

## How can I continue to provide breastmilk for my child when I return to work?

This guide provides an overview, and some case studies, of ways mothers may continue to provide their child breastmilk on return to work. There are several ways and it is not one size fits all. As highlighted by the NHS potential ways include:<sup>1</sup>

- **Directly breastfeeding during breaks**
- **Adjusting the timing/frequency of breastfeeds**
- **Providing expressed breastmilk**
- **'Combination' feeding**

What might work best for you may depend on the age of your child, your job, your childcare and your infant feeding goals. Every family's situation is different: for example, some may want to continue providing as much breastmilk as possible, whilst some families we spoke to used return to work as a chance to reduce breastfeeding / wean.

### Directly breastfeeding during breaks

If your childcare is close to where you'll be working you might be able to breastfeed your child directly during some breaks. For example, if childcare provision is available onsite at your workplace or nearby or if you are able to work from home to facilitate this. Breastfeeding at childcare can also be a lovely way to connect after time apart and limits the time between breastfeeds (so might reduce how often you need to express at work).

**Did you Know?** Because of the way immunity and breastmilk works, it's thought to be desirable to breastfeed/spend time in your childcare setting. When a breastfeeding mother is exposed to a germ, her breastmilk makes protection against exactly that germ<sup>3</sup>. Many mothers will tell you that your child will bring them home too!

**Case study 1:** Aisha, a sales representative, returned when her son was 10 months old. Her son attended the onsite nursery at Aisha's workplace. She would express once a day and give the expressed milk straight to the nursery. This was more to maintain her milk supply as her son never drink the expressed milk. She would directly feed her son at the nursery at lunch time and stopped expressing when her son was 13 months old.

### Adjusting the timing/frequency of breastfeeds

You may be able to adjust the timing/frequency of breastfeeds so they take place outside of your work hours which may be facilitated by a flexible working arrangement. This may be possible with an older child and as your child gets older. Note it is recommended that breastmilk or infant formula milk is the main drink until 12 months<sup>2</sup>. If you are separated for

only a few days a week or for short/half days, and your child is happy to eat 3 meals a day, you might find your child doesn't need your expressed or infant formula milk while separated. Many children manage the day on solid food and water; they will probably make up for it by feeding a bit extra when you are together. *Is your child managing without expressed milk when away from you?* Then you might not need to express at work for your child.

**A note on engorgement and mastitis:** Breastmilk supply is based on a supply and demand system. The more milk you or your child removes from your breasts the more your body will produce. If your feeding patterns change your body may still produce milk whilst you are , separated for you child (anticipating a feed) until it adjusts to new feeding patterns. And, therefore, you may become engorged (breasts become full) whilst away from your child. Becoming engorged can increase the risk of mastitis - the inflammation of breast tissue which can be serious. Advice on mastitis changes and La Leche League<sup>4</sup> provide useful advice and signs to look out for in relation to mastitis, and when you may need to seek medical help. You may find you need to express for comfort whilst your body adjusts (as discussed in the next section). Many mothers in our study were surprised at how well and quickly (often within a few weeks) their bodies adjusted.

**Case study 2:** Maria, a family support worker, returned when her daughter was 12 months but did not want to express due to difficulties expressing. She fed her daughter in the morning, when she came home, a few feeds before bed and then bedtime, and then through the night (which was common prior to Mira returning to work). Her daughter adapted well to not having any milk whilst they were separated.

**Case study 3:** Kate, a scientist, returned at 6 months with both of her children. This coincided with her children moving onto solids so they did not have any milk whilst separated. She fed them on demand when they were together and her children continued to feed until 3-4 years

## Providing expressed breastmilk /expressing at work

Some mothers express breastmilk for the child to have later; with the child given expressed milk by a caregiver when separated. If you wish to do so, and your child is under 12 months old and doesn't yet accept a range of solid foods in enough volume, you probably need to express your milk at work. Others may need to express during work hours for comfort:

*Are you able to complete your shift at work without your breasts feeling uncomfortably full?* Then you might not need to express at work. *Are you becoming uncomfortably full when your child is away from you?* You may need to express breastmilk during work hours for comfort purposes i.e. to stop you becoming full (engorged). Then you might need to gently hand express or use an electric pump just for a few minutes to reduce pressure. Some mothers do this and some don't even keep the milk.

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**Case study 4:** Debra, a project manager, returned when her first child was 7 months and expressed once a day for six months to provide expressed milk for her daughter. With her second child she returned when he was 12 months. With her son she found she needed to express a few times in the first week for comfort but then her body adjusted and she did not need to do so anymore.

## Combination Feeding

If providing expressed breastmilk for your child when separated is becoming challenging (or impossible) some families opt for breastfeeding when together and giving their child infant formula milk while separated. *Maybe your child has already been having both breastmilk and formula?* As stated by the NHS<sup>5</sup>, from 12 months a child can have cow's milk (or an alternative to cow's milk) as a drink, and some families opt to give their children cow's milk (or alternative) while separated.

**Case study 5:** Mira, a lecturer, returned when her son was 11.5 months old. She could not express enough for him to drink at nursery so opted to give him formula at nursery for 2-3 weeks and breastfeed him when they were together. He then had cow's milk at nursery from 12 months. Maria felt it worked out okay because he was having more solids and did not seem to mind the formula.

**Case study 6:** Carly, an engineer, returned when her daughter was 4 months old and being looked after by her husband who was taking shared parental leave. Carly spent the first 2 months working from home to exclusively breastfeed her daughter. When her daughter was 6 months she returned to the office and they switched to combination feeding. Her husband gave their daughter expressed milk and topped up with formula milk. Carly would express once during the day in the office until 8 months. Gradually they moved to more formula and until her daughter was just having one breastfeed in the evening before sleep.

## References

1. <https://www.nhs.uk/baby/breastfeeding-and-bottle-feeding/breastfeeding-and-lifestyle/back-to-work/>
2. <https://www.nhs.uk/baby/weaning-and-feeding/babys-first-solid-foods/>
3. Brandtzaeg, P. (2003). Mucosal immunity: integration between mother and the breast-fed infant. *Vaccine*, 21(24), 3382-3388.
4. <https://laleche.org.uk/mastitis/>
5. <https://www.nhs.uk/baby/weaning-and-feeding/what-to-feed-young-children/>