



Better Business Practices for Children

PRIVATE SECTOR POLICY
TO SECURE WORKPLACE SUPPORT FOR BREASTFEEDING



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We also thank the Ministry of Health and other stakeholders for their technical support and partnership in this process.

FOREWORD

Kenya Private Sector Alliance (KEPSA) is the apex body of the private sector in Kenya representing over 500,000 members through Corporates and Business Membership Organizations. Over the last 15 years, KEPSA has emerged as the authoritative voice for the private sector in Kenya through provision of thought leadership in advocacy at national and sector-based levels through established Public-Private Dialogue platforms. KEPSA has established relationships with a wide array of stakeholders including national and multinational companies, government institutions and development partners among other stakeholders.

The KEPSA Foundation, a legal entity and the social arm of KEPSA is registered under the Trustees Act in Kenya with a mandate to engage and devote its resources to social activities that contribute to the economic and social development in Kenva in relation to the vulnerable members of the Kenyan Society. This is delivered under three key pillars namely; Financial Sustainability, Private Sector Socioeconomic Transformation Platform and Though Leadership. The Better Business Practices for Children is hosted under the private sector socioeconomic transformation platform pillar of the KEPSA Foundation.



Since 2010, KEPSA in collaboration with UNICEF and the Ministry of Health has been undertaking the Better Business Practices for Children (BBPC) initiative, a championship towards the good practices that promote, support and protect breastfeeding within the private sector in Kenya.

This initiative was informed by recognition of the various challenges working women encounter in a bid to balance between work and infant feeding as per World Health Organizations (WHO) and UNICEF recommendations on Infant and Young child Nutrition.

Not only has the private sector membership realized the positive impact associated with implementing this initiative for businesses but also have embraced the humanity perspective towards good foundation of life.

It is worth noting that the private sector is committed to accelerate actions that will contribute to attainment of the Vision 2030, the Medium Term III Plans and Sustainable Development Goals (SDGs) in the country. I therefore urge all member of the private sector to embrace the social transformative initiatives including investing on the welfare of employees who the greatest assets for businesses to thrive.

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OVERVIEW OF THE BBPC PRIVATE SECTOR POLICY

Majority of the private sector employees comprise of the women in their reproductive age and hence if well supported at the workplace, effectively they can sustain breastfeeding. Organizations that create lactation spaces at their workplaces incur a one-off cost and its benefits are felt over a long period of time with an increasing number of children as the primary beneficiaries. Inculcating the culture of breastfeeding and its support at the workplace will thus go a long way in increasing the number of women adhering to breastfeeding recommendations by WHO and UNICEE

The Better Business Practices for Children Private Sector Policy has been developed through a private sector and other partners consultative process. It is envisaged to provide guidance on how the private sector membership can be able to integrate workplace support for breastfeeding initiatives within their workplace policies. Implementation of this policy is envisaged to contribute to the improvement of the proportion of mothers and children on recommended Maternal, Infant and Young Child Nutrition (MIYCN) practices and the global strategy on infant and young child feeding. It will also contribute towards attainment of the Sustainable Development Goals (SDG), World Health Assembly (WHA) targets and Vision 2030 in Kenya.

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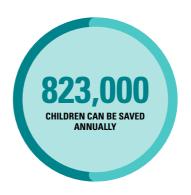
CHAPTER ONE

INTRODUCTION TO BREASTFEEDING

Breastfeeding is an unequalled way of providing ideal food and care for health, growth and development of the infant. Breastmilk remains the best source of nutrition for the new-born, infant and young children by greatly improving their quality of life through its nutritional, immunological, and psychological benefits.

It is estimated that 823,000 lives of children could be saved annually by scaling up breastfeeding. The early years of life are critical for the child's growth and development including brain growth, physical, emotional, and intellectual wellbeing. Children who are breastfed for longer periods have lower infections,

morbidity and mortality rates, fewer dental malocclusions and higher intelligence as compared to those who are breastfed for shorter periods or not breastfed at all (Belfield & Kelly, 2010). Growing evidence also suggests that breastfeeding might protect against overweight and diabetes later in life.



Breastfeeding lowers the risk of: WEIGHT GAIN EAR INFECTIONS RESPIRATORY INFECTIONS MATERNAL POSTPARTUM DEPRESSION DERMATITIS **CANCERS** GASTROINTESTINAL (BREAST, OVARIAN, ENDOMETRIAL) DISORDERS **CHILD MOTHER** ASTHMA (YOUNG CHILDREN) TYPE 2 DIABETES OBESITY TYPE 1 AND 2 DIABETES OSTEOPOROSIS **20,000** ANNUAL BREAST CANCER DEATHS PREVENTABLE

Why Women Need to Express Milk



Milk production is a constant, ongoing process. Every time the nursing baby consumes milk. bodv the mother's automatically makes more milk to replace it. The more often the baby feeds, the more milk the mother's body produces. If the baby does not take the milk directly, it must be regularly removed by hand or with an efficient breast pump about as often as the baby usually feeds. This process is called expressing milk. If a baby does not

breastfeed and the mother does not express milk, the mother's breasts become overly full and uncomfortable. This can lead to an infection and potentially a drop in her milk supply. After the baby is 6 months old and begins eating solid foods, the number of milk expression breaks usually begins to diminish

Benefits of work place support

BENEFITS TO THE EMPLOYER

- Improved retention of skills and experience
- Reduced recruitment costs
- Loyalty of employees
- Increased productivity, satisfaction and resilience of the employee
- Added recruitment incentives for employer
- Improve employer image
- Lowers employers health and insurance costs
- Reduced absenteeism due to improved child and maternal health.

BENEFITS TO THE EMPLOYEE

- Improved job security of female employees.
- Retention of skills and experience leading to improved performance.
- Improve productivity hence satisfaction and self-esteem.
- Improve health of the child and employee.
- Added recruitment incentives for female employees.
- Increased spacing between pregnancies.
- ₽ Better stress management
- Decreased risk of diabetes, breast and ovarian cancer.

CHAPTER TWO

BETTER BUSINESS PRACTICES FOR CHILDREN GUIDING PRINCIPLES

A

The Constitution of Kenya (2010 Article) 53 (1) (c)

States that 'every child has the right to basic nutrition'.

В

Maternity Protection Convention. 2000 (No. 183)

ILO recommends at least 14 weeks (98 days) of paid maternity leave, one or two breaks daily or a reduction in work hours in order for women to breastfeed their children and, where practicable, provision of facilities for nursing under adequate hygienic conditions at or near the workplace (ILO, 2000)



Employment Act. 2007

Section 29: Maternity Leave

The employment Act 2007, allows for 3 months maternity leave after which women return to work.

On expiry of a female employee's maternity leave, the female employee shall have the right to return to the job which she held immediately prior to her maternity leave or to a reasonably suitable job on terms and conditions not less favorable than those which would have applied had she not been on maternity leave.

Health Act 2017

Article 71: Lactation stations in the workplace

(1) All employers shall in the workplace establish Lactation stations in the workplace which shall be adequately provided with necessary equipment and facilities including hand washing equipment, refrigerates or appropriate cooling facilities, electrical outlets for breast pumps, a small table comfortable seats the standard of which shall be defined by the Ministry responsible for matters relating to health.

The lactation station shall not be located in the rest rooms.

All employers shall take strict measures to prevent any direct or indirect form of promotion, marketing and or selling of infant formula and or breast substitutes within the lactation stations.'



Article 72: Provision of break intervals for nursing employees

- (1) An employer shall grant all nursing employees in addition to the regular times off for meals to breastfeed or express milk.
- (2) The time intervals referred to in sub section (1) shall include the time it takes an employee to get to and from the lactation station and shall be counted as compensable hours worked provided that such intervals shall not be more than a total of one hour for every eight hour working period.

E

Child Rights Business Principles

- Meet their responsibility to respect children's rights and commit to supporting the human rights of children
- Contribute to the elimination of child labour, including in all business activities and business relationships
- 3. Provide decent work for young workers, parents and caregiver
- 4. Ensure the protection and safety of children in all business activities and facilities
- 5. Ensure that products and services are safe, and seek to support children's rights through them

- 6. Use marketing and advertising that respects and support children's rights
- 7. Respect and support children's rights in relation to the enviroment and to land acquisition and use
- 8. Respect and support children's rights in security arrangements
- Help protect children affected by emergencies
- 10. Reinforce community and government efforts to protect and fulfill children's rights



CHAPTER THREE

COMPONENTS FOR CREATING A BREASTFEEDING FRIENDLY WORKPLACE

Working female employees have a right to an environment that enables them to successfully breastfeed their infants. Employers have the responsibility to promote breastfeeding friendly workplaces by providing the following components;

- Better Business Practices for Children workplace Policy
- Better Business Practices for Children workplace Space
- Better Business Practices for Children workplace Time
- Social support structures for breastfeeding at workplace

V

Better Business Practices for Children workplace Education and sensitization



Better Business Practices for Children workplace Policy

It is good practice for an employer to have a policy on breastfeeding at the workplace. This will help employers make fair decisions when handling requests from breastfeeding female employees.

The policy should:

- Provide at least 3 months paid maternity leave (Employment Act, 2007, section 29).
- Help to reassure breastfeeding female employees that their participation in the workforce is compatible with their reproductive function
- Outline workplace provisions to enable female employees to maintain breastfeeding (e.g. breastfeeding breaks and facilities for support of breastfeeding)
- Highlight the employer's commitment to helping workers to achieve work life balance through flexible working arrangements such as, job-sharing, flexi time and working from home

This policy could be part of the company's competitive recruiting package offered to potential employees along with general information about parental leave entitlements and other family-friendly measures. which all men and female employees should receive when they start work.

It is worth noting that once developed, the workplace policy ought to be implemented and mechanisms put in place for monitoring and evaluation on a regular basis. All employees, managers and supervisors will need to discuss the needs of breastfeeding female employees and should all be aware of the in-house policy including the benefits breastfeeding can bring to the different people concerned.



Better Business Practices for Children workplace Space

Rooms for breastfeeding female employees are a valuable resource for providing privacy and convenience that mothers need for expressing breastmilk when they are separated from their babies. Of utmost importance to a breastfeeding female employee when she returns to work is a location where she can comfortably and safely express milk during the working hours. Many employees work in open areas or cubicles that are not private. Simple breastfeeding rooms or private spaces can be created within existing building space. The initial cost is usually a one-time expenditure other than costs involved with standard maintenance and the return on investment is continuous breastfeeding since many female employees can make use of the facility over a long period of time.

Allocating Space

The following points will help employers when allocating suitable space for the lactation station.



- The amount of space needed for the lactation station is minimal
- Lactation stations do not require a fullsized office
- The size of the space should be sufficient to accommodate the requirements as listed under Equipment and Supplies requirement section of this guidelines
- It is important to involve at least one breastfeeding employee and other employees with experience in milk expression when identifying a suitable space for the lactation room
- It would help if employers organize time for creating awareness on the lactation station once established for optimal utilization

Equipment and supplies requirements

It is important to ensure that all equipment and supplies used in the lactation station are fit for intended purpose and meet the required standards where appropriate.

Below are the equipment and supplies that ought to be in the lactation station.

- An electrical outlet
- A comfortable chair(s) that will fit next to the table
- A table or counter for placing breast pump
- Lockable cabinets
- Refrigerator (or nearby access)
- A sink (or nearby access) with running water
- Hand washing facility
- Disinfecting solution available for clean-up of spills

- Liquid soap
- Breast pumps (Electric and/or manual)optional
- Personal protective gear as appropriate
- Labels of various stations
- Stationery and other office supplies
- Information. education and communication materials (IEC) through linkage with the Ministry of Health
- A waste basket
- A door signage

Pre-assessment for establishment of lactation station at workplace

Before setting up the lactation station, preassessment of the space allocated should be done to ensure that the space is conducive for the purpose of supporting breastfeeding. The following are key conditions that need to be met for establishment of the lactation station.

- Consistent supply of clean safe water
- Appropriate private room with sufficient space, be well lit, adequate ventilation and not located in the rest rooms
- Policy in support of breastfeeding staff and orientation package regarding use of the lactation station
- Infection control guidelines

Lactation Space Options

When allocating space for establishment of the lactation station, the following space options may be considered;

- An infrequently-used existing space at the office
- An infrequently-used space near an employee lounge or any other area where a sink is available
- A clean infrequently-used storage area
- A small corner of a room section with either permanent walls or portable partitions
- An "unused space" that is currently not well-utilized
- A conference room, a vacant office, a storeroom or a dressing room
- Construction of a room

Lactation Station Layouts

The following illustrations give an understanding of examples of options for lactation station layouts;



1) SINGLE USER LAYOUT

This is the most common set up used when there are few female employees of reproductive age. It involves installation of all the equipments (sink, table, chair, refrigerator, and storage cabinets) in an open room. In the event of more than one employee enrolled into the workplace support, a schedule on how to use the space will be necessary to enable sharing and privacy

2) MULTI-USER ROOM

This option is similar to the single user option and appropriate for institutions with a potentially high number of female breastfeeding employees. The set up could be in such a way that the common area has a refrigerator, sink and lockers while each of the lactation suites has a table and chair. The breastfeeding suites in the lactation station should be made private by use of curtains, screens or by partitioning.



Scheduling Lactation Space Usage



If a large number of breastfeeding employees will use the lactation station, the employer may want to consider scheduling room usage so as to maintain order. In maintaining privacy, each user can be given a code to use rather than her name. The lactation station should be kept locked when not in use to safeguard supplies equipment, and expressed breastmilk that may be stored in the refrigerator. Keys may also be retained by a designated individual and checked out by users as needed.

Below are some of the options that can be explored when scheduling lactation station usage;

- Electronic sign-in (a computerized room schedule) that allows employees to log in at preferred times
- Schedule sign-in sheets or dry-erase board at an accessible place by the users
- E-mail notices sent to employees who are using the room
- First-come. first-served basis with an "occupied" sign outside the door (this is effective if there are only a few female employees in need of the room).

Maintenance of the Room

Workplace support policy should stipulate that employers can provide general maintenance oversight of the room within their administrative services department, while individual users take responsibility of keeping the room clean.



Better Business Practices for Children Workplace Time

The following are some of the considerations for employers when allocating flexi time to allow for breastfeeding female employees to express or breastfeed their babies;

- Flexi time allows a gradual transition back to work after a mother completes her 3 months maternity leave thereby giving time for her to adjust to her body's changing needs while providing support for breastfeeding.
- A minimum period of 60 minutes in addition to the regular breaks to be allowed for every eight working hours. This should include the time taken by an employee to get to and from the lactation station and shall be counted as compensable hours worked provided that such intervals shall not be more than a total of one hour for every eight hour working period.
- Alternatively, if it is practically possible, the baby can be brought to the mother to breastfeed at work by the care giver during the work period
- If extra time is needed for milk expression or direct infant feeding, flexibility to make up for the time before or after the usual work schedule helps to make expenditure of time manageable.

Other alternatives to flexi time

The following back to work transition options can also be offered by employers:

- Employers can allow breastfeeding female employees to arrive to work late and/or leave work early as agreed
- Where applicable, home based work for a few weeks before resuming full-time work can be allowed
- Job-sharing can be highly effective for both employees and the employer.



Social support structures for breastfeeding at workplace

Managers/supervisors and senior management

- Incorporate information about the basic needs of breastfeeding employees in established company training programs
- Establish policies that recognize and address the needs of breastfeeding employees in the workplace
- Encourage supervisors to offer breastfeeding employees the flexibility to adjust work schedules around their breastfeeding breaks
- Disseminate information about the designated room and other components of the breastfeeding friendly workplace program
- Sensitize employees on importance of breastfeeding to both mother and baby
- Help facilitate mother-to-mother support opportunities e.g. peer meetings
- Coordinate management of the lactation station
- Aspire to be champions for workplace support.

Breastfeeding female employees: Peer support

Women value sharing successful strategies for managing breastfeeding and benefit from advice and support from other breastfeeding employees. Employers can help facilitate mother-to-mother support opportunities by arranging a monthly lunchtime mothers' meeting or facilitating an electronic discussion board on the company's website. Some lactation rooms feature a bulletin board or photo album for women to post photos of their babies and to share stories of their babies' progress.

- Consciously become a support system for one another. This can be achieved through leveraging on available platforms for information sharing
- Seek information on breastfeeding friendly workplace practices
- Engage in negotiations that improve support for breastfeeding friendly workplace
- Endeavour to deliver on their responsibilities both at work and in attaining optimal breastfeeding.
- Aspire to be champions for workplace support.







WHAT CO-WORKERS CAN DO



BE SUPPORTIVE OF THE MOTHER WHO NEEDS TIME AND FLEXIBILITY TO BREASTFEED

ENCOURAGE NEW MOTHERS WITH A POSITIVE, ACCEPTING ATTITUDE

RECOGNIZE THAT THE MONTHS AFTER HAVING A BABY ARE SPECIAL

BREASTFEEDING SUPPORT IN THE WORKPLACE MAKES A DIFFERENCE TO WORKING PARENTS



Better Business Practices for Children workplace Education and sensitization

Because successful breastfeeding is a learned behavior, basic breastfeeding information, made available beginning during pregnancy, helps both male and female employees make informed choices about infant feeding and builds support among family members and colleagues. Employers may offer a variety of educational options.

Topics for Prenatal Classes

- Reasons to breastfeed.
- Basic breastfeeding techniques.
- Tips for balancing work and breastfeeding.
- Proper procedures for expressing and storing human milk.

Lactation Counselling

Employers may also consider privately contracting with health professional to provide lactation support. Another option is to give employees contact information for lactation consultants in the community, hospital or private clinic nurses, or support groups that can help women deal with potential issues related to breastfeeding.

Back to Work Education

An employer contract with a health professional may includes a personalized "Back to Work Consult" as a company health benefit. This consult can help mothers make the transition back to work, assist them in learning to use a breast pump, and answer their questions.

The session includes specific information tailored to the employee's unique situation, including the following:

- Setting up a milk expression schedule at home and work to fit her needs.
- Identifying places at work to express milk.
- Learning effective techniques for milk expression.
- Storing and handling human milk in ways that fit her specific situation.
- Maintaining and building milk supply.
- Talking with her supervisor about her needs.
- Adjusting to the physical and emotional demands of returning to work





CHAPTER FOUR

MONITORING AND EVALUATION OF WORKPLACE SUPPORT FOR BREASTFEEDING

This chapter provides an overview of key concepts and details on the monitoring and evaluation of workplace support for breastfeeding. Collecting simple data to document the progress and value of the workplace support for breastfeeding, will help quantify potential returns on investment which in turn can be used for securing funding and support for the initiative. It is helpful to conduct a process evaluation to obtain feedback from female employees who benefit from the workplace support to aid in initiative improvement. It will also provide options for collecting feedback from the co-employees, supervisors/ managers and employers.



Options for collecting feedback

It is good practice for an employer to have a policy on breastfeeding at the workplace. This will help employers make fair decisions when handling requests from breastfeeding female employees.

a. Usage Logs

A record kept in the lactation station for users to record the hours the space is in use and to communicate any needs that may arise. To maintain privacy, each participant may be given a code rather than using her name. Usage logs are valuable in demonstrating participation and determining the need for additional space.

b. Employee Satisfaction Surveys

This is a survey which collects feedback from the female employees who benefited from the workplace support about what they valued most as well as their recommendations for improving the support. Typical questions measure satisfaction with the lactation space, availability of the space when needed, willingness of supervisors to provide needed flexibility for milk expression breaks, and usefulness of resources or materials. It is also important to note the length of time the employee breastfed.

c. Co-Worker Satisfaction Surveys

A survey of co-workers can provide insight into how well the workplace support is being accepted and what concerns might need to be addressed. It can also provide information on the benefits of breastfeeding-friendly workplaces.

d. Records Kept by the Manager/ Supervisor

The records kept by the supervisors and managers will provide the following information associated with workplace support;

- Rates of absenteeism and turnover
- Health care costs
- Management of the lactation station
- Information on flexi hours for breastfeeding employees
- Breastfeeding rates among employees benefiting from the workplace support
- Basic needs of breastfeeding employees in established company training programs
- Established policies that recognize the needs of breastfeeding employees in the workplace
- Information on resource materials including brochures and other relevant materials
- Information on mother-to-mother support opportunities offered
- Champions for workplace support among the company employees



Assessment tools for employers

An employer may develop tools for assessing the need for a workplace support, plan, communicate and obtain feedback about the value of the workplace support. Needs assessment and evaluation tools can assist in the creation of a comprehensive breastfeeding policy and provide a typical timeline for implementing a workplace support. Communication tools are helpful in promoting workplace support and its benefits. These promotional materials can be used in newsletters, on bulletin boards and in breastfeeding rooms.

INVESTING IN YOUR
EMPLOYEES - YOUR
MOST VALUABLE
ASSET - PAYS OFF
IN BOTTOM LINE
RETURNS

SMART COMPANIES
RECOGNIZE THEIR
EMPLOYEES AS
THEIR MOST
VALUABLE ASSET

REFERENCES

- Addati, Laura, Cassirer, Naomi, and Gilchrist, Katherine. (2016). Maternity and Paternity at Work: Law and Practice across the World. Geneva, CHE: ILO, 2014. ProQuest ebrary. Web. August, 13 2018. Copyright © 2014. ILO. All rights reserved., (June).
- Belfield, Clive R., & Kelly, Inas Rashad. (2010). The Benefits of Breastfeeding Across the Early Years of Childhood. National Bureau of Economic Research Working Paper Series, No. 16496.

http://doi.org/10.3386/w16496

3. Chuang, C., Chang, P., Chen, Y., Hsieh, W., Hurng, B., Lin, S., & Chen, P. (2010). Maternal return to work and breastfeeding: A population-based cohort study. International Journal of Nursing Studies, 47(4), 461–474.

http://doi.org/10.1016/j.ijnurstu.2009.09.003

4. GoK. (2010). The Constitution of Kenya, 2010. Retrieved August, 13 2018, from

http://www.lcil.cam.ac.uk/sites/default/files/LCIL/documents/transitions/Kenya_19_2010_Constitution.pdf

5. UNICEF, the UN Global Compact and Save the Children, 2013. Children's Rights and Business Principles. Retrieved September, 6 2018.

http://childrenandbusiness.org/

6. Hansen, Keith. (2016). Breastfeeding: A smart investment in people and in economies. The Lancet, 387(10017), 416.

http://doi.org/10.1016/S0140-6736(16)00012-X

 Hawkins, Summer S., Griffiths, Lucy J., Dezateux, Carol, & Law, Catherine. (2007). Maternal employment and breast-feeding initiation: findings from the Millennium Cohort Study. Paediatric and Perinatal Epidemiology, 21(3), 242–7.

http://doi.org/10.1111/i.1365-3016.2007.00812.x

 Horta, Bernardo L., Mola, Christian Loret De, & Victora, Cesar G. (2015). Long-term consequences of breastfeeding on cholesterol, obesity, systolic blood pressure and type 2 diabetes: a systematic review and meta-analysis, 30–37.

http://doi.org/10.1111/apa.13133

9. ILO. (2000). Convention C183 - Maternity Protection Convention, 2000 (No. 183). Retrieved from

http://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPU B:12100:0::NO:12100:P12100_ILO_CODE:C183

 Mills, Susan Polston. (2009). Workplace lactation programs: a critical element for breastfeeding mothers' success. AAOHN Journal: Official Journal of the American Association of Occupational Health Nurses. 57(6), 227–231.

http://doi.org/10.3928/08910162-20090518-02

- Ministry of Health, 2018. Guidelines for Securing a Breastfeeding Friendly Environment at the Work Place (Draft Guidelines)
- National Bureau of Statistics-Kenya and ICF International. (2015). 2014 KDHS Key Findings. Rockville, Maryland, USA: KNBS and ICF International.
- 13. Ortiz, J., McGilligan, K., & Kelly, P. (2004). Duration of breastmilk expression among working mothers enrolled in an employer-sponsored lactation program. Pediatric Nursing, 30(2), 111–119.
- 14. Rollins, Nigel C., Bhandari, Nita, Hajeebhoy, Nemat, Horton, Susan, Lutter, Chessa K., Martines, Jose C., ... Victora, CG. (2016). Why invest, and what it will take to improve breastfeeding practices? The Lancet, 387(10017). 491–504.

http://doi.org/10.1016/S0140-6736(15)01044-2

15. Ryan, Alan S., Zhou, Wenjun, & Arensberg, Mary Beth. (2006). The effect of employment status on breastfeeding in the United States. Female employees's Health Issues. 16(5), 243–251.

http://doi.org/10.1016/j.whi.2006.08.001

16. Tsai, Su-Ying. (2013). Impact of a Breastfeeding-Friendly Workplace on an Employed Mother's Intention to Continue Breastfeeding After Returning to Work. Breastfeeding Medicine, 8(2), 210–216.

http://doi.org/10.1089/bfm.2012.0119

17. WHO. (2014). Global Nutrition targets 2015: Breastfeeding Policy Brief. Retrieved from

http://apps.who.int/iris/bitstream/10665/14902 2/1/WHO_NMH_NHD_14.7_eng.pdf?ua=1

18. WHO, & UNICEF. (2003). Global strategy for infant and young child feeding. Report, 1–30.

http://doi.org/ISBN 92 4 156221 8

 www.kenyalaw.org. (2012). Breastmilk Substitutes (Regulation and Control) Bill.

http://doi.org/10.1017/CBO9781107415324.004

- Wyatt, Stephanie N. (2002). Challenges of the working breastfeeding mother. Workplace solutions. AAOHN Journal: Official Journal of the American Association of Occupational Health Nurses, 50, 61–66.
- UNDP. (2002). Handbook on Monitoring and Evaluating for Results. New York. Retrieved from

http://web.undp.org/evaluation/documents/handbook/me-handbook.pdf

22. UNICEF. (2003). Chapter 5. MONITORING AND EVALUATION. Retrieved from

https://www.unicef.org/spanish/evaluation/files/PPP_excerpt_ch5.pdf

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