

# Maternal Wellbeing Infant Feeding and Return to Paid Work

## Technical Report 3: Maternal Experiences Survey

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# 1. Maternal Experiences Survey Sample

Our maternal experiences survey was aimed at the group of women who wished to continue to breastfeed upon return to work to understand workplace experiences, barriers and facilitators. However, all women who had given birth in the UK in the last 5 years (since 2017 in the first round and since 2018 in the second round) were eligible to take part. The first round of the survey ran from November 2022-March 2023 and then the survey was reopened in September 2023 to try to increase diversity of respondents and kept open until February 2024. The survey was shared through our networks, via social media, via national charities supporting infant feeding and families, and local community groups.

The survey collected information about birth and child characteristics, infant feeding experience (methods used, whether breastfeeding and duration of breastfeeding, reasons for breastfeeding/not breastfeeding), job characteristics, return to work experience, facilities and support in the workplace, experience of continuing to breastfeed upon return to work, maternal wellbeing and demographic variables. The focus was on the respondent's most recent birth for simplicity. Full questions can be found in appendix 1.

## **Sample Characteristics**

We received a total response of 1,865 responses. 1,786 (96%) had breastfed their most recent child (with only 79 not having breastfed). 1,292 had returned to work (94% of the 1380 who had worked whilst pregnant and had finished maternity leave), with 23 starting a job (of the 115 who had not worked whilst pregnant). 370 were currently on leave of which 347 were planning on returning to work (23 were not planning or were undecided on whether to return to work). 920 respondents reported they had continued to breastfeed upon return to work, and 211 yet to return expect to still be breastfeeding. Often, we are interested in the sample who have returned to work within 15 months which captures the 12 months leave women in the UK are entitled to plus annual leave (up to 3 months) accrued whilst on leave. 905 of those who had continued to breastfeed upon return to work had returned within 15 months and this provides our key sample of interest.

Table 1.1 reports the characteristics of the survey sample. Table 1.1. also includes the samples that breastfed for 3+ months and were employed 15 months after return to work, as these were groups of interest in the analysis of the UKHLS. The final column includes those who breastfeed upon return to work, who are the main sample of interest.

Compared to the UKHLS sample, respondents were more likely to be older, highly educated and from a high socio-economic background, and working in managerial and professional occupations. These characteristics reflected those (based on our UKHLS analysis) who were more likely to breastfeed for at least 3 months and return to paid work after giving birth - our group of interest. ). As is common in surveys relating to

breastfeeding experiences in the UK, there was an under-representation of those from minority ethnic groups, who are more likely to establish breastfeeding, but also less likely to be employed after giving birth.

**Table 1.1: Characteristics of Survey Respondents**

Variable	All	Breastfed 3+ months	Employed 15 months	Continued to BF on RTW
University Degree (%)	81.5	83.5	85.0	86.3
Age Group (%)				
18-24	2.9	2.6	2.3	2.0
25-34	61.7	61.0	61.0	61.0
35+	35.4	36.4	36.7	37.1
Ethnic Group (%)				
White	92.6	92.6	93.0	93.6
Asian	3.1	2.8	2.6	2.1
Black	1.0	1.2	1.2	1.4
Mixed/other	3.3	3.5	3.2	2.9
White British	84.4	84.1	84.9	85.3
First Time Mother (%)	62.7	61.7	64.0	60.7
High Socio-Economic Background (%)	56.8	59.0	57.0	59.7
Observations	1,865	1,782	1,288	905

Continued to BF on RTW refers to continuing to breastfeed upon return to work.

### *Industry and Occupation definitions*

We asked respondents to state the occupation and industry of their job in a free-text box (see Appendix 1 for the questions) and then used the answers to assign then an industry code based on the UK 2007 Standard Industrial Classification (SIC)<sup>1</sup> and an occupation code on the basis of the 2020 UK Standard Occupation Classification (SOC)<sup>2</sup>. We tried to create industry definitions that were consistent with the other datasets in the study. Table 1.2 used the industry definitions used.

We created consistent industry definitions across the datasets. Due to a small number of observations we created an 'Other' group which included Primary and Secondary industries, Transport and Communication. We also asked individuals if they were in

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<sup>1</sup> See

<https://www.ons.gov.uk/methodology/classificationsandstandards/ukstandardindustrialclassificationofeconomicactivities/uksic2007>

<sup>2</sup> See

<https://www.ons.gov.uk/methodology/classificationsandstandards/standardoccupationalclassifications/soc2020/soc2020volume1structureanddescriptionsunitgroups>

the private or public sector (see Appendix 1) for the question and separated out those who were working in higher education, in the voluntary/charity or other sector (based on the information the respondent provided in the free-text boxes) into an 'other' sector category.

**Table 1.2: Industry Definitions**

Industry Group	Industry UK SIC Sections
<b>Primary and Secondary industries</b>	A: Agriculture, forestry and fishing B: Mining and quarrying C: Manufacturing D: Electricity, gas, steam and air conditioning supply E: Water supply; sewerage, waste management and remediation activities F: Construction
<b>Transport and Communication</b>	H: Transportation and storage J: Information and communication
<b>Business and Professional Service</b>	K: Financial and insurance activities L: Real estate activities M: Professional, scientific and technical activities N: Administrative and support service activities
<b>Other services</b>	G: Wholesale and retail trade; repair of motor vehicles and motorcycles I: Accommodation and food service activities R: Arts, entertainment and recreation S: Other service activities T: Activities of households as employers; undifferentiated goods-and services-producing activities of households for own use U: Activities of extraterritorial organisations and bodies
<b>Public Administration</b>	O: Public administration and defence, compulsory social security
<b>Education</b>	P: Education
<b>Health and Social Work</b>	Q: Human health and social work activities

Notes: Industry sections were based on those from the [UK 2007 Standard Industrial classification](#).

Occupation definitions are reported in Table 1.3. We generally based the definitions using the 1-digit SOC level but separated out some professional occupations (Health and Teaching) which typically have a higher proportion of women and combined other groups where sample sizes were small. Due to a small number of observations for the Other group this was combined with Other Services in the Maternal Experiences Survey. We also divided occupations into Managerial/Professional (based on the 1-digit SOC level) vs non-Managerial/Professional jobs.

**Table 1.3: Occupation Definitions**

Short name	UK SOC Codes
<b>Health</b>	22 "Health professionals" 321 "Health associate professionals"
<b>Teaching</b>	23 "Teaching and educational professionals"
<b>Managers and Other professionals</b>	11 "Corporate managers and directors" 12 "Other managers and proprietors" 21 "Science, research, engineering and technology professionals" 24 ""Business, media and public service professionals"
<b>Associate professionals</b>	31 "Science, engineering and technology associate professionals" 32 "Health and social care associate professionals" 33 "Protective service occupations" 34 "Culture, media and sports occupations" 35 "Business and public service associate professionals" Excludes "321 Health associate professionals"
<b>Administration</b>	41 "Administrative occupations" 42 "Secretarial and related occupations"
<b>Services</b>	61 "Caring personal service occupations" 62 "Leisure, travel and related personal service occupations" 71 "Sales occupations" 72 "Customer service occupations"
<b>Other</b>	51 "Skilled agricultural and related trades" 52 "Skilled metal, electrical and electronic trades" 53 "Skilled construction and building trades" 54 "Textiles, printing and other skilled trades" 81 "Process, plant and machine operatives" 82 "Transport and mobile machine drivers and operatives" 91 "Elementary trades and related occupations" 92 "Elementary administration and service occupations"

Notes: UK SOC codes were from the [2020 UK Standard Occupation Classification](#)

Table 1.4 reports the job characteristics of the sample who were working 15 months after giving birth. There was an over-representation of those in the health/education industries and occupations, again reflecting that these are the industries/occupations that had the highest documented proportion of returning mothers breastfeeding. This also meant there was an over-representation of respondents in professional/managerial jobs and those in the public/other sector (also reflective that

individuals in these jobs were more likely to breastfeed and breastfeed upon return to work).

**Table 1.4: Job Characteristics of the Employed Sample**

Employed 15 months	
<b>Industry</b>	
Education	27.7
Health and Social Work	29.3
Public admin	9.3
Business and Professional services	14.7
Other services	6.9
Other	12.1
<b>Occupation</b>	
Health	20.8
Teaching	15.9
Managers and Other Professionals	36.5
Other Associate Professionals	12.7
Administration	7.2
Other	6.9
<b>Sector</b>	
Private	35.8
Public	49.3
Other	14.9
<b>Professional / Managerial job</b>	71.0

Includes 1,288 respondents who were employed 15 months after giving birth

## 2. Analysis of qualitative responses

Q45, Q54b, Q86, Q94b, Q65a, Q66a, Q66c, Q93b, Q110, Q115

All answers to the qualitative questions were saved in separate corpora and each corpus was uploaded onto the linguistic software programme Sketch Engine. To identify the recurrent and shared themes, the key content words – nouns and adjectives – were retrieved from each corpus whenever possible or applicable. Nouns are parts of speech that describe concrete objects as well as abstract ideas and are good indicators of issues that respondents raised. They allow us to get a sense of the dominant themes mentioned specifically in answers to the qualitative questions which were centred on support and reasons. To do so, nouns with a minimum frequency of 10 were retrieved from answers collected from Q45, Q54b, Q65a, Q66a, Q110 and Q115 (when there was simply enough data for using this threshold). When the number of available responses and therefore texts was small (usually below 100 responses), the frequency threshold of 3 was used.

The survey also involved a set of questions eliciting answers about feelings following the return to work and/or changes that the respondents made or had to make regrading infant feeding (Q54b, Q94b, Q65a, Q66a, Q66c, Q93b). To identify the most dominant emotions expressed by the participants, adjectives with a minimum frequency of 10 were retrieved or with 3 where there was a small number of responses available. Adjectives are words that describe objects as well as mental and emotional states and thus good indicators of the kind of emotions and state of mind that women reported when answering the questions.

### 1. Experiences of mothers who returned to work

#### 1.1. Support received and support they would have liked

Question 45: If any, please list other support for mothers returning to work offered by your employer or any other support you would have liked.

Question 45 sought insights into the support offered by employers to returning mothers and any additional support they would have liked. This question elicited 259 varied responses, ranging from brief notes to extended paragraphs.

Table 1: The most frequent nouns in responses to Q45

Noun	Freq.	Norm. Freq. <sup>3</sup>	Noun	Freq.	Norm. Freq.	Noun	Freq.	Norm. Freq.
day	58	6810	maternity	23	2700	working	12	1409
time	56	6575	baby	23	2700	shift	12	1409
milk	54	6340	office	21	2466	nursery	12	1409
hour	51	5988	manager	21	2466	need	11	1292
child	47	5518	job	17	1996	facility	11	1292

<sup>3</sup> Frequencies were normalised per 1 million words, which is the default option in Sketch Engine.



room	46	5401	fridge	15	1761	flexibility	10	1174
support	42	4931	space	15	1761	meeting	10	1174
work	40	4696	policy	14	1644			
home	38	4462	toilet	14	1644			
return	37	4344	mother	14	1644			
leave	37	4344	staff	13	1526			
break	31	3640	year	13	1526			
employer	27	3170	parent	13	1526			
week	26	3053	option	13	1526			
place	25	2935	month	13	1526			

The responses highlighted two primary themes: the practical adjustments made (or not made) and the desire for more flexible work arrangements. Key terms such as 'day', 'time', 'hour', 'week', 'month', 'break', 'leave', and 'shift' were frequently mentioned, pointing to a strong need for flexibility in work schedules. Respondents expressed a desire for shorter workdays, the ability to work part-time initially, and additional sick leave for child-related emergencies, reflecting concerns about balancing work and childcare.

1. Able to work part time or shorter days and not be hit so hard financially with it and workload to acknowledge it
2. I did apply for job share to work 3 days a week, this was declined
3. I would have liked sick leave days for when my child is sick
4. More than 3 days carers leave per year for when children ill, usually only allowed to take 1 day leave for emergency childcare which is not enough.

Although 'home' is not a noun pointing to time, the opportunity of working from home was mentioned by more than 30 respondents. Those who had this arrangement in place, saw it as facilitating breastfeeding mother's decision to return to work.

5. My manager was very supportive letting me work from home so I could express milk as there was nowhere for me to do this
6. Work have been incredibly supportive on my return to my job, they've offered me complete flexibility in the days I work and whether I wish to work from home or in the office.

However, this was not a universal experience and more women reported difficulties when asking for this arrangement or WFH was not available.

7. Work was awful about working from home , or being flexible
8. I have been allowed to work 1 day a week from home but reluctantly
9. I would have liked the opportunity to work more from home, there was an expectation to be in the office more than out of it, without an obvious reason

The topic of breaks, particularly for expressing milk, also emerged as significant with the noun 'break' used by 31 respondents. Women highlighted the need for longer or

additional and ideally paid breaks to manage breastfeeding without impacting their non-work responsibilities:

I could have a longer break to express milk

10. I could have more than a 30 minute lunch break, or pumping breaks

11. Would have liked extra break time for this had to use my 30 min unpaid break.

From the answers, it became clear that most women used their lunch break to express but this was not always sufficient, convenient or at times detrimental to their wellbeing and relationships with co-workers:

12. I have to use all my own breaks for expressing affecting my ability to connect with Coworkers and have adult interaction

13. I would need to use my 30 minute lunch break , which would then mean eating became rushed

14. I had to pump on my breaks and found at times it was socially isolating as couldn't join my colleagues for lunch.

15. With very short/ limited breaks between lessons it means I have almost no time to eat or have a comfort break after expressing

Some respondents noted the total lack of breaks:

16. I had to fight to have additional breaks to express.

17. when I asked for a break to pump and was told I couldn't have it

18. Not made aware of break entitlements or anything else

The wish for adjustments to working hours, days and breaks is also indicated in the fairly frequent use of the noun 'flexibility'. Flexibility or flexible working hours or flexible shifts were seen as benefiting mothers who returned to work and breastfed and this was also mentioned as a desired support mechanism:

19. Would have liked more shift flexibility

20. no/reduced night shifts for breastfeeding mothers

21. Flexible shifts without using holidays They agreed to let me go part time (0.6 FTE).

22. some flexibility of working hours to actually allow effective pumping

The second theme that emerged from the responses was the inadequacy of facilities for expressing milk. Mothers frequently noted the absence of designated spaces for expressing, with existing facilities often serving multiple purposes, such as prayer or first aid rooms. This dual use led to interruptions and a lack of privacy, highlighting the need for dedicated spaces that are equipped with essential amenities like blinds for privacy and refrigerators for storing milk:

23. There was a religious prayer room and communal fridge so no dedicated places to express or store milk.

24. I stored my milk in the staff fridge with everyone else's stuff. So they would say they provided facilities to express milk. I would disagree.

25. Facilities for breastfeeding in a quiet room with blinds and a fridge for storage would be appreciated.
26. Although there is a designated place to rest and express milk, it is not a space solely set aside for that - it is the first aid/welfare room so there is always the possibility that you will be asked to move/leave if it is needed for first aid etc. Officially there are no facilities to store milk - this would be good to have. In practice I used the office fridge

The use of toilets for milk expression was mentioned by 14 respondents. This is clearly problematic given potential issues around hygiene, and emphasises a severe oversight in workplace accommodations: some women reported that when asked for a space, they were directed to the toilet by their managers or HR or that the toilet was simply the only 'private' space available:

27. I had to ask for the space to express milk, HR originally told me to use a toilet cubicle and I refused
28. I asked if there would be a place I could put my pumps on and take them off privately... I was told the toilet is private enough.
29. Designated breastfeeding space is a toilet. We have 2 toilets for 40+ staff. I'd be very unpopular taking a toilet up on our short break times.
30. I was told to express milk in the toilet !!!! There is only one female toilet in the whole school so this was impractical and disgusting.

The responses also revealed a significant gap in workplace policies regarding breastfeeding support. One of the frequent nouns was the term 'policy' and in 10 out of 14 occurrences, women reported a complete absence of clear guidelines, leaving them unaware their rights and the supports available:

31. there is no official breastfeeding policy available (I did ask HR about this).
32. I was not told about any formal policies at the time.
33. The company had no maternal policies at all

Other support mechanisms wished for by the respondents were identified when examining specifically the phrase 'would have' (72 occurrences) which signalled directly what they would have liked or benefited from to facilitate breastfeeding and their return to work. Desired supports included more predictable work patterns, the ability to work from home, and better facilities. Additionally, mothers expressed a need for mentoring on career trajectories post-return, regular wellbeing checks, and more transparent communication regarding maternal policies and the financial implications of adjustments to work hours, and 'some sort of buddy system even if in an informal capacity'.

In conclusion, the most effective support mechanisms as identified by the respondents include adjustments to work hours, the option to work from home or part-time, designated, clean and private rooms with proper amenities, and clear communications regarding maternal policies and support. These changes would not only facilitate breastfeeding/expressing upon return to work but also support the overall wellbeing and productivity of returning mothers.

Figure 1: The most frequent nouns (minimum frequency of 3) in responses to Q45



### 1.2. Feelings about changes made to feeding practices upon return to work

54.b. How did these changes make you feel?

Return to work involved considerable changes to the feeding practices and routines with most respondents reporting on adjustments to the timing and frequency of breastfeeding as well as introducing other feeding forms such as using formula or cow's milk and expressing breastmilk. Question 54.b, 'How did these changes make you feel?' explored mothers' emotional responses to these adjustments upon returning to work. As shown in Table 2, 'sad' and 'anxious' were the most frequently mentioned adjectives, indicating prevalent negative emotions.

Table 2: The most frequent adjectives (minimum frequency of 10) in responses to Q54 b.

Adjective	Freq.	Norms. Freq.
sad	64	7102
anxious	31	3440
happy	27	2996
able	25	2774
guilty	19	2109
fine	17	1887
ready	15	1665
first	14	1554
uncomfortable	13	1443

old	13	1443
long	12	1332
stressful	11	1221
good	11	1221
hard	10	1110

The reasons for the negative emotions had to do mostly with the sadness over losing the close, nurturing connection breastfeeding provides:

- 34. I felt **sad** that I was not able to feed her as often as she was used to.
- 35. I was **sad** to lose those moments of connection with my baby.
- 36. It was very **sad** and frustrating that I had to stop/ change the breastfeeding frequency as we both enjoyed our routine.

Anxieties largely stemmed from concerns about the adequacy of expressed milk, the transition to bottle feeding, and potential health issues like mastitis. Compounding these concerns were the logistical challenges of integrating new feeding schedules with work commitments:

- 37. **Anxious** about quantity of expressed milk.
- 38. Worried and **anxious** I could only breastfeed once a day in the evening and even then felt guilty leaving the office early (on time!) to get back in time.
- 39. I was very **anxious** that my baby was not getting the same amount of milk as before.
- 40. **Anxious** that my baby wouldn't take an expressed bottle.
- 41. Anxious about mastitis due to not pumping as frequently as I would normally breastfeed.

19 respondents also used the word 'guilty' which points to a strong feeling of shame which stemmed feeling inadequate when balancing motherhood duties and work obligations:

- 42. I felt **guilty** for not giving my baby the best like exclusively breastfeeding for 6 months.
- 43. I feel **guilty** that my child goes without feeds for 9 hours whilst I am at work and has to rely on food and water.
- 44. I worried he would miss me and felt **guilty** for not being there
- 45. Sad, more **guilty** for returning to work as letting my baby down.

Despite the dominance of negative emotions, some mothers did report positive feelings. 'Happy', mentioned 27 times, often related to the wellbeing of their child and satisfaction with managing to continue breastfeeding, even if in a reduced capacity:

- 46. Worried at first but ok when reassured by the nursery that my child was **happy** and healthy.
- 47. **Happy** to reduce feeds to only morning/nighttime feed for my baby.
- 48. I don't enjoy pumping but I am **happy** my child is still getting breastmilk

Figure 2 displays the most frequently used adjectives in responses to Q54.b.



Communication and policy were also areas of concern. Many respondents were unaware of any formal breastfeeding policies at their workplaces, suggesting a gap in workplace policy gap and poor communication from employers regarding maternal support. Additionally, mothers frequently mentioned the absence of supportive structures like mentoring for career progression post-childbirth, mental health support, and clearer guidelines on the financial implications of reduced work hours.

The emotional impact of returning to work was profound, with many mothers reporting feelings of sadness and anxiety due to changes in feeding routines and the reduced physical connection with their babies. Feelings of guilt were also prevalent, stemming from not being able to provide as they had intended, compounded by the challenges of balancing work commitments with infant care.

## 2. Expectations and experiences of mothers who had not yet returned to work

86. If any, please list other support for mothers returning to work offered by your employer or any other support you would like to see

In a survey, 56 participants responded to question 86, which asked about existing support and desired support mechanisms for mothers planning to return to work. As above with the question related to support, the most frequent nouns were retrieved from the responses. Because there was a small number of texts available due to fewer and shorter answers, the decision was made to include nouns with the minimum frequency of 3. These are shown in Table 3.

Table 3: The most frequent nouns (minimum frequency of 3) in responses to Q86

Noun	Freq.	Norm. Freq.
hour	11	12035
return	11	12035
support	10	10941
day	9	9847
leave	6	6565
parent	5	5470
baby	4	4376
child	4	4376
mother	4	4376
maternity	4	4376
none	4	4376
flexibility	3	3282
hr	3	3282
time	3	3282
week	3	3282
manager	3	3282

Similar to women who returned to work, mothers who wish to return mentioned adjustments to work hours and work schedules as a support mechanism they would most welcome. 'Hour' was the most frequent noun (used 11 times). Participants expressed a strong preference for flexible work hours, including options for compressed hours, which allow for extended family time and balanced income. Many suggested a phased or gradual return to work to smooth the transition.

49. I would like to see more options to work extended **hours** on one specific day (flexibly across the day), and then less hours other days.

50. Core **hours** 10-4, allowing for school drop offs etc More flexible arrangements in policy not just by discretion More flexibility would be great!

51. My current intention is to do a compressed 30 **hour** week so I can have a longer weekend with my family and not cut out too much on income.

There was also a call for better HR support and managerial guidance (8 responses), particularly for breastfeeding mothers, highlighting the necessity for clear and supportive policies rather than discretionary flexibility:

52. I would like to see a process in which employers ask about requirements for supporting breastfeeding **mothers** upon return from maternity leave.

53. I would like to see training for managers and guidance from **HR** regarding breastfeeding and managing return to work.

Mothers not yet returned to work provided shorter responses than those who had, likely due to lack of firsthand experience or awareness of available support. For example, issues around facilities were not emphasised, which might be due to the lack of communications and support in this area. The expectations centred mostly on flexible adjustments to work hours – this matches what women who have returned would have liked too.

Figure 3: The most frequent nouns (minimum frequency of 3) in responses to Q86



The survey also revealed that mothers are contemplating modifications to their infant feeding practices in anticipation of returning to work. When asked about how they



feel about these planned changes (Q94 b), those who responded expressed feelings of sadness, anxiety and worry as indicated in the most frequently mentioned adjectives (see Table 4).

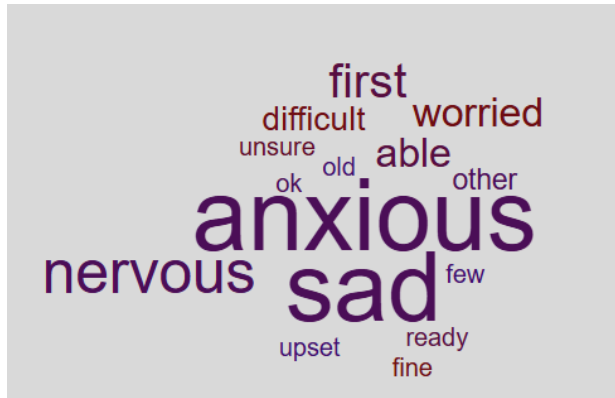
Table 4: The most frequent adjectives (minimum frequency of 3) in responses to Q94 b.

Adjective	Freq.	Norm. Freq.
anxious	22	10628
sad	21	10145
nervous	12	5797
worried	7	3382
able	7	3382
difficult	5	2415
ready	3	1449
ok	3	1449
old	3	1449
fine	3	1449
unsure	3	1449
upset	3	1449

As can be seen, prior to return to work, mothers already think about changes to their feeding practices as a preparation to the transition. Yet, thinking of this transition is a cause of emotional distress as women worry about how they are going to manage feeding and work commitments, their supply, how the transition may affect their relationship with the child and how the child is going to respond to the change in circumstances and feeding practices:

- 54. I feel **sad** that I cannot breastfeed in a natural organic way, and that I have to adjust a normal biological process for financial reasons
- 55. **Sad** that decisions are forced I feel worried about my baby being hungry when I am at work
- 56. Now, I am **anxious** and nervous about my return to work and how it is going to negatively affect my baby, her eating habits and her wellbeing.

Figure 4: The most frequent adjectives (minimum frequency of 3) in responses to Q94b



### 2.3 Summary of responses given by mothers who had not yet returned to work

Whereas mothers who have returned to work have reported both negative and positive emotions, those yet to return predominantly express negative feelings. This indicates that transitioning back to the workplace is fraught with anxieties concerning infant feeding and the child's wellbeing. Alleviation of some of the anxieties through better support mechanisms such as adjusting work hour patterns (something that women expect and wish for) could ensure a better transition to work environment and better wellbeing of the mother and the child.

### 3. Reasons for stopping breastfeeding

3 the qualitative questions aimed at women who stopped breastfeeding asking them for reasons behind the decision and the feelings that the decision produced. Three groups of women were targeted: 1) women who were still breastfeeding upon return to work and then stopped (Q65a); 2) women who stopped before return and had specifically not wanted to continue (Q66a) and 3) women who stopped before return but had specifically wanted to continue (Q66c).

65.a. If you have stopped breastfeeding/expressing breastmilk, what were your reasons? How did stopping make you feel?

Answers to question 65a generated 430 responses. Most of the reasons behind stopping breastfeeding related to child showing less interest and self-weaning also due to age (mostly more than 1 year old). The nouns 'child' was the most frequent noun and mostly accompanied by words such as 'wean' and numbers pointing to age (see Table 5). The second most frequent nouns was 'time', which was mostly accompanied by the adverb 'right' (22 times) and used in phrases such as 'it was the right time' or 'I felt like it was the right time'.

Table 5: The most frequent nouns (minimum frequency of 10) in responses to Q65a

Noun	Freq.	Norm. Freq.	Noun	Freq.	Norm. Freq.
child	155	14119	age	20	1822
time	94	8563	feeding	19	1731
milk	82	7469	self	16	1457

month	62	5648	bottle	16	1457
baby	54	4919	morning	14	1275
work	54	4919	nursery	14	1275
year	46	4190	decision	13	1184
day	44	4008	comfort	13	1184
night	42	3826	cow	12	1093
daughter	37	3370	bedtime	12	1093
son	36	3279	break	11	1002
feed	35	3188	food	11	1002
supply	32	2915	choice	11	1002
body	25	2277	pressure	10	911
end	22	2004	health	10	911
breast	21	1913	week	10	911

Return to work was also explicitly stated as a reason to stop breastfeeding as evidenced by the frequent mentions of the noun 'work' (54 times). Here a variety of individual reasons were mentioned of which most frequent were issues around expressing and its incompatibility with work schedules, lack of time given to do so or challenges around facilities:

57. I have stopped expressing at **work** now, as it was taking up so much time during the day#
58. I was not offered breaks at **work** for expressing.
59. I chose to stop expressing at **work** as soon as possible as I found the experience very unpleasant and challenging to do within my working day
60. Not given enough breaks at **work**
61. We had to stop because I couldn't have any more pumping breaks at **work** and so nights became the only time I could feel my kid.
62. Awkward at **work** and storing milk/travelling with milk was difficult in the warmer weather.
63. I really hated doing it at **work** , the facilities weren't comfortable and my child wouldn't take much of the expressed milk.

Another set of reasons related to the agency regarding the female body. 'Body' was one of the most frequent nouns used 25 times and exclusively in phrases 'my body back':

64. wanted my own **body** back It was at the right time for baby and me.
65. loved breastfeeding my child but it was nice to have my **body** back.
66. I wanted to have my **body** back and my child had naturally decreased asking for it
67. After a short mourning period it felt good to have my **body** back

It is interesting that although women mentioned positive feelings when stopping breastfeeding because it allowed them to be in control of their bodies, these answers are almost always mitigated as seen in the exemplary responses above. There is always a sense of mixed feelings and some women even reported a sense of grief

when they had to stop breastfeeding. The following extras represent expressions of such emotional states:

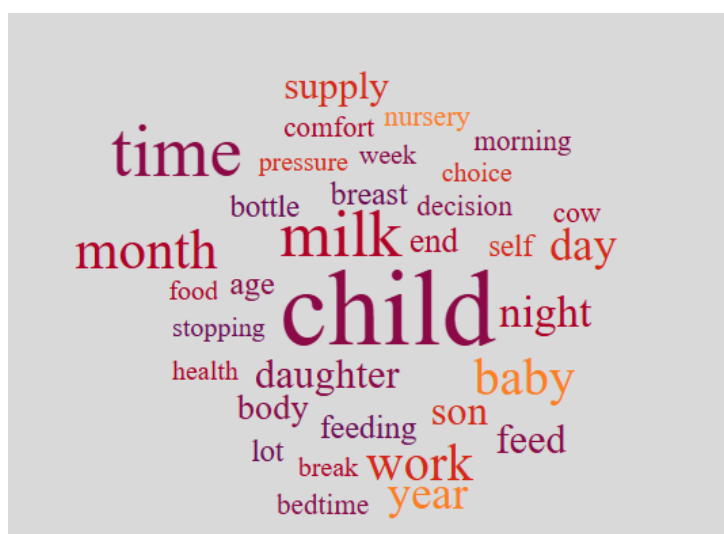
- 68. A mixture of happy to have my **body** back and to be able to wear different clothes and a little bereft that the experience had ended.
- 69. nice to have **body** back after a year (each time breastfed after both pregnancies) But then sad it was over.
- 70. I was sad it had come to an end, but happy to get my **body** back to myself.

Another set of reason involved decreasing supply of breastmilk upon return to work and due to changes to timing and frequency (mentioned 32 times). 10 response mentioned mental health issues (8 times) and issues related to engorgement/mastitis/sore breast/taking antibiotics (15 times). The word 'pressure' was used in 10 responses. Upon reading the answers, in almost all instances it related to pressures from family and society especially stigma in relation to breastfeeding beyond a particular age:

- 71. I wonder now if that's because I felt **pressure** about "still" feeding at 2
- 72. Stopped in the end because of **pressure** to not feed an older child
- 73. No one else I knew was breast feeding and I felt a lot of **pressure**.
- 74. There was a lot of **pressure** from family and I also felt like it's a time to stop

In most cases, the decision to stop was motivated not just a single reason but in most cases a variety of circumstances. The decision felt more natural when the child was seen as ready to stop being fed with breastmilk or women felt under pressure because of the changed circumstances that impacted the timing and frequency of breastfeeding and issues around expressing, some of which were physical while others had external causes (not provided with breaks or enough breaks, difficult to fit into work schedule, inadequate facilities etc).

Figure 5: The most frequent nouns (minimum frequency of 10) in responses to Q65a



Because Question 65a included a sub-question aiming to elicit feelings, the most frequent adjectives were retrieved too (see Table 6).

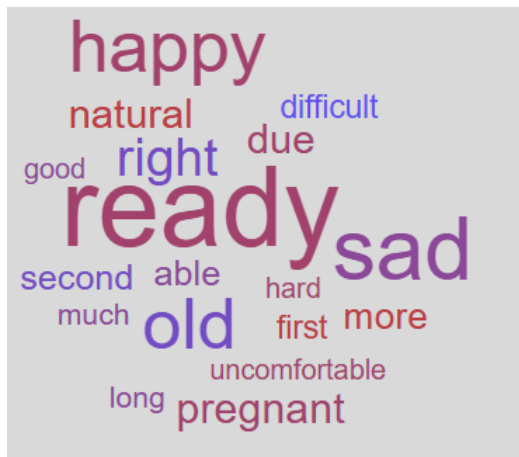
Table 6: The most frequent adjectives (minimum frequency of 10) in responses to Q65a

Adjective	Freq.	Norm. Freq.
ready	69	6285
sad	52	4737
happy	41	3735
old	40	3644
right	27	2459
pregnant	20	1822
natural	19	1731
due	19	1731
more	16	1457
second	15	1366
able	15	1366
first	13	1184
difficult	12	1093
much	11	1002
long	11	1002
good	10	911
uncomfortable	10	911
hard	10	911

69 women who responded to this question emphasised that they were 'ready' to stop breastfeeding feeling that it was the 'right' time either because of child's age or the child showing less interest or health problems related to engorgement. For 19 women, this was a 'natural' phase. 41 women used the adjective 'happy' which described not just positive feelings on the part of the mother but also the child who was happy to reduce feeds or happy to drink from the bottle. Regarding emotions, 52 women expressed sadness. In 10 responses, the adjective 'hard' was used and in some instances this related to difficulties of continuing breastfeeding while working :

- 75. Only my manager knew I was expressing and so it was **hard** to protect the time.
- 76. My daughter did not want to stop which made me sad, but I found it too **hard** with my new job and lack of sleep

Figure 6: The most frequent adjectives (minimum frequency of 10) in responses to Q65a



Women who stopped breastfeeding before return and specifically had not wanted to continue (217 responses to Q66a) reported similar reasons to women who stopped after the return. As Table 7 shows, mothers used the noun 'time' and again mostly with the adjective 'right' emphasising that they felt it was the right time to stop because

Table 7: The most frequent nouns (minimum frequency of 10) in responses to Q66a

Noun	Freq.	Norm. Freq.
time	53	8853
child	50	8351
milk	49	8184
baby	49	8184
month	40	6681
supply	31	5178
formula	30	5011
breast	23	3842
daughter	22	3675
health	21	3508
feeding	19	3174
bottle	18	3007
day	18	3007
son	15	2505
issue	15	2505
support	14	2338
feed	13	2171
lot	12	2004
work	12	2004
pressure	10	1503

of child's age or needs. Other reasons included issues with breastmilk supply (in 31 responses), switch to formula (30 responses) and bottle feeding which generally went well (18 responses), and own mental health (13 responses). 12 responses

included references to 'work' and here some women said that they were afraid of not having enough time to express at work and the potential consequences of this:

- 77. Boobs too full at **work** during the day and it's uncomfortable
- 78. I could not have my child with me at **work** to give her milk, I also did not have the time to spend 2-4 hours every day expressing on top of a full time job
- 79. Working in a busy school environment, I did not want to have to express (or leak) whilst at **work**
- 80. I couldn't breastfeed while at work and felt too much **pressure** trying to pump.

This suggest that alongside other frequently mentioned reasons which might be seen more natural or organic decisions, return to work and worries about managing breastfeeding before the upcoming return to work might have 'pushed' mothers to stop breastfeeding beforehand.

Figure 7: The most frequent nouns (minimum frequency of 10) in responses to Q66a



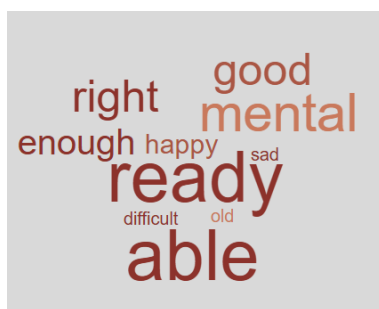
Table 8. The most frequent adjectives (minimum frequency of 10) in responses to Q66a

Adjective	Freq.	Norm. Freq.
ready	16	2672
able	16	2672
mental	14	2338
good	13	2171
right	13	2171
enough	12	2004
happy	11	1837
sad	10	1670
difficult	10	1503
old	10	1503

Because there were fewer responses, there were also fewer adjectives used, but here too women reported on being 'ready' or their child being 'ready' because of child's age or needs or losing interest in breastfeeding. Some expressed the sense of sadness, while some mentioned being 'happy' with the decision and this mostly because of the child being ready to stop:

81. Baby lost interest when weaned, I was **happy** it was on his terms
82. I felt that feeding up to 12 months gave her a good start and I was **happy** to transition over to cow's milk at that point.
83. he was **happy** with a bottle and could feed independently

Figure 8. The most frequent adjectives (minimum frequency of 10) in responses to Q66a



Mothers who stopped breastfeeding before return to work but wanted to continue reported (65 responses to Q66c), reported predominantly negative reasons and feelings. (Because there were fewer responses and less texts, nouns and adjectives with the minimum of

Table 9: The most frequent nouns and adjectives in responses to Q66c

Noun	Freq.	Norm. Freq.	Adjective	Freq.	Norm. Freq.
child	10	10173	sad	16	16277
baby	8	8138	guilty	3	3052
failure	6	6104	disappointed	3	3052
breast	6	6104	ready	3	3052
time	6	6104	long	3	3052
work	5	5086	emotional	3	3052
supply	4	4069	upset	3	3052
milk	4	4069			
month	4	4069			
reason	3	3052			

frequency of 3 were retrieved). While in a few instances mothers reported that their child was ready or settled on the bottle or there were issues with supply (4 responses), 'work' or financial reasons (i.e. the need to go back to work) were mentioned in 6 responses:



84. sad that due to financial **reasons** I stopped to allow someone else to care for my son during the day
85. it just seemed easier to stop than to try and keep it going while at **work**
86. didn't have to worry about expressing at **work**
87. Sad. My child didn't want to but I encouraged it. Making her go longer and longer between feeds and offering cow's milk so that she wouldn't need to be breastfed during working hours

Most women reported on the feeling of sadness that the decision to stop breastfeeding has triggered. 'Sad' was the most frequently mentioned adjective followed by 'guilty' and 'disassociated'. 6 women reported that they felt as a failure which is a strong expression of mother's guilt:

88. Like a **failure** Really sad I would have loved to have done it for longer as she is my last baby but I felt I didn't have a choice due to work and financial commitments.
89. **sad** and **stressed** that there was an external pressure of returning to work contributing to stopping so soon
90. Disappointed and sad but I didn't think I had any other option. My baby only took milk from me and I struggled to express. As I was working shifts/irregular hours I thought it would be unfair on her as there would be no routine.

And finally, mothers who have not yet returned to work but plan to stop breastfeeding before returning to work too expressed a range of mixed feelings (55 responses to Q93b). There were fewer responses to analyse, but most point to uncertainties around how the child will be impacted, sadness about the need to stop or intentions to continue in some form:

91. Nervous for the unknown/ yet another big change, but positive about the physical freedom.
92. I'm generally ok, but don't like the pressure of having to stop by a deadline
93. It is sad and frustrating to have to stop for external reasons.
94. A little sad but inevitable

Some mothers pointed to a sense of relief as breastfeeding/expressing turned out to be challenging:

95. Relief - it was a difficult journey to expressing and having my baby fed from freezer stash gives a sense of security & freedom when I return to work
96. Conflicted but relieved
97. I feel will allow me to have some 'me' time, even if it's just for a morning. I also don't feel entirely comfortable breastfeeding in public.

Table 10: The most frequent nouns and adjectives in responses to Q93b

Noun	Freq.	Norm. Freq.	Adjective	Freq.	Norm. Freq.
baby	9	14241	sad	7	11076
month	5	7911	old	4	6329

time	5	7911	ready	4	6329
year	3	4747	sure	3	4747
child	3	4747	happy	3	4747

### **3.1 Summary of reasons and emotions of stopping breastfeeding or planning to stop**

Analysing the qualitative responses from women who stopped breastfeeding, several dominant themes emerge across different groups, which reveal both the reasons for stopping and the associated emotional impact. These themes reflect the experiences of women who stopped breastfeeding upon returning to work, those who stopped before returning without wanting to continue, and those who stopped but wished to continue.

A common reason cited for stopping breastfeeding was child-led weaning, where children showed less interest, often related to their age (with mothers seeing the 'right' age from a few months to more than 3 years). Mothers frequently described this as happening 'at the right time' suggesting a natural transition perceived by them. The theme of natural progression and timing was less associated with emotional distress, guilt or sadness. Returning to work emerged as a considerable factor influencing the decision to stop breastfeeding. The responses highlight difficulties around expressing milk at work, inadequate or no breaks, and unsuitable facilities. Many women described the challenge of balancing breastfeeding with work commitments, particularly when expressing milk during work hours felt impractical or unsupported.

Some responses emphasized a desire to reclaim one's body and physical autonomy post-breastfeeding. This was often accompanied by mixed feelings, where mothers expressed relief but this was also at time accompanied by sadness and a sense of loss. This highlights the complex emotional states that stopping breastfeeding might involve especially if women feel pressures to do so, for example, because of the return to work or anticipating the return to work.

External pressures, including societal norms and family expectations, were also noted as reasons for stopping breastfeeding. This includes feeling judged for breastfeeding beyond a certain child's age or societal expectations to return to work or the need to return to work for financial reasons. These pressures often exacerbated feelings of guilt and failure among mothers. Issues such as decreased milk supply, physical health problems like mastitis, and mental health struggles were mentioned as reasons for stopping too. This highlights the physical and psychological challenges that can influence decisions around breastfeeding. Alongside emotional challenges and external pressures.

The emotional responses to stopping breastfeeding are equally varied, encompassing a spectrum from relief and readiness to sadness and guilt. Many

women felt 'ready' to stop, associating this readiness with positive feelings of natural progression and mutual agreement with their child's readiness and needs. Regardless of the scenario, sadness was the most prominent emotion expressed by many mothers, particularly those who felt forced to stop due to work or social pressures. For some, stopping breastfeeding brought relief, especially when breastfeeding was challenging. However, this relief was often tempered by conflicted feelings about losing a special connection with their child.

Particularly among those who wanted to continue breastfeeding, feelings of guilt and perceptions of failure were significant, reflecting the internal conflict and external pressures faced. The survey results illustrate a complex array of factors influencing the decision to stop breastfeeding, spanning from decisions that are based on perceived and natural child development, work-related logistics, personal recovery, social pressures, and health issues. Given the emotional, physical, social and work-related complexities, these findings call for supportive practices and policies that accommodate the diverse needs and challenges faced by breastfeeding mothers on their transition to the workplace.

#### 4. Impact of the Covid-19 pandemic

Q110: If applicable, do you think the pandemic had any impact on your choices related to the way your child was fed and/or paid work?

Question 110 aimed to elicit qualitative responses related to the impact of the Covid-19 pandemic on the choices that women have made regarding infant feeding. 1307 responses were received, of which 609 included a simple 'no' answer, while 252 said 'yes'. More than half of the respondents further elaborated on their responses. 2 dominant themes emerged from the analysis of the qualitative responses as revealed through the most frequent nouns (see Table 11). The first theme highlighted positive experience, while the second emphasised negative aspects.

Table 11: the most frequent nouns (minimum frequency of 10) in responses to Q110

Noun	Freq	Norm	Noun	Freq	Norm	Noun	Freq	Norm
.	.	Freq.	.	.	Freq.	.	.	Freq.
		1265						
home	303	9	daughter	28	1170	Start	16	668
						Experienc		
pandemic	225	9400	leave	28	1170	e	15	627
child	159	6643	I	26	1086	Lack	15	627
time	133	5556	birth	26	1086	Tie	14	585
support	127	5306	option	24	1003	Employer	14	585
work	99	4136	health	24	1003	Restriction	14	585
baby	83	3468	choice	24	1003	Staff	13	543
day	81	3384	return	23	961	Commute	13	543
lockdown	72	3008	thing	22	919	Tongue	13	543

feeding	65	2716	family	22	919	Parent	12	501
week	55	2298	feed	22	919	People	12	501
month	55	2298	visitor	20	836	Reason	12	501
covid	54	2256	childcare	20	836	Wfh	12	501
partner	48	2005	role	20	836	Decision	11	460
son	42	1755	antibody	19	794	Supply	11	460
husband	40	1671	weight	19	794	Result	11	460
impact	40	1671	midwife	19	794	Need	11	460
formula	39	1629	bottle	19	794	Help	11	460
			pregnanc					
office	37	1546	y	18	752	House	10	418
milk	34	1420	year	18	752	Money	10	418
working	34	1420	life	18	752	Benefit	10	418
maternity	32	1337	breast	18	752	Bf	10	418
hospital	32	1337	pressure	17	710	Group	10	418
						Opportunit		
nursery	31	1295	way	16	668	y	10	418
hour	29	1212	flexibility	16	668	Face	10	418

The positive experience regarding decision around infant feeding was mostly related to working from home, which became the option during the pandemic. This was the most frequently reported matter with the noun 'home' being the most frequent (303 times). It was almost always used in the phrase 'work/working from home' or as abbreviation 'wfh'. The noun 'home' was frequently accompanied by words such as 'made' ( 25 times), 'easier' (19 times), 'allowed' (15 times), 'could' (16 times), 'flexible' (10 times) indicating a time of possibilities. In fact, women reported that the pandemic and working from home facilitated breastfeeding and expressing because of the flexible arrangements that women had at their disposal (the noun 'flexibility' was mentioned 16 times):

98. the move to working from **home** made it much easier to continue breastfeeding,
99. Working from **home** has also meant I can express milk when I need to in privacy
100. more time at **home** meaning more access to breastfeeding.
101. more time at **home** made my bf journey more successful
102. I was able to work from **home** more so could offer more breastfeeds during the day.
103. It made it easier to work from **home** and continue breastfeeding for longer privately

Women also appreciated the availability of other members of the family (partners, husbands, grandparents) who were able to be on standby. It appears that when it comes to infant feeding and especially breastfeeding, the flexible working option which the pandemic brought about was the major positive factor allowing women to work and at the same time, maintain feeding their child with breastmilk. Interestingly,

while the word 'pressure' was a prominent noun in responses to the questions eliciting feeling upon return to work and was always associated with negative experience, in responses to Q110, it was actually associated with positive aspects in that women often reported that they felt less pressure or no pressure :

- 104. Yes, there was less **pressure** and breastfeeding was easier
- 105. Less **pressure** /reason to introduce a bottle
- 106. I think the pandemic helped me to breastfeed more successfully as my child was born during lockdown regulations which enabled me to focus fully on her and allowed us to establish feeding successfully without **pressure**

The decision to continue breastfeeding or expressing was also motivated by health concerns in the situation of the pandemic, which was associated with huge health uncertainties and worries. In the context of health crisis, the nutritional and health benefits of breastmilk came to the forefront with mothers highlighting breastmilk as a source of antibodies and protection against Covid (19 responses) and key for strengthening child's immunity (8 responses):

- 107. Was anxious of baby catching Covid and was keen to breastfeed in order to pass on **antibodies**
- 108. I was even more keen to feed my second so she'd get the **antibodies** to protect her from covid
- 109. I was pleased to still be breastfeeding during the pandemic because of the immune support and Covid **antibodies**
- 110. was more aware of need for her to receive my **antibodies**
- 111. Yes - breastfed for longer as I was at home, wanted extra **immunity** for baby

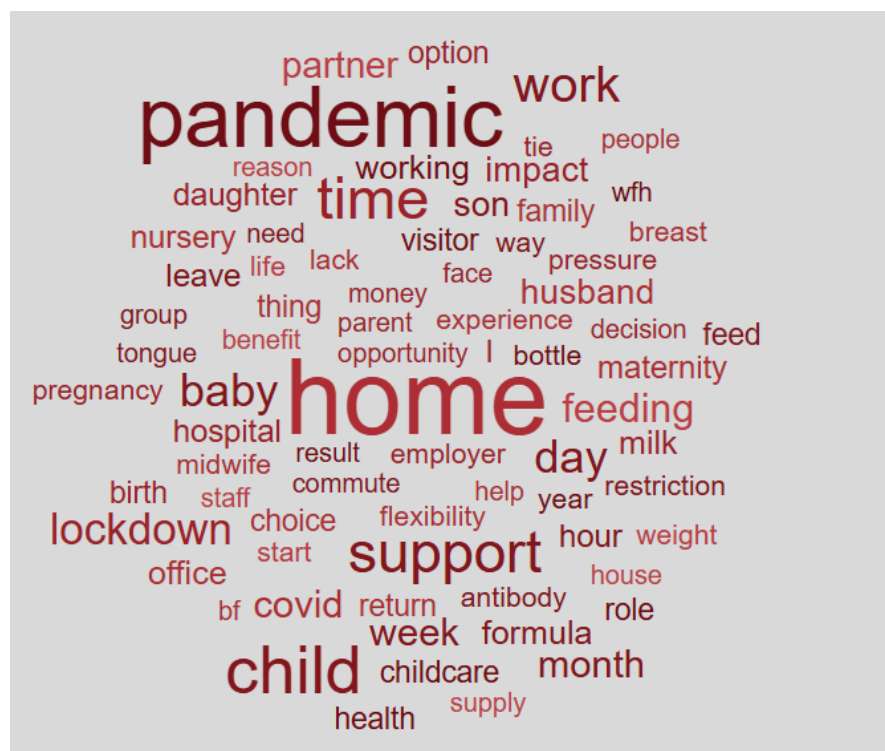
Concerns around food supplies during periods of lockdowns including supply of formula milk as well as general financial worries were also issues that motivated some women to continue breastfeeding for longer (39 women mentioned this as a concern).

At the same time, the time of the pandemic and especially lockdowns were far from positive experiences. The noun 'lockdown' (72) is also always associated with negative experiences especially with the state of being left alone with little or no support from relevant professional services (NHS, midwives, health visitors). The noun 'support' is mostly used in reporting of negative experiences related to the lack of support, of which specifically the 'breastfeeding support' and its unavailability were frequently mentioned (29 times):

- 112. I struggled to access **support** with breastfeeding in the early weeks of parenthood and switched to formula feeding
- 113. Yes- really struggled with breastfeeding and there was no **support** so gave formula even though I didn't want to.
- 114. The pandemic was difficult as I was isolated and there was no breastfeeding **support** .

Women also mentioned financial worries (10 responses) as well as issues around career progression and potential redundancies (5 responses). Pandemic but particularly lockdowns have affected mental health with many respondents describing feelings of being isolated or having nowhere to go.

Figure 9: The most frequent nouns (minimum frequency of 10) in responses to Q110



Overall, the pandemic had a dual impact on maternal decisions related to infant feeding and work. The responses highlighted two main themes: positive experiences were often tied to the flexibility and support afforded by working from home, allowing women to continue and/or adjust breastfeeding and other feeding practices and reducing stress; negative experiences stemmed from lockdowns, marked by isolation and a lack of professional breastfeeding or health support.

## 5. Impact of physical and mental health

Q115: Did your physical or mental health impact your feeding or paid work decisions?

1022 respondents provided an answer to Q115, with 184 saying 'yes' and 577 answered with 'no'. Most of the issues mentioned related to mental health. As Table 12 shows, 'health' was the top noun (mentioned 168 times) and predominantly modified with the adjective 'mental' (140 times).

Table 12: The most frequent nouns (minimum frequency of 10) in responses to Q115

Noun	Freq.	Norm. Freq.	Noun	Freq.	Norm. Freq.
health	168	11964.96	stress	17	1210.7
time	83	5911.26	way	17	1210.7
baby	81	5768.82	support	16	1139.5
feeding	79	5626.38	leave	16	1139.5
child	63	4486.86	pnd	15	1068.3
work	60	4273.2	part	15	1068.3
decision	48	3418.56	lack	15	1068.3
birth	47	3347.34	year	15	1068.3
anxiety	46	3276.12	daughter	14	997.08
job	43	3062.46	feed	14	997.08
month	37	2635.14	bottle	14	997.08
formula	37	2635.14	role	13	925.86
milk	32	2279.04	pressure	13	925.86
week	30	2136.6	maternity	13	925.86
breast	25	1780.5	weight	12	854.64
day	24	1709.28	sleep	11	783.42
hour	24	1709.28	pandemic	11	783.42
son	24	1709.28	life	11	783.42
depression	22	1566.84	tongue	10	712.2
impact	22	1566.84	thing	10	712.2
home	19	1353.18	reason	10	712.2
issue	19	1353.18	night	10	712.2
supply	18	1281.96	choice	10	712.2

This suggests that mental health issues were more likely to impact decisions with women reporting anxiety (46 times), depression specifically post-natal depression (37 times) and stress (11 times). The main causes of mental health issues mentioned involved traumatic birth experience (10 times), sleepless nights (27 responses), challenges with breastfeeding and/or expressing (34 responses) as well as pressure to return to work; at least 27 mothers reported that they had to return to work but in order to manage childcare with work commitments, they had to either reduce work hours or go part time or take a different and less well paid job:

- 115. I took a lower-paid and lower-qualified job for the benefit of my family.
- 116. I earn far less than I used to, **work** part-time and have little challenge.
- 117. I had to return to **work** dropped to 4 days from 5 after one year due to pressure of combining motherhood and work

10 women stated that they left their job or took a redundancy, while 5 said that they are considering quitting:

- 118. I left my **job** when baby was 9 months due to mental and physical health majorly decreasing from stress at work.





support, highlighting significant gaps in communication and policy implementation that affect returning mothers. Those who had not yet returned to work also expressed a desire for flexible working conditions but mentioned appropriate facilities less frequently, likely because they had yet to confront the challenges of breastfeeding and expressing upon returning to work.

It became clear from the responses that returning to work poses significant emotional challenges, far beyond merely resuming professional duties after a break. Many mothers reported feelings of sadness - the most commonly cited emotion - along with anxiety and guilt, particularly in relation to changes in their feeding routines. These feelings often originated from reduced physical contact with their babies and the logistical challenges associated with continuing to breastfeed or express milk at work. This emotional strain highlights the need for workplaces to better accommodate the unique needs of breastfeeding mothers, ensuring their transition back to work is supportive both practically and emotionally. If we women are supported to make decisions that they feel part of natural progression (e.g. when to stop breastfeeding), they tend to be happier and more content, which can have positive effects on their work commitments.

The pandemic had a profound, dual impact on mothers' decisions regarding infant feeding and work. For many, the shift to working from home provided unexpected yet essential flexibility, enabling them to manage breastfeeding more effectively. This outcome serves as compelling evidence that flexible work arrangements can significantly support mothers, leading to more positive experiences. This also aligns well with the need for more flexible work arrangements, so frequently mentioned by mothers who returned to work or had not yet returned. Thus, the pandemic acted as a 'real-world experiment', demonstrating that with sufficient flexibility, mothers can continue breastfeeding for extended periods while managing their work responsibilities with less stress. However, the pandemic also posed considerable challenges. A lack of support during lockdowns, coupled with feelings of isolation and unsupported breastfeeding journeys, led some mothers to stop breastfeeding.

Responses to Q115 reveal that physical and particularly mental health issues significantly influenced feeding decisions and work arrangements. Mental health concerns like anxiety, post-natal depression, and stress from work pressures or breastfeeding difficulties led some mothers to drastically alter their work patterns, including reducing their hours or even quitting their jobs.

Based on the detailed analysis of qualitative responses from mothers regarding infant feeding and return to work decisions, it is evident that there is a need for a workplace policy to support breastfeeding mothers in the workplace. Here are some recommendations:

1. **Flexible Work Arrangements:** Implementing more flexible work schedules to accommodate breastfeeding and expressing needs, including options for remote work and flexible hours, whenever possible. This flexibility would allow

mothers to continue breastfeeding/expressing and manage their work commitments effectively.

2. **Dedicated Breastfeeding Facilities:** Employers should provide dedicated, private, and hygienic spaces for breastfeeding and expressing milk. These facilities should be equipped with comfortable seating, electrical outlets, and refrigeration for storing milk, ensuring that mothers do not have to resort to inappropriate locations such as toilets or their cars.
3. **Extended Breaks and Leave Options:** Workplaces should offer extended breaks for breastfeeding or milk expressing. This would include provisions for paid breaks and the possibility of additional unpaid leave for child-related emergencies. This would allow mothers to maintain their infant feeding practices and schedules without penalty.
4. **Clear Policies and Communication:** Development and communication of clear policies supporting breastfeeding are essential. These policies should be well-publicized and accessible, providing guidance on mothers' rights and available support. Training for management and staff to foster a supportive workplace culture towards breastfeeding mothers is also crucial.
5. **Health and Wellbeing Support:** The establishment of support systems such as mentoring programs for career progression post childbirth, mental health support, and structured guidelines on managing work-life balance could further support breastfeeding mothers. These systems could help alleviate the emotional toll and make the transition back to work less daunting.

While managers might perceive policies supporting breastfeeding as restrictive due to their temporary impact on work schedules and resources, it's important to recognise that these measures are only applicable for a relatively short period in the employee's working life. Facilitating breastfeeding and expressing for working mothers will not only improve mothers' wellbeing but also promote their long-term professional engagement and aid career progression this potentially reducing gender inequalities in the workplace (e.g. gender pay gap) Implementing a workplace policy for breastfeeding mothers could enhance employee satisfaction and retention, reduce turnover costs, and improve overall productivity, as mothers are more likely to be engaged and motivated when their workplace acknowledges and supports their needs during this transition.

# Appendix 1: Maternal Experiences Survey Questions

Welcome to our maternal wellbeing, infant feeding, and paid work experiences survey

We wish to survey mothers based in the UK who have given birth since January 2017. Participation is voluntary and the survey is entirely anonymous. It should take approximately 20-25 minutes of your time. The survey aims to capture mothers' experiences of infant feeding and return to work and forms part of a wider project in this area. We will ask a couple of questions about your birth which may be distressing if you had a difficult birth. Please note sensitive questions have a 'prefer not to say' option.

This project has been subject to an ethical review and has been given a favourable ethical opinion for conduct by the Head of the School of Politics, Economics and International Relations. You can find out more information about the survey, how your data will be stored, used, retained and shared in our information sheet.

If you have any questions about the survey please e-mail X

I confirm the above and consent to take part in this study

Please confirm that:

- 1) I have read and understand the above information for this study and have had the opportunity to ask questions.
- 2) I agree to take part in this study.

## **About the birth of your child**

First, we would like to ask for some basic information about your child and birth. This will help us better understand infant feeding decisions and experiences.

We are interested in mothers based in the UK who have given birth since 2017. Please answer the following questions in relation to your most recent birth. If you had twins, triplets or other multiple births please answer the questions as if they are applicable to any of your children.

### **1. Please specify the year your child was born**

2017  
2018  
2019  
2020  
2021  
2022  
2023  
2024

### **2. Please specify the month your child was born**

January  
February  
March  
April  
May  
June  
July  
August  
September  
October  
November  
December

### **3. Did you have twins, triplets or other multiple births?**

No  
Yes, twins  
Yes, triplets or other multiple births

### **4. What is the sex of your child?**

Female, Male, Both (twins, triplets or other multiple births), Prefer not to say

### **5. Was your child born?**

Within a week of your due date  
1 or more weeks after your due date  
37-39 weeks  
32-36 weeks  
28-31 weeks  
Before 28 weeks  
Other [please specify]

Prefer not to say

**6. What was the birth weight of your child?**

Less than 2.5kg (5lbs 8oz)

2.5kg to 2.99kg (5lbs 8oz to 6lbs 9oz)

3kg to 3.49kg (6lbs 10oz to 7lbs 11 oz)

3.5kg to 3.99kg (7lbs 12oz to 8lbs 12oz)

4kg (8lbs 13 oz) and over

Prefer not to say

If you had twins, triplets or other multiple births, you can include additional information on birth weights if you wish

**7. Please tell us which of the following best describes the delivery of your child**

Vaginal birth

Assisted vaginal birth (forceps/ventouse)

Elective caesarean

Emergency caesarean

Prefer not to say

**8. Related to your birth, did you undergo/experience any of the following?  
[Please select all that apply]**

An induction/acceleration of labour

An episiotomy and/or a tear

Postpartum haemorrhaging

Other complication

None of these

Prefer not to say

**9. What day of the week did you give birth?**

Monday-Thursday

Friday-Sunday

I don't remember

## **About how your child was fed**

We will now ask some questions related to your intentions and actual feeding experiences of your most recent child. If you had twins, triplets or other multiple births please answer the question as if they are applicable to any of your children.

### **10. Before your most recent child was born, how would you describe your intentions for feeding your child?**

I wanted to breastfeed only

I wanted to express breastmilk only

I wanted to formula feed only

I wanted to breastfeed and express breastmilk

I wanted to mix feed (breastfeed and/or express breastmilk and give formula milk as well)

I had not decided how I was going to feed my child

Other

If you selected Other, please specify:

### **11. Have you ever breastfed or expressed breastmilk for your child?**

Yes

No

### **12. Which of the following best describes your reasons why you did not breastfeed your child [Please select all that apply] [Asked if Q11=No]**

I did not want to breastfeed

Previous experience(s) with another child(ren)

I could not breastfeed for health reasons

I could not breastfeed due to birth complications

My child was premature

My child had health issues

My child had problems latching

I had low milk supply

It allowed my partner to be involved

It allowed others to help feed my child

Because it was easier for when I return to work

I feel it is what is expected

Cultural/religious reasons

Other

If you selected Other, please specify:

### **13. Which of the following best describes your reasons for breastfeeding/expressing breastmilk? [Please select all that apply] [asked if Q11=yes]**

A health professional advised me to (e.g. nurse, doctor, midwife or health visitor)

My partner, friend and/or relative advised me to

Previous experience(s) with another child(ren)

Child health benefits

Mother health benefits

To bond with my child

To save on the cost of formula

Cultural/religious reasons

Other

If you selected Other, please specify:

**14. You may have used different methods at different times but which feeding method(s) have you used? [Please select all that you used]**

[Asked if Q11=Yes]

I breastfed only

I expressed breastmilk only

I formula fed only

I breastfed and expressed breastmilk

I mix fed (breastfed and/or expressed breastmilk and gave formula milk as well)

Other

If you selected Other, please specify:

**15. Which of the following best describes your reasons for giving formula milk? [Please select all that apply]** [Asked if Q14=I formula fed only or I mix fed]

A health professional advised me to (e.g. nurse, doctor, midwife or health visitor)

My partner, friend and/or relative advised me to

Previous experience(s) with another child(ren)

I had milk supply issues/problems breastfeeding

I had concerns about how much milk my child was getting/weight gain

I had health issues

It allowed my partner to be involved

It allowed others to help feed my child

Because it was easier for when I return to work

It made breastfeeding more manageable

I feel it is what is expected

Cultural/religious reasons

Other [please specify]

The following questions are asked to those for which Q11=Yes

**16. Which of the following statements best describes your feelings about how long you breastfed/expressed breastmilk for your child?**

I am still breastfeeding/expressing breastmilk

I would have liked to have breastfed /expressed breastmilk for longer

I breastfed/expressed breastmilk for as long as I wanted

I breastfed/expressed breastmilk for longer than I wanted

What age was your child when last breastfed/given expressed breastmilk? [You can answer in days, weeks or months; if you had twins, triplets or other multiple birth, please answer for the child you breastfed/expressed breastmilk for the longest]

**17. During the first 6 months of your child's life, was/is anyone else involved in regularly feeding your child milk during the day? [Please select all that apply]**

No  
Yes, my partner  
Yes, other family member  
Yes, childcare provider  
Yes, other  
No

**18. During the first 6 months of your child's life, was/is anyone else involved in regularly feeding your child milk during the night? [Please select all that apply]**

Yes, my partner  
Yes, other family member  
Yes, childcare provider  
Yes, other

The following questions are asked to all respondents

**19. Do you know whether you were fed with breastmilk or formula milk when you were a baby?**

Fed with breastmilk entirely or almost entirely  
Fed with formula entirely or almost entirely  
Fed with both breastmilk and formula milk  
I don't know

**20. Was this your first child?**

Yes  
No

Asked to those for which Q20=No

**21. Excluding your most recent child, how many other children do you have? [Exclude any step or adoptive children]**

1  
2  
3  
4  
5+

**22. Excluding your most recent child, were any of your other children breastfed?**

Yes  
No

The following questions were asked to all

**23. Do most of the mothers you know...?**

Breastfeed and/or express breastmilk only  
Formula feed only  
Mix feed (breastfeed and/or express breastmilk and give formula milk as well)



Mothers I know use a variety of methods

**24. Are most of the mothers that you know employed?**

I'm not sure

All or most

Around half

Less than half

I'm not sure

## **Return to paid work**

We will now ask you some questions about whether you returned to work after the birth of your child. We are interested in your experience whether you undertook paid work or not. If you were self employed please answer the return to work questions, as we will ask later specific questions related to self-employment if this applies to you.

### **25. Did you undertake paid work whilst pregnant with your most recent child?**

Yes  
No

### **26. Did you start a paid job within 12 months after giving birth? [asked if Q25=No]**

Yes  
No

### **27. If you would like to have worked did you face any barriers to working?** [Please select all that apply] [Asked if Q26=No]

I did not want to work  
I did not face any barriers  
I could not find a job with the desired hours  
I could not find a job in a suitable location  
I would lose benefits if I started work  
Working would have made it difficult to feed my child the way I wanted  
I could not find suitable childcare  
I could not find a job that paid enough to afford childcare  
I prefer to look after my child myself  
Other [Please specify]

### **28. Were you previously employed in paid work? [Asked if Q26=No]**

Yes  
No

### **29. What was the occupation/job title of the last job you had? [Asked if Q28=Yes]**

### **30. Did you return to paid work after giving birth? [Asked if Q25=Yes]**

Yes  
I am still on leave  
No

The following are asked if Q30=Yes or Q26=Yes

### **31. How old in months was your child when you returned to paid work?**

1  
2  
3

- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15

Other [Please specify]

**32. Which of the following best describes your reasons for returning to paid work after the birth of your child? [Please select all that apply to you]**

Financial reasons

Career reasons

Job security

It felt like it was what was expected

Personal desire/I enjoy working

I did not want to be a stay at home parent

I wanted the routine

For a sense of identity

Other [please specify]

**33. Did you feel any conflict between return to paid work after the birth of your child and how you wanted to feed your child?**

Yes, I was not able to feed my child in a way I would have liked for as long as I would have liked as a result of returning to work

Yes, I returned to paid work later than I would have liked so I could feed my child in the way I wanted

No, I did not feel any conflict

Other {please specify]

**34. How is/was your child cared for whilst you are/were at work? [Please select all that apply]**

Myself

Looked after by partner

Looked after by grandparent(s)

Looked after by other family member

Child attends/attended workplace nursery

Child attends/attended other nursery

Child minder

Nanny/carers in home

Other [please specify]

**35. Did you make any voluntary adjustments to your working patterns after the birth of your child? [Please select all that apply]**

- No, I did not make any adjustments
- I increased my work hours worked
- I decreased my work hours worked
- I changed shift patterns
- I started a flexible working arrangement
- I started a job share
- Other [please specify]

**36. On average, how many hours a week were you working when you returned to work?**

- Less than 10 hours
- 10-19 hours
- 20-29 hours
- 30-35 hours
- 36-40 hours
- More than 40 hours

**37. On average, how many hours a day were you working when you returned to work?**

**About your job** [asked to Q30=Yes or Q26=Yes]

We will now ask you about your job. We want to understand how experiences vary across different types of job/work. Please answer the following questions in relation to the job you were doing upon return to work after giving birth to your most recent child. If you had more than one job please answer for the job you considered to be your main job.

**38. Did/do you have more than one job?**

Yes

No

**39. What is the occupation/job title of your job?**

**40. What is/was your contract type?**

Permanent

Fixed term

Agency/Casual work

Zero hours contract

Self-employed/freelance

I don't know

Other [please specify]

If Q40 is equal to self-employed individual routed to Q56

**41. Were you eligible for any enhanced occupational maternity/parental pay?  
[By enhanced occupational maternity/parental pay we mean pay paid by your employer on top of statutory maternity/parental pay]**

Yes

No

**42. How many weeks of enhanced occupational maternity/parental pay did you take? [If Q41=Yes]**

**43. Did you return to the same job(s) that you did prior to giving birth?**

Yes, I returned to the same employer and job

No, I returned to the same employer but a different job role/title

No, I returned to a different employer

**44. If you changed employer/job role/title please state the occupation/job title you were doing prior to giving birth**

**45. Did/does your job involve any of the following working arrangements?  
[Please select all that apply]**

Working most/every weekend

Working some weekends

Overnight travel

Unsocial working hours e.g. evenings/nights

On call working

Driving or travelling around

Attending client or customer premises

None of these

**46. Did/does your job (after the birth of your child) allow you to work from home at all?**

Yes

No

**47. How often do/did you typically work from home?** [asked if Q46=Yes]

I work(ed) entirely from home

3+ days per week

1-2 days per week

Less often

I never work(ed) from home

**48. Compared to before you gave birth to your child, did the amount of time working from home...?** [asked if Q46=yes]

Increase

Decrease

Stay the same

Not applicable

## **About your employer**

We will now ask some questions about the employer you were working for upon return to work after giving birth to your most recent child. If you had more than one job please answer for the job you considered to be your main job.

**49. What does the organisation/firm you work(ed) for mainly make or do?**

**50. Do you work in the public sector?**

Yes

No

**51. How many people does the organisation you work(ed) for employ?**

Under 25 employees

25 to 99 employees

100-249 employees

250-499 employees

500+

I don't know but less than 250 employees

I don't know but 250+ employees

**52. Does/did your employer offer any of the following to support mothers returning to work?** [possible answers: Yes No I don't know]

A designated place to rest and lie down if necessary

A designated place to breastfeed/express breastmilk

Facilities to store breastmilk

Shorter working days

Longer/extended breaks (which may include time to express breastmilk/breastfeed)

Additional leave/holiday

Extra leave if your child is ill

Different shift patterns/flexible working hours

**53. If any, please list other support for mothers returning to work offered by your employer or any other support you would have liked.**

**54. Does/did your employer have a formal policy for breastfeeding employees?**

Yes

No

I don't know

**55. Did your employer undertake a health and safety risk assessment with you when you returned to work?**

Yes

No

The following were asked to the self employed (those who answered self-employed/freelance to Q40)

We will now ask you some questions about the job you were doing upon return to work after giving birth to your most recent child. If you had more than one job please answer for the job you consider to be your main job.

**56. Did you return to the same job(s) that you did prior to giving birth?**

Yes

No

**57. Were you previously self-employed/freelance prior to the birth of your child?** [Asked if Q56=No]

Yes

No

**58. What occupation/job were you doing prior to giving birth?** [Asked if Q56=No]

**59. Do/did you have any employees?**

Yes

No

**60. How many people do/did you employ?**

Under 10 employees

10-24 employees

25 to 99 employees

100-249 employees

250-499 employees

500+ employees

I don't know

**61. Do/did you work? [Please select all that apply]**

From your own home

From separate business premises

From a van or stall

From client or customer premises

Driving or travelling around

Other [Please specify]

**62. How often do/did you typically work from home?**

I work(ed) entirely from home

3+ days per week

1-2 days per week

Less often

**63. Compared to before you gave birth to your child, did the amount of time working from home...?**



Increase  
Decrease  
Stay the same

**64. Does/did your job involve any of the following working arrangements?  
[Please select all that apply]**

Working most/every weekend  
Working some weekends  
Overnight travel  
Unsocial working hours e.g. evenings/nights  
On call working  
None of these

**Workplace experience** (asked to those who responded Q30=Yes or Q26=Yes]

**65. Which of the following best describes your circumstances?**

You stopped breastfeeding/expressing breastmilk some time before you returned to work

You stopped breastfeeding/expressing breastmilk just before or around the point at which you returned to work

You continued breastfeeding/expressing breastmilk after your return to work but you have stopped now

You are still breastfeeding/expressing breastmilk

Not applicable, I did not breastfeed my child

**Workplace experience** (asked to those who indicated from answered Q65 they had continued to breastfeed upon return to work]

We will now ask you some questions related to your experience of combining breastfeeding/expressing breastmilk and paid work.

**66. Had your child been introduced to solids by the time you returned to work?**

Yes

No

**67. Did you make any changes to the way your child was fed/the type of milk given as a direct result of your return to work?**

Yes

No

**68. What changes did you make?** [Please select all that apply] [Asked if Q67=Yes]

I introduced cow's or alternative milk

I introduced expressed breastmilk

I introduced formula milk

I stopped breastfeeding and expressed breastmilk only

I adjusted the timing/frequency of breastfeeds

Other {please specify]

**69. How did these changes make you feel?** [Asked if Q67=Yes]

**70. Did you inform your line manager/employer that you were breastfeeding/expressing breastmilk?**

Yes

No

Not applicable

**71. Why do you not inform your line manager/employer? [Please select all that apply]**

I felt uncomfortable raising it

I did not know the procedure to do so

I did not know how to broach the subject

I did not think my employer/line manager needed to know

Other [Please specify]

**72. Have you done any of the following? [Please select all that apply]**

Brought your child to work and breastfed at work

Breastfed child during breaks at an onsite nursery/childcare facility

Breastfed child during breaks at a nearby location (e.g. at home, childcare provider)

Worked from home so you could breastfeed your child

None of the above

**73. At your workplace, where have you ever breastfed? [Please select all that apply]** [asked if Q72= Brought your child to work and breastfed at work]

A private breastfeeding room  
Private office/workspace  
Other private space  
Shared office/workspace  
A communal area  
The toilets  
Other [Please specify]

**74. How comfortable did/do you feel breastfeeding at your workplace?** [asked if  
Q72= Brought your child to work and breastfed at work]

Very comfortable  
Somewhat comfortable  
Neither comfortable or uncomfortable  
Somewhat uncomfortable  
Very uncomfortable

**Q75. Have you ever expressed breastmilk at your workplace?**

Yes  
No

**Experience of expressing breastmilk at your workplace** [asked if Q75=Yes]

**Q76. Do/did you express breastmilk at work for comfort or for your child?**

Comfort  
Your child  
Both

**Q77. At your workplace, where have you ever expressed breastmilk? [Please select all that apply]**

A private breastfeeding room  
Private office/workspace  
Other private space  
Shared office/workspace  
A communal area  
The toilets  
Other [Please specify]

**Q78. Where have you ever stored expressed breastmilk whilst at work? [Please select all that apply]**

In a fridge provided for storing breastmilk  
In a communal fridge  
In an insulated cooler e.g. cool bag/box  
Other [Please specify]

**Q79. How comfortable did/do you feel expressing breastmilk at your workplace?**

Very comfortable  
Somewhat comfortable  
Neither comfortable or uncomfortable  
Somewhat uncomfortable  
Very uncomfortable

**Workplace Experience** [Asked to those who expressed breastmilk or breastfed at their workplace]

**Q79. Did you experience any of the following problems relating to expressing breastmilk/breastfeeding whilst at work? [Please select all that apply]**

Line managers/employer were reluctant to/didn't provide necessary breaks  
Line managers/employer were reluctant to/didn't provide necessary facilities  
The nature of my job role made it difficult/impractical  
I received negative reactions or comments from managers  
I received negative reactions or comments from colleagues  
I did not experience any problems  
Other [Please specify]

**Q80. How supported do/did you feel combining breastfeeding/expressing breastmilk and paid work by your...?**

Scale of: Fully supported, fairly well supported, not well supported, not at all supported, not applicable

Line manager/employer  
Work colleagues  
Partner  
Family

**Q81. Did you experience any of the following problems relating to expressing breastmilk or breastfeeding upon your return to work? [Please select all that apply]**

A reduction in milk supply  
Child would not take a bottle  
Difficulty expressing  
Painful expressing  
Engorgement/mastitis  
None of the above  
Other [Please specify]

If you selected Other, please specify:

**Q82. How easy or difficult have/did you found/find combining breastfeeding and/or expressing breastmilk with paid work?**

Very easy  
Somewhat easy  
Neither easy nor difficult  
Somewhat difficult  
Very difficult

**Q83. If you have stopped breastfeeding/expressing breastmilk, what were your reasons? How did stopping make you feel?**

**Q84. Is there anything else you would like to add about your experience of combining breastfeeding/expressing breastmilk and paid work?**

**Workplace Experience** [asked if indicated stopped breastfeeding before return to work, based on Q65]

**Q85. Would you have liked to have continued breastfeeding/expressing breastmilk when you returned to work?**

Yes

No

**Q86. What were your reasons for stopping breastfeeding/expressing breastmilk? How did this make you feel?** {asked if Q85=No]

**Q87. Did you face any barriers that stopped you from continuing to breastfeed/express breastmilk upon your return to work?** [Please select all that apply] {asked if Q85=Yes]

No, I did not face any barriers

It was difficult/impractical

I did not know how to broach the subject with my employer/line manager

I did not think it was an option/possible to do so

I did not feel I would be supported at work to do so

I was worried it would have been stressful/unmanageable

Other [Please specify]

**Q88. How did stopping breastfeeding/expressing breastmilk make you feel?** {asked if Q85=Yes]

**Return to Work Intentions** [Asked if Q30=I am still on leave]

**Q89. Do you intend to return to work?**

Yes

No

I have not yet decided

The following questions are asked if Q89=Yes

**Q90. How old in months will your child be when you intend to return to paid work?**

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

Other [Please specify]

I have not yet decided/confirmed

**Q91. Which of the following best describes your reasons for returning to paid work? [Please select all that apply to you]**

Financial reasons

Career reasons

Job security

It feels like it is what is expected

Personal desire/I enjoy working

I do not want to be a stay at home parent

I want the routine

For a sense of identity

Other [Please specify]

**Q92. Do you feel any conflict between returning to work after the birth of your child and how you want to feed your child?**

Yes, I will not be able to feed my child in a way I like for as long as I would like as a result of returning to paid work

Yes, I will return to paid work later than I would like so I can feed my child in the way I want

No, I did not feel any conflict



Other {Please Specify}

**Q93. How will your child be cared for whilst you are at work? [Please select all that apply]**

Myself

Looked after by partner

Looked after by grandparent(s)

Looked after by other family member

Child will attend workplace nursery

Child will attend other nursery

Child minder

Nanny/carers in home

I have not yet decided

Other [Please specify]

**Q94. Do you expect to make any voluntary changes to your working patterns? [Please select all that apply]**

No

I expect to increase my work hours worked

I expect to decrease my work hours worked

I expect to change shift patterns

I expect to start a flexible working arrangement

I expect to start a job share

Don't know

Other [Please specify]

**Q95. On average how many hours a week do you expect to be working when you return to work?**

Less than 10 hours

10-19 hours

20-29 hours

30-35 hours

36-40 hours

More than 40 hours

**Q96. On average, how many hours a day do you expect to be working when you return to work?**

**About your job** [The following questions are asked if Q89=Yes]

We will now ask you about the job you will be doing on return to paid work. We want to understand how experiences vary across different types of job/work. If you had more than one job please answer for the job you considered to be your main job

**Q97. Will you have more than one job?**

Yes

No

I don't know/I have not yet decided

**Q98. What is the occupation/job title you will be doing?**

**Q99. What is your contract type?**

Permanent

Fixed term

Agency/Casual work

Zero hours contract

Self-employed/freelance

I don't know

Other [Please specify]

**Q100. Were you eligible for any enhanced occupational maternity/parental pay? [By enhanced occupational maternity/parental pay we mean pay paid by your employer on top of statutory maternity/parental pay]**

Yes

No

**Q101 How many weeks of enhanced occupational maternal/parental pay did/will you take? [Asked if Q100=Yes]**

**Q102 Do you expect to return to the same job(s) that you did prior to giving birth?**

Yes, I expect to return to the same employer and job

No, I expect to return to the same employer but a different job role/title

No, I expect to return to a different employer

**Q103 If you expect to change employer/job role/title please state the occupation/job title you were doing prior to giving birth**

**Q104 Does/will your job involve any of the following working arrangements? [Please select all that apply]**

Working most/every weekend

Working some weekends

Overnight travel

Unsocial working hours e.g. evenings/nights

On call working

Driving or travelling around

Attending client or customer premises

None of these

**Q105. Will your job role allow you to work from home at all?**

Yes

No

**Q106. How often do you expect to typically work from home?** [Asked if Q105=Yes]

Entirely from work

3+ days per week

1-2 days per week

Less often

I don't expect to work from home

I don't know/I am undecided

Increase

**Q107 Compared to before you gave birth to your child, do you expect the amount of time working from home to..?** [Asked if Q105=Yes]

Decrease

Stay the same

Not applicable

I am not sure/I have not decided

**About your employer** [The following questions are asked if Q89=Yes]

We will now ask some questions about the employer you expect to be working for upon return to work. If you had more than one job please answer for the job you considered to be your main job.

**Q108 What does the organisation/firm you (will) work for mainly make or do?**

**Q109 Do/will you work in the public sector?**

Yes

No

**Q110 How many people does the organisation you (will) work for employ?**

Under 25 employees

25 to 99 employees

100-249 employees

250-499 employees

500+

I don't know

**Q111 Does/will your employer offer any of the following to support mothers returning to work?**

Yes, No, I don't know

A designated place to rest and lie down if necessary

A designated place to breastfeed/express breastmilk

Facilities to store breastmilk

Shorter working days

Longer/extended breaks (which may include time to express breastmilk/breastfeed)

Additional leave/holiday

Extra leave if your child is ill

Different shift patterns/flexible working hours

**Q112 If any, please list other support for mothers returning to work offered by your employer or any other support you would like to see**

**Q113 Does your employer have a formal policy for breastfeeding employees?**

Yes

No

I don't know

**About your job** [The following questions are asked if Q99=Self-employed/freelance]

We will now ask you some questions about the job you expect to be doing when you return to work. If you had more than one job please answer for the job you consider to be your main job.

**Q114. Do you expect to return to the same job(s) that you did prior to giving birth?**

Yes  
No

**Q115. Were you self-employed/freelance prior to the birth of your child?** {Asked in Q114==No]

Yes  
No

**Q116. What occupation/job were you doing prior to giving birth** {Asked in Q114==No]

**Q117. Do you have any employees?**

Yes  
No

**Q118. How many people do you employ?**

Under 10 employees  
10-24 employees  
25 to 99 employees  
100-249 employees  
250-499 employees  
500+ employees  
I don't know

**Q119. Do/will you work? [Please select all that apply]**

From your own home  
From separate business premises  
From a van or stall  
From client or customer premises  
Driving or travelling around  
Other [Please specify]  
I don't know/I have not yet decided

**Q120. How often do you expect to work from home?** [Asked if Q119=from your own home]

Entirely from home  
3+ days per week  
1-2 days per week  
Less often  
I am not sure/I have not yet decided

**Q121. Compared to before you gave birth to your child, do you expect the amount of time working from home to...?** [Asked if Q119=from your own home]

Increase

Decrease

Stay the same

I am not sure/I have not yet decided

**Q122. Does/will your job involve any of the following working arrangements?**  
**[Please select all that apply]**

Working most/every weekend

Working some weekends

Overnight travel

Unsocial working hours e.g. evenings/nights

On call working

None of these

**About how you will feed your child** [Asked in Q89=Yes]

**Q123. Do you expect your child to have been introduced to solids by the time you return to work?**

Yes

No

I am not sure

**Q124. Do you expect to be breastfeed/expressing breastmilk when you return to work?**

No, I am not currently breastfeeding/expressing breastmilk

No, I am currently breastfeeding/expressing breastmilk but expect to stop before I return to work

Yes

No, I would like to stop before I return to work

**Q125. Are there any barriers that are stopping you from continuing to breastfeed/express breastmilk upon your return to work? [Please select all that apply]** [Asked if Q124=expect to stop before return to work]

It is difficult/impractical

I do not know how to broach the subject with my employer/line manager

I do not think it is an option/possible to do so

I do not feel I would be supported at work to do so

I am worried it would be stressful/unmanageable

Other [Please specify]

**Q126. How does stopping breastfeeding/expressing breastmilk make you feel?**  
[asked if Q124=expect to stop before return to work]

Following questions asked if Q124=expect to continue to breastfeed upon return to work

**Q127. Do you plan to make any changes to the way your child is fed/the type of milk given as a direct result of your return to work?**

Yes

No

**Q128. What changes do you plan to make? [Please select all that apply]**

I will introduce cow's or alternative milk

I will introduce expressed breastmilk

I will introduce formula milk

I will stop breastfeeding and express breastmilk only

I will adjust the timing/frequency of breastfeeds

I don't know/I have not decided yet

Other [Please specify]

**Q129. How did these planned changes make you feel?**

**Q130. How easy or difficult do you expect to find combining breastfeeding and/or expressing breastmilk with paid work?**

Very easy

Somewhat easy

Neither easy nor difficult

Somewhat difficult

Very difficult

Don't know



The following questions are asked if Q89=No, I have not yet decided

**Q131. Why have you chosen not to/yet decided to return to work? [Please select all that apply]**

I do not want to return to work/my job  
I was made redundant  
I have not found a job with the desired hours  
I have not found a job in a suitable location  
I would lose benefits if I returned to work  
Working would make it difficult to feed my child the way I wanted  
I am unable to find suitable childcare  
I cannot afford childcare  
I prefer to look after my child myself  
I feel like it is what is expected  
Other [Please specify]

**Q132. What was the occupation/job title of the job you were doing prior to giving birth?**

**Q133. What was the contract type of the job you were doing prior to giving birth?**

Permanent  
Fixed term  
Agency/Casual work  
Zero hours contract  
Self-employed/freelance  
I don't know  
Other [Please specify]

**Q134. What did the organisation you were working for prior to giving birth mainly make or do?**

**Q135. Prior to giving birth were you working in the public sector?**

**Q136. How many people did the organisation you were working for prior to giving birth employ (excluding temporary and casual staff)?**

Yes  
No  
Under 25 employees  
25 to 99 employees  
100-249 employees  
250-499 employees  
500+  
I don't know but less than 250 employees  
I don't know but 250+ employees

**Q137. Did you have any employees? [Asked if Q133=self-employed/freelance]**

Yes  
No

**Q138. How many people did you employ? [Asked if Q137=Yes]**

Under 10 employees  
10-24 employees  
25 to 99 employees  
100-249 employees  
250-499 employees  
500+ employees  
I don't know

**Q139. On average, how many hours a week were you working prior to giving birth?**

Less than 10 hours  
10-19 hours  
20-29 hours  
30-35 hours  
36-40 hours  
More than 40 hours

The following are asked to respondents who did not return to work if Q30=No

**Q141. Why did you not return to work? [Please select all that apply]**

I did not want to return to work/my job  
I was made redundant  
I could not find a job with the desired hours  
I could not find a job in a suitable location  
I would lose benefits if I returned to work  
Working would make it difficult to feed my child the way I wanted  
I could not find suitable childcare  
I could not afford childcare  
I prefer to look after my child myself  
I feel like it is what is expected  
Other [Please specify]

**Q142. What was the occupation/job title of the job you were doing prior to giving birth?**

**Q143. What was the contract type of the job you were doing prior to giving birth?**

Permanent  
Fixed term  
Agency/Casual work  
Zero hours contract  
Self-employed/freelance  
I don't know  
Other [Please specify]

**Q144. What did the organisation you were working for prior to giving birth mainly make or do?**

**Q145. Prior to giving birth were you working in the public sector?**

Yes  
No

**Q146. How many people did the organisation you were working for prior to giving birth employ (excluding temporary and casual staff)?**

Under 25 employees  
25 to 99 employees  
100-249 employees  
250-499 employees  
500+  
I don't know but less than 250 employees  
I don't know but 250+ employees

**Q147. Did you have any employees? [Asked if Q143=self-employed/freelance]**

Yes  
No

**Q148. How many people did you employ?**

Under 10 employees  
10-24 employees  
25 to 99 employees  
100-249 employees  
250-499 employees  
500+ employees  
I don't know

**Q149. On average, how many hours a week were you working prior to giving birth?**

Less than 10 hours  
10-19 hours  
20-29 hours  
30-35 hours  
36-40 hours  
More than 40 hours

**About your partner** [Asked to all]

**Q150. After the birth of a child, did you have a partner or spouse?**

Yes

No

The following questions are asked if Q150=Yes

**Q151. What is/was the gender of your partner/spouse?**

Male

Female

Other

Prefer not to say

**Q152. Are/were you and your partner married or in a civil partnership?**

Yes

No

**Q153. Is/was your partner employed after the birth of your child?**

Prefer not to say

Self-employed

Paid Employment (Full time)

Paid Employment (Part time)

Not in employment

**Q154. Did your partner make any voluntary adjustments to their working patterns after the birth of your child? [Please select all that apply]**

They did not make any adjustments

They increased their hours worked

They decreased their hours worked

They changed their shift patterns

They moved to a flexible working agreement

They started/stopped working

They changed employer

They changed job role

Other [Please specify]

**Q155. Did you partner take any leave after the birth of your child?**

Yes

No

**Q156. Was/is this leave..? [Please select all that apply]**

Paid paternity leave

As part of a shared parental leave arrangement

Annual leave

Unpaid leave

Other [Please specify]

**Q157. Are/did you taking/take shared parental leave...? [If Q156=shared parental leave]**

At the same time

At a different time

There is/was some overlap

**Q158. In total how many weeks of leave did/will your partner take?**

**About the pandemic [asked to all]**

**Q159. If applicable, do you think the pandemic had any impact on your choices related to the way your child was fed and/or paid work?**

**About your wellbeing** [asked to all]

We will now ask some questions about your mental wellbeing in the months after you gave birth and, if applicable, returned to work.

Q160. In the months after giving birth, please choose which you feel best describes how satisfied or dissatisfied you were with the following aspects of your situation

On a scale of completely satisfied, mostly satisfied, somewhat satisfied, neither satisfied/dissatisfied, somewhat dissatisfied, mostly dissatisfied, completely dissatisfied

The way your child was fed

Your health

Your income

Your job

Amount of Leisure time

Relationship with partner

Relationship with other family members

Your life overall

**Q161. In the months after giving birth, on a scale of 0(Not all happy) to 10(Completely happy), overall how happy did you feel?**

**Q162. In the months after giving birth, on a scale of 0(Not all anxious) to 10(Completely anxious), overall how anxious did you feel?**

**Q163. Since giving birth to your most recent child, have you ever been diagnosed with any of the following?**

(Post Natal) depression

(Post Natal) anxiety

(Post Natal) psychosis

None of these

Prefer not to say

**Q164. Did your physical or mental health impact your feeding or paid work decisions?**



**About you** (asked to all)

Finally, we would like to ask some questions about you. The survey is anonymous so the information cannot be traced back to you. This information will be used to ensure we collect a range of experiences.

**Q165. How old were you when you gave birth to your most recent child?**

Under 21  
21-24  
25-29  
30-34  
35-39  
40-44  
45-49  
50+  
Prefer not to say

**Q166. What is your highest qualification level?**

Degree level (e.g. undergraduate, postgraduate, PGCE, PhD)  
Higher qualification below degree level (e.g. higher education certificate/diploma)  
A-level /AS-level, International baccalaureate or equivalent  
GCSE/O-level or equivalent  
Other  
No Qualification  
Prefer not to say

**Q167. What is your ethnic group?**

White  
English, Welsh, Scottish, Northern Irish or British  
Irish  
Gypsy or Irish Traveller  
Any other White background  
Mixed or multiple ethnic groups  
White and Black Caribbean  
White and Black African  
White and Asian  
Any other mixed or multiple ethnic background  
Asian or Asian British  
Indian  
Pakistani  
Bangladeshi  
Chinese  
Any other Asian background  
Black, African, Caribbean or Black British  
African  
Caribbean  
Any other Black, African or Caribbean background  
Other ethnic group  
Arab  
Any other ethnic group

Prefer not to say

**Q168. Were you born in the UK?**

Yes

No

Prefer not to say

**Q169. What was the occupation/job title of your main household earner when you were aged about 14?**

**Q170. What region of the UK were you residing in when your child was born?**

North East

North West

Yorkshire and the Humber

East Midlands

West Midlands

East of England

London

South East

South West

Wales

Scotland

Northern Ireland

**Q171. Do you want to tell us anything else about yourself?**

**Q172. If any, please enter any further information you wish to provide or any further comments**

## Appendix 2: Ease of Combining Breastfeeding and Work Regressions

We utilised the following question asked to respondents who had continued to breastfeed upon return to work, to test the factors that impacted how difficult the respondent found combining breastfeeding and/or expressing breastmilk with paid work.

How easy or difficult have/did you found/find combining breastfeeding and/or expressing breastmilk with paid work?

Very easy  
Somewhat easy  
Neither easy nor difficult  
Somewhat difficult  
Very difficult

We created a binary variable based on the responses:

Difficult = 1 if Very difficult/somewhat difficult; 0 otherwise

43.9% reported their experience as easy (very or somewhat) and 35.9% reported their experience as difficult.

We then run a several regressions with the key variables reported in Table A2.1, to understand the factors that increase the probability that a respondent found combining breastfeeding and work difficult. Regressions varied by their specification with some variables appearing in all regressions, whilst others were included in some and not others. The key findings are:

**First time mothers:** Across all specifications first time mothers compared to those who were not first time mothers, reported it as being more difficult: an increase in the probability of finding it difficult by 6-8 percentage points. This finding may reflect lack of experience of combining breastfeeding and return to work for first time mothers.. There is also the possibility that mothers who find it difficult (easy) with their first child may not choose (choose) to continue to breastfeed upon return to work with later children, but this is not something we can directly test.

**Age of the child:** The younger the child the more difficult individuals report finding combining breastfeeding and work, this effect disappears when controlling for whether the individual expressed breastmilk at work, suggest that a lot of the difficulty comes from the practicalities of feeding a younger child (who will likely need more frequent feeds).

**Ethnicity:** Although not statistically significant across all specifications (reflecting that there was limited statistical power owing to the fact a high proportion were white) minority ethnic groups tended to find it more difficult. 41.3% of respondents from minority ethnic groups reported finding it difficult compared to 35.4% of respondents from the white ethnic group. The effect of ethnicity is stronger when occupation is not controlled for, reflecting those from minority ethnic groups are more likely to work in occupations where combining breastfeeding and work is harder.

There is no impact of age of the mother or education, suggesting (especially given some of the characteristics above weaken when controlling for workplace factors) that workplace characteristics play more of a role than personal characteristics in balancing breastfeeding and paid work. A key driver is whether the mother expressed breastmilk at work or not, those who did saw a 19-22 percentage point increase in the probability of finding it difficult. Among those who had expressed breastmilk 45.3% reported combining paid work and breastfeeding as difficult compared to 25.4% of those who had not expressed at work. And the need to express (and the frequency) at work reduces as the child ages.

**Occupation/industry:** Only the teaching occupation and education industry (the effect disappears when controlling for whether express breastmilk in the workplace) showed any statistical significance, with an increase in the probability of finding it difficult.

**Workplace provisions:** In column 5 we added whether the employer offered any provisions (working from home, flexible working, a breastfeeding room, storage facilities and breaks). Since many of these provisions may be correlated i.e. an employer may offer many of these as part of an overall package in column 6 we reduced this to whether they offered any time provisions (working from home, flexible working, and/or breaks) and facilities (a room and/or storage facilities). Time comes out as more important (especially when we removed whether the individual expressed at work or not in column 7) than facilities. Having time reduces the probability of finding it difficult 16-18 percentage points. Facilities becomes more important (increasing from a reduction of 6 percentage points to 13 percentage points) when controlling for whether they expressed in the workplace. This implies that whilst facilities are important, especially for those who need to express at work, if there is no time to do so then they can't be used, so time is more important.

**Communication:** In column 8 we include whether there is a breastfeeding policy (which of course may be correlated with other provisions) as a proxy for good communication. When there is a breastfeeding policy this reduces the probability of reporting it as difficult by 10 percentage points. In column 9 we added whether the individual felt supported by their line manager. Those who did saw a 31.7 percentage point decrease in the likelihood of reporting combining breastfeeding and work as difficult. 28.9% found it difficult if they said they felt supported by their manager compared to 67.0% who did not feel supported

In the first set of regressions we included personal characteristics and occupation, we then moved onto adding workplace characteristics, and then whether the respondent had expressed breastmilk in the workplace (with only the final regressions shown in table A2.1). We also group factors relating to time/flexible, and facilities, since variables relating to time and variables relating to facilities are correlated.

Across all specifications White British find (Non-white British) individuals found combining breastfeeding and paid work easy (difficult), whilst other personal characteristics lose their significance when other controls are included. With the exception of ethnicity there are no differences across sub-groups in their experience once controlling for workplace characteristics. The effect of the age of the youngest disappears when controlling for whether the mother has expressed breastmilk, suggests difficulties relate to mothers with younger children on return being more likely to need to express breastmilk at their workplace to maintain their breastfeeding

journey. The one occupation that is statistically significantly different from the base category of Other associate professionals is Teaching occupations where respondents report their experience as more difficult, which is driven by workplace characteristics (since the effect disappears when controlling for workplace characteristics).

Table A2.1: Ease of Combining Breastfeeding and Work Regressions

	1	2	3	4	5	6	7	8	9
<b>First Time Mother</b>	0.062*	0.069**	0.065**	0.075**	0.086***	0.083**	0.079**	0.080**	0.110***
	[0.034]	[0.035]	[0.033]	[0.034]	[0.033]	[0.033]	[0.034]	[0.033]	[0.038]
<b>White</b>	-0.059	-0.115*	-0.084	-0.136**	-0.126*	-0.119*	-0.100	-0.112*	-0.074
	[0.065]	[0.069]	[0.064]	[0.068]	[0.065]	[0.066]	[0.067]	[0.065]	[0.076]
<b>Age group (ref: 16-24)</b>									
25-34	0.077	0.003	0.063	-0.019	0.020	0.014	0.040	0.012	0.028
	[0.117]	[0.125]	[0.115]	[0.123]	[0.120]	[0.120]	[0.123]	[0.120]	[0.123]
35+	0.065	-0.011	0.061	-0.024	0.027	0.016	0.032	0.014	0.039
	[0.119]	[0.127]	[0.117]	[0.124]	[0.122]	[0.123]	[0.126]	[0.122]	[0.126]
<b>University Degree</b>	-0.027	0.009	-0.022	0.011	0.019	0.019	0.011	0.020	0.025
	[0.051]	[0.050]	[0.050]	[0.049]	[0.050]	[0.050]	[0.051]	[0.050]	[0.057]
<b>Age of Child Upon Return (months)</b>	0.015***	-0.015**	-0.009	-0.008	-0.005	-0.006	-0.014**	-0.005	-0.003
	[0.006]	[0.006]	[0.006]	[0.006]	[0.006]	[0.006]	[0.006]	[0.006]	[0.007]
<b>Occupation (ref: Associate professionals)</b>									
Health	0.050		0.026		-0.017	0.016	0.043	0.042	-0.023
	[0.059]		[0.058]		[0.061]	[0.059]	[0.061]	[0.060]	[0.070]
Teaching	0.152**		0.135**		0.043	0.066	0.075	0.062	0.033
	[0.062]		[0.061]		[0.064]	[0.064]	[0.066]	[0.064]	[0.077]
Managers and Other Professionals	-0.002		-0.002		0.005	0.005	0.003	0.012	-0.011
	[0.054]		[0.053]		[0.054]	[0.055]	[0.056]	[0.054]	[0.065]
Administration	-0.051		-0.058		-0.042	-0.049	-0.045	-0.051	-0.079
	[0.081]		[0.079]		[0.079]	[0.080]	[0.082]	[0.080]	[0.091]
Other	0.023		0.029		-0.024	-0.003	-0.019	-0.006	-0.077
	[0.077]		[0.076]		[0.080]	[0.078]	[0.080]	[0.078]	[0.091]
<b>Industry</b>									
Education		0.119**		0.091					

	[0.058]	[0.057]					
Health and Social Work	0.093	0.055					
	[0.057]	[0.056]					
Public Administration	0.040	0.017					
	[0.072]	[0.070]					
Business and Professional Services	0.068	0.046					
	[0.065]	[0.064]					
Other Services	-0.003	-0.019					
	[0.080]	[0.079]					
Expressed milk at work	0.186***	0.188***	0.214***	0.223***		0.222***	0.201***
	[0.032]	[0.033]	[0.034]	[0.034]		[0.034]	[0.039]
Employer Offers							
Working from Home (WFH)			-0.079**				
			[0.039]				
Flexible Working Hours			-0.086**				
			[0.037]				
Extended/Additional Breaks			-0.087**				
			[0.035]				
Breastfeeding Room			-0.052				
			[0.038]				
Storage Facilities			-0.085**				
			[0.039]				
				-	-	-	
WFH/Flexible working/breaks			0.162***	0.183***	0.151***	-0.111**	
			[0.045]	[0.046]	[0.045]	[0.053]	
				-	-		
Any Facilities			0.129***	-0.061*	0.107***	-0.095**	
			[0.034]	[0.033]	[0.035]	[0.042]	
					-		
Breastfeeding Policy					0.102***		
					[0.038]		

Supportive line manager									- 0.317*** [0.042]
Observations	901	849	901	849	857	857	857	857	650
R-squared	0.029	0.025	0.065	0.062	0.122	0.102	0.056	0.110	0.185

Standard errors in brackets

\*\*\* p<0.01, \*\* p<0.05, \* p<0.1

Question asked: How easy or difficult have/did you found/find combining breastfeeding and/or expressing breastmilk with paid work? Options of Very easy, somewhat easy, Neither easy nor difficult, Somewhat difficult, Very difficult) Dependent variable is Difficult = 1 if answer was Very difficult or Somewhat difficult; 0 otherwise. Each column refers to a separate regression using ordinary least squares regression.