

Title:

Two Years Later: Postpartum Return to Work

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Session Title:

Research in Postpartum Care

Slot:

I 22: Monday, 30 October 2017: 3:45 PM-4:30 PM

Scheduled Time:

4:05 PM

Keywords:

breastfeeding and workplace, maternal employment and postpartum employment

References:

Balkam A.J., Caldwell, K. & Fein, S. B. (2011). Effects of components of a lactation program on breastfeeding duration among employees of a public sector employer. *Maternal and Child Health Journal*, 15 (5), 677-683. Cooklin AR, Canterford L, Strazdins L, & Nicholson JM. (2011). Employment conditions and maternal postpartum mental health: Results from the Longitudinal Study of Australian Children. *Archives of Women's Mental Health* 14(3):217-225. Ogbuana, C., Glover, S., Probst, J., Hussey, J., & Liu, J. (2011). Balancing work and family: Effect of employment characteristics on breastfeeding. *Journal of Human Lactation*, 27(3), 225-238. Tsai, S.Y. (2013). Impact of a breastfeeding-friendly workplace on an employed mother's intention to continue breastfeeding after returning to work. *Breastfeeding Medicine*, 8, 210-216.

Abstract Summary:

The purpose of this presentation is to describe the experiences and perspectives of 35 employed mothers two years after return to postpartum employment. Originally the women participated in a larger study of 240 employed, breastfeeding participants who returned to work an average of 10 weeks after birth.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE	TIME ALLOTTED	TEACHING/LEARNING METHOD
1. The learner will be able to describe the qualitative data and themes for maternal perspectives about return to postpartum work.	The participants will explore the qualitative findings from mothers two years after postpartum return to the workplace. Maternal perspectives and experiences will be examined to discuss possible clinical implications and future research directions.	7 minutes	Lecture, Power Point presentation, participant feedback

2. The learner will be able to identify clinical, educational and research strategies to meet the needs of employed mothers.	Participants will explore and discuss possible clinical interventions to meet the needs of mothers planning postpartum return to the workplace and also address perinatal education, as well as policy, and legislative implications.	8 minutes + 5 minutes for Q & A and discussion	Lecture, Power Point presentation, participant feedback
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Abstract Text:

A significant number of women of childbearing age are in the workplace today. Postpartum return to employment, especially for breastfeeding mothers, is often challenging, particularly for first time mothers. Breastfeeding is an excellent and preferred way to nourish infants even after women return to the workplace. Most mothers in the US return to the workplace approximately 6-12 weeks after giving birth. Return to employment is often the cause for weaning despite the fact that there are numerous known benefits to exclusively breastfeeding. Among breastfeeding women, those who work full-time outside the home have a 19 percent lower rate of breastfeeding beyond six months than women who stay home. The purpose of this presentation is to describe the experiences and perspectives of 35 employed mothers two years after return to postpartum employment. Originally the women participated in a larger study of 240 employed, breastfeeding participants who returned to work an average of 10 weeks after birth.

Methods: The current descriptive study included 35 participants from a larger mixed methods study of 225 employed women aged 21-48 who were breastfeeding and returned to postpartum work at an average of 9 weeks after giving birth. In the larger study, employed women were recruited via email Listserve, internet social media and from day care centers and obstetrical practices. The women were well educated and economically advantaged and were mostly professionals. The women in the larger mixed methods study identified more facilitators than barriers to breastfeeding in the workplace. The women were very committed to breastfeeding after return to work and had high levels of breastfeeding self-efficacy with reported adequate levels of employer and colleague support for breastfeeding. One of the major barriers identified to postpartum return to work was inadequate time for maternity leave. From the original study participants, 75 women indicated an interest in a future follow up study. Those interested women were contacted one year later and were provided with the original study results and those mothers were contacted again one year later by email to see if they were interested in a brief follow-up survey of open-ended questions about their experiences as a working mother two years after return to postpartum employment.

Results: There were 35 women who provided follow-up qualitative data via Survey Monkey describing their experiences of being the mother and working outside the home two years after postpartum return to the workplace. The women ranged in age from 23 to 50 with an average age of 33.2 years. Nearly all were professionals and were currently employed with three fourths of the women working full-time and 23.5% working part-time. The majority of women (94.3%) reported that they were married or partnered and 54.2% were first time mothers with one child. The remainder of the women had more than one child, some having had another child in the last two years. The women also described their type of child care and answered open-ended questions about their experiences of returning to work during the last two years and meeting the demands of parenting. The participants responded to questions that asked about how their employment impacted being a mother, what was most helpful to them as an employee, what was most challenging, what workplace policies they perceived as needed and what advice they would give to other new mothers who plan postpartum return to the workplace. The data were analyzed using descriptive statistics and content analysis to determine themes. Within the themes, frequency of

responses were determined for each open-ended question where mothers provided responses describing their experiences and perceptions about return to postpartum employment. Slightly less than half (42.9%) of women changed their work situation to meet the demands of motherhood primarily by changing from full-time to part-time employment. Additionally, women felt that time issues (mainly associated with work demands) had a negative effect on their mothering role. In response to what was most helpful to her as a mother, the majority of women found work and spouse support to be the most helpful and a majority of responses indicated that increased stress associated with work-parent balance was the most challenging. When asked what she wished she had known before return to postpartum work, the majority of women indicated that the primary issue was stress especially associated with work-parent role balance and breastfeeding issues. Advice they would give other mothers planning to return to work was primarily related to planning in advance for the new role adjustment/ balance and that breastfeeding advocacy/support was needed. Recommendations for workplace policies needed overwhelmingly included the need for work/job flexibility, more time for maternity and child care leave and breastfeeding-friendly workplace policies.

Conclusion/Implications for nursing practice: The mothers in the current study indicated that effective strategies are needed to prepare employed women to continue breastfeeding after their return to work. The results provide additional evidence for the need for enhanced perinatal support and advanced planning for return to postpartum employment. Prenatal education and interventions designed to prepare mothers for postpartum employment are needed increase breastfeeding duration and self-efficacy. The results of the current study have social, workplace and national workplace policy implications. Breastfeeding women, who work outside the home, have a significantly lower breastfeeding rate beyond six months than women who stay home. Workplace policies are needed that assist working mothers especially with flexibility for lactation needs. Breastfeeding-friendly workplaces should establish dedicated breastfeeding rooms and maintain a comfortable and clean environment. Furthermore, employers should provide work flexibility as well as encouragement and support for working mothers. Women want to continue to breast feed after return to work and health care providers are ideally poised to assist mothers in this transition with well-designed prenatal and postpartum strategies. Many women in the US do not have paid maternity leave and must use vacation time and sick leave for maternity leave. Most postpartum women return to work within weeks after giving birth. Future studies are needed to address specific needs of employed mothers with infants as well as to develop and test interventions including the use of social media and support groups designed to help employed women manage parenting and employment issues.