



State of Connecticut
HOUSE OF REPRESENTATIVES
STATE CAPITOL
HARTFORD, CONNECTICUT 06106-1591

REPRESENTATIVE CAROLINE SIMMONS
144TH ASSEMBLY DISTRICT

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CHAIRWOMAN
COMMERCE COMMITTEE

MEMBER
HIGHER EDUCATION COMMITTEE
HUMAN SERVICES COMMITTEE

February 11, 2021

Senator Julie Kushner, Co-Chair
Representative Robyn Porter, Co-Chair
Senator Rob Sampson, Ranking Member
Representative Harry Arora, Ranking Member
Labor and Public Employees Committee
300 Capitol Avenue Hartford CT, 06106

To Senator Kushner, Representative Porter, Senator Sampson, Representative Arora, and all distinguished members of the Labor and Public Employees Committee,

Thank you for the opportunity to testify in favor of House Bill 5158: An Act Concerning Breastfeeding in the Workplace.

We are testifying in favor of this legislation in order to support more women in the workforce who wish to breastfeed. For women who wish to breastfeed in the workplace, the benefits can be extremely beneficial to the health of the mother and the child. In fact, one of the most effective preventative measures a mother can take to protect the health of her baby and herself is to breastfeed. Babies who are breastfed are less likely to develop infections, allergies, asthma, cancers, and a range of other health issues. According to the Centers for Disease Control and Prevention, breastfeeding is a key tool to improve public health. Breastfeeding has also been shown to lower the risk of breast and ovarian cancer for the mother. Due to these benefits, the American Academy of Pediatrics recommends that women attempt to exclusively breastfeed for at least the first six months of a baby's life and the World Health Organization recommends breastfeeding up to three years or as long as mutually desired by the mother and baby thereafter.

Despite the recommendation to exclusively breastfeed for the first six months, according to the [Centers for Disease Control and Prevention's 2014 Breastfeeding Report Card](#), seventy nine percent of moms start out breastfeeding, and that number drops to fifty percent at six months and just twenty five percent at twelve months. Furthermore, recent research has linked breastfeeding rates to income levels and socioeconomic status, as ["seventy four percent of children in families with incomes above 185](#)

[percent of the federal poverty line are breastfed, compared to only 57 percent of children in families with incomes at or below that threshold.](#) These statistics are troubling and unfair, as every mother should be able to make the choice as to whether or not to breastfeed her baby and be supported by her workplace, regardless of her income level. As a result of these disconcerting statistics, as well as countless stories from constituents, friends, colleagues, and family members, we are recommending that Connecticut improve its breastfeeding laws related to better support women who wish to breastfeed in the workforce.

Specifically, this legislation would enhance Connecticut's current laws related to lactation rooms. Our current statutes require employers to make reasonable efforts to provide a room or other location for women to breastfeed in close proximity to the work area, other than a toilet stall. This legislation would further clarify our existing statutes by requiring that such lactation room:

1. Be private, free from intrusion and shielded from the public,
2. Include or be situated near a refrigerator where an employee can store expressed breast milk, and
3. Include access to an electrical outlet.

While Connecticut does have basic protections in place requiring employers to provide lactation support, our current language in our state statutes is vague, and oftentimes employers are not providing these spaces and when they are, they are not in fact private, accessible, or close to a refrigerator or outlet. Privacy is important in order to provide a supportive and nurturing space for women who wish to breastfeed, and access to an electrical outlet and refrigerator are necessary for both turning on breast pump machines and safely storing expressed breast milk to prevent bacteria from contaminating it.

These policy proposals will better support women who wish to breastfeed in the workplace, thereby supporting the health of women and families across Connecticut as well as encourage more women to re-enter the workforce. When workplaces are not supportive of women during the pregnancy and post labor stage, this contributes to women dropping out of the work force, lower wages, more turnover among workers, less productivity, higher rates of stress and depression among women, and negative health outcomes for newborn babies.

Supporting breastfeeding mothers will also reduce health care costs to Connecticut in the long-term. It is estimated that \$13 billion of direct health care costs would be saved annually if 90% of women were able to breastfeed exclusively for the first six months.¹ Furthermore, babies who are not breastfed visit the physician more often, spend more days in the hospital, and require more prescriptions than breastfed infants. In fact, one study found that for every 1,000 babies not breastfed, there were 2,033 extra physician visits, 212 extra hospitalization days, and 609 extra prescriptions for three illnesses alone – ear, respiratory, and gastrointestinal infections.²

These measures will not only improve public health, but they will benefit our economy overall. Thank you for your consideration and we are happy to answer questions.

¹ Bartick M, Reinhold A. The burden of suboptimal breastfeeding in the United States: a pediatric cost analysis. *Pediatrics*. 2010; 125(5):e1048-e2015

² Ball T & Wright A. (1999)

Sincerely,

A handwritten signature in cursive script, appearing to read 'Caroline Simmons'.

Caroline Simmons
State Representative - 114th Assembly District

A handwritten signature in cursive script, appearing to read 'Kate Farrar'.

Kate Farrar
State Representative - 20th Assembly District

A handwritten signature in cursive script, appearing to read 'Christine Cohen'.

Christine Cohen
Senator - 12th District