

Senate Bill No. 257

Passed the Senate May 11, 2009

Secretary of the Senate

Passed the Assembly August 20, 2009

Chief Clerk of the Assembly

This bill was received by the Governor this _____ day
of _____, 2009, at _____ o'clock ____M.

Private Secretary of the Governor

CHAPTER _____

An act to amend Section 123360 of the Health and Safety Code, and to add Chapter 5.3 (commencing with Section 19994.10) to Part 2.6 of Division 5 of Title 2 of the Government Code, relating to lactation accommodation.

LEGISLATIVE COUNSEL'S DIGEST

SB 257, Pavley. Lactation accommodation: state employees.

Existing law requires employers, including the state, to provide a reasonable amount of break time to employees desiring to express breast milk. Employers are also required to make reasonable efforts to provide the use of a room, or other location, other than a toilet stall, in close proximity to the employees' work area, for the employee to express milk in private.

This bill would require every state agency and department, including local offices, when notified by a female employee that she is nearing maternity leave, to notify the employee, through its usual channels of communication with state employees and in the most cost-effective manner, of specified information regarding breast-feeding, including an explanation and summary of the provisions described above relating to lactation accommodation, information regarding lactation accommodation on the Internet Web site of the Department of Public Health, and a listing of other comprehensive breast-feeding support organizations with Internet links.

Existing law requires the State Department of Public Health to include in its public service campaign the promotion of mothers breast-feeding their infants.

This bill would require the department to provide information regarding lactation accommodation on its Internet Web site, as specified.

The people of the State of California do enact as follows:

SECTION 1. The Legislature hereby finds and declares all of the following:

(a) Scientific evidence shows that breast-feeding strengthens an infant's immune system and protects infants' health in many ways, by preventing disease and other adverse health conditions, and is also beneficial to the mother's health.

(b) The United States Surgeon General, the United States Preventive Services Task Force, the American Academy of Pediatrics, and all other major health organizations, recommend that, unless there are specific contraindications, babies be exclusively breast-fed (meaning no food or drink other than breast milk) for the first six months, with continued breast-feeding and the addition of appropriate foods up to at least one year, as long as it is mutually desired.

(c) Breast-fed babies are likely to have fewer ear, respiratory, and intestinal infections; less frequent allergies and asthma; and less risk of developing sudden infant death syndrome or chronic diseases and conditions, such as diabetes, leukemia, obesity, and high cholesterol.

(d) Exclusive breast-feeding for three months is estimated to reduce health care costs for infants in the first year alone by up to four hundred seventy-five dollars (\$475), compared to nonbreast-fed infants. The United States Department of Agriculture estimates that a minimum of three billion six hundred million dollars (\$3,600,000,000) in medical expenses annually would be saved if the number of children breast-fed for six months were to increase by 50 percent.

(e) Breast-feeding is also linked to reducing the risk of obesity. Childhood obesity is a major public health policy concern. Approximately 28 percent of California schoolage children are overweight or obese. Children who are overweight or obese are at heightened risk of high blood pressure, high cholesterol, asthma, and type 2 diabetes, among other serious physical problems. Type 2 diabetes is a particular concern, as it is now being found in children at increasing rates. Being overweight or obese in childhood also increases the risk of obesity in adolescence and adulthood. Medical expenses attributable to obesity cost Californians seven billion seven hundred million dollars (\$7,700,000,000) each year, with one billion seven hundred million dollars (\$1,700,000,000) paid by Medi-Cal.

(f) The California Obesity Prevention Plan highlights breast-feeding as a key strategy. The federal government's Healthy

People 2010 goals seek to increase breast-feeding initiation (any breast milk) to at least 75 percent of babies, with at least 40 percent of babies exclusively breast-feeding at three months, at least 50 percent of babies having some breast milk at six months, and at least 17 percent of babies exclusively breast-feeding at six months.

(g) Only 42.7 percent of mothers of newborns breast-feed exclusively in California hospitals after giving birth according to the most recent data available (2007) from the State Department of Public Health. Less than 18 percent of California mothers breast-feed exclusively when their infants are six months old, according to the United States Centers for Disease Control and Prevention.

(h) Women who breast-feed their babies for longer periods accrue significant health benefits. Breast-feeding is linked to a reduction in risk for breast and ovarian cancers, osteoporosis, and type 2 diabetes. The practice has a contraceptive effect, which can lengthen the time between pregnancies and help make the next child healthier. Financially, breast-feeding means families save on food costs and healthcare expenses. Working women who breast-feed take fewer days off to care for a sick child and are less likely to incur the expense of a caretaker.

(i) Since 2001, state law has required every employer, including the state and any political subdivision, to provide a reasonable amount of break time to accommodate an employee desiring to express breast milk for her infant child, subject to the requirements of Sections 1030 to 1033, inclusive, of the Labor Code.

(j) Better communication between the state as an employer and its employees about the breast-feeding accommodation requirements of Sections 1030 to 1033, inclusive, of the Labor Code is necessary to help promote and support breast-feeding among state employees, for the benefit of the state.

SEC. 2. Chapter 5.3 (commencing with Section 19994.10) is added to Part 2.6 of Division 5 of Title 2 of the Government Code, to read:

CHAPTER 5.3. LACTATION ACCOMMODATION

19994.10. (a) Through its usual channels of communication with state employees, every state agency and department, including local offices, when notified by a female employee that she is

nearing maternity leave, shall, in the most cost-effective manner, notify the employee of the following information:

(b) Information regarding lactation accommodation on the Internet Web site of the State Department of Public Health.

(c) An explanation and comprehensive summary of Sections 1030 to 1033, inclusive, of the Labor Code.

(d) A listing of other comprehensive breast-feeding support organizations and Internet links to their informational materials.

SEC. 3. Section 123360 of the Health and Safety Code is amended to read:

123360. (a) The State Department of Public Health shall include in its public service campaign the promotion of mothers breast-feeding their infants.

(b) The department shall provide information regarding lactation accommodation on its Internet Web site. This information shall include, at a minimum, a link to the most recently published version of “The Employees’ Guide to Breastfeeding and Working,” as developed by the Health Resources and Services Administration of the United States Department of Health and Human Services.

(c) The department shall develop a model eight-hour training course of hospital policies and recommendations that promote exclusive breast-feeding, incorporating available materials already developed by the department, and shall specify hospital staff for whom this model training is appropriate. The department shall also provide the model training materials to hospitals, upon request.

Approved _____, 2009

Governor