

**BREASTFEEDING BRIEFS**  
SPECIAL EDITION, 2019



– Since 1979 –

IBFAN Position Paper on  
*Maternity Protection at Work*

This paper presents IBFAN's position on maternity protection at work and the tools for advocacy needed to increase the implementation of measures that enable mothers to participate as equals in the workplace while exercising their reproductive rights to breastfeed.

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## Women's Dual Roles

**W**omen's dual roles in society are that of *reproduction* (maternity), and of *producing* (work).<sup>1</sup> As much as these two roles are a source of women's empowerment and emancipation, they often stretch women's capacity in opposing demanding directions. Women's reproductive role consists of pregnancy, giving birth, and caring for and nurturing their baby through breastfeeding for periods of several months to several years. To enable women to exercise their dual roles, new mothers need time to recover from childbirth, to bond and to care for their infant, and to exclusively breastfeed for the recommended duration while retaining their job status and income.

During much of this time women need support such as medical follow-up and care, adequate foods,

assistance and counselling, support to reduce stress and rest to replenish energy.

Historically, women's role of producing goods also includes caring for the group they belong to: cooking, gathering and growing food, and in more recent times, working, often outside of the home, for pay. The 21st century sees more women in the workplace than at any previous time, giving increased focus on the worldwide phenomenon of women's double workday. The majority of women hold two jobs: the unpaid domestic work that is generally not even acknowledged or valued as work, and the "real" paid work at a workplace.

In order to support women in their dual roles, maternity protection at work and women's entitlement to it are essential.

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## Maternity Protection as a Human Right

**S**ince the 1990s IBFAN's work on maternity protection has been rooted in the principles of human rights, focusing on securing the rights of all working women (the *rights holders*), through the obligations of the State (the *duty bearer*) to respect, protect, and fulfill these workers' rights. These include the right to equality, and non-discrimination on the basis of gender.

Maternity protection supports gender equality and contributes to dismantling barriers which prevent women from obtaining economic autonomy on an equal footing with men. It means

defending women's rights to participate in the workplace, to choose their job and to retain their job status. Moreover it entitles women to work in dignity, and in conditions that bar discrimination and discriminatory practices based on their sex and their reproductive role. It signifies fair salaries that meet their basic needs as well as those of their families, including when they are on maternity leave.

The **Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW)**<sup>2</sup>, an international treaty adopted by

***International Baby Food Action Network (IBFAN)***, established in 1979, consists of more than 273 public interest groups in over 168 countries working globally and nationally to reduce infant and young child mortality and morbidity. IBFAN aims to improve the health and well-being of babies and young children, their mothers, and their families through the protection, promotion and support of breastfeeding and optimal infant and young child feeding practices. IBFAN works for universal and full implementation of the World Health Organization International Code and subsequent WHA Resolutions, adequate maternity protection, and other related infant and young child feeding issues. IBFAN is the recipient of the 1998 Right Livelihood Award.

IBFAN's work is based on the principle: "Breastfeeding is a collective right of women and children." IBFAN calls upon governments to enact maternity protection through effective legislation, including paid leave and adequate workplace nursing breaks.

the UN General Assembly in 1979, recognizes the importance of maternity protection, not only as an essential support for mothers but also as a means to achieve gender equity (CEDAW Art.11.1.f & 11.2.a-d). In 1981 it was adopted as an international bill of rights and has to date been ratified by 189 countries.

CEDAW: *“States Parties shall take all appropriate measures to eliminate discrimination against women in the field of employment in order to ensure, on a basis of equality of men and women, the same rights.”*

The **Convention on the Rights of the Child (CRC)**,<sup>3</sup> adopted in 1979, is yet another critical instrument for the protection of maternal and child rights. It recognizes the, *“family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community”*.

18.2 *For the purpose of guaranteeing and promoting the rights set forth in the present Convention, States Parties shall render appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities and shall ensure the development of institutions, facilities and services for the care of children.*

24.1 *States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.*

24.2(c) *the right of the child to adequate nutritious food, 24.2(d) To ensure appropriate pre-natal and post-natal health care for mothers, 24.2(e) To ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding.*

27.3 *States Parties, in accordance with national conditions and within their means, shall take appropriate measures to assist parents and others responsible for the child to implement this right and shall in case of need provide material assistance and support programmes, particularly with regard to nutrition, clothing and housing.*

In addition to the rights of the child, the rights of the mother to pre- and postnatal care (Art.24.2.d), the rights of parents to measures assisting them in their work and parental responsibilities (Art.18.2) and to material assistance and support (Art 27.3) are also included in the CRC requirements for governments to enact.

The CRC has been ratified by nearly all member states (only two countries, the USA and Somalia, are not signatories). Therefore, obligation to comply to their provisions by governments and their institutions are near universal.

The enabling of the highest attainable standard of health is to provide the necessary supports that mothers need to care for and to nurture their children; such supports include maternity protection. To ensure that supports are realized for mothers, countries are required to report every five years on their progress in implementing the CRC articles. Breastfeeding rates and supports are included in the country reviews.

In 2013, the CRC issued the **General Comment No. 16**<sup>4</sup> (art 54) stating that employment conditions should be created within business enterprises to assist working parents and caregivers in fulfilling their responsibilities to children in their care. These would include: family-friendly workplace policies, including parental leave; support for breastfeeding; access to quality childcare services; wages sufficient for an adequate standard of living; protection against discrimination and violence in the workplace; and secure and safe workplaces.

In their **joint statement (2016)**,<sup>5</sup> the **UN Special Rapporteurs on the Right to Food, the Right to Health, the Working Group on Discrimination against Women in law and in practice, and the Committee on the Rights of the Child** in support of increased efforts to promote, support and protect breastfeeding declared that: *“Breastfeeding is a human rights issue for both the child and the mother ... Women have the right to accurate, unbiased information needed to make an informed choice about breastfeeding ... And they have the right to adequate maternity protection in the workplace and to a friendly environment and appropriate conditions in public spaces for breastfeeding which are crucial to ensure successful breastfeeding practices.”*

# Maternity Protection as a Breastfeeding Right

**M**aternity protection entitles mothers – and their babies to take an adequately paid leave from work that is long enough to ensure their own health and rest and the healthy beginnings of their child. The time allotted should be enough to bond with him or her; to establish a sound breastfeeding routine and to follow the WHO recommendation for six months of exclusive breastfeeding and sustained breastfeeding to two years and beyond.

In addition to the international reproductive rights mentioned earlier, mothers also need a period of rest before and after birth (maternity leave); income security; the guarantee of reintegrating their job after the period of leave; and protection from all forms of discrimination related to their reproductive role. They also need the social and health system supports to establish breastfeeding and a workplace that is not prejudicial to the health of the mother or the child.

## **The International Code of Marketing of Breastmilk Substitutes and subsequent WHA resolutions.**<sup>6,7</sup>

The aim of the Code and Resolutions is to eliminate commercial interference with how mothers/parents feed their infants. The Code also urges governments to implement its measures. It prohibits the promotion of infant formula, other infant and young child feeding products, and bottles and teats.

Other global documents which focus specifically on breastfeeding also advocate for maternity protection at work. The two **Innocenti Declarations**<sup>8,9</sup> (1990, 2005) elaborate on four operational targets: to promote, protect and support breastfeeding, and the fourth which urges States to enact imaginative maternity protection legislation, protecting the breastfeeding rights of working women.

In 1995 the **Beijing Platform for Action**<sup>10</sup> underlined the numerous areas where women at work need protection, as well as the specific actions to be undertaken by government and other actors to meet these needs:

*165(c) Eliminate discriminatory practices by employers and take appropriate measures in*

*consideration of women's reproductive role and functions, such as the denial of employment and dismissal due to pregnancy or breast-feeding, or requiring proof of contraceptive use, and take effective measures to ensure that pregnant women, women on maternity leave or women re-entering the labour market after childbearing are not discriminated against.*

In 2002 the **WHO Global Strategy on Infant and Young Child Feeding**<sup>11</sup> emphasized, in several paragraphs, the importance of strong protective maternity legislation for working women, to enable them to balance their work and family responsibilities.

The recent publication of WHO and FAO (2018) **Strengthening Nutrition Action**:<sup>12</sup> A resource guide for countries based on the policy actions proposed by the Second International Conference



Ginger market: IBFAN Calendar

on Nutrition (ICN2) recommends the following SMART commitments for Recommendation 30 (Implement policies and practices, including labour reforms, as appropriate, to promote protection of working mothers).

- *By December 2020, the Ministry of Labour has set up legislation to ensure that at least a given percent as set by government policy of the public workspaces have a private space where women can breastfeed their child during working hours and that employers provide paid daily breaks or a daily reduction of hours of work for female lactating workers.*
- *By December 2020 the Government has ratified the ILO Maternity Protection Convention ensuring maternity leave of at least 14 weeks paid at a percent of previous earnings as set by government policy, funded by compulsory social insurance or public funds.*

The **Sustainable Development Goals**<sup>13</sup> (SDGs) are yet another global instrument to emphasize the importance of maternity protection. Goal 1 (no poverty), Goal 3 (good health), Goal 5 (gender equality), Goal 8 (decent work), and Goal 10 (reduced inequalities) are all relevant to maternity protection in general, as well as to maternity protection at work.

# Instruments on Maternity Protection at Work

A number of UN instruments and conventions as early as the 1919 first **International Labour Organization (ILO) maternity protection convention (C3)**<sup>14</sup> have recommended to national governments the need to enact legislation to protect mothers and parents in their maternity and parenting roles. These recommendations provide the minimum standards for governments to implement.

Since the adoption of the first ILO (C3, 1919) maternity protection convention by the tripartite ILO conference, two more conventions (C103, 1952; and C183, 2000)<sup>14</sup> and two recommendations (R52, 1952 and R191, 2000) were adopted. Each new convention expanded entitlements for women workers. (See sidebar, on page 5.) These provided governments with the opportunity to strengthen their national measures.

Countries are urged to ratify these ILO conventions, which obligate the implementation into national legislation as minimum standards for maternity protection.

## Additional ILO conventions and recommendations for specific situations with provisions for maternity protection<sup>14</sup>

- night work C089 (1948) and P089 (1990),
- social security C102 (1952); C118 (1962); C157 (1982); R202 (2012),
- non-discrimination C111 (1958),
- health at the workplace (approximately 40 conventions),
- informal workers or transition from informal to formal economy R204 (2015),
- domestic workers C189 (2011),
- agriculture workers C184 (2001),
- plantation workers C110 (1958),
- home work C177 (1996),

- migration for employment C097 (1949),
- nursing personnel C149 (1979);

When maternity protection provisions are enshrined into legislation, employers have the responsibility to provide the entitlements required. Concurrently, governments must make sure that the maternity protection rights of working women are monitored and enforced in a meaningful way.

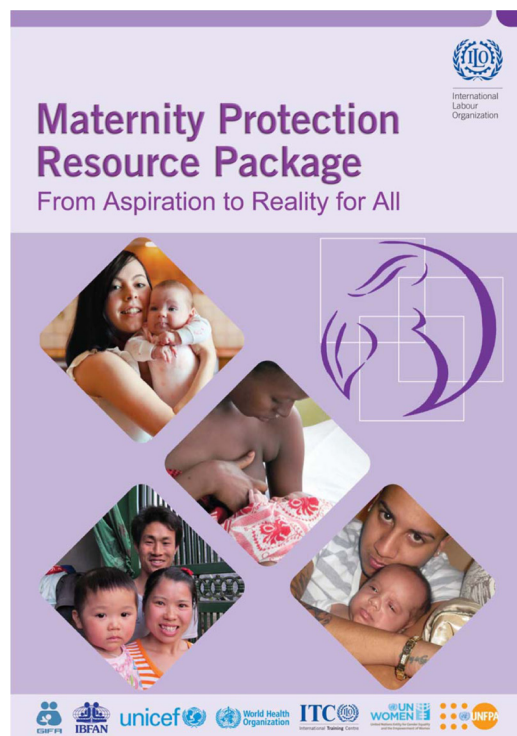
Another valid document, the **ILO resolution of 2004**,<sup>15</sup> called upon all governments and social partners to actively contribute to provide all employed women with access to maternity protection; and to consider how women workers not covered

especially those in vulnerable groups, can be provided with access to maternity protection.

Within a given country, **collective bargaining agreements** are signed between concerned parties, such as employers and trade unions, or professional organizations, or a group of enterprises, or a firm. These agreements must, at the minimum, meet the provisions of national legislation, but they can be stronger. Collective bargaining agreements are another mechanism where maternity protection can be included.

## The Maternity Protection Resource Package

The Maternity Protection Resource Package developed by ILO,<sup>16</sup> in partnership with the WHO, UNICEF, UNFPA, UN Women and IBEAN-GIFA, is a reference for self-learning, training, policy advice, research and action by: governments, trade unions, employers' organizations, NGOs, researchers and practitioners. The package highlights numerous examples of action. The key message is that maternity protection at work for all is both possible and desirable; it contributes to maternal and child health and well-being, social cohesion, and decent work for all women and men.



## ILO C183 and R191

An ILO convention establishes minimum international standards for basic labour rights. Conventions are negotiated leading to a final text. The convention can be ratified by a member state and is then binding for this state, which means that laws must be brought in conformity, and subsequent legislation cannot be modified to be less than the minimum standard.

Recommendations are not open for ratification, but they give further details for higher standards.

### ILO C183 and R191 are much more than maternity leave!

#### Main points ILO C183:

- minimum of 14 weeks maternity leave,
- cash benefits during leave at a level that woman can maintain herself and her child with a suitable standard of living,
- medical benefits for the women and the child, including prenatal, childbirth and postnatal care as well as hospitalization care when necessary,
- employer not individually liable for the costs of the monetary benefit,
- leave for illness or complications arising out of pregnancy or childbirth,
- pregnant and breastfeeding mothers not to perform work that is prejudicial to the health of the mother or the child or where a significant risk has been assessed,
- Protection from dismissal during pregnancy and while returning from leave,
- Right to return to same position or equivalent paid position,
- one or more breastfeeding breaks or daily reduction of hours, counted as working time and remunerated accordingly.

#### Main points ILO R191

Recommendations are not open for ratification, but they give further details for higher standards.

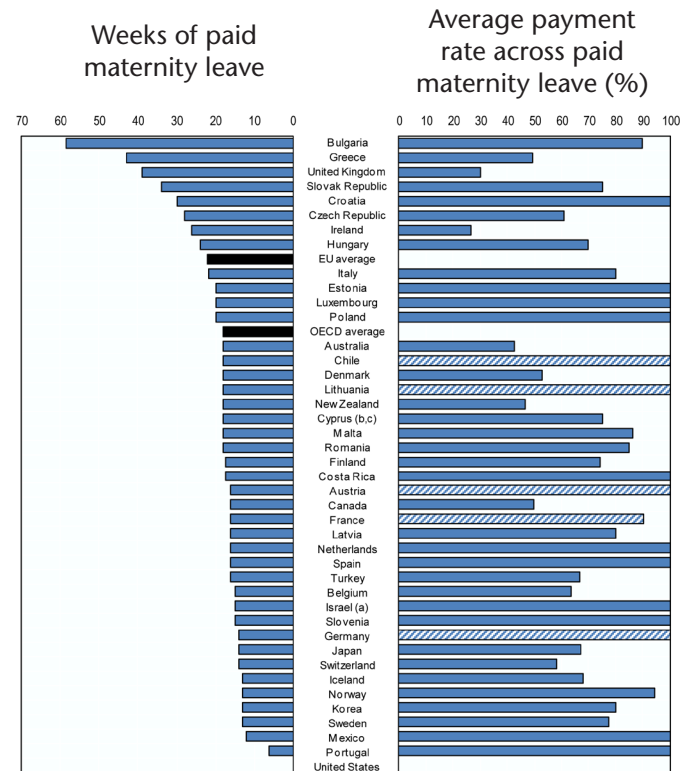
- minimum 18 weeks maternity leave,
- extension of the leave for multiple births,
- Cash benefits to be raised to the full amount of the previous earnings,
- dental and surgical care, pharmaceutical and medical supplies,
- Risk assessment to be made available to the mother,
- In case of risk an alternative to such work to be offered or paid leave,
- No night work if a medical certificate declares such work incompatible with pregnancy or breastfeeding,
- If necessary leave for medical visits related to the pregnancy during working hours,
- in case of death, sickness or hospitalisation of the mother, the father should be entitled for an equal leave,
- employed mother or father should be entitled to parental leave following the expiry of the maternal leave,
- leave considered as period of service,
- nursing breaks adapted to particular needs,
- daily reduction possible at the beginning or the end of the working day,
- Nursing facilities under adequate hygienic conditions at or near the workplace.

## Maternity leave provisions across OECD countries 2018

The Organisation for Economic Co-operation, stationed in Paris, with a membership of 36 countries, functions to collaborate on, “key global issues at national, regional and local levels”, including reporting on the status of maternity benefits in member countries.

The OECD Family Database, 2018, reports that most mothers birthing in OECD countries have entitlements of 18 weeks or more paid maternity leave. This leave is in line with the ILO Convention on maternity leave. The United States is the only OECD country with no statutory leave provisions.

Maternity leave pay entitlements for the OECD countries replace over 50 percent of previous earnings. Ireland and the UK provide the lowest payment rates, while in 13 countries mothers are provided with full compensation on average earnings.



From: OECD Family Database, [oe.cd/fdb](http://www.oecd.org/fdb). PF2.1 Parental leave systems, OECD. <http://www.oecd.org/els/family/database.htm>

# The Formal and the Informal Work Place

Maternity benefits are essential supports to enable mothers to breastfeed to achieve optimal health for both mother and child. Maternity protection also includes a safe and healthy workplace and importantly the right to work in an environment that facilitates breastfeeding when they return to work and thus are entitled to breastfeeding breaks and to breastfeeding facilities at the place of work.

Policies are needed for both the formal workplace and the informal sectors. The World Bank reports that the female share of the labour force has increased significantly over the past decades and in most parts of the world has reached near 50 percent. In the southern hemisphere the majority of women work in the informal economy. This is estimated<sup>17</sup> to be over 80 percent in South Asia; 74 percent in sub-Saharan Africa; and 54 percent in Latin America and the Caribbean. A dearth of policies for this sector remains.

## The formal work place

Women working in the formal workplace, such as a company or business, are hired with recognized working conditions that include working hours, salary and benefits. For the majority of women in industrialized countries the formal work place is the major source of employment whereas in low and middle income the numbers of women in this sector is lower. Where governments have maternity protection legislation in place, women in this sector benefit from the entitlements governed by law. These may include all or some provisions: maternity leave, continued payment while on leave, job security, breastfeeding breaks, a safe and healthy work environment by not exposing the mother or the child to risks.

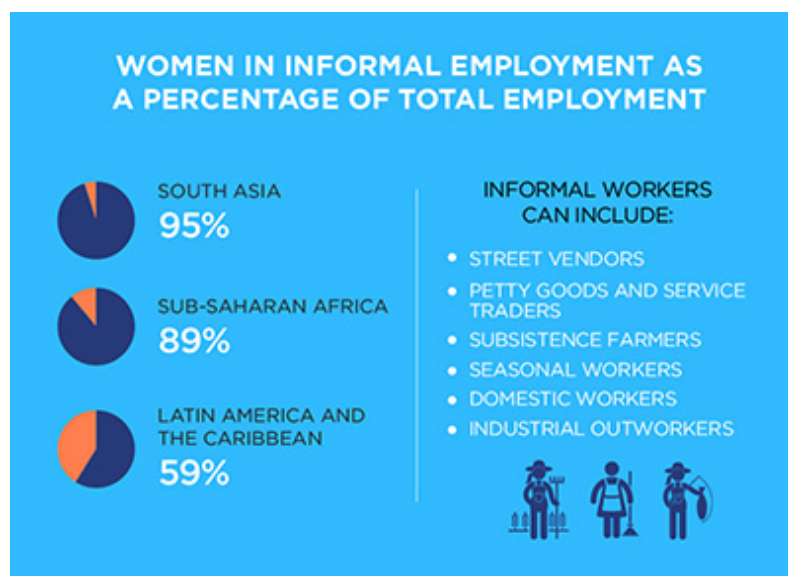
## Informal economies

In the informal sector the majority of women who work independently and who are mostly the poorest, includes those who sell goods in marketplaces, street vendors, work on family farms or engaged in domestic work, and are frequently able to bring their infants to work with them.

Others work for small enterprises which are often exempted from maternity benefits legislation. Since

these work situations may be outside of the regulatory frameworks that govern employment, it becomes essential to consider policies for all to cover all working situations.

Stumbitz's (et al, 2018)<sup>17</sup> examination of how mothers in the informal economy in Ghana meet their breastfeeding needs, recognizes the importance of



From: UN Women, Progress of the World's Women 2015-2016

traditional cultural values, the value of “reciprocity”, the give and take relationship between mother and employer and the importance of development of trust. As important as these “informal” mechanisms are, mothers remain vulnerable to power and gender influences and the economic impact of unpaid leave. Hence new mothers in this sector remain largely unprotected and most affected by both maternal and child mortality.

An important advocacy tool could be the **General recommendation No 34 of CEDAW on rural women (2016)**<sup>18</sup> that calls on states parties: **52.(h)** providing child and other care services in rural areas, including through solidarity and community-based care services, in order to alleviate women's burden of unpaid care work, to facilitate their engagement in paid work, and to allow them to breastfeed during working hours;.. The same document states in **43(g)** pregnant girls in rural schools are retained during pregnancy and allowed re-entry to school following childbirth, and that childcare facilities and breastfeeding rooms as well as counselling on childcare and breastfeeding are made available.

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## Importance of Maternity Protection: Who Benefits?

Everyone benefits from measures protecting maternity in the workplace. The mother and her baby are healthier and happier, more rested, less stressed and more focused on each other. The entire family manages more smoothly the arrival of the newborn, accepting it more wholly and often learning to take on new roles. Employers too find various advantages: their financial input is compensated by a contented workforce, by increased production, less turnover, less absenteeism and increased loyalty. As for the State, the added value includes lower health costs, a decrease in morbidity and mortality rates, an overall healthier population, increased social and economic peace and welfare, and a more egalitarian attitude towards gender relations. By protecting its female workers and fulfilling their maternity rights, the State contributes to developing its own wealth and the wellbeing of its people.

Common knowledge tells us that mothers need time to recover from birthing, parents need time to bond with their new infants and infants need to be with their mothers so that breastfeeding can be initiated and exclusively practised for the first six months of life.

What we instinctively know is also supported by research which overwhelmingly tells us that when we support mothers and babies to remain together breastfeeding is facilitated and continued for longer durations and health outcomes for infants and mothers are optimized.

For example, Nandi A (2016)<sup>19</sup> looked at the affect of legislated paid maternity on infant mortality in 20 Low and Middle Income Countries (LMIC). Their analysis suggested that each additional month of paid leave was associated with eight fewer infant deaths per 1000 live births. Given that infant mortality rates are higher in LMIC, and the importance to overall maternal and child health, the impact of paid leave is substantial in poorer countries.

Research from Brazil by Monteiro FR (2017)<sup>20</sup> tells us that when mothers did not have maternity leave, there was a strong association with “interruption” of exclusive breastfeeding among women in the formal sector. The authors stressed the

importance of working women’s rights to maternity protection and the protection of breastfeeding.

Clearly women’s health is also protected by maternity leave policies. In European countries, Avaendano M (2015)<sup>21</sup> found significant mental health advantages for working mothers. These benefits extended into older age, implying that maternity protection contributes to “healthy aging among women”. Also, that this outcome has significant impact on health costs as well as the social involvement and productivity of older women.

A number of reviews<sup>22, 23</sup> also confirmed a positive association between the length of maternity leave and breastfeeding duration. The authors recommended that all women, especially the most vulnerable have access to maternity protection as a public health policy.

Positive outcomes are also noted in high income countries.<sup>24, 25</sup> Although the US is one of the only countries with no mandatory paid leave and has not signed the ILO Convention 183, Rossin M (2011)<sup>26</sup> found that maternity leave resulted in small increases in birth weight, less likelihood of premature births and lower infant mortality. This affect was found for those able to access unpaid leave, such as college educated and married mothers. Paid breastfeeding breaks are also associated with increased exclusive breastfeeding rates.

Heymann (2013)<sup>27</sup> looked at the impact of guaranteed paid breastfeeding breaks. In the formal workplace setting their survey found that 130 countries had guaranteed paid breaks, seven had unpaid guaranteed breaks and 45 countries had no policy. Where paid guaranteed breaks existed for at least six months the exclusive breastfeeding rates were 8.86 percent higher. In the informal workplace where the majority of the world’s poorest women work, mothers who work in settings such as markets can often bring their infants to work for feeding; however, those employed by the informal economy for the most part do not benefit from legislated policies and remain vulnerable and dependent on cultural values of reciprocity and community support.



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## Importance of National Regulations for All Working Women

The recognition of breastfeeding as a human right places the obligation to respect and enable that right on governments. Implementing maternity protection measures is the responsibility of the State. This requires enacting effective legislation that ensures that all mothers and their infants have full access and are able to benefit from maternity protection.

Legislative measures are the most effective to ensure full access and protection for the most vulnerable in society. It follows that all of society, citizens, employers, unions, workers, have specific duties and obligations to comply with maternity legislation.

*For those working with mothers, children and parents, it is necessary to be knowledgeable about the national laws and where these are weak or inadequate to advocate for improved protection for all mothers.*

Since the 1980s, the vast majority of States worldwide have taken measures to safeguard maternity, and today nearly all countries of the world have legislated various measures to protect at least some categories for working women.

The few remaining countries without national regulation still leave maternity protection to the vagaries of the workplace or to what individual mothers or parents are able to arrange. Thus, **national**

**legislation** is the most secure means to provide universal access to maternity protection for working women and their families.

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## IBFAN's Position on Optimal Maternity Provisions

To optimize the benefits of maternity protection for mothers, children, families, employees, employers and all of society, the question must be asked what provisions and mechanisms are needed and how are these to be achieved?

Based on the evidence of the benefits derived and the entitlements ratified by the global human rights documents, IBFAN recommends the following provisions to be implemented through national legislation as a comprehensive set of measures.

### Maternity protection measures for all women

- *Maternity protection provisions should cover all women, including both non-working and working women; amongst working women, maternity protection should include those working in both the formal and the informal economy.*

Globally, the majority of women working either outside of the home or home-based are not covered by maternity protection legislation. Most of world's women find themselves in work environments that have no regulated structures to provide for their maternity needs. These are domestic workers; the

women who work in agriculture; those who are put into the categories of informal workers; the women who are part-time workers; those who are self-employed and work as independents; or those who have not worked for the same employer long enough. Steps need to be taken everywhere to extend protection to all categories of women, with special attention to the most vulnerable of all, those living below the poverty line, and those in the informal economy, in domestic service and in agriculture.

- *Maternity protection should cover affordable access to adequate nutrition based on food diversity and to quality health care services, including nutrition and breastfeeding counseling. Such services should be provided through the development of innovative schemes, for example: food or cash transfers, social security legislation, health care insurances and counselling as part of public health care.*

### Maternity protection measures specific to working women

- *Maternity leave (and adoption leave) should be a minimum of 26 weeks, plus four weeks of*

*compulsory leave before birth* for a total leave of a minimum of 30 weeks. A minimum of 26 weeks after birth allows mothers to follow WHA recommendations regarding six months of exclusive breastfeeding, to recover from birth and bond with their infant.

- *Maternity leave should be paid for the full duration of the leave at the rate of 100 percent of the worker's average salary over the past year. It should be paid by the State (social security, social insurance) rather than by the employer, to avoid discrimination against female workers of reproductive age.*
- *Medical expenses related to maternity must be covered by national health insurance: pre- and post-natal visits, professional assistance/hospitalization at birth, breastfeeding counselling, medication, transportation.*
- *All work that is potentially dangerous to the health of the mother, the fetus or the baby should be forbidden for pregnant and breastfeeding workers. Workers should be transferred to another post in situations of unsafe conditions, or stop working temporarily (with pay) if a transfer is not feasible.*
- *Maternity protection measures must include job status protection. On returning to the workplace after maternity leave, the worker should have the guarantee that she will return to the same or an equivalent post, without loss of pay or of other benefits (seniority, etc.).*
- *Maternity protection measures must guarantee against dismissal during pregnancy, during maternity leave and for a determined period after the end of the leave (and in the very least while she is still breastfeeding). In the case of dismissal, the employer carries the burden of proof concerning the reason of dismissal.*
- *A female worker of reproductive age may not be discriminated against because she is or may become pregnant or is breastfeeding. An employer may not request a pregnancy test or proof of sterility, either before or during employment except in very specific cases where the job conditions negatively affect the health of the worker and/or of her fetus or of the breastfed baby.*
- *Breastfeeding workers must be entitled to daily paid breastfeeding breaks of at least 2x30 minutes (or to a shorter workday) for the entire duration of breastfeeding. Breastfeeding breaks*



Bernard-Burkina Faso: IBFAN calendar

must be classified as work-time and thus *be paid by the employer.*

- *The workplace should accommodate the needs of breastfeeding mothers.*

A majority of these demands are enshrined in the ILO Maternity Protection convention 183 or in Recommendation 191.

## **Protection for parents with family responsibilities**

- *Paid paternity leave of at least five days should be given to fathers at the time of birth so as to fully support their partner and bond immediately with the newborn.*
- *Both parents should be entitled to a period of paid parental leave of several months with the guarantee of returning to their original post. Such leave should be shared by both parents in order to encourage fathers' involvement in family life, care and responsibilities. Parental leave should be supported with sufficient income benefits to allow for decent living conditions.*

Moreover, all work that exposes the male or female worker of reproductive age to substances or conditions potentially harmful to their reproductive functions, should be prohibited or modified to reduce or eliminate health risks.

- The State should ensure that employers develop, in consultation with their female workers, family-/baby-/child-friendly policies that enable workers, both female and male, to balance their work and family responsibilities: written policies, information sharing, flexible schedules,

home work, in-house creches and children's rooms, job sharing, daytime scheduling of meetings, longer breastfeeding breaks, etc.

**These elements are all part of a whole and should be considered in their entirety, not separately.**

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## Get active: advocate for ratification of ILO Conventions (page 4)

**D**uring the One for All - ILO Centenary Ratification Campaign (2019)<sup>28</sup> the following countries have already ratified conventions implementing better protection for women with children.<sup>29</sup>

- **Costa Rica - C156:** Workers with Family Responsibilities Convention, 1981 (No. 156) - 11 Jul 2019;
- **San Marino - C183:** Maternity Protection Convention, 2000 (No. 183) - 19 Jun 2019;
- **Brazil - C189:** Domestic Workers Convention, 2011 (No. 189) - 31 Jan 2019;

- **Peru - C189:** Domestic Workers Convention, 2011 (No. 189) - 26 Nov 2019;
- **Niger - C183:** Maternity Protection Convention, 2000 (No. 183) - 10 Jun 2019;
- **Mauritius - C183:** Maternity Protection Convention, 2000 (No. 183) - 13 Jun 2019;
- **Madagascar - C189:** Domestic Workers Convention, 2011 (No. 189) - 11 Jun 2019;
- **Serbia - C184:** Safety and Health in Agriculture Convention, 2001 (No. 184) - 12 Mar 2019;
- **Sweden - C189:** Domestic Workers Convention, 2011 (No. 189) - 04 Apr 2019.

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## Conclusions

**I**BFAN supports the global human rights statements and instruments as the basis for just and equitable protective labour legislation everywhere, and it commits to defending the full rights of working mothers at all levels of society and in all societies. It thus works actively to support governments, communities, workplaces as well as individuals and families towards implementing and enjoying **maternity protection measures for all working women**.

Maternity protection legislation for working women differs from one country to the next; however, it still needs to be improved everywhere. For some the scope is much too narrow and qualification criteria too restricted, thus excluding large groups of workers; in many others, legislated maternity leave remains too short or is not adequately remunerated, or not for the full period of leave; while in still others, breastfeeding breaks simply do not exist...

Advocating for improved maternity protection as a working woman's right, specific goals should be prioritized, based on independent analysis of

the national or local needs and capacity to implement. Analysing the situation will help IBFANers and their allies decide how best to protect working women during maternity and breastfeeding.

However, IBFAN's mission goes far beyond improving the maternity protection measures of female workers alone.

The network has come to the point where it needs to widen its purview in this field, to reflect upon and defend the **reproductive rights of all women** during maternity and lactation. All women, be they working women or not, be they accounted for or not as part of the active population, be their work officially considered of value or not by the State, be they married or single, be they rich or be they poor, have maternity rights and the right to their enjoyment.

This is the direction that IBFAN will take in future: from now on, we will be making the obvious step forward – from advocating for “maternity protection at work” to advocating even more urgently for “maternity protection for all women”.

## Notes

- 1 Some women with access to family planning methods opt not to take up their reproductive role.
- 2 <https://www.un.org/womenwatch/daw/cedaw/>
- 3 <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>
- 4 [https://tbinternet.ohchr.org/\\_layouts/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=5&DocTypeID=11](https://tbinternet.ohchr.org/_layouts/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=5&DocTypeID=11)
- 5 <https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=20871>
- 6 [https://www.who.int/nutrition/topics/wha\\_nutrition\\_iycn/en/](https://www.who.int/nutrition/topics/wha_nutrition_iycn/en/)
- 7 <https://www.who.int/nutrition/publications/infantfeeding/manual-ending-inappropriate-promotion-food/en/>
- 8 <https://www.unicef.org/programme/breastfeeding/innocenti.htm>
- 9 <http://www.innocenti15.net/declaration.pdf.pdf>
- 10 <https://www.un.org/womenwatch/daw/beijing/platform/>
- 11 <https://www.who.int/nutrition/publications/infantfeeding/9241562218/en/>
- 12 <https://www.who.int/nutrition/publications/strengthening-nutrition-action/en/> (page 69)
- 13 <https://sustainabledevelopment.un.org/?menu=1300>
- 14 <https://www.ilo.org/global/standards/lang--en/index.htm>
- 15 [https://www.ilo.org/gender/Informationresources/Publications/WCMS\\_114221/lang--en/index.htm](https://www.ilo.org/gender/Informationresources/Publications/WCMS_114221/lang--en/index.htm)
- 16 [https://www.ilo.org/global/publications/ilo-bookstore/order-online/books/WCMS\\_193968/lang--en/index.htm](https://www.ilo.org/global/publications/ilo-bookstore/order-online/books/WCMS_193968/lang--en/index.htm)
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- 29 <https://www.ilo.org/dyn/normlex/en/f?p=ILO100DASH:1:0>

### INTERNATIONAL BABY FOOD ACTION NETWORK (IBFAN)

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