

Impact of workplace design on the health of breastfeeding women in low-wage jobs Stephanie Villella, MPH; Amanda Joost, MBA, MLS (ASCP)^{CM}; Victoria Steiner, PhD **College of Health and Human Services** University of Toledo; Toledo, Ohio

Background

- Women are one of the fastest-growing segments of the U.S. labor force, and the contributions of working women who are also mothers are vital to a strong economy (Kozhimannil, et al., 2016).
- Occupational stress increased in the restaurant industry during the pandemic, and has continued to grow (Lippert et al., 2021). These low-wage food service jobs are dominated by women.
- Since breastfeeding has health benefits for both babies and mothers, the U.S. Surgeon General issued a call to action in 2011 with four recommendations for employers.
 - One recommendation was to establish and maintain comprehensive, high-quality lactation support programs for their employees (Rocheleau et al., 2019).
- In a survey of workplace accommodations for breastfeeding women, only 40% reported having access to break time and private space to express breastmilk (Kozhimannil, et al., 2016).
- Women with adequate break time and private space were 2.3 times as likely to be breastfeeding exclusively at six months (Kozhimannil, et al., 2016).



- One study found workplace support, attitude, and personal strategic planning impacted the psychological distress of the mother returning to work while choosing to express breastmilk (Rojjanasrirat, 2004).
- A more recent study found a consistent relationship between work-related problems with breastfeeding and concurrent low job satisfaction among working women (Whitley et al., 2019).
- Most research, however, has focused on full-time, high-wage Caucasian employees. Over half (64%) of the 1.1 million lowwage workers are women (U.S. Bureau of Labor Statistics, 2022).

Purpose

• This qualitative study will use a descriptive phenomenological approach to increase understanding of the lived experiences of women expressing breastmilk while working in low-wage food service jobs.

Objectives

<u>Aim 1</u>: Identify psychosocial hazards, particularly social factors, perceived by breastfeeding mothers in low-wage jobs in the food service industry.

<u>Aim 2</u>: Examine aspects of work-related design that impact a working mother's experiences while expressing breastmilk at these jobs.

<u>Aim 3</u>: Determine ways to improve the health and well-being of working mothers who are overrepresented in low-wage jobs.

Study Population

Mothers aged 18 and older who have chosen to express breastmilk while working in a low-wage food industry job.

Methods

Sample:

• Purposive sampling will be used to recruit approximately 20 mothers from Lucas County with an infant between the ages of 0 and 6 months.

Data Collection:

- Potential participants will be recruited by disseminating flyers to mothers in the Lucas County community and utilizing relevant public social media sites.
- Participants will complete a demographic survey and participate in an in-depth interview lasting about an hour to address Aims 1 and 3.
- After the interview, interested participants will participate in the Photovoice portion of the study to address Aim 2.

Measures:

- In-depth Interviews: A semi-structured interview guide with open-ended questions was developed based on evidencebased practice (Ahmad et al., 2022).
- **Photovoice:** Participants will take a representative photo of their experience(s) while expressing breastmilk in the workplace. The participants will also provide photo descriptions based on the SHOWeD technique (Santos, Lopes, & Botelgo, 2017).

Data Analysis:

- Descriptive statistics will be applied to the demographic data.
- Recordings from the interviews will be transcribed and rigorous thematic analysis used with the narrative data (Hennink et al, 2020).
- Submitted photos will be categorized and compared to the themes from the narrative data. Exemplary photos and quotes from the descriptions will be selected for each category to enhance understanding from the participants' point-of-view (Tsang, 2020).

In-depth Interview Guide

Interview Questions

- What were your experiences with feeding your baby when you returned to work?
- Were there breastfeeding supports in place within your workplace?
- How did you combine breastfeeding and your job responsibilities when returning to the workplace?
- How do you think your co-workers or managers feel about women expressing breastmilk in the workplace?
- What support is needed to encourage women to breastfeed after their return to work?

The interview guide will be reviewed by three content experts to ensure content validity and pilot tested for readability and understandability.

Photovoice



The SHOWeD Technique:

- What do you **See** here?
- What is really **Happening** here?
- How does this relate to **Our** lives?
- Why does this situation, concern or strength exist?
- What can we **Do** about it?

Based on the questions in the **SHOWeD** technique, participants will write a description for each photograph they submit.

• The investigators will be able to identify psychosocial hazards, particularly social factors, that influence breastfeeding duration and perceptions of women working in low-wage food service jobs.

• Recommendations related to workplace design and policies can subsequently be developed to improve the health and wellbeing of these women.

• Future funding can be used to advance systems, policies, and practices that will create a healthy work environment, and improve well-being by decreasing occupational stress for breastfeeding mothers working in low-wage jobs in the food service industry.

 A proposed NIH submission employing quantitative research methods will be used to statistically test and generalize the findings found from the current qualitative study.

This study will examine workers in the NORA Services Sector and apply NORA priorities of the Healthy Work Design and Well-Being Cross-Sector Program (NORA, 2018).

 As the number of women in the U.S. labor force continue to grow, it is essential to "improve the design of work, management practices, and the physical and psychosocial work environment" for women returning to work after the delivery of a child (NIOSH, 2022; Rocheleau et al., 2019).

The Healthy Work Design and Well-Being Program has seven proposed objectives within its research agenda. This study highlights a gap in research that addresses four of these objectives: identify and examine the impact of worker

2. improve the safety, health, and well-being of workers with non-standard work arrangements; 3. improve the safety, health, and well-being of workers through healthier work design and better organizational practices; and

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Expected Results

Future Direction

Relevance to NORA

demographics on employer or organizational practices and work safety, health, and well-being;

4. promote a sustainable work-nonwork interface.

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