



FRAGILE FAMILIES RESEARCH BRIEF

March 2005 • Number 31

On-the-Job Moms: Work and Breastfeeding Duration

Background

Breastfeeding provides numerous benefits to infants, mothers and society, including reductions in illness and medical costs. Therefore, in 1997 (and now again in 2005), the American Academy of Pediatrics initiated a public health awareness campaign designed to encourage mothers to breastfeed until their child was at least one year old. Between 1990 and 2000, breastfeeding increased sharply among several groups of mothers, indicating that the public health campaign was having a positive effect. African-American mothers' breastfeeding initiation rate went from 23 percent to 51 percent and teenaged mothers' breastfeeding initiation rate went from 30 percent to 56 percent.

Interestingly, during the same time period, the prevalence of working mothers also increased. In 1990, 54 percent of married mothers with young children were in the workforce and this number increased to 60 percent by the year 2000. Among women working full-time before the birth of their child, three-quarters are back at work full-time by the time their baby is six months old. For these mothers, the decision to return to work and the decision to breastfeed are closely connected. In 2000, only 11 percent of mothers who worked full-time were still breastfeeding at one year, as opposed to 19 percent of mothers who worked part-time and 22 percent of mothers who were not in the labor force. Clearly most American women are not able to combine breastfeeding and full-time employment.

This brief examines two questions regarding the relationship between maternal employment and breastfeeding. The first question is whether a mother's plans to return to work after a birth affect her decision to breastfeed her child. The second question is whether returning to work shortens the duration of breastfeeding, and if so, by how much.

Data and Methods

This research brief uses data from the baseline and one-year follow-up surveys of the Fragile Families and Child Wellbeing Study [see box] to examine the relationship between breastfeeding and employment. The sample for the first analysis - the initiation of breastfeeding - is comprised of all the mothers in the study who provided information on breastfeeding (n=4,331). The sample for the second analysis - the duration of breastfeeding - is comprised of mothers who initiated breastfeeding and provided information on the timing of their return to work (n=2,466).

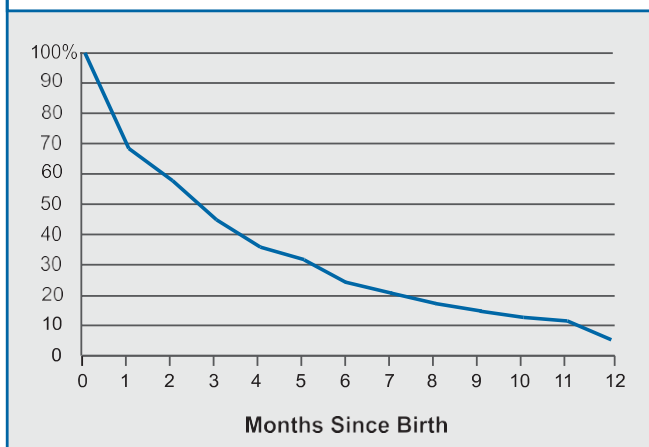
Breastfeeding initiation is measured by a question at the one-year follow-up interview that asked the mother if she had ever breastfed her child (57% had ever breastfed). Breastfeeding duration is measured by a follow-up question that asked the mother how many months she breastfed her child (average of 5 months among those who ever breastfed). Maternal employment is measured as: 1) having plans to work after the child's birth (from the baseline survey) and 2) actual realized employment (from the one-year survey). For plans to work, mothers were asked in the hospital following the child's birth whether they intended to return to work in the first year after their child's birth (82% intended to work in the year

Table 1: Logistic Regression for Breastfeeding Initiation

Mother expects to work next year	Odds of initiating breastfeeding	p-value
Bivariate	0.58***	0.000
With controls	0.85*	0.084

Notes: Control variables include mother's race-ethnicity, nativity, age, education, relationship status, prior children, and income.
*p<.10 **p<.05 ***p<.01

Figure 1: Survival Curve for Breastfeeding Duration for All Mothers Who Initiate



after the child was born). The date of actual employment is measured by a question that asked mothers how old their child was when they returned to work (71% began working when the child was, on average, 4.5 months old). Analyses include individual-level controls for mothers race and ethnicity, immigrant status, age, income, occupation, education, relationship status, and parity.

Results

Table 1 (page 1) shows the results for the relationship between plans to work after the child is born and breastfeeding initiation. The variable of interest, "Mom expects to work in the next year," is significantly and negatively related to breastfeeding initiation. Mothers who expect to work in the year following the birth of their child have 15 percent lower odds of breastfeeding than other mothers when controlling for differences in background characteristics. Therefore, mothers who plan to work after the child is born may not initiate breastfeeding because of the anticipated difficulties in combining breastfeeding and employment.

There is a fairly steep drop off in breastfeeding rates for all mothers who initiate breastfeeding, regardless of employment status. Figure 1 shows the survival curve of breastfeeding duration over the baby's first year of life. We see that over 30 percent of mothers quit breastfeeding before the baby is one month old. The survival curve also shows that 50 percent of mothers have quit breastfeeding by the third month and 75 percent have quit by the sixth

month. Less than ten percent of mothers breastfeed for at least a year, the time recommended by the American Academy of Pediatrics.

Breastfeeding duration differs greatly by maternal employment status, however. Table 2 shows the relationship between the breastfeeding cessation (or weaning) and the timing of maternal employment. One month and two months after starting work, working mothers have 48 percent and 27 percent higher odds, respectively, of weaning than non-working mothers. In the month a mother starts work, her odds of weaning are 2.4 times the odds of a mother who did not start working that month. In the month before she starts work, a mother's odds of weaning are 46 percent higher and two months before she starts work, they are 37 percent higher, as compared with mothers who are not getting ready to work.

Conclusion and Policy Implications

The results of this analysis demonstrate that mothers' decisions to breastfeed and how long they breastfeed are strongly related to whether and when they intend to return to work. The results also indicate that mothers anticipate the difficulty of combining work and breastfeeding and therefore either choose not to initiate breastfeeding or stop breastfeeding around the time they plan to begin work.

Given the health advantages associated with breastfeeding, these findings suggest that working mothers and their infants are at a disadvantage, as compared to mothers who stay home with their children. Although progress has been made in encouraging more mothers to breastfeed and to breastfeed for longer periods of time,

Table 2: Logistic Regression for Weaning

Mother returned to work...	Odds of weaning	p-value
2+ months ago	1.27**	0.020
Last month	1.48***	0.003
This month	2.42***	0.000
Next month	1.46***	0.000
2+ months from now	1.37***	0.005

Notes: This discrete-time logit model includes controls for the number of months since the child's birth. *p<.10 **p<.05 ***p<.01

additional steps will be necessary if mothers are to meet the revised goals set by the American Academy of Pediatrics in 2005. In addition to changing mothers' attitudes toward breastfeeding, steps must be taken to change employer's attitudes and work place policies so that mothers can take time off from their work to breastfeed or to pump and store their breast milk for

future feedings. Without a supportive work environment, new mothers will be forced to choose between breastfeeding their child for an optimal amount of time and returning to work to help support their families. For many mothers today, breastfeeding for a year is simply not an option.

Recent Working Papers

The following comprises a list of the most recent Working Papers authored by the Center for Research on Child Wellbeing (CRCW) faculty and research associates. A complete list of Working Papers is also available for viewing and downloading on the CRCW web site: crew.princeton.edu/papers.html

2005-10-FF Marcy Carlson March 2005 "Family Structure, Father Involvement and Adolescent Behavioral Outcomes"

2005-09-FF Bruce Western March 2005 "Incarceration, Marriage, and Family Life"

2005-08-FF Angela Fertig, Sara McLanahan, Irwin Garfinkel March 2005 "The Effect of Child Support Enforcement on Bargaining Power Among Married and Cohabiting Couples"

2005-07-FF Marcy Carlson, Sara McLanahan, Jeanne Brooks-Gunn March 2005 "Unmarried But Not Absent: Fathers' Involvement With Children After a Nonmarital Birth"

2005-06-FF Nick Wolfinger, Brad Wilcox March 2005 "HAPPILY EVER AFTER? Religion, Marital Status, Gender, and Relationship Quality in Urban Families"

2005-05-FF Lenna Nepomnyaschy March 2005 "Child Support and Father-Child Contact: Leveraging Panel Data to Establish a Causal Path"

2005-04-FF Rachel Kimbro March 2005 "On-the-Job Moms: Work and Breastfeeding Initiation and Duration for a Sample of Low-Income Women"

2005-03-FF Maureen Waller, Elizabeth Peters Feb 2005 "The Risk of Divorce as a Barrier to Marriage"

2005-02-FF Michelle DeKlyen, Sara McLanahan, Jeanne Brooks-Gunn, Jean Knab March 2005 "The Mental Health of Parents with Infants: Do Marriage, Cohabitation and Romantic Status Matter?"

2005-01-FF Kristen Harknett Feb 2005 "Children's Elevated Risk of Asthma in Unmarried Families: Underlying Structural and Behavioral Mechanisms"

2004-17-FF Cynthia Osborne, Wendy Manning, Pamela Smock Oct 2004 "Instability in Fragile Families: The Role of Race-Ethnicity, Economics, and Relationship Quality"

2004-16-FF Cynthia Osborne, Sara McLanahan Oct 2004 "The Effects of Partnership Instability on Parenting and Young Children's Health and Behavior"

2004-15-FF Lawrence Berger, Cynthia Osborne Oct 2004 "Parental Substance Abuse and Child Health and Behavior"

2004-14-FF Teresa Ciabattari Sep 2004 "Single Mothers, Social Capital, and Work-Family Conflict"

2004-13-FF Nancy Reichman, Hope Corman, Kelly Noonan Sep 2004 "Effects of Child Health on Sources of Public Support"

2004-12-FF Lenna Nepomnyaschy Jul 2004 "Child Support and Father-Child Contact In Fragile Families"

2004-11-FF Ronald Mincy, Irwin Garfinkel, Lenna Nepomnyaschy Jul 2004 "In-Hospital Paternity Establishment and Father Involvement in Fragile Families"

2004-10 Lonnie Berger Jun 2004 "Children Living Out-of-Home: Effects of Family and Environmental Characteristics"

2004-09-FF Joshua Goldstein, Kristen Harknett Jun 2004 "Parenting Across Racial and Class Lines: Assortative Mating Patterns of New Parents Who Are Married, Cohabiting, Dating, and No Longer Romantically Involved"

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2004-05-FF Jean Knab Apr 2004 "Who's In and for How Much? The Impact of Definitional Changes on the Prevalence and Outcomes of Cohabitation"

2004-04-FF I-Fen Lin, Sara McLanahan Apr 2004 "Gender Differences in Perceptions of Paternal Responsibility"

2004-03-FF Lauren Rich, Irwin Garfinkel, Qin Gao Apr 2004 "Child Support Enforcement Policy and Unmarried Fathers' Employment in the Underground and Regular Economies"

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Inside...

This research brief uses data from the Fragile Families and Child Wellbeing study to examine the relationship between maternal employment and breastfeeding.

The Fragile Families and Child Wellbeing Study is following a birth cohort of nearly 5,000 children, including 3,712 children born to unmarried parents and 1,186 children born to married parents. The data are nationally representative of births in cities with populations of 200,000 or more. For more information about the study, visit the Web site of The Center for Research on Child Wellbeing, <http://crew.princeton.edu/fragilefamilies> or email the CRCW at crew@opr.princeton.edu

This research brief was adapted from "On-the-Job Moms: Work and Breastfeeding Initiation and Duration for a Sample of Low-Income Women" by Rachel Kimbro. To download a copy of the paper on which this brief was based, visit <http://crew.princeton.edu>, go to the Fragile Families link, click on Publications, then click on Working Papers Series.

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