



**Testimony for the House Economic Matters Committee  
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**HB 1293 Labor and Employment - Break Time for Expression of Breast Milk by  
Employees - Requirement**

**SUPPORT**

The ACLU of Maryland supports HB 1293, which would require certain employers to provide reasonable break times for employees to express milk and provide a private place, besides a bathroom, for the employee to do so.

The medical benefits of breastfeeding are well established.<sup>1</sup> Accordingly, there is a strong public policy at both the state and federal level in favor of accommodating the needs of nursing mothers in numerous contexts.<sup>2</sup>

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Nursing mothers who are away from their children need to empty their breasts using a breast pump on approximately the same schedule as their babies' feeding schedule. HB 1293 requires employers to make time allowances for women to pump and thereby remain in sync with their babies' feeding schedules. In addition to providing the time for pumping, HB 1293 also requires employers to provide a private space for pumping, besides a bathroom. Pumping in a public bathroom raises concerns of both comfort and sanitation: there is unlikely to be a place other than the floor or the toilet itself on which to sit down or place her equipment and supplies, and for obvious reasons, the production and handling of food for infants is not properly done in a toilet stall. *See Currier v. Nat'l Bd. of Med. Examiners*, 462 Mass. 1, 9, 965 N.E.2d 829, 836 (2012) ("It is not recommended that a restroom be used for expressing milk due to the risk of infection.").

Moreover, HB 1293 is supported by the Maryland Health Code, which explicitly provides that "[a] mother may breast-feed her child in any public or private location in which the mother and child are authorized to be," and further provides that "[a] person may not restrict or limit the right of a mother to breast-feed her child." Md. Code Ann., Health-Gen. § 20-801 (West).

For the foregoing reasons, the ACLU of Maryland urges a favorable report on HB 1293.

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<sup>1</sup> See, e.g., Am. Academy of Pediatrics, Section on Breastfeeding, Breastfeeding and the Use of Human Milk, 129 Pediatrics e827 (2012), available at <http://pediatrics.aappublications.org/content/129/3/e827.full.pdf+html> (recommending "exclusive breastfeeding for about 6 months, with continuation of breastfeeding for 1 year or longer as mutually desired by mother and infant; see also Alison Steube, The Risks of Not Breastfeeding for Mothers and Infants, 2 Rev. Obstetrics & Gynecology 222 (2009), available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2812877/> ("For mothers, failure to breastfeed is associated with an increased incidence of premenopausal breast cancer, ovarian cancer, retained gestational weight gain, type 2 diabetes, myocardial infarction, and the metabolic syndrome.").

<sup>2</sup> See, e.g., U.S. Dep't of Health and Human Servs., Office of the Surgeon Gen., The Surgeon General's Call to Action to Support Breastfeeding, v (2011).