence of protection for breastfeeding and inappropriate social media campaign

As two national charities working closely with new families, we welcome the flexibility offered by shared parental leave. However we have two concerns:

- (1) The associated social media campaign illustrating these new opportunities (see appendix).
- (2) The continuing absence of adequate breastfeeding protection for employees returning to work.

While we appreciate that using a bottle as an icon means the poster is instantly recognisable, other symbols of babyhood should have been used instead. For example, a teddy bear or a stack of bricks could have demonstrated the information equally effectively.

The choice of the bottle icon represents our concern that the impact of shared parental leave without implementation of a breastfeeding friendly workplace policy will make breastfeeding even harder to sustain and that those responsible for overseeing shared parental leave are not aware of the possible impact on breastfeeding.

The Department of Health and World Health Organisation recommend exclusive breastfeeding for the first six months before the introduction of solid food alongside continued breastfeeding. Despite this, the government implemented shared parental leave with no specified protection for breastfeeding. This can mean a mother will re-enter the workplace two weeks after giving birth with no opportunity to express milk or maintain breastfeeding (four weeks if she works in a factory). The obvious danger will be that women who are back in the workplace early on are precisely the mothers of babies for whom breastfeeding is likely to have the most significant health outcomes.

There is strong evidence to show that supporting mothers to maintain breastfeeding on the return to work increase employee morale, improves recruitment and retention and reduces child illness which may impact on employee absence. It can also give more flexibility for women to return to work earlier.

The Breastfeeding Network PO Box 11126, Paisley PA2 8YB
www.breastfeedingnetwork.org.uk

To speak to a Breastfeeding Supporter call the National Breastfeeding Helpline 0300 100 0212

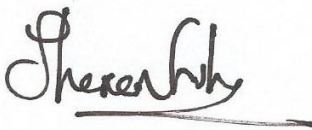
Calls to 0300 numbers cost no more than calls to UK numbers starting 01 and 02 and will be part of any inclusive minutes that apply to your provider and call package.

In response to conversations about the lack of breastfeeding protection, the government asked ACAS to provide guidance on breastfeeding. The resulting document¹ merely emphasises the lack of breastfeeding protection: "The law doesn't require an employer to grant paid breaks from a job in order to breastfeed or to express milk for storage and later use. Neither does it require an employer to provide facilities to breastfeed or express milk (ACAS guide: p2)." The information and guidance for employers needs to be strengthened to provide the required protection. We also argue that further legislation is required to more fully protect breastfeeding mothers on their return to work and oblige employers to provide paid breaks and suitable feeding/expressing areas. Without such legislation and security mothers are at increased risk of having to stop breastfeeding before they wish to.

We are extremely concerned that there has not been a proper consideration of the risks to the breastfeeding mother with the introduction of shared parental leave in the UK. We feel the use of this graphic highlights the government's lack of awareness of these dangers.

Why has the idea of legislation to protect breastfeeding rights been rejected and what further evidence would be needed for it to be considered?

Yours sincerely,



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CEO The Breastfeeding Network

Emma Pickett

Sandra Tanner

Emma Pickett & Sandra Tanner
Co-Chairs, Association of Breastfeeding Mothers

CC Jo Swinson MP
Maggie Atkinson, Children's Commissioner for England
Tam Baillie, Scotland's Commissioner for Children and Young People
Dame Sally Davies, Chief Medical Officer
Dr Aileen Keel, Chief Medical Officer, Scotland
Dr Ruth Hussey, Chief Medical Officer, Wales
Dr Michael McBride, Chief Medical Officer, Northern Ireland.

¹ (<http://www.acas.org.uk/media/pdf/b/s/Acas-guide-on-accommodating-breastfeeding-in-the-workplace.pdf>)

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Appendix

Poster



Having a baby in 2015?
Congratulations! You might want more details on [#sharedparentalleave > gov.uk/sharedparental...](#)

Parental leave - how will you share yours?

If your baby is due from 5 April 2015, mums can end their maternity leave after 2 weeks and split up to 50 weeks of shared parental leave with dads, any way they like.

		
Both parents take 25 weeks at the same time.	Mum takes 44 weeks, Dad takes the first 6 weeks at the same time.	Mum takes the first 12 weeks, then Dad takes the remaining 38 weeks.

Start planning your [#sharedparentalleave](#) at www.gov.uk/sharedparentalleave

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Timelines Notifications Messages Me

Evidence for breastfeeding breaks

Research published in the bulletin of the World Health Organisation (Jody Heymann, Amy Raub, and Alison Earle Volume 91(6); June 1, 2013) undertook a globally comparative analysis of breastfeeding policy. Breastfeeding breaks with pay are guaranteed in 130 countries (71%) and unpaid breaks are guaranteed in seven (4%). No policy on breastfeeding breaks exists in 45 countries (25%). In multivariate models, the guarantee of paid breastfeeding breaks for at least 6

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months was associated with an increase of 8.86 percentage points in the rate of exclusive breastfeeding ($P < 0.05$).

The UK is among the minority of countries with no breastfeeding policy.

The study concluded that: "A greater percentage of women practise exclusive breastfeeding in countries where laws guarantee breastfeeding breaks at work. If these findings are confirmed in longitudinal studies, health outcomes could be improved by passing legislation on breastfeeding breaks in countries that do not yet ensure the right to breastfeed."

A 2012 study commissioned by UNICEF, Preventing Disease and Saving Resources, showed that for just five illnesses, moderate increases in breastfeeding would translate into cost savings for the NHS of £40 million and tens of thousands of fewer hospital admissions and GP consultations.

When we consider there to be an 'epidemic of obesity' among children in the UK, and we know breastfeeding reduces obesity throughout childhood and into adulthood, it seems nonsensical that the idea of breastfeeding protection on an early return to work is being ignored. (<http://www.unicef.org.uk/BabyFriendly/News-and-Research/Research/Obesity/>). In just one example, Owen (2005) reviewed 61 studies, (29,800 babies) and found a reduced risk of breastfeeding in later life even when confounding variables such as parental obesity, maternal smoking and social class were taken into account.

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