

How can faculty members foster a supportive culture around breastfeeding or milk expression?

The importance of breastfeeding is well known. The standard recommendation is for infants to be breastfed for their first six months of life, with continued breastfeeding for at least the first year and beyond (can be up to 2 years).

The Accreditation Council for Graduate Medical Education (ACGME) mandates the provision of clean and private facilities for lactation that have refrigeration capabilities, with proximity appropriate for safe patient care. Our residents and fellows have a designated lactation room, and have access to other lactation rooms at various locations at MMC.

Studies have identified multiple structural barriers in the medical field which lead to a lot of female trainees abandoning breast feeding sooner than they would have wanted. Barriers for physician moms include insufficient time to express breast milk, lack of supportive team, limited access to appropriate lactation facilities and the power differential between trainees and faculty can make it intimidating for them to request permission for protected time for breast pumps.

The trainee needs 20-30 minutes for milk expression, every 2-3 hours. This does not include the time needed to travel to and from designated lactation room (which is commonly removed from the clinical work area), the potential wait time to have access to lactation spaces and the time needed to clean the pump parts.

Here are 10 practical strategies for Faculty and medical educational leaders to promote a culture of support around breastfeeding/ lactation as we support our patients and families in meeting their lactation goals.

1. Ensure that the trainee has protected time during clinic for milk expression.
2. Faculty members and medical educational leaders should consider walking from clinical areas to the designated pumping stations to get a sense of the time required to leave and get back to clinical areas. This will give you a better appreciation of time constraints – sometimes it takes longer to move from non-clinical area to the designated lactation room compared to the amount of time needed for expression.
3. Adjustment of schedules for the breastfeeding trainee is important. Some rotations are not conducive for breastfeeding hence the need to consider tailored schedules for the lactating learner if feasible.
4. Demonstration of support to the trainee within the division may come through regular education of faculty/ trainees/ administrators. Openly talking about lactation increases awareness of the needs of our trainees.

5. Supervisors' trainees should familiarize themselves with institutional policies, which should be shared during orientation/ onboarding. The policy should be revisited when a trainee is discussing family leave.
6. Program leadership should clearly communicate the needs of the trainee to rotation directors and the supervising faculty. In the heat of clinical work, it may be challenging for the trainee to advocate for themselves. Faculty should be the voice for the trainees.
7. Faculty should be willing to step in to help with the responsibilities of the learners during milk expression. This promotes positive role modeling for other trainees.
8. Avoid using terms such as "Lactation Break" and "accommodations" since these could be perceived in a negative way. Avoid commenting on how long the trainee was away from clinical duties "example: "wow that was quick or took a while" since that evokes "guilty conscience".
9. Some trainees may choose to pump from work rooms, during clinical conference, and or in the OR. Faculty should be supportive of the trainees wish if feasible. Trainees should never be expected to pump in a non-private room.
10. Hybrid (in-person and virtual) options should be offered to trainees who want to use educational time to pump privately.

To learn more:

<https://www.aafp.org/about/policies/all/breastfeeding-lactation-medical-trainees.html>

Helen M Johnson, Katrina B Mitchell, Rebecca A Snyder, Call to Action: Universal Policy to Support Residents and Fellows Who Are Breastfeeding, J Grad Med Educ, . 2019 Aug;11(4):382-384. doi: 10.4300/JGME-D-19-00140.1. PMID: 31440330 PMCID: PMC6699541 DOI: 10.4300/JGME-D-19-00140.1

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