



12214 HOUSE



Daily News - Miner

State now overseeing garbage collection

By Eric Lidji

Published February 18, 2007

Garbage pickup service for commercial customers in Fairbanks will now be regulated by the state.

The Regulatory Commission of Alaska decided on Thursday that University Refuse, LLC, which provides trash pickup around Fairbanks, has "insufficient competition" in the commercial pickup market around Fairbanks.

"We're not a monopoly. We're just the most active," University Refuse Manager Larry Kelly said.

The commercial monopoly dates to last December, when Alaska Waste, a garbage company based in Anchorage, decided to acquire the assets of University Refuse, rather than enter the local market as a competitor.

The RCA also decided to continue regulating University Refuse's residential service.

University Refuse began offering service in 2003.

The company bought out the local customer base of Waste Management, a national company doing business as Star Sanitation, last September, making it by far the largest provider of residential garbage pickup in the Fairbanks North Star Borough.

Although three companies hold a certificate to offer residential garbage pickup in the borough, one of those companies, Interior Services, does not do enough business to be considered competitive in the market, and another, Trash Talk, stopped providing service in 2005, leaving University Refuse with a "practical" monopoly in Fairbanks, according to the RCA ruling.

Kelly said the regulation will not lower rates.

Contact staff writer Eric Lidji at 459-7504 or elidji@newsminer.com.

This article may be accessed online at <http://newsminer.com/2007/02/18/5319/>.

This article is copyrighted property of the Fairbanks Daily News-Miner. Unauthorized reproduction of this article other than for personal use is strictly prohibited. To obtain permission for republication in any form, please contact the News-Miner. Visit <http://newsminer.com/contact/> for more information.

Commercial Refuse Deregulation Bullet Points:

- No benefit to regulation; industry operates effectively without regulation; history has demonstrated this
- Deregulation allows for more competitors to operate on an even playing field
- Competitive bid process is not slowed waiting for commission approval for special contracts
- Customers have many options and are happy to and capable of making the right decisions for their business needs
- Market entry in unregulated environment is less cumbersome
- Customers have the ability to respond to the immediate needs of their business without being subject to regulatory approval
- No large upfront capital investment like typical utilities for infrastructure
- Would allow RCA to focus on higher priority items

Recycling Benefits of Deregulation:

- Provides for rapid adjustment to market conditions (recyclable commodities markets) to allow for maximum utilization of equipment as market changes occur
- Allows providers to create differential pricing on disposal to encourage and promote recycling by commodity or industry segment (pay as you throw and incentivizing disposal options)
- Creates economic incentives for businesses to participate
- Allows for more efficient routing and administrative handling as refuse and recycling are no longer regulated vs. non-regulated activities which have to be accounted for and costs allocated separately, which provides for better customer experience (one-stop shopping) and more concentrated focus

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26

STATE OF ALASKA

THE REGULATORY COMMISSION OF ALASKA

Before Commissioners:

Kate Giard, Chairman
Dave Harbour
Mark K. Johnson
Anthony A. Price
Janis W. Wilson

In the Matter of the Joint Application by)
UNIVERSITY REDI-MIX, INC. d/b/a UNIVERSITY)
REFUSE to Transfer Certificate of Public)
Convenience and Necessity No. 667 from)
UNIVERSITY REDI-MIX, INC. d/b/a UNIVERSITY)
REFUSE to UNIVERSITY REFUSE, LLC)

U-06-21

ORDER NO. 3

In the Matter of the Joint Application by WASTE)
MANAGEMENT OF ALASKA, INC. and)
UNIVERSITY REFUSE, LLC to Transfer)
Certificate of Public Convenience and Necessity)
No. 628 and for Sale of Services and Equipment)
from WASTE MANAGEMENT OF ALASKA, INC.)
to UNIVERSITY REFUSE, LLC.)

U-06-22

ORDER NO. 3

ORDER ADDRESSING ECONOMIC REGULATION, APPROVING TARIFF SHEETS AND MAP, REQUIRING FILINGS, AND CLOSING DOCKETS

BY THE COMMISSION:

Summary

We continue economic regulation of residential refuse service provided by University Refuse, LLC (URLLC) and subject its commercial refuse service to economic regulation. We approve tariff Sheet Nos. 1 through 15, 17 through 26, 28, 32 through 52, and 54 through 65, filed March 7, 2006. We also approve tariff Sheet Nos. 16 and 53, filed October 5, 2006. We approve tariff Sheet Nos. 27, 29, 30, and 31 filed

Regulatory Commission of Alaska
701 West Eighth Avenue, Suite 300
Anchorage, Alaska 99501
(907) 276-6222; TTY (907) 276-4533

1 October 5, 2006, on a temporary basis for ninety days¹ and require URLLC to file
2 revisions to those tariff sheets. We approve the U.S. Geological Survey (USGS) map
3 filed by URLLC as corrected by Commission Staff (Staff). We close these dockets.

4 Background

5 We approved transfer of Certificate of Public Convenience and Necessity
6 (Certificate) No. 667 from JJAL, Inc., formerly University Redi-Mix, Inc. d/b/a University
7 Refuse (University Refuse) to URLLC.² We also approved transfer of portions of
8 Certificate No. 628 from Waste Management of Alaska, Inc. to Certificate No. 667 held
9 by URLLC. We required compliance filings and held in abeyance our decision on the
10 level of economic regulation for commercial refuse service requested by URLLC.
11 URLLC filed a USGS map and revised tariff sheets on October 5, 2006.

12 Discussion

13 Economic Regulation

14 Commercial Refuse Service

15 When we declined to address whether to impose full economic regulation
16 upon URLLC, we were aware of an application before us that could introduce a potential
17 viable competitor into the Fairbanks commercial refuse market. However, the applicant

18
19
20
21
22
23 ¹Commission Staff revised the approved tariff sheets to remove the
"informational" reference.

24 ²Order U-06-21(2)/U-06-22(2), *Order Approving Transfer of Certificates; Granting*
25 *Waiver; Revoking Certificate; Granting Withdrawal of Request for Confidential*
26 *Treatment, and Requiring Filings*, dated September 7, 2006 (Order U-06-21(2)).

1 withdrew that application,³ leaving insufficient competition in the Fairbanks commercial
2 refuse market to justify limited economic regulation. We will therefore economically
3 regulate URLLC's commercial operations.

4 Residential Refuse Service

5 Three refuse utilities are now certificated to provide residential refuse
6 service in the Fairbanks area: URLLC, Bartlett,⁴ and Trash Talk.⁵ Bartlett did not
7 dispose of enough refuse at the landfill to be independently tracked as a significant
8 customer during 2005. The owner of Trash Talk notified us on January 26, 2007, that
9 Trash Talk had discontinued service in 2005.⁶ For all practical purposes, URLLC has a
10 monopoly on residential service in and around Fairbanks. Accordingly, we continue
11 economic regulation of URLLC's residential service.

12 Given that URLLC commercial and residential service is economically
13 regulated, all future tariff filings should be filed in accordance with 3 AAC 48.220
14 through 3 AAC 48.390.

15 Tariff

16 We reviewed URLLC's tariff filed March 7, 2006, and required URLLC to
17 file revised tariff sheets to include minimum monthly service levels and a deposit policy
18 in compliance with our regulations. On October 5, 2006, URLLC filed the required tariff

19
20 ³*Joint Notice of Withdrawal of Application for Certificate of Public Convenience*
21 *and Necessity Pursuant to 3 AAC 48.090(d)(1), filed January 3, 2007, in*
22 *Docket U-06-24. Docket U-06-24 is titled *In the Matter of the Application Filed by**
23 *Alaska Waste - Interior, LLC d/b/a Alaska Waste for Issuance of a Certificate of Public*
Convenience and Necessity to Provide Refuse Hauling Service Within the Fairbanks
North Star Borough.

24 ⁴Ralph E. Bartlett d/b/a Interior Services holds Certificate No. 216.

25 ⁵Robert T. Richards d/b/a Trash Talk holds Certificate No. 631.

26 ⁶Letter from Robert T. Richards filed January 26, 2007.

1 sheets in Docket U-06-21.⁷ The revised sheets appropriately set minimum monthly
2 service levels and complied with our deposit regulations and practices, which allow
3 utilities to collect two months worth of service charges as a deposit. The revised sheets
4 also provide timelines for deposit refunds. Revised tariff Sheet Nos. 27, 29, 30, and 31
5 include provisions stating that customers who have previously had service cancelled
6 due to nonpayment will be required to pay, before service is resumed, a reinstatement
7 fee of \$25 to \$100 depending on their class of service, all past due billings, collection
8 costs if applicable, and the cost to reestablish a new two-month service deposit.

9 Before taking over an economically-regulated service, UJLLC was subject
10 only to informational tariff requirements. Now that UJLLC's billing policies apply to
11 economically-regulated services, we intend to review provisions related to
12 discontinuance and reestablishment of service after non-payment. We approve the
13 provisions on a temporary basis for ninety days and require UJLLC to make a tariff
14 advice filing. In the tariff filing, UJLLC must explain why different reinstatement fees
15 are appropriate for different customer classes. UJLLC must also provide cost
16 justification for the reinstatement fees and explain why it is reasonable to assess both a
17 reinstatement fee and collection costs. UJLLC must explain how collection costs are
18 determined and whether collection costs are based on actual internal UJLLC costs or
19 contracted collection agency costs.

20 Based on the above, we approve tariff Sheet Nos. 1 through 15, 17
21 through 26, 28, 32 through 52, and 54 through 65, filed March 7, 2006, effective the
22
23

24 ⁷UJLLC filed the tariff sheets in Docket U-06-21. In light of Order
25 U-06-21(1)/U-06-22(1) consolidating proceedings in these dockets, we note that the
26 filing applies to both dockets.

1 date of this order. We also approve tariff Sheet Nos. 16 and 53, effective the date of
2 this order. We approve tariff Sheet Nos. 27, 29, 30, and 31 filed October 5, 2006, on a
3 temporary basis for ninety days, effective the date of this order. Commission Staff
4 revised the approved tariff sheets to remove the "informational" reference. We also
5 require URLLC to file revisions to tariff Sheet Nos. 27, 29, 30 and 31 as a separate tariff
6 advice filing, addressing the issues discussed above. We invite URLLC to contact Staff
7 for assistance in developing the tariff filing.

8 USGS Map

9 We reviewed the USGS map filed October 5, 2006, by URLLC and found
10 an error in the delineation of the service area. Otherwise, the USGS map accurately
11 reflects the service area description approved by Order U-06-21(2). Staff corrected the
12 error, and we accept the USGS map as corrected.

13 Final Determination

14 This order constitutes the final decision in these proceedings. This
15 decision may be appealed within thirty days of the date of this order in accordance with
16 AS 22.10.020(d) and the Alaska Rules of Court, Rule of Appellate Procedure
17 (Ak. R. App. P.) 602(a)(2). In addition to the appellate rights afforded by
18 AS 22.10.020(d), a party may file a petition for reconsideration as permitted by
19 3 AAC 48.105.. If such a petition is filed, the time period for filing an appeal is then
20 calculated under Ak. R. App. P. 602(a)(2).

21 With these determinations, no substantive or procedural matters remain in
22 these proceedings, and there are no allocable costs under AS 42.05.651 and
23 3 AAC 48.157. Therefore, we close these dockets.

24
25
26

1 **ORDER**

2 THE COMMISSION FURTHER ORDERS:

3 1. The commercial refuse service to be provided by University Refuse,
4 LLC in and around Fairbanks, Alaska, is subject to economic regulation.

5 2. Tariff Sheet Nos. 1 through 15, 17 through 26, 28, 32 through 52, and
6 54 through 65, filed by University Refuse, LLC on March 7, 2006, are approved effective
7 the date of this order.

8 3. Tariff Sheet Nos. 16 and 53, filed October 5, 2006, by University
9 Refuse, LLC, are approved effective the date of this order.

10 4. Tariff Sheet Nos. 27, 29, 30, and 31 filed October 5, 2006, by
11 University Refuse, LLC, are approved on a temporary basis for ninety days, effective
12 the date of this order.

13 5. By 4 p.m., March 19, 2007, University Refuse, LLC shall file revisions
14 to tariff Sheet Nos. 27, 29, 30, and 31 as a tariff advice filing, as discussed in the body
15 of this order.

16 6. The U.S. Geological Survey map filed October 5, 2006, by University
17 Refuse, LLC, is accepted as corrected by Commission Staff.

18 7. Docket U-06-21 is closed.

19 8. Docket U-06-22 is closed.

20 DATED AND EFFECTIVE at Anchorage, Alaska, this 15th day of February, 2007.

21 BY DIRECTION OF THE COMMISSION
22 (Commissioners Kate Giard and Janis W. Wilson,
23 not participating.)
24

25 (SEAL)
26

Regulatory Commission of Alaska
701 West Eighth Avenue, Suite 300
Anchorage, Alaska 99501
(907) 276-6222; TTY (907) 276-4533



**Reasons for Commercial Refuse Deregulation by the RCA
April 12, 2007**

- (1) Alaska is one of only three states in the nation with commercial refuse regulation.
- (2) Because there is no significant infrastructure involved, the business provides an opportunity for competition without investing in a lot of capital.
- (3) Commercial consumers have options, including the ability to haul their own refuse. Most commercial customers are successful operators and are very capable of managing this type of service.
- (4) Continued regulation of residential refuse service is in the public interest, but the Commission does not need to spend its resources to protect commercial consumers like Fred Meyer, Walmart, and Burger King.
- (5) Over the last 10 years there have been periods of regulation and deregulation. During the period of deregulation the industry has proven its ability to provide a fair price and competitive opportunities for small businesses without any abuses.
- (6) Deregulation provides for an even playing field for competitors and creates alternatives for commercial customers.
- (7) Deregulation enhances the potential for recycling and reuse alternatives because it allows competitors to offer differential services and rates based on diversion and reduction goals.
- (8) The current regulations are actually a barrier to small companies and become an impediment to growth beyond a certain level. If they are able to get through the regulatory approval process, then the reporting requirements are burdensome and they are forced into a cost model which encourages inefficiency.
- (9) Monitoring and enforcing the rate requirements becomes extremely difficult especially when other more pressing issues need the RCA's attention and limited resources. This commercial deregulation would free up staff time and ultimately the Commission's time to devote to higher priorities.
- (10) The RCA retains the authority to impose regulation should the outcome of deregulation prove unfavorable. In addition, the existing statute retains the right for re-regulation of the industry through the customer petition.

Alaska Pacific Environmental Services Anchorage, LLC dba Alaska Waste
6301 Rosewood St. Anchorage, AK 99518
907-563-3717 Fax 907-273-2797

HB

182



March 16, 2007

The Honorable Kurt Olson, Chair
House Labor and Commerce Committee
Alaska State Capitol, Room 408
Juneau, Alaska 99801-1182

HB 182 (Lynn)—Support

Dear Chair Olson:

On behalf of the AARP members in Alaska, we encourage you and your colleagues on the House Labor and Commerce Committee to support HB 182, authored by Representative Bob Lynn and co-sponsored by your Committee colleague Representative Carl Gatto.

HB 182 would create a new category under the Consumer Act's deceptive practices to prohibit the use of "promotional checks." All of us receive these checks in our mailboxes and often they are designed to look like a refund for an overpayment or a rebate.

We would like to think that, as we grow older, we also become more savvy consumers. Unfortunately, the evidence does not support that premise.

Older people are often the targets of fraud and deceptive marketing tactics. Half of all telemarketing fraud complaints are made by victims over age 50. If you ask any of your older constituents, you will find they are bombarded regularly with deceptive mailings, come-ons, and telephone pitches. Unfortunately, the oldest of the old are generally the ones most likely to be victimized. They have a tendency to open and read all their mail and to be polite to telephone solicitors.

HB 182 will not protect all consumers of every age from becoming victims. What it will do is end one form of deceptive marketing, the use of promotional checks. This will help

our citizens as well as our businesses who often have checks processed without carefully looking at the source.

Battling scams and deceptive marketing schemes is a never-ending effort. HB 182 is one more tool that the Attorney General can use in this effort.

AARP recommends an "AYE" vote on HB 182.

Should you have any questions about our position, please feel free to contact me (586-3637) or Patrick Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator
AARP Capital City Task Force
415 Willoughby Avenue, Apt. 506
Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)

CC: Vice-Chair Mark Neuman
Representative Carl Gatto
Representative Gabrielle LeDoux
Representative Jay Ramras
Representative Bob Buch
Representative Berta Gardner
Representative Bob Lynn

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: HB182-LAW-CFB-3-19-07
 Bill Version: HB 182
 () Publish Date: _____

Revision Date/Time (Note if correction): _____
 Title An Act relating to the offering of promotional checks
 Sponsor Lynn
 Requester House Labor & Commerce

Dept. Affected: Law
 RDU Civil Division
 Component Commercial & Fair Business
 Component No. _____

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES						
-----------------------------	--	--	--	--	--	--

CHANGE IN REVENUES ()						
-------------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

The bill would amend a current statute by making the offering of certain promotional checks an unfair or deceptive act or practice.

The Department of Law does not anticipate a fiscal impact from passage of this legislation.

Prepared by: Robert Meiners, Acting Director
 Division: Administrative Services Division
 Approved by: Robert Meiners for Talis Colberg, Attorney General
 Agency: Department of Law

Phone 465-5427
 Date/Time 3/19/07 8:00 AM
 Date 3/19/2007



March 16, 2007

The Honorable Kurt Olson, Chair
House Labor and Commerce Committee
Alaska State Capitol, Room 408
Juneau, Alaska 99801-1132

HB 182 (Lynn)—Support

Dear Chair Olson:

On behalf of the AARP members in Alaska, we encourage you and your colleagues on the House Labor and Commerce Committee to support HB 182, authored by Representative Bob Lynn and co-sponsored by your Committee colleague Representative Carl Gatto.

HB 182 would create a new category under the Consumer Act's deceptive practices to prohibit the use of "promotional checks." All of us receive these checks in our mailboxes and often they are designed to look like a refund for an overpayment or a rebate.

We would like to think that, as we grow older, we also become more savvy consumers. Unfortunately, the evidence does not support that premise.

Older people are often the targets of fraud and deceptive marketing tactics. Half of all telemarketing fraud complaints are made by victims over age 50. If you ask any of your older constituents, you will find they are bombarded regularly with deceptive mailings, come-ons, and telephone pitches. Unfortunately, the oldest of the old are generally the ones most likely to be victimized. They have a tendency to open and read all their mail and to be polite to telephone solicitors.

HB 182 will not protect all consumers of every age from becoming victims. What it will do is end one form of deceptive marketing, the use of promotional checks. This will help

our citizens as well as our businesses who often have checks processed without carefully looking at the source.

Battling scams and deceptive marketing schemes is a never-ending effort. HB 182 is one more tool that the Attorney General can use in this effort.

AARP recommends an "AYE" vote on HB 182.

Should you have any questions about our position, please feel free to contact me (586-3637) or Patrick Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator
AARP Capital City Task Force
415 Willoughby Avenue, Apt. 506
Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)

CC: Vice-Chair Mark Neuman
Representative Carl Gatto
Representative Gabrielle LeDoux
Representative Jay Ramras
Representative Bob Buch
Representative Berta Gardner
Representative Bob Lynn

MAR - 8 2007

STATE OF ALASKA

DEPARTMENT OF LAW

OFFICE OF THE ATTORNEY GENERAL

SARAH PALIN, GOVERNOR

LEGISLATION & REGULATIONS SECTION
P.O. BOX 110300
DIMOND COURT HOUSE, 6TH FLOOR
JUNEAU, ALASKA 99811-0300
PHONE: (907) 465-3600
FAX: (907) 465-2520

March 7, 2007

The Honorable Kurt Olson, Chair
House Labor & Commerce Committee
Alaska State Legislature
State Capitol, Room 408
Juneau, Alaska 99801-1182

Re: House Bill 182 -- An Act making the
offering of certain promotional checks an
unfair or deceptive act or practice

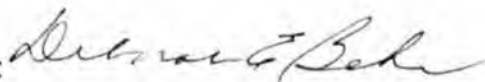
Dear Representative Olson:

The Department of Law would appreciate scheduling of the above bill for a hearing in your committee, at your earliest convenience. The bill is a high priority of the Department of Law.

If you have any questions, please feel free to contact me.

Sincerely,

TALIS J. COLBERG
ATTORNEY GENERAL

By: 

Deborah E. Behr
Chief Assistant Attorney General

DEB:pvp

cc: Hon. Bob Lynn, Representative, Alaska State Legislature
John Bitney, Legislative Director, Office of the Governor

Alaska State Legislature

Chairman
State Affairs Committee

Vice-Chairman
Economic Development, Trade & Tourism
Committee

Member
Judiciary Committee
Joint Armed Services Committee

Finance Subcommittees
Corrections
Labor and Workforce Development
Military and Veterans' Affairs
Public Safety



A Communication From
REPRESENTATIVE BOB LYNN
District 31 Anchorage

E-Mail: Representative_Bob_Lynn@legis.state.ak.us
"Bob Lynn's Alaska Blog" RepBobLynnBlog.com

Session:
Alaska State Capitol
Juneau, AK 99801-1182

Phone: (907) 465-4931
Fax: (907) 465-4316
Toll Free: (800) 870-4391

Interim:
716 W. 4th Ave., #650
Anchorage, AK 99501-2133

Phone: (907) 269-0205
Fax: (907) 269-0207

March 14, 2007

To: Representative Kurt Olson, Chairman
House Labor and Commerce Committee

Fr: Representative Bob Lynn

Re: HB 182

"An Act making the offering of certain promotional checks an unfair or deceptive act or practice."

Thank you for scheduling HB 182 for a hearing in the House Labor and Commerce Committee for Monday, March 19 at 3 p.m. Attached is a copy of the most current version of the Bill, the Sponsor Statement, relevant new stories, research, statutes and other background material.

Thank you for considering my request for a hearing on a bill designed to protect Alaska consumers. HB 182 is considered a high priority of the state Department of Law.

Alaska State Legislature

Chairman
State Affairs Committee

Vice-Chairman
Economic Development, Trade & Tourism
Committee

Member
Judiciary Committee
Joint Armed Services Committee

Finance Subcommittees
Corrections
Labor and Workforce Development
Military and Veterans' Affairs
Public Safety



A Communication From
REPRESENTATIVE BOB LYNN
District 31 Anchorage

E-Mail: Representative_Bob_Lynn@legis.state.ak.us
"Bob Lynn's Alaska Blog" RepBobLynnBlog.com

Session:
Alaska State Capitol
Juneau, AK 99801-1182

Phone: (907) 465-4931
Fax: (907) 465-4316
Toll Free: (800) 870-4391

Interim:
716 W. 4th Ave., #650
Anchorage, AK 99501-2133

Phone: (907) 269-0205
Fax: (907) 269-0207

HB 182 Sponsor Statement

"An Act making the offering of certain promotional checks an unfair or deceptive act or practice."

There is no such thing as free money!

Just ask the many Alaskans who have received checks in the mail with seemingly no strings attached. Many of these consumers cash these checks, usually for small amounts, only to find themselves obligated for products and services they never intended to buy.

HB 182 amends the Unfair Trade Practices and Consumer Protection Act (Consumer Protection Act), AS 45.50.471, by making the offering of a promotional check, through the mail or by other means, an unfair or deceptive act or practice in violation of the Consumer Protection Act. Promotional checks subject to the legislation are live checks offered to consumers to promote goods or services which, when cashed or deposited, obligate the endorser or payee on the check to pay for goods or services.

Thousands of these promotional checks are sent unsolicited to Alaskan individuals, businesses, churches and schools (hereafter "consumers"). Consumers receiving them often believe them to be refund or rebate checks or ordinary business receivables. They unwittingly cash the checks without realizing that they have entered into a contract, usually for goods or services they do not want, do not use, and often do not even realize they have. By cashing the checks consumers also have often unknowingly agreed to have monthly payments automatically taken from their bank accounts, or added to credit card or utility bills. Consumers usually do not realize the debits or charges have occurred and accept or pay for them believing them to be legitimate charges. Prohibiting the use of these checks is the only effective method of preventing these accidental agreements, and subsequent charges, from occurring.

By making the offering of these promotional checks an enumerated unfair or deceptive act or practice, use of the promotional checks will be prohibited as an automatic violation of the Consumer Protection Act. The Attorney General will then be able to take enforcement action under the Act to stop the use of such checks using the remedies afforded under the Act.

Thursday, March 15, 2007

HB 182 Offering Promotional Checks Q&A with Alaska Department of Law

*Below is a transcript of an interview with the Consumer
Protection Unit of the Alaska Department of Law*

QUESTION: Can you explain how Alaska businesses and individuals are being taken advantage of through promotional checks?

DEPARTMENT OF LAW: The promotional check is often packaged and sent in a manner that causes the individual or organization receiving and cashing the check to believe that the check is a refund, rebate, or payment of some nature, and does not understand that by cashing the check they are accepting an offer to pay for goods or services.

After cashing the check, the recipient may be sent a bill for collection of the amount "due", and if the bill isn't paid, a collection agency will start hounding the consumer for payment. Another method of collection is to use the consumer's account information involved in cashing the check to debit the consumer's account on a monthly basis without the consumer's knowledge. Or, alternatively, similar monthly billings may occur through the consumer's telephone carrier, credit card, etc. Therefore, the individual or entity cashing the check may be out significant amounts of money prior to discovering and canceling whatever was purportedly authorized by merely cashing the check.

QUESTION: How big of a problem is this for consumers in Alaska?

DEPARTMENT OF LAW: Thousands of promotional checks have been sent to Alaskan individuals, businesses, schools, churches and other organizations over the years. Many hundreds of these checks are cashed by individuals and organizations who receive subsequent billings or automatic debits for goods or services they do not want and often are not aware that they have.

QUESTION: Why should it be considered an unfair or deceptive practice or act to offer these "small" promotional checks?

DEPARTMENT OF LAW: Receipt of these promotional checks by individuals and organizations causes a likelihood of misunderstanding or confusion so that the recipient believes the check is one thing (a refund, rebate or payment of some nature) when it is really another (a contract for the payment of goods or services), the recipient acts on this misunderstanding and cashes the check and incurs an obligation to pay for something they did not want, need, or even know about. That is a classic example of one of the definitions of an unfair or deceptive act or practice under the Unfair Trade Practice and Consumer Protection Act, AS 45.50.471 et seq.

QUESTION: Don't these checks have information explaining that cashing them obligates the consumer to "larger" payments for products and services?

DEPARTMENT OF LAW: Yes, but the information is usually on the back of the check, in very small print, or is crowded on "stuffer" included with the check, and the recipient of the check does not see, read or understand the information. This is particularly true for businesses which often believe the check to be an ordinary receivable or refund check and automatically stamp the check for deposit without ever seeing or noticing any small print disclosures.

QUESTION: How are you currently dealing with these promotional checks?

DEPARTMENT OF LAW: The Attorney General's Office has initiated a number of investigations relating to the use of promotional checks in Alaska. Several of the investigations have resulted in prosecutions and settlements under the Unfair Trade Practices and Consumer Protection Act. One of the most recent was a coordinated multi-state investigation involving 34 states' Attorney Generals, and resulted in a settlement agreement that prohibited the use of promotional checks by the business in all 34 states.

QUESTION: Why is a law needed? How will it help Alaska consumers?

DEPARTMENT OF LAW: By amending the Unfair Trade Practices and Consumer Protection Act to make it clear that the use of promotional checks in Alaska is an unfair or deceptive act or practice businesses will be put on notice that the use of these checks in Alaska is prohibited. This should stop most businesses from sending the checks. For those that persist, the Attorney General's Office has clear enforcement authority to petition the court to stop the practice.

QUESTION: What would be the penalty for violating this proposed law?

DEPARTMENT OF LAW: Violations of the Consumer Protection Act are subject to a civil penalty of a minimum of \$1,000 per violation and a maximum of \$25,000 per violation.

QUESTION: Does the penalty vary depending on the number of Alaskan consumers involved?

DEPARTMENT OF LAW: The court looks at a number of factors when deciding the amount of civil penalty to impose. The amount of consumer harm, including the number of consumers harmed by the conduct, is one of the factors.

QUESTION: How are other states dealing with these promotional checks?

DEPARTMENT OF LAW: Many states have brought enforcement actions under their state consumer protection statutes, and a couple states have introduced legislation similar to HB 182 banning the use of the checks.

QUESTION: Why does the Department of Law consider this bill a high priority?

DEPARTMENT OF LAW: Many hundreds of Alaskan consumers have been harmed by the use of promotional checks. The Attorney General's Office has spent considerable time and resources investigating and pursuing law enforcement actions against businesses that use these inherently deceptive checks, and it has been able to obtain restitution for consumers in many instances. The best way to deal with the problem, however, is to stop the practice from occurring at all, so that consumers do not have to suffer the monetary loss, time and frustration which results from cashing the checks. HB 182 would do this, by prohibiting the use of these checks in Alaska.

House Bill 182

Background Information

Offering Promotional Checks

Alaska Department of Law April 2006 Report on
Multi-State Settlement with Yellow Pages, Inc.

Example of a "YPI" promotional check sent to Alaska



See page 2

Generally Speaking

Comings and Goings

AAG **Laura Bowen** transferred from the Anchorage Child Protection section to the Collections & Support section.

Shella Bugbee has resigned from the Administrative Services Division. She transferred to the Department of Administration, Division of Personnel.

AAG **Alicia Porter** in the Fairbanks AGO resigned. She joined the Anchorage law firm of Landye Bennett Blumstein.

Lynn Concepcion joined the Anchorage AGO. Lynn will be splitting her time as a litigation assistant between the Labor and State Affairs and the Opinions, Appeals, and Ethics sections.

IN THIS ISSUE

Comings and Goings.....	1
Civil Division.....	1
Child Protection	1
Commercial and Fair Business.....	2
Environmental	3
Human Services.....	4
Labor and State Affairs	5
Legislation & Regulations.....	7
Natural Resources	8
Opinions, Appeals and Ethics	11
RAPA	12
Torts and Workers' Compensation.....	12
Transportation	14
Criminal Division.....	15
Anchorage DAO.....	15
Fairbanks DAO.....	17
Kenai DAO.....	18
Kodiak DAO.....	19
Nome DAO.....	19
Palmer DAO	19
Administrative Services Division	20

CIVIL DIVISION

Child Protection

CINA Cases

The section received a number of new CINA cases. Based on the allegations in the OCS petitions, substance abuse was the most common concern.

Several newborns and a toddler tested positive for drugs. Subsequently OCS took the children into custody.

In one such case, a newborn tested positive for amphetamines. The mother refused to allow the child to room with her and did not appear to be trying to bond with the child. OCS has a history with both parents involving methamphetamine abuse. The child's father is in jail on drug and weapons violations after a California narcotics conviction.

OCS took custody of another newborn that tested positive for cocaine and had numerous medical complications. The mother acknowledged using cocaine every day and also admitted the use of methamphetamine during her pregnancy. Three of her older children had also been removed by the state.

After having removed a two-year-old child from the mother due to drug use when the mother was seven months pregnant, OCS next assumed custody of her newborn. OCS has concerns about both parents' drug use.

In another case, a mother brought her three-year-old child to the emergency room because he was vomiting and having seizures. The child tested positive for cocaine. The mother admitted she had recently relapsed on cocaine and alcohol.

The mother was arrested for child neglect. OCS has a significant prior history with this family.

Three young children were taken into custody after a newborn and the mother tested positive for cocaine. The mother acknowledged repeated cocaine use just prior to the birth. The mother's last child had been born under similar circumstances. According to an anonymous caller, the mother had claimed that her boyfriend had sexually abused the younger siblings, but she continued to live with that man along with her young children.

In another case, OCS and APD investigated a couple who were allegedly using drugs in the home around their one-year-old child. They found crack cocaine paraphernalia, empty beer containers, smoking pipes, and other items dangerous to a young child. Both parents admitted to using crack cocaine. While OCS was in the process of attempting to take custody of the child, the mother absconded with the child. Her whereabouts and those of the child were unknown when OCS filed its petition.

In other cases, OCS was forced to remove children from their homes after social workers' attempts to assist parents to care properly for the children failed. In one instance, OCS was concerned about a family because they were being evicted, and the parents had a history of DV and drug use. When the social worker arrived at the home to investigate, he found the mother was not sober enough to care for her children. The social worker convened a Team Decision Making meeting in order to determine if there was a way to make the children safe other than by removing them from the home, but the mother did not appear for the meeting.

OCS provided extensive services to a family where the concern was unsanitary conditions in the home that affected the safety of the children. Despite active efforts to keep the children in the home and help remedy the conduct of the parents, OCS decided the children needed to be removed.

OCS social workers also attempted to work with a mother with a significant substance abuse problem. However, after repeatedly testing positive for illegal substances, the mother agreed to voluntarily place her child with a relative. The mother also has significant mental health issues.

In another case, substance abuse caused OCS to take two children ages 13 and 17 into custody after their mother and the fathers of both of the children died within three years of each other, all from drug or alcohol overdoses.

Commercial and Fair Business

Consumer Protection/Anti-Trust

Yellow Pages, Inc. Multi-State Settlement.

Alaska, along with 27 other states, entered into a settlement agreement with Yellow Pages, Inc. ("YPI") resolving allegations that YPI engaged in unfair or deceptive acts or practices in violation of each state's respective consumer protection acts relating to the solicitation checks and renewal notices sent to business consumers.

Alaska's complaint, filed in superior court, alleges that YPI engaged in misleading or deceptive conduct by sending out "live" checks to small businesses and other organizations which looked like rebate checks from local yellow pages companies, but which, when deposited by the consumer, purported to create a contract for advertising services for which the consumer owed YPI \$179.00.

Under the settlement, injunctive relief was entered against YPI prohibiting YPI from sending live check solicitations into the state or attempting to collect on checks which were cashed by consumers. YPI is also required to pay refunds to consumers harmed by the conduct and pay the states \$535,000 for costs, attorney fees, and consumer protection enforcement.

Yellow Pages, Inc.
Independent Yellow Pages Publishers
P.O. Box 60005, Anaheim, CA 92612-6006

BANK OF WEST
SANTA ANA OFFICE
SANTA ANA, CA 92701
90-4284 889
1222

871626242


Date: 2/20/2004

Pay To The
Bearer Or

\$ **3.49****

Three and 49/100

Dollars

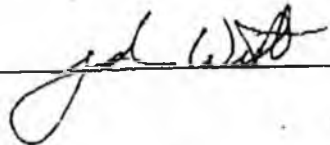
 Security features included. Details on back.

VOID AFTER
May 20, 2004

PO BOX 100279
ANCHORAGE, AK 99510-0279



Memo 907-272-6... ATTORNEYS



⑈B??626242⑈ ⑆122242843⑆ 658025390⑈

Please let my company's information as shown on this check on the Yellow Pages, Inc. Internet website: www.YellowPagesInc.com. I am over 18, and authorized to place this advertisement by depositing this check, and by doing so I also agree to pay the fee for this advertisement, which is \$179 per year, billed in advance, according to the terms which were enclosed with this check. Furthermore, I understand I can cancel up to 30 days after the date I cashed or deposited this check. By endorsing I'm agreeing to terms enclosed with this check.

Signature

X

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE

*FEDERAL RESERVE BOARD OF GOVERNORS REG. CO

Security Features: Micron Pen Signatures Line & Endorsement Line, Pullback Mark on the front and Original Document, Security Suse on the back.



House Bill 182

Background Information

Offering Promotional Checks

State of Tennessee 2006 News Release on
Multi-State Settlement with YP Corp.

Examples of promotional checks sent to churches,
schools and even the State of Tennessee itself



**Office of the Attorney General
Robert E. Cooper, Jr.**

**Department of Commerce and Insurance
Commissioner Paula Flowers**

NEWS RELEASE

Office of the Attorney General
P.O. Box 20207 Nashville, TN 37202-0207

Department of Commerce and Insurance
Division of Consumer Affairs
500 James Robertson Parkway Nashville, TN 37243

FOR IMMEDIATE RELEASE
Dec. 14, 2006
#06-46

CONTACT:
Sharon Curtis-Flair
(615) 741-5860

(NOTE TO EDITORS: A Knoxville consumer is available to discuss her experiences with news media. Contact Sharon Curtis-Flair at 615-741-5860 for more information)

STATE REACHES AGREEMENT WITH YP CORP. REGARDING CHECK SOLICITATIONS; COMPLAINT DEADLINE TO DCA IS FEB. 5, 2007

Attorney General Bob Cooper and Division of Consumer Affairs Director Mary Clement today announced YP Corp., (doing business as YP.com) and its wholly owned subsidiary Telco Billing, Inc., have reached an agreement regarding complaints they engaged in deceptive business practices.

The companies are alleged to have mailed checks, which if cashed or deposited, charged businesses and organizations to pay for advertising on its yellow page directory. Tennessee and 33 other states reached the agreement after filing suit regarding YP.com's use of checks.

"Last legislative session, Tennessee became one of the first states in the nation to make it unlawful to market these advertising checks that lure unwitting customers to obligate themselves," Attorney General Cooper said. "We will aggressively enforce the new law against violators."

Samples of the YP Corp. checks can be seen by scrolling below or by clicking

<http://www.attorneygeneral.state.tn.us/press/2006/story/PR46a.pdf>.

“Consumers should beware of checks for a nominal amount of money arriving in the mail for no apparent reason or little explanation,” said DCA Director Mary Clement. “Because the State of Tennessee was solicited, I believe there is a widespread problem with many different kinds of businesses and individuals being targeted. I would urge consumers to contact our office if they suspect they may have received a questionable check.”

Under the agreement, YP Corp. will stop using the checks to obligate businesses to purchase its products and services. YP Corp. also has agreed to pay \$2 million (in total to all of the participating states) to consumers who did not understand the potential consequences of depositing YP.com's check. YP Corp. also agreed to notify all current check customers to inform them of their right to cancel and to let them know they may be eligible for a refund.

In addition, all Tennesseans who cashed the YP Corp. checks sent after the new law became effective July 1, 2006 will receive full refunds. An estimated 950 Tennesseans were solicited after that date and were billed approximately \$8,500 for advertising. Refunds for post-July 1st consumers should arrive by February if not earlier.

Since at least 1998, YP.com mailed businesses and other organizations, including churches, public schools, and even the State of Tennessee, the YP.Corp checks, allegedly obligating them to pay for commercial listings on the web site www.yp.com. Some of these recipients had never advertised commercially before. Approximately 15,000 of these solicitations were sent to Tennesseans. The checks involved were small amounts, usually \$3.50. On the back of the checks, in fine print above the endorsement line, was language stating that by depositing the check, the recipient agreed to purchase advertising from YP.com for its on-line yellow pages directory.

The fine print also stated that by depositing the check, the recipient authorized YP.com (through its subsidiary Telco Billing, Inc.) to bill the monthly fees in advance, on the business's telephone bill or other means. Many recipients who deposited YP.com's checks did so without knowing the potential consequences. Some recipients did not realize they were being billed for many months or years after depositing the checks.

YP.Corp, YP.com, and Telco Billing, Inc. deny the State's allegations and any wrongdoing.

Anyone who feels they may have deposited an activation check and were consequently billed for services they did not authorize have until **Feb. 5, 2007** to contact the Division of Consumer Affairs for information on how to request a refund. Current YP.com customers who are being billed as the result of an activation check should be contacted by letter within the next two (2) weeks by YP.com. If you have received a check from YP Corp. or any other company, please contact the Division of Consumer Affairs at 1-800-342-8385 (toll-free inside Tennessee) or (615) 741-4737

ATTACHMENT TO PRESS RELEASE 46 (PR-46)

YP Corp. Sample Live Checks - 2002

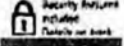
YELLOW-PAGE.NET
4840 E. JASMINE ST., STE 105
MESA, AZ 85205

BANK OF THE SOUTHWEST
TEMPE, AZ 85284

10/11/2002

PAY TO THE BEARER OR \$ **3.50

Three and 50/100***** DOLLARS



MEMO

Carl Simon

00500 ←

00500 ←

Enlargement of small print states, "I am over 18 and authorized to place this advertisement by depositing this check and by doing so **I agree to pay \$17.95 per month** for this advertisement."
(emphasis added)

Please list my company's information as shown on this check on the Yellow-Page.Net Internet website. I am over 18, and authorized to place this advertisement by depositing this check and by doing so I agree to pay \$17.95 per month for this advertisement. I agree to the Terms of Offer which were enclosed with this check and authorize Telco Billing, Inc. to bill such fees in advance, on the company's phone bill or by debiting the fee from the company's bank account into which this check is deposited or by other methods, according to the Terms. I understand that I can cancel and receive a full refund by simply calling 1-800-300-3209 within 120 days. Of course, the \$3.50 is mine to keep in any case.

X

Enlargement of small print states, "I . . . authorize Telco Billing, Inc. to bill such fees in advance, **on the company's phone bill or by debiting the fee from company's bank account** into which this check is deposited **or by other methods . . .**"
(emphasis added)

ATTACHMENT TO PRESS RELEASE 46 (PR-46)

YP Corp. Sample Live Checks - 2004, 2005

FRONT OF CHECK

YP.COM INTERNET YELLOW PAGES
101 CONVENTION CENTER DR., STE 1002
LAS VEGAS, NEVADA 89109
1-800-300-3209

BANK ONE, NA
DELAWARE, OH

04/30/2005

PAY TO THE BEARER OR [Redacted] Baptist Church \$ **3.25

Three and 25/100*****

[Redacted]
[Redacted] / Churches [Redacted]

MEMO [Redacted]

DOLLARS
Security features included. Details on back.

Sara Davis

YP sent advertising solicitations to churches, the State alleges

YP.COM INTERNET YELLOW PAGES
101 CONVENTION CENTER DR., STE 1002
LAS VEGAS, NEVADA 89109
1-800-300-3209

FIRST STATE BANK
LAKE LILLIAN, MN 56253

07/01/2004

PAY TO THE BEARER OR [Redacted] United Methodist Chr \$ **3.25

Three and 25/100*****

[Redacted] United Methodist Chr
[Redacted] TN [Redacted]

[Redacted] / Church [Redacted]

MEMO [Redacted]

DOLLARS
Security features included. Details on back.

Sara Davis

YELLOW-PAGE.NET
806 BUCKNAN #115-250
BOULDER CITY, NV 89005
1-800-300-3209

BANK ONE, NA
DELAWARE, OH

03/04/2004

PAY TO THE BEARER OR [Redacted] Church Of Christ \$ **3.25

Three and 25/100*****

[Redacted] Church Of Christ
[Redacted] Memphis, TN [Redacted]

[Redacted] Churches [Redacted]

MEMO [Redacted]

DOLLARS
Security features included. Details on back.

Sara Davis

FRONT OF CHECK

ATTACHMENT TO PRESS RELEASE 46 (PR-46)

YP Corp. Sample Live Checks/- 2006

FRONT OF CHECK

YP.COM INTERNET YELLOW PAGES
101 CONVENTION CENTER DR., STE. 1002
LAS VEGAS, NEVADA 89109
1-800-300-3209

CITIZENS STATE BANK OF
CLARA CITY
CLARA CITY, MO: 66222

4/1/2006

PAY TO THE BEARER OR Elementary School \$ **3 25

Three and 25/100***** DOLLARS

MEMO /Elementary & Seconda/

Sara Davis

YP Sent Advertising Solicitations to **Public** Elementary Schools, the State Alleges

Back of check

Please list my company's information as shown on this check on the YP.Com Internet website. I am over 18, and authorized to place this advertisement by depositing this check into my business account and by doing so I agree to pay \$27.50 per month for this advertisement. I agree to the Terms of Offer which were enclosed with this check and authorize Telco Billing, Inc. to bill such fees in advance, on the company's local phone bill or by direct ACH debit from the company's checking account into which this check is deposited in accordance with the rules governing the ACH network. Company agrees to be bound by the rules governing the ACH network in effect at the time and may revoke its ACH debit authorization at any time, change billing method or cancel and receive a full refund within 120 days by calling 1-800-300-3209.

PAY TO THE ORDER OF

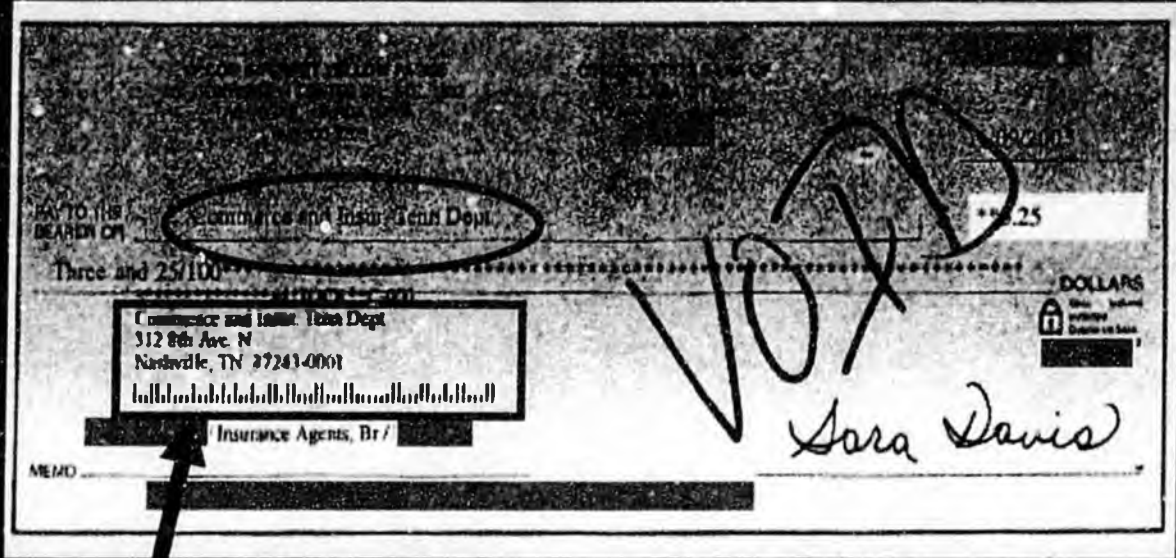
X Elementary School

DO NOT WRITE OR STAMP OR SIGN BELOW THIS LINE
RESERVED FOR SCHOOL USE

ATTACHMENT TO PRESS RELEASE 46 (PR-46)

YP Corp. Sample Live Checks - 2005

FRONT OF CHECK



YP even sent commercial advertising solicitations to the State itself, the State alleges. The check was not cashed.

Please see the company's information as shown on this check on the YP.com internet website. I am over 18, and authorized to place this advertisement by depositing this check into my business account and by doing so I agree to pay \$27.50 per month for this advertisement. I agree to the Terms of Offer which were attached with this check and authorize Telcel Billing, Inc. to bill such fees in advance, on the company's local phone bill or by direct ACH debit from the company's checking account into which this check is deposited in accordance with the rules governing the ACH network. Company agrees to be bound by the rules governing the ACH network in effect at the time and may revoke its ACH debit authorization at any time, change billing method or cancel and receive a full refund within 130 days by calling 1-800-303-5270.

X

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE

BACK OF CHECK

House Bill 182

Background Information

Offering Promotional Checks

News Releases, Articles, Consumer Warnings
and additional information from other States

March 14, 2007

Quick links: Home Overview News Employment FAQs Privacy Policy Contact Us



Office of the
Attorney General of Florida
Bill McCollum

The Capitol PL-01
Tallahassee, FL 32399-1050
850-414-3300

Attorney General Charlie Crist News Release
December 14, 2006

Florida, 33 States Agree to \$2 Million YP.com Settlement

TALLAHASSEE - Attorney General Charlie Crist today announced that Florida and 33 other states have reached an agreement with a telephone directory company resolving allegations of deceptive business practices. YP Corp., commonly known as YP.com, and its subsidiary Telco Billing, Inc., have agreed to settle allegations that they used activation checks to obligate businesses and organizations to pay for an enhanced listing on YP.com's online yellow page directory. More than 40,000 Florida consumers could be eligible for refunds.

Florida and the other states began investigating YP.com in June after receiving consumer complaints about the company's marketing practices. The company allegedly has been sending businesses and organizations small promotional checks since January 2003. The states' investigation revealed that many recipients who deposited YP.com's checks, often only for \$3.50, did so without knowing that by depositing the check, they were purchasing the enhanced online listing or that they were authorizing YP.com (through Telco Billing, Inc.) to bill them monthly fees in advance on their telephone bill, by debit from their account, or through some other method. In some of these cases, the business remained unaware that it was being billed for several months, if not years, after it deposited the check.

"These checks were an excellent example of there being no such thing as free money," said Crist. "This settlement will ensure that people are not being taken advantage of and are not being stuck with unwanted subscriptions or services."

According to the settlement, YP Corp. will stop using activation checks to obligate businesses to pay for its products and services. The company also has agreed to pay more than \$1 million in restitution to former YP.com customers who did not understand the consequences of depositing the check. Florida consumers could receive more than \$84,000 in restitution.

YP Corp. must also contact its current activation check customers to inform them of their right to cancel their agreement with YP.com and of their potential eligibility for at least a partial refund of money paid to YP.com. Current YP.com customers who are being billed through their telephone bill or bank account for a listing and became a customer by depositing a promotional check are to be contacted by mail within the next two weeks by YP.com. Any customers with questions may call the Attorney General's fraud hotline at 1-866-9-NO-SCAM (1-866-966-7226.)

A copy of the YP Corp. settlement is available at:
[http://myfloridalegal.com/webfiles.nsf/WF/KGRG-6WGMCD/\\$file/YP_Settlement.pdf](http://myfloridalegal.com/webfiles.nsf/WF/KGRG-6WGMCD/$file/YP_Settlement.pdf)

SOUTH FLORIDA
THE BUSINESS JOURNAL

YP.com may pay Floridians \$84K for fraud

South Florida Business Journal - December 14, 2006

Florida and 33 other states have reached an agreement with a telephone directory company resolving allegations of deceptive business practices. More than 40,000 Florida consumers could be eligible for a total of more than \$84,000 in refunds.

The settlement is with YP Corp., commonly known as YP.com, and its Telco Billing subsidiary.

The companies agreed to settle allegations they used activation checks to obligate businesses and organizations to pay for an enhanced listing on the YP.com online yellow page directory.

Florida and the other states began investigating YP.com in June, after receiving consumer complaints about the company's marketing practices.

The company allegedly has sent businesses and organizations small promotional checks since January 2003.

The states' investigation showed many recipients who deposited YP.com's checks, often only for \$3.50, did so without knowing that, by depositing the check, they were purchasing an enhanced online listing or were authorizing YP.com (through Telco Billing) to bill monthly fees in advance on their telephone bill, by debit from an account or through some other method.

In some of these cases, the Florida Attorney General's Office said businesses were unaware they were being billed for several months, if not years, after depositing the check.

"These checks were an excellent example of there being no such thing as free money," Florida Attorney General and Gov.-elect Charlie Crist said. "This settlement will ensure that people are not being taken advantage of and are not being stuck with unwanted subscriptions or services."

Under the settlement, YP Corp. is to stop using activation checks to obligate businesses to pay for its products and services.

The company also agreed to pay more than \$1 million in restitution to former YP.com customers who did not understand the consequences of depositing the check.

YP Corp. must also contact its current activation check customers to inform them of their right to cancel their agreement with YP.com and of their potential eligibility for at least a partial refund of money paid to YP.com.

Within the next two weeks, the company is to contact, by mail, current YP.com customers who are being billed through their telephone bill or bank account for a listing and became a customer by depositing a promotional check.

Any customers with questions may call the attorney general's fraud hotline at (866) 966-7226.



THE OFFICE OF
MASSACHUSETTS ATTORNEY GENERAL

MEDIA CENTER

AG REILLY REACHES SETTLEMENT WITH YELLOW PAGES, INC., RESOLVING ALLEGATIONS OF CONSUMER DECEPTION

Company Used Promotional Checks to Lure Consumers into Purchasing Ads

April 25, 2006

**CONTACT: SARAH NATHAN
(617) 727-2543**

BOSTON - A Nevada-based corporation with principal offices in Anaheim, California accused of luring Massachusetts consumers and small business owners into unknowingly purchasing on-line directory listings through the use of promotional checks must put an end to the deceptive practice, Attorney General Tom Reilly announced today.

Under the terms of a multi-state agreement reached with Massachusetts and 27 other states, Nevada-based Yellow Pages, Inc., California-based Electronic Directories Company, LLC, and John Wurth, president of these companies, are prohibited from using promotional checks to bait consumers and small business owners into buying listings in their directories. The checks, according to AG Reilly's settlement, filed today in Suffolk Superior Court, did not clearly explain that, by cashing them, consumers were committing to pay for an annual listings in Yellow Pages publications. Those consumers who cashed these checks were later hit with a bill averaging \$179.

"Consumers and small business owners must be wary of live check promotions," AG Reilly said. "Promotional checks are almost always used to lure consumers into making a much bigger purchase. In this case, by cashing a check for very little money - \$2 or \$3 - consumers were unknowingly purchasing advertising with this company."

According to AG Reilly's settlement, Yellow Pages used checks, described as "instant cash back offers," to lure consumers and small business owners into contracting for annual advertising listings in an online directory and printed publication. The face of

the checks gave no indication that if cashed, it would commit the consumer to paying for an online directory listing. The information on the back of the check and on a separate disclosure used such small print and vague language as to make it virtually illegible.

Additionally, consumers and businesses that did not subsequently pay the invoices had their accounts referred by Yellow Pages, Inc., to a collection agency. Under the terms of the agreement, Continental Recovery Service, the Yellow Pages' collection agency, will cease all collection activity related to the check solicitation program. Also, the collection company will certify that no adverse credit information has been reported, and that it will not report adverse credit information about any prior customers in connection with the check solicitation program to any credit reporting agency.

Consumers and small business owners who believe they were victimized by Yellow Pages, Inc., may be entitled to refunds, and should contact Paralegal Judy Connolly in Attorney General's Consumer Protection Division at 617-727-2200 extension 2959.

This case was handled by Senior Counsel Jeffrey Shapiro of AG Reilly's Consumer Protection and Antitrust Division with assistance from Deanna Gonsalves, who serves as Vice President of Operations for the Better Business Bureau of Eastern Massachusetts.



Beware of "Live Checks" Bearing Conditions

From the Office of Minnesota Attorney General Lori Swanson

Many companies offer potential customers incentives to encourage the purchase of goods and services. Recently, companies have begun to use check payments in connection with some marketing campaigns. Typically, a consumer receives a mailing that includes a "live check." The fine print on the back of the checks may contain language indicating that by endorsing the check, the consumer agrees to certain terms. Such terms may include membership in a club, subscription to a service, or purchase of a product.

A consumer may receive a live check and cash it, believing that it represents payment for a service rendered. Some unscrupulous marketers use checks that resemble refunds or rebates. A consumer may cash such a check, unaware that he or she is agreeing to be billed monthly for an unwanted and costly service, such as Internet access or membership in a web directory. Businesses and organizations may be particularly susceptible to cashing live checks without fully understanding the nature of the solicitation, since they frequently receive checks for payment.

Some consumers have complained that they cashed these checks without realizing that by doing so, they were charged for products or services. In some cases, such checks may bear conditions that are disclosed in small font, or placed in locations on the check that make the information difficult to access. For instance, a live check may include an asterisk near the amount, indicating that the recipient may read the rear side of the check for more information. The back of the check may then include a "disclosure" indicating that endorsing the check obligates the consumer to a certain purchase.

Protect Your Interests

The Minnesota Attorney General's Office warns consumers to closely scrutinize any payments or checks that they receive to avoid accidentally signing up for an

unwanted program, product, or service. Consumers are further cautioned to closely monitor their accounts to catch any suspicious withdrawals or charges on their banking or credit accounts. A company may obtain a consumer's checking account information once the live check is deposited into an account. Once the marketing company has obtained the account information, it may use the information to process electronic withdrawals from the account.

What to Do if You are Billed for Unwanted Services

Consumers who are billed electronically for unwanted services should contact their financial institution immediately. Consumers are encouraged to dispute unwanted charges by filing a written "Affidavit of Unauthorized Charges" with their financial institution. Based upon the investigation of the financial institution, it may agree to reverse the charges, clearing the consumer's account on the unauthorized debit.

Financial institutions are typically regulated at the national or state level, depending upon the institution's charter. The Office of the Comptroller of the Currency ("OCC") is a federal agency with the authority to regulate nationally-chartered banks. The Minnesota Department of Commerce is the state agency with the authority to regulate state-chartered banks in Minnesota. Accordingly, consumers who have concerns about the conduct of a given financial institution may wish to file a complaint with the appropriate regulatory agency. Consumers may contact the OCC and the Minnesota Department of Commerce as follows:

Office of the Comptroller of Currency
Customer Assistance Group
1301 McKinley, Suite 3710
Houston, TX 77010
Toll free: 1-800-613-6743

AG MYERS FILES RACKETEERING LAWSUIT AGAINST INTERNET YELLOW PAGES COMPANY

May 25, 2005

Attorney General Hardy Myers today announced the filing of a civil racketeering lawsuit against a Nevada corporation, operating out of Anaheim, California, for allegedly tricking thousands of Oregon businesses into endorsing negotiable checks that the company claimed were actually contracts for Internet "yellow page" listings.

Named in the lawsuit filed Tuesday in Polk County Circuit Court are Yellow Pages, Inc.(YPI) and its president, John M. Wurth of Anaheim. The Oregon Department of Justice alleges in the suit that the defendants, from November 2003 through December 2004, mailed thousands of negotiable checks in a misleading solicitation to Oregon small businesses, churches and synagogues.

"Protecting legitimate Oregon businesses and non-profit and religious organizations from fraudulent enterprises is an important part of the Department of Justice legal mandate," Myers said. "In this case, the civil racketeering laws provided us the tools to sue this unscrupulous enterprise."

According to the complaint, the mailing piece was designed to imply a relationship with the recipient's commonly-used yellow page directory and the checks, ranging from \$3.47 to \$3.49, appeared to represent a refund of little consequence to resolve a small outstanding debt. The rest of the package allegedly did little to disclose the true nature of the mailing's purpose. Hence, victims thought they were dealing with their regular yellow pages directory rather than signing up for a new \$179 Internet listing.

The complaint alleges that the 2,776 Oregon victims who cashed the checks then received invoices for an Internet listing. The invoices contained the phone number of the second business in the racketeering enterprise, Continental Recovery Services, Corp. of Simi Valley, California, doing business as Continental Recovery and Filing Solutions and CRF Solutions.

Businesses calling CRF Solutions were told CRF represented Yellow Pages, Inc. If the invoice for the Internet listing was not paid, CRF continued collection efforts. Nationwide, the YPI/CRF/John Wurth enterprise collected millions from victims. In Oregon, the enterprise invoiced victims for more than \$496,000 and netted more than \$131,000.

The lawsuit, the sixth filed by a state against Yellow Pages, Inc., asks for civil penalties of \$250,000 from each defendant, attorney fees and investigative costs and the forfeiture of all monies and property derived from or used in the alleged illegal conduct. The suit

also requests restitution for all victims, who paid invoices connected to the deceptive "live" check solicitation.

In addition, the lawsuit seeks a permanent injunction prohibiting the defendants from engaging in or having an interest in any enterprise that utilizes "live" checks to promote a product or service in Oregon.

CONTACT:

Jan Margosian, (503) 947-4333 (media line only) jan.margosian@doj.state.or.us |

From *PROMO Magazine*

Jan 1, 2007 12:00 PM, By Patricia Odell

IF YOU BELIEVE THAT

Planning to use a live check as a promotional hook? Think again.

Chase Bank and Trilegiant Corp. got into hot water with 17 states over the use of this device. The firms settled last month for \$14.5 million, resolving charges that they duped consumers into paying for membership programs or buying clubs.

The live checks, worth from \$2 to \$10, were tied to a "free" 30-day trial offer. Consumers were never told that by signing it, they had agreed to pay for a membership, the states alleged. The victims were mostly seniors and people with limited use of the English language.

And now the states are toughening up their guidelines on live checks.

For example, some now require specific language on the backs of checks, and disclosures in the solicitation.

A couple of states are mulling bills to prohibit the checks, says Albert Shelden, the acting senior assistant attorney general, Department of Justice for California.

Equally troubling for the states was the co-marketing aspect of the promotion. Trilegiant, a provider of loyalty and affinity programs to financial service and retail companies, was given access to Chase's database, and the solicitation arrived in a Chase-branded envelope. This led consumers to believe it had come from their bank, credit card issuer or mortgage lender, according to the states.

"The solicitation didn't adequately disclose that it was really a third party's product," Shelden says. "So there are additional requirements regarding disclosures that are going to have to be looked into."

Co-marketing with charities can create even greater problems, Shelden says. Requirements vary by state, with some requiring marketers to register as a charitable solicitor.

"Likewise, whatever you say is going to go to that charity, even if your sales are zero, better go to that charity or there are going to be problems," Shelden adds.

Iowa, which was also involved in the Trilegiant case, looked at specific words in the solicitation that it thought were misleading or created a false premise. It also examined what consumers were obligated to do.

One word that stuck out was "enroll," as in enroll in a class. The consumer who fell for this was, in fact, agreeing to a free trial in a buying club membership, says William Brauch, special assistant attorney general, consumer protection division, for Iowa.

The settlement included more than \$8 million from Trilegiant for restitution to consumers.

House Bill 182

Relevant Statutes

Offering Promotional Checks

Sec. 45.50.471. Unlawful acts and practices.

Sec. 45.50.551. Civil penalties.

Sec. 45.50.561. Definitions; short title.

HB

1900

ALASKA STATE LEGISLATURE
REPRESENTATIVE SHARON CISSNA



Sponsor Statement

CSHB 190 – Nursing Mothers in Workplace

Infant and childhood nutrition is a growing and major concern in the State of Alaska. Numerous studies have shown that infants who are breast fed have significant health, growth and developmental advantages, as well as decreased risk of acquiring acute and chronic diseases. From 2000-2003, 42% of Alaskan mothers of newborn infants reported that they were currently in school or working outside their home. Of the mothers who stopped breastfeeding their infants, 21.9% reported that one reason they did so was because they were returning to work or school. Young mothers are often responsible for supplementing household income. The health of their children can be a critical factor in the mother's ability to succeed in the workforce.

CSHB 190 addresses this issue by requiring employers to provide reasonable, unpaid break time up to three times each day to nursing mothers for the purpose of breastfeeding or expressing breast milk until the child is twelve months of age. The bill also requires employers to make a reasonable attempt to provide a sanitary and private place for the employee. By allowing time for nursing mothers to continue breastfeeding, Alaskan employers play an important role in ensuring that the Alaskan workforce of tomorrow is healthy and strong enough to meet the challenges of our future. I urge your support for this important piece of health legislation.

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: _____
 Bill Version: SS HB 190
 () Publish Date: _____

Identifier (file name): HB190SS-DOA-DAS-3-07-08 Dept. Affected: Administration
 Title: _____ RDU: Centralized Administrative Services
 "An act relating to break times for employees who nurse a child." Component: Administrative Services
 Sponsor: Rep. Cissna
 Requester: (H) HES Component Number: 46

(Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	Appropriation Required	Information					
	FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Personal Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Travel	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Contractual	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Supplies	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Equipment	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Land & Structures	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Grants & Claims	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES							
-----------------------------	--	--	--	--	--	--	--

CHANGE IN REVENUES ()							
-------------------------------	--	--	--	--	--	--	--

FUND SOURCE	(Thousands of Dollars)						
1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0	0.0
1037 GF/Mental Health	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other Interagency Receipts	0.0	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2008) cost: 0.0

POSITIONS

Full-time							
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if necessary)

The impact of this bill will be minimal and therefore the agency submits a zero fiscal note

Prepared by: Eric Swanson Phone 907-465-4429
 Division: Administrative Services Date/Time 3/7/08 12:00 AM
 Approved by: Kevin Brooks, Deputy Commissioner Date 3/7/2008
Department of Administration

FISCAL NOTE

**STATE OF ALASKA
2008 LEGISLATIVE SESSION**

Fiscal Note Number: _____
 Bill Version: SSHB 190
 () Publish Date: _____

Identifier (file name): HB190SS-DOLWD-WH-03-07-08 Dept. Affected: Labor and Workforce Development
 Title: Nursing Mothers in Workplace RDU: Labor Standards and Safety
 Component: Wage and Hour
 Sponsor: Representative Cissna
 Requester: House HES Component Number: 345

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies								
Equipment								
Land & Structures								
Grants & Claims								
Miscellaneous								
TOTAL OPERATING		0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES								
-----------------------------	--	--	--	--	--	--	--	--

CHANGE IN REVENUES ()								
-------------------------------	--	--	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts								
1003 GF Match								
1004 GF								
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other Interagency Receipts								
TOTAL		0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2008) cost: None

POSITIONS

Full-time							
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if necessary)

There is no anticipated financial impact to the department as a result of this legislation.

Prepared by: Grey Mitchell, Director Phone: (907) 465-4855
 Division: Labor Standards & Safety Date/Time: 3/7/08 8:33 AM
 Approved by: Click Bishop, Commissioner Date: 3/7/2008
Department of Labor and Workforce Development

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Wednesday, March 12, 2008 3:47 PM
To: Anna Sorensen
Subject: Fwd: Bill to protect breastfeeding moms

Onni Tibor <kaleblanc@yahoo.com> wrote:

Date: Wed, 12 Mar 2008 14:39:43 -0700 (PDT)
From: Onni Tibor <kaleblanc@yahoo.com>
Subject: Bill to protect breastfeeding moms
To: msgreeman@yahoo.com

First of all, thank you for doing this, I really appreciated.

This is my testimony~

My name is Onni Tibor; my baby was 2.5 months old when I returned back to work. I worked at a local Engineering firm with men being dominated, in our office; we do not have a break room where we can go pumping. We have to go to the unisex Bath/Shower room to pump; sometimes it is very unpleasant especially in the morning after some one doing the #2 in there.

Also the closest outlet in the shower room has not been working in years! Some veteran pumpers at work told me that they had notified the management a few times; somehow nothing gets done, then no one said a thing anymore. So now we all use the extension cord to get power across the toilet and sink... I always think that the germs are going to jump to the power cord.

Well, it is my testimony about pumping at work, sometimes it is a drag to go pumping. And I hope the bill will successfully pass.

Onni

Do You Yahoo!?
Tired of spam? Yahoo! Mail has the best spam protection around
<http://mail.yahoo.com>

Do You Yahoo!?
Tired of spam? Yahoo! Mail has the best spam protection around
<http://mail.yahoo.com>

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Wednesday, March 12, 2008 3:48 PM
To: Anna Sorensen
Subject: Fwd: HB190

"Rutzler, Kristiann" <RutzlerK@ci.anchorage.ak.us> wrote:

From: "Rutzler, Kristiann" <RutzlerK@ci.anchorage.ak.us>
To: "msgreeman@yahoo.com" <msgreeman@yahoo.com>
Date: Wed, 12 Mar 2008 11:05:35 -0800
Subject: HB190

Please pass on my testimony and support for HB 190.

I fully support the proposed bill HB 190. A 10-second jaunt on the internet reveals the myriad of reasons breast milk is better than formula. Our society in general is coming to support women when providing their offspring this valuable nutrition. The US Food and Drug Administration notes how the percentage of American mothers who breastfeed their newborns drops considerably by the time their baby reaches 6 months old. It states "government and private health experts are working to raise those numbers". (http://www.fda.gov/Fdac/features/895_bstfeed.html) HB 190 Nursing Mothers in the Workplace will do just that.

Following the birth of my daughter, I continued to work full-time for the Municipality Of Anchorage, and had difficulty finding private, clean space in which to pump. My supervisor supported my decision to breastfeed and pump, but we had a tough time finding the space. I work in a cubicle, and at first I tried to pump there, by blocking the entrance, but abandoned that practice the first time a fellow stood on tip-toe and peeked over my cubicle wall (luckily, he was a new father, and wasn't too shocked to see me with suction cups attached to my body). Then I tried pumping in a storage room that had no lock on the door – a colleague who was also pumping built a wooden wedge to keep people from walking in while we were pumping. That area worked out well, but the space was soon needed for an office, so we were given the boot. The break rooms were not private enough. We hopped from office to office taking advantage of that space while others were on leave. Eventually, we had to use the conference rooms. It was sometimes difficult finding free time in the room schedule, for so many employees were rightfully using them for meetings. One time I pumped in the restroom, but was so disgusted by the fact that I was pumping while someone was defecating that I never did that again. I even tried pumping in my car, but felt too exposed to those walking by in the parking lot.

I'm hoping to have another child soon, and I'm already dreading the task of securing a safe, clean place to pump. I hope this bill helps bring this difficulty to light – so employers and building developers recognize this need and help provide a private, clean place to pump. We're not asking for much: a quiet room with a door, a table and a chair is all we need.

Please support HB 190 Nursing Mothers in the Workplace, so we can continue to raise our children to the best of our ability.

Kristiann Rutzler
Municipality of Anchorage
Planning Department

Do You Yahoo!?

Tired of spam? Yahoo! Mail has the best spam protection around

<http://mail.yahoo.com>

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Wednesday, March 12, 2008 3:48 PM
To: Anna Sorensen
Subject: Fwd: Bill to protect breastfeeding moms - testimony

Rachel Cruz <rachelacruz@gmail.com> wrote:

Date: Wed, 12 Mar 2008 10:15:16 -0800
From: "Rachel Cruz" <rachelacruz@gmail.com>
To: msgreeman@yahoo.com
Subject: Bill to protect breastfeeding moms - testimony

Hi Sarah,

I'm writing to provide you with a written testimony of my experiences with being a nursing mother in the workplace.

When I first came back from maternity leave (June 2007) I did not want to pump in the bathrooms, so I attempted to pump in my office. However, it was a bit challenging since I had a window with no blinds and a door that did not lock. I hunted around the office for some left over foam board that was large enough to put up in my window to block the view. I found a piece that wasn't a perfect fit, but was adequate. I then put a do not disturb sign on my door. I pumped in my office for about two weeks. I ended up finding a new location to pump because I always felt rushed and nervous that the board would fall out of my window (which it did once), someone could see through cracks that the board did not cover, or that someone would open the door. So I relocated to the bathroom. The bathroom is a very unpleasant place to sit for 20 minutes, let alone pump milk for your baby. I always tried to use the private handicap bathroom so that I at least had privacy, but many times the bathroom was in use when I needed to pump or the stench in the bathroom was too unbearable to stand. If I could not use the private bathroom, I would resort to the bathroom with multiple stalls and stand in a stall and pump. I can remember many times standing in the stall pumping breastmilk while someone later came into the bathroom to go number two. I certainly don't blame them, but it makes for a very unpleasant and unsanitary experience.

It would be nice if all companies were proactive and provided lactation rooms for their employees, but unfortunately this is not the case. For example, I work for a company that has young staff and for the last four years has consistently had a handful of pregnant and nursing moms. We also have many empty offices that could easily be used as a lactation room. Unfortunately the management sees nothing wrong with using the bathroom as a lactation room too. Why have a lunch room?...we have a bathroom with plenty of space!

Thanks for all your efforts on this bill!

Rachel Cruz

Do You Yahoo!?

Tired of spam? Yahoo! Mail has the best spam protection around
<http://mail.yahoo.com>

3/13/2008

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Wednesday, March 12, 2008 3:48 PM
To: Anna Sorensen
Subject: Fwd: HB 190

Andrew Billings & Mia Costello <andrewmia@gci.net> wrote:

Date: Wed, 12 Mar 2008 10:53:55 -0800
From: Andrew Billings & Mia Costello <andrewmia@gci.net>
Subject: HB 190
To: msgreeman@yahoo.com
CC: chechako@alaska.net

To Whom It May Concern,

As a former working mother who returned to the office place following maternity leave from the State of Alaska as deputy director of communications for Governor Murkowski, I found my return to work and my choice to pump during working hours to be completely supported by every single person in the governor's office.

Almost immediately upon my return, my office was installed with a lock so that while I pumped I could have the privacy needed. This provided me both privacy and allowed me to avoid pumping in the bathroom, an option that I would not have chosen to exercise because of the obvious health and safety risk of contaminating the milk.

The support and acceptance that I experienced while I was a nursing mother to my infant is something that all working mothers should come to experience and expect.

That personal choice is one all mothers should be able to make and it should not be either dictated by or compromised by an employer's inability to offer a clean, safe and private area for working mothers who choose to provide breast milk to their infants.

I wholeheartedly support HB 190 and urge it's passage into law.

Sincerely,
Mia Costello
1570 Goldpointe Drive
Fairbanks, Alaska 99709

Do You Yahoo!?

Tired of spam? Yahoo! Mail has the best spam protection around
<http://mail.yahoo.com>

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Wednesday, March 12, 2008 3:56 PM
To: Anna Sorensen
Subject: Fwd: breastfeeding bill

Anna Knapp <annapatknapp@yahoo.com> wrote:

Date: Tue, 11 Mar 2008 23:51:33 -0700 (PDT)
From: Anna Knapp <annapatknapp@yahoo.com>
Subject: breastfeeding bill
To: msgreeman@yahoo.com

Sarah,

I hear that you are a mother! It's amazing how quickly those months of pregnancy go by. I'd love to hear your birth story when you have a chance, but it looks like you are pretty busy with this house bill work. I'm so happy to see that you are doing this for moms...it's so important.

Here are my comments that I hope can help you out:

I am a new mom as of January 2008. I am happy to have a beautiful baby girl in my life now. She means everything to me. I want to make sure that she has a great start to her life, so I am planning on breastfeeding as long as she wants to in her life. I believe that providing breast milk to her will allow her to have a healthy start. I have talked with my healthy care provider as well as read research on this subject and found that kids who are breastfed do get significant health benefits.

I am not able to stay home with my daughter and have returned to work just 8 weeks after her birth. My employer has made it very easy for me to express my breast milk during work hours. A copy room with a comfy chair and an electrical outlet for the pump has been made available for me for the times that I need to pump during the work day. I simply put a sign on the door with the message "copy room will be available in 15 minutes" and my coworkers know that I am inside providing nourishment for my daughter. I take the milk home each night and my daughter eats it the next day.

Because I am able express milk during the day, I am able to keep my milk supply strong. The allows me to

nurse my daughter "in person" whenever we are able to be together. This time with her is so important to our bonding since I have to be away from her 40-50 hours a week.

I can not imagine a situation different from this. Often when I am expressing milk, I wonder what other mothers do who work in other places. How stressful it would be to express milk in a bathroom stall or even worse--to not be able to do it all!

This small action that my employer has taken allows my daughter to have a healthier start and allows me to be a happier employee. Even though I have to go back to work when I would rather stay home with my child, I know that I have the best of both worlds--a strong bond with my child and an employer that cares about both me and my child. I am a more productive employee because of it.

I know that I am lucky with this situation. Not all moms have a boss that is so understanding. It would be a much better situation in our state if all moms had the place to express breast milk like I do. This bill would allow this to happen; please vote yes on House Bill 190 Nursing Mothers in the Workplace.

Anna G. Knapp
Mother of Mellen Knapp
Anchorage AK

Looking for last minute shopping deals?

Find them fast with Yahoo! Search. <http://tools.search.yahoo.com/newsearch/category.php?category=shopping>

Do You Yahoo!?

Fired of spam? Yahoo! Mail has the best spam protection around
<http://mail.yahoo.com>

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Thursday, March 13, 2008 9:27 AM
To: Anna Sorensen
Subject: Fwd: testimony

Kristin Wognild <wognild_kristin@asdk12.org> wrote:

Date: Thu, 13 Mar 2008 09:26:08 -0900
Subject: testimony
From: Kristin Wognild <wognild_kristin@asdk12.org>
To: <msgreeman@yahoo.com>

Hello! Thank you for your efforts to support breastfeeding mom. I will do what I can to help. I hope this will suffice. Below is my written statement about my situation:

I am the mother of a ten-month old wonderful and spirited little girl. If you were to meet her, you'd probably find her demonstrating one of her many new tricks- crawling at the speed of lightening, dancing to the (off-key) tune of her mom's voice, or pulling herself to standing on anything and everything- all while showing off a big toothy grin. There is no doubt that she is a very happy baby.

But, this was not always the case. My daughter was very colicky- right from the start. I desperately wanted to nurse- knowing the benefits it provides both her and I. But, she and I both struggled in the beginning. She was easily frustrated, and I was overwhelmed, and despite frequent nursing sessions- she didn't gain weight as she should. Many mothers would stop, but I became a permanent fixture in the office of a lactation consultant- who helped my daughter and I learn what to do. I visited an accupuncturist- who helped my milk supply increase. I ate the right foods and took the suggested herbs- anything that would help with this process. And finally- we had it under control.

My daughter was "thriving," at least according to growth charts- but she remained extremely colicky. As a mother, I knew something wasn't right- and my daughter's pediatrician finally referred her to an allergist. Three months into her life, we found out that she had major food allergies. There were nine in all- and one was to corn. This was the most worrisome because if she or I (while nursing) ingested it- there was a possibility of an anaphylactic reaction. I was instructed on how to use an epi-pen. and told to carry it with my daughter at all times.

The news came- just weeks before I was to go back to work. I had spent months pumping every chance I could to stock up my freezer with milk. Now,

the doctor instructed me to dump everything I had pumped. He went on to explain that corn (or a corn derivative) was in every form of formula. (There was one that I could use if need be- but I would have to buy it special order, and was extremely pricey. \$10 a day to feed my daughter. And my insurance refused to fund ANY formula.)

Still- breast is best for your daughter- he had explained. And after everything I had been through TO breastfeed, I would keep going (minus the nine allergens from my diet.)

Still, the thought of going back to work loomed before me. Would I be able to pump as much as I would need to? It was imperative that my milk supply did not go down- both for my daughter's health and for our finances (we simply could not afford to feed her the formula.) I thought about staying home with my daughter- taking a leave of absence from the school district, where I work- but it wouldn't work. So- I set out to work with apprehension.

I am a teacher. So, my pumping options are limited. Fortunately, I am offered a planning time and a short duty-free lunch. During these times, you could find me, sitting on the floor, pressed against the only wall in my classroom where I can't be seen through windows from the outside. Still, I pump every chance I get- but unfortunately, chances are becoming more and more limited. I often miss lunch (which I know is imperative for my milk supply), and sometimes struggle with priorities (which kids' welfare comes first?) I have very little planning time left after pumping, and good teaching REQUIRES time. Needless to say, this experience has been overwhelming.

Still, despite the tears that have come while I sit on the floor, pressed for time, hungry, and fearful that the sticky lock on the door isn't working- I know that I have been lucky. Yes, my milk supply decreased, and I have had to give my daughter some formula. (How could it not when pumping is limited and stressful?) I am lucky because I am not in the bathroom pumping. I am lucky because I have SOME time to pump. I know there are other mother's out there that have it harder.

I believe that the state must protect these mothers, and more importantly, their children. We all know that breast is best. And just because a mother must or chooses to work- that child still deserves the best chance on life. For too long, it has been up to the employer, and that is not good enough.

Thank you for your time.

-Kristin Wognild

Anna Sorensen

From: AKma2many@aol.com
Sent: Thursday, March 13, 2008 1:24 PM
To: Anna Sorensen
Subject: HB 190 testimony

Anna

Here is my testimony for HB 190. I don't know if I will be available to call in so I thought I would send this to you.

I'll call in if I am available.

Cathy Tapey
President
Alaska Breastfeeding Coalition

Babies were born to be breastfed.

"The Alaska Breastfeeding Coalition is a nonprofit 501c3 organized to provide leadership through collaboration and education to improve the health and well-being of Alaskans by promoting, protecting and supporting breastfeeding. Our members represent a wide variety of groups committed to breastfeeding in the community including nurses, pediatricians, certified lactation consultants, nutritionists, WIC peer counselors, La Leche League members, health educators and committed parents.

The Alaska Breastfeeding Coalition supports bills HB 190 An Act relating to break times for employees who nurse a child. As professionals, we see on a daily basis the dilemma of mothers as they return to work. We know that many women choose to quit breastfeeding sooner than they would like due to the difficulty they experience when trying to express their milk for their child during their work schedule.

The passage of bill HB 190 will not only benefit breastfeeding mothers and their infants, but employers as well. Breastfed babies generally develop fewer occurrences of ear infections, lower respiratory infections, and GI illnesses during infancy and childhood. This translates into fewer absences from work by the parent. In addition, healthier children have fewer doctor visits reducing health care costs.

As stated in a letter to the Editor of the New York Times by Dr Audrey Naylor, "A goal of the United States Breastfeeding Committee is that every woman, regardless of her employment status, will have the opportunity to provide breast milk for her child." By showing support for HB 190 you can protect breastfeeding mothers from discrimination and support their efforts to raise healthy babies. We find this legislation to be a step forward in reaching that goal."

It's Tax Time! Get tips, forms and advice on AOL Money & Finance

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Thursday, March 13, 2008 4:32 PM
To: Anna Sorensen
Subject: Fwd: RE: Bill to protect breastfeeding moms

These emails ended up in my junk mail. I know the hearing is over. We had company so I'll have to listen on the archive. Please add this to the testimony for later.

Thank you

"Keri A. Nutter" <knutter@dowl.com> wrote:

Subject: RE: Bill to protect breastfeeding moms
Date: Wed, 12 Mar 2008 15:15:21 -0800
From: "Keri A. Nutter" <knutter@dowl.com>
To: <msgreeman@yahoo.com.>
CC: "Kristen J. Hansen" <khansen@dowl.com>

Hello Sarah,

I received an email from Onni Tibor that you were looking for testimonials of women's experiences of pumping/breastfeeding at work.

I haven't had any negative experiences with pumping at work. My supervisor has been incredibly supportive of my choice to continue breastfeeding my son and shows an understanding for this decision despite my job description. I understand that my job as a field geologist presents some unique challenges for pumping and that I have and will need to pump under less than ideal conditions (i.e. in a pick-up truck) but so far I've managed and have not felt like I have to stop because of my job. If possible, I do not do field work or leave town for any length of time, but there really isn't always a choice. I guess the only thing that I would change are the places to pump while at work. We do have a conference room to use that is pretty private, but lately it has been in use during the majority of the day and I feel bad for tying it up if someone wants to impromptly use it (that's what they are there for). And although our bathroom is clean and there is a chair to sit and pump, it is the only restroom for the ladies that work in this building (and pumping can tie it up for 20 to 40 minutes at a time) and it's not exactly all that private feeling (I know that people can walk by and hear the pump whirring through the door). We haven't any offices that do not have windows to the hallways, and the only other alternative I've found is an old file room, with no door at the end of the hallway. I hang a "Do Not Disturb" sign and I have been left alone the last couple of weeks since I started using that room - but then again, there is no door and it doesn't really feel that private. I know that eventually the space upstairs will be occupied once again so that is not really an option, and another girl in my department will be back at work and pumping in the near future (she just had her baby). This is just temporary (I plan to breastfeed for a year, if possible). I make it work with what we've got and don't really have any complaints. But being discreet in a building of mostly men has been interesting.

Thanks for listening!

Keri

From: Kristen J. Hansen
Sent: Wednesday, March 12, 2008 1:24 PM
To: Kelly L. Suchodolski, P.E.; Onni Tibor; Keri A. Nutter; Rachel A. Cruz; Tanya S. Hickok, P.E., LEED® AP; LaQuita M. Chmielowski, P.E., LEED® AP
Cc: Heather A. Campfield

Subject: RE: Bill to protect breastfeeding moms

Hello Fellow Working Moms –

I didn't experience any negative issues related to pumping at DOWL. I used the bench in the bathroom downstairs (next to the shower), and felt that it was clean and private. I left the extension cord that I brought in (since the outlet nearest the bench didn't seem to work at the time) for future pumping mothers to use ... not sure if it's still there, or if they've fixed the outlet.

I certainly hope no one at DOWL has experienced anything negative related to pumping at work. As an owner, I'd be interested to know about any bad experience and I'd be happy to work with management to try and get any issues resolved. Please feel free to come and talk to me if you have had any issues that you'd like to discuss.

Cheers!
Kristen

From: Kelly L. Suchodolski, P.E.
Sent: Wednesday, March 12, 2008 9:51 AM
To: Onni Tibor
Subject: RE: Bill to protect breastfeeding moms

You might want to forward this to Kristen Hansen as well.

Kelly L. Suchodolski, P.E.
Transportation Engineer



(907) 562-2000
DOWL Engineers
4041 B Street
Anchorage, AK 99503
Fax (907) 563-3953
www.dowl.com

From: Onni Tibor [mailto:kaleb1anc@yahoo.com]
Sent: Wednesday, March 12, 2008 9:50 AM
To: Rachel A. Cruz; Christopher E. Settle; Tanya S. Hickok, P.E., LEED®AP; cecile.davis@hdrinc.com; Kelly.Brown2@contractor.conocophillips.com; LaQuita M. Chmielowski, P.E., LEED® AP; Keri A. Nutter; Kelly L. Suchodolski, P.E.
Subject: Re: Bill to protect breastfeeding moms

Hi Veteran Pumpers.

Jen Aist is my Lactation consultant from the nursing boutique at Providence, she forwarding this email out and tried to protect working Moms. I know some of you are done pumping, but if you have a few minutes, can you write down what your experience was when you were pumping at work. And email to Sarah

Grosshuesch msgreeman@yahoo.com.
Thanks so much!

Onni

3/13/2008

jenaist <aists@gci.net> wrote:

I can't normally send out messages like this... However, local mom Sarah Grosshuesch has worked really hard to bring a bill to our state government that would protect working and breastfeeding moms.

"HB 190 Nursing Mothers in the Workplace has a hearing before the House Health, Education and Social Services Committee on Thursday, March 13 at 3:00.

Testimony can be given in person at the Anchorage Legislative Information Office located at 716 W 4th Ave. The Alaska Breastfeeding Coalition is trying to gather written testimony of mothers, health care professionals and other interested parties who would be impacted by this bill. The bill requires employers to provide adequate break time and clean private space other than a bathroom stall for the purpose of expressing breastmilk or breastfeeding a child. If you have any questions or to submit testimony please email Sarah Grosshuesch msgreeman@yahoo.com

The bill language is similar to the bill in the Senate. We have bill in both houses to help make sure it moves through."

I know many of you moms and dads out here have expressed an interest in this topic. If you can come on Thursday, it would be great. If you can write a comment about your experiences working and breastfeeding that would be great. If you know others who might be affected by this bill, pass it on. If you have any questions, shoot me an email or send an email to Sarah. Hope to see some of you there on Thursday!

Jen

Looking for last minute shopping deals? Find them fast with Yahoo! Search.

IMPORTANT INFORMATION ABOUT THIS COMMUNICATION This electronic communication (including any appended material) is intended solely for the use of the person or entity to which it is addressed. Because the communication may contain information that is confidential, privileged, or legally exempt from disclosure, you are prohibited from reading, disclosing, reproducing, distributing, disseminating, or otherwise using the communication if you are not its intended recipient. Accordingly, if you have received this communication because of error or inadvertence on our part or on the part of one of the recipients, we ask that you please, for your own protection, immediately notify the sender by electronic communication, immediately delete this message from your system. Please note that electronic communication has been used to expedite delivery of information and, as a consequence, the communication may have not been subjected to our customary internal review. **DO NOT RELY** on professional recommendations, professional opinions, plans, specifications, or other instruments of professional service that are delivered electronically. Any such material may have been corrupted by electronic delivery bugs. **RELY ONLY** on the hard copy that we will issue to you by mail or delivery service.

Looking for last minute shopping deals? Find them fast with Yahoo! Search.

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Thursday, March 13, 2008 4:33 PM
To: Anna Sorensen
Subject: *****SPAM***** Fwd: RE: bill to protect breastfeeding moms

more testimony

Kelly Keays <nppatriot@hotmail.com> wrote:

From: Kelly Keays <nppatriot@hotmail.com>
 To: <msgreeman@yahoo.com>, <kkeays@awcp.net>
 Subject: RE: bill to protect breastfeeding moms
 Date: Wed, 12 Mar 2008 13:45:13 -0800

I was and still am a working mother. I wanted to do the best thing for my son and give him my breastmilk but I had to work. I worked full time at a long term care center. It was a horrible experience trying to find a place to pump breastmilk at work. Basically I was left with "you can use your 15 minute break or your lunch hour to pump" and the bathroom was my only choice for privacy. I was embarrassed enough to be exposing my breasts at work, even if it was under a blanket. But then to have to go into a bathroom and try to keep everything clean, from my pump, to bottles etc... It made me wonder if it was worth it. I breastfed my son for 13 months but the experience of not having a place to pump that was sanitary, comfortable, and private was almost enough to make me quit breastfeeding all together. Thankfully I no longer work at that place.

It's very frustrating to say the least.

Kelly Keays RN

"When we long for life without difficulties, remind us that oaks grow strong in contrary winds and diamonds are made under pressure"
 ~Peter Marshall

Date: Tue, 11 Mar 2008 19:10:33 -0800
 From: aists@gei.net
 Subject: bill to protect breastfeeding moms

I don't normally send out messages like this... However, local mom Sarah Grosshuesch has worked really hard to bring a bill to our state government that would protect working and breastfeeding moms.

"HB 190 Nursing Mothers in the Workplace has a hearing before the House Health, Education and Social Services Committee on Thursday, March 13 at 3:00.

Testimony can be given in person at the Anchorage Legislative Information Office located at 716 W 4th Ave. The Alaska Breastfeeding Coalition is trying to gather written testimony of mothers, health care professionals and other interested parties who would be impacted by this bill. The bill requires employers to provide adequate break time and clean private space other than a bathroom stall for the purpose of expressing breastmilk or breastfeeding a child. If you have any questions or to submit testimony please email Sarah Grosshuesch msgreeman@yahoo.com

The bill language is similar to the bill in the Senate. We have bill in both houses to help make sure it moves through."

I know many of you moms and dads out there have expressed an interest in this topic. If you can come on Thursday, it would be great. If you can write a comment about your experiences working and breastfeeding that would be great. If you know others who might be affected by this bill, pass it on. If you have any questions, shoot me an email or send an email to Sarah. Hope to see some of you there on Thursday!

Jen

Be a better friend, newshound, and know-it-all with Yahoo! Mobile. Try it now.

Anna Sorensen

From: Sarah Grosshuesch [msgreeman@yahoo.com]
Sent: Thursday, March 13, 2008 4:34 PM
To: Anna Sorensen
Subject: Fwd: Bill to Protect Breastfeeding Mothers

last one that for now.

LaQuita M. Chmielowski, P.E., LEEDR AP <Lchmielowski@dowl.com> wrote:

Subject: Bill to Protect Breastfeeding Mothers
Date: Wed, 12 Mar 2008 10:31:09 -0800
From: LaQuita M. Chmielowski, P.E., LEEDR AP <Lchmielowski@dowl.com>
To: <msgreeman@yahoo.com>

Hello, Sarah

I received your email from Onni Tibor requesting our experiences while breastfeeding at work. I have a unique situation since I work out of our Anchorage and Palmer office. While I am in Anchorage we have a private bathroom with a bench and shower area. This bathroom is very nice and makes pumping a breeze. In Palmer I struggled to find a nice place to pump without having to use a bathroom stall. I use an alcove for an elevator that is not used at our office. It works fine, but it not the ideal situation. The hardest thing for me with pumping is finding the time to pump three times a day. I have averaged two pumping a day due to my work schedule. Fortunately my son sleeps through the night, so I am able to pump late at night to make up for the times I miss during the day. It seems like 15 minutes would not be hard to find in a work day, but it is.

Thanks
LaQuita

Be a better friend, newshound, and know-it-all with Yahoo! Mobile. Try it now.



50 State Summary of Breastfeeding Laws

Updated January 2008

Health professionals and public health officials promote breastfeeding to improve infant health. Both mothers and children benefit from breast milk. Breastfeeding helps prevent diarrhea and infections in infants. It also provides long-term preventive effects for the mother, including an earlier return to pre-pregnancy weight, reduced risk of pre-menopausal breast cancer and osteoporosis. According to the *New York Times*, about 70 percent of mothers start breastfeeding immediately after birth, but less than 20 percent of those moms are breastfeeding exclusively six months later. Healthy People 2010 objectives for the nation include increasing the proportion of mothers who breastfeed their babies in the early postpartum period to 75 percent.

Thirty-nine states have laws with language specifically allowing women to breastfeed in any public or private location (*Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Minnesota, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Utah, Tennessee, Texas, Vermont, and Wyoming*).

- Twenty-one states exempt breastfeeding from public indecency laws (*Alaska, Arizona, Arkansas, Florida, Illinois, Kentucky, Michigan, Mississippi, Montana, Nevada, New Hampshire, North Carolina, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Virginia, Washington and Wisconsin*).
- Fourteen states have laws related to breastfeeding in the workplace (*California, Connecticut, Georgia, Hawaii, Illinois, Minnesota, New Mexico, New York, Oklahoma, Oregon, Rhode Island, Tennessee, Texas, and Washington*).
- Twelve states exempt breastfeeding mothers from jury duty (*California, Idaho, Illinois, Iowa, Kansas, Kentucky, Minnesota, Mississippi, Nebraska, Oklahoma, Oregon and Virginia*).
- Four states have implemented or encouraged the development of a breastfeeding awareness education campaign (*California, Illinois, Missouri, and Vermont*).
- *Virginia* allows women to breastfeed on any land or property owned by the state.

First Letter of State A C D F G H I K L M N O R T U V W

Several states have unique laws related to breastfeeding. For instance,

- *California* and *Texas* have laws related to the procurement, processing, distribution or use of human milk.
- *Louisiana* prohibits any child care facility from discriminating against breastfed babies.
- *Maine* requires courts, when awarding parental rights and responsibilities with respect to a child, to consider whether the child is under age one, and being breastfed.
- *Maryland* exempts from the sales and use tax the sale of tangible personal property that is manufactured for the purpose of initiating, supporting or sustaining breastfeeding.
- *Mississippi* provides for regulations for child care facilities to promote breastfeeding by mothers of children being cared for in the facility.
- *Rhode Island* requires the Department of Health to prepare a consumer mercury alert notice, explaining the danger of eating mercury-contaminated fish to women who are pregnant or breastfeeding their children.

State	Summary of Statutes
Alabama	<i>Ala. Acts of 2006-526</i> Allows a mother to breastfeed her child in any public or private location.
American Samoa	
Alaska	<i>Alaska Stat. § 29.25.080 (1998)</i> prohibits a municipality from enacting an ordinance that prohibits or restricts a woman breastfeeding a child in a public or private location where the woman and child are otherwise authorized to be. The law clarifies that "lewd conduct," "lewd touching," "immoral conduct," "indecent conduct," and similar terms do not include the act of a woman breastfeeding a child in a public or private location where the woman and child are otherwise authorized to be. (SB 297)
Arizona	<i>Ariz. Rev. Stat. Ann § 41-1443 (2006)</i> Provides that indecent exposure does not include an act of breast-feeding by a mother and entitles a mother to breast-feed in any

Arkansas

public place where the mother is otherwise lawfully present.

Ark. Act No. 680 (2007) Allows a woman to breastfeed in any public or private location where other individuals are present. Also exempts breastfeeding women from indecent exposure laws.

California

Cal. Health and Safety Code § 1123360, 123361 & 1257.9 (2007) mandates the Department of Public Health to encourage breast-feeding training for mothers and infants in acute care and maternity care hospitals. The law only applies to hospitals with patient breast-feeding rates in the lowest twenty-five percent. The law also requires notification of hospital directors, improved access to lactation supports and breast pumps, and peer counseling, given that funds are available.

Cal. Lab. Code § 1030, 1031, 1032, 1033 (2001) Employers need to allow a break and provide a room for a mother who desires to milk in private.

Cal. Civil Code § 210.5 (2000) allows the mother of a breastfed child to postpone jury duty for one year and specifically eliminates the need for the mother to appear in court to request the postponement. The law also provides that the one-year period may be extended upon written request of the mother. [Chap. 266 (AB 1814)]

Cal. Health and Safety Code § 1647 (1999) declares that the procurement, processing, distribution or use of human milk for the purpose of human consumption is considered to be a rendition of service rather than a sale of human milk. [Chap. 87 (AB 532)]

Cal. Assembly Concurrent Resolution 155 (1998) encourages the state and employers to support and encourage the practice of breastfeeding, by striving to accommodate the needs of employees, and by ensuring that employees are provided with adequate facilities for breastfeeding and expressing milk for their children. The resolution memorializes the governor to declare by executive order that all state employees be provided with adequate facilities for breast feeding and expressing milk.

Cal. Civil Code § 43.3 (1997) allows a mother to breastfeed her child in any location, public or private, except the private home or residence of another, where the mother and the child are otherwise authorized to be present. (AB 157)

Cal. Assembly Concurrent Resolution 95 (1996) proclaims the week of August 1 through 7, 1996, as Breastfeeding Awareness Week.

Cal. Health and Safety Code § 123360, 123365 (1995) requires the Department of Health Services to include in its public service campaign the promotion of mother who breastfeed their infants. The law requires hospitals to make available a breastfeeding consultant or alternatively, provide information to the mother on where to receive breastfeeding information. (AB 973, AB 977)

Cal. Assembly Concurrent Resolution 41 (1995) proclaims August 1 through 7, 1995, Breastfeeding Awareness Week.

Colorado

CRS 25-6-301, 25-6-302 (2004) recognizes the benefits of breastfeeding and encourages mothers to breastfeed. The law also allows a mother to breastfeed in any place she has a right to be. (SB 88)

Connecticut

Conn. Public Act § 01-182 (2001) requires employers to provide reasonable time each day to an employee who needs to express breast milk for her infant child and to provide accommodations where an employee can express her milk in privacy. (HF 5656)

Express only

Conn. Gen. Stat. § 46a-64 (1997) prohibits places of public accommodation, resorts or amusements from restricting or limiting the right of a mother to breastfeed her child. [P.A. 97-210]

Delaware

Del. Code Ann. tit. 31 § 310 (1997) entitles a mother to breastfeed her child in any location of a place of public accommodation wherein the mother is otherwise permitted [71 Del. Laws, c. 10, § 1]

District of Columbia
Florida

Fla. Stat. § 383.016 (1994) authorizes a facility lawfully providing maternity services or newborn infant care to use the designation "baby-friendly" on its promotional materials. The facility must be in compliance with at least 80 percent of the requirements

developed by the Department of Health in accordance with UNICEF and World Health Organization baby-friendly hospital initiatives. (SB 1668)

Fla. Stat. § 383.015 (1993) allows a mother to breastfeed in any public or private location. (HB 231)

Fla. Stat. § 800.02, 800.03, 800.04 These statutes exclude breastfeeding from various sexual offenses, from the definition of an unnatural and lascivious act.

Fla. Stat. § 827.071 a mother breastfeeding her baby does not under any circumstance constitute "sexual conduct".

Georgia

Ga. Act No. 922 (2002) changes the previous law, § 31-1-9, and inserts the phrase: "The breast-feeding of a baby is an important and basic act of nurture which should be encouraged in the interests of maternal and child health. A mother may breast-feed her baby in any location where the mother and baby are otherwise authorized to be." (S.B. 221)

Ga. Code § 31-1-9 (1999) allows a mother to breastfeed in any location where she is otherwise authorized to be, provided that she "acts in a discreet and modest way." [Act 304 (SB 29)]

Ga. Code § 34-1-6 (1999) allows employers to provide daily unpaid break time for a mother to express breast milk for her infant child. Employers may also be required to make a reasonable effort to provide a private location (other than a toilet stall) in close proximity to the work place for this activity. The employer is not required to provide break time if to do so would unduly disrupt the workplace operations.

Express
only

Guam
Hawaii

Hawaii Rev. Stat. § 367-3 (1999) requires the Hawaii Civil Rights Commission to collect, assemble, and publish data concerning instances of discrimination involving breastfeeding or expressing breast milk in the workplace. Prohibits employers to forbid an employee from expressing breast milk during any meal period or other break period. (HB 266)

Express
only

Hawaii Rev. Stat. § 378-2 (1999) makes it discriminatory deny the full and equal enjoyment of the goods, services, facilities, privileges, advantages, and accommodations of a place of public accommodations to a woman because she is breastfeeding a child. (HB 2774)

HRS 489.21, HRS 489-22 Discriminatory practices; breast feeding. It is a discriminatory practice to deny, or attempt to deny, the full and equal enjoyment of the goods, services, facilities, privilege, advantages, and accommodations of a place of public accommodations to a woman because she is breast feeding a child.

Idaho

Idaho Code § 2-209 (1996) allows nursing mothers to postpone jury service until she is no longer nursing the child.

Idaho Code § 2-212 A person who is not disqualified for jury service under section 2-209, Idaho Code, may have jury service postponed by the court or the jury commissioner only upon a showing of undue hardship, extreme inconvenience, or public necessity, or upon a showing that the juror is a mother breastfeeding her child.

Ill. P.A. 94-391 (2005) Amends the Jury Act. Provides that any mother nursing her child shall, upon her request, be excused from jury duty.

Illinois

Ill. P.A. 93-942 (2004) Creates the Right to Breastfeed Act. Provides that a mother may breastfeed her baby in any location, public or private, where the mother is otherwise authorized to be; a mother who breastfeeds in a place of worship shall follow the appropriate norms within that place of worship. (SB 3211)

Ill. Law, P.A. 92-68 (2001) creates the Nursing Mothers in the Workplace Act, and requires that employers provide reasonable unpaid break time each day to employees who need to express breast milk. The law also requires employers to make reasonable efforts to provide a room or other location, other than a toilet stall, where an employee can express her milk in privacy. (SB 542).

Ill. Rev. Stat. ch. 20 § 2310/55.84 (1997) allows the Department of Public Health to

conduct an information campaign for the general public to promote breastfeeding of infants by their mothers. The law allows the department to include the information in a brochure that shares other information with the general public and is distributed free of charge. [P.A. 90-244]

Indiana

Ill. Rev. Stat. ch. 720 § 5/11-9 (1995) clarifies that breastfeeding of infants is not an act of public indecency. (SB 190)

Ind. Code § 16-35-6 allows a woman to breastfeed her infant anywhere that the law allows her to be. (HB 1510)

Iowa

Iowa Code § 607A.5 (1994) allows a woman to be excused from jury service if she submits written documentation verifying, to the court's satisfaction, that she is the mother of a breastfed child and is responsible for the daily care of the child.

Kansas

Iowa Code § 135.30A (2002) a woman may breast-feed the woman's own child in any public place where the woman's presence is otherwise authorized.

2006 Kan. Sess. Laws, Chap. 11 excuses a nursing mother from jury duty. (H.B. 2284)

Kentucky

Kan. Acts of 2005 Allows a woman to breastfeed in "any place she has a right to be." Also allows breastfeeding to be an excuse from jury service.

2006 Ky. Acts, Chap. 80 Permits a mother to breastfeed her baby or express breastmilk in any public or private location; requires that breastfeeding may not be considered an act of public indecency, indecent exposure, sexual conduct, lewd touching or obscenity; prohibits a municipality from enacting an ordinance that prohibits or restricts breastfeeding in a public or private place. (SB 106)

Louisiana

Ky. Act No. 102 (2007) Directs judges at all levels of the court to excuse women who are breastfeeding or expressing breast milk from jury service until the child no longer nursing. (S.B. 111)

La. House Concurrent Resolution 35 (2002) establishes a joint study of requiring insurance coverage for outpatient lactation support for new mothers.

LRS 51. 2247.1 (2001) states that a mother may breastfeed her baby in any place of public accommodation, resort, or amusement, and clarifies that breastfeeding is not a violation of law. (HB 377)

Maine

LRS 46. 1409 B 5 prohibits any child care facility from discriminating against breastfed babies. (HB 233)

Me. Rev. Stat. Ann. tit. 5, § 4634 (2001) amends the Maine Human Rights Act to declare that a mother has the right to breastfeed her baby in any location, whether public or private, as long as she is otherwise authorized to be in that location. [Public Law No. 206 (LD 1396)]

Me. Rev. Stat. Ann. tit. 19-a § 1653 (1999) requires the court, in making an award of parental rights and responsibilities with respect to a child, to apply the standard of the best interest of the child. In making decisions regarding the child's residence and parent-child contact, the court must consider the primary the safety and well being of the child, and consider whether the child is under one year of age, and being breastfed. [Public Law No. 702 (HB 2774)]

Maryland

Md. Code § 20-801 Laws, Chap. 369 (2003) permits a woman to breastfeed her infant in any public or private place and prohibits anyone from restricting or limiting this right. (SB223)

Massachusetts

Michigan

Mich. Comp. Laws §§ 41.181, 67.1aa, and 117.4i (1994) states that public nudity laws do not apply to a woman breastfeeding a child.

Minnesota

Minn. Laws, Chap. 269 (2000) allows a nursing mother, upon request, to be excused from jury service if she is not employed outside of her home and if she is responsible for the daily care of the child. (HF 1865)

Minn. Stat. § 181.939 (1998) requires employers to provide daily unpaid break time for a mother to express breast milk for her infant child. Employers are also required to make a reasonable effort to provide a private location (other than a toilet stall) in close proximity to the work place for this activity. (SB 2751)

Express only

Mississippi

Minn. Stat. § 145.905 a mother may breastfeed in any location, public or private, where the mother and child are otherwise authorized to be, irrespective of whether the nipple of the mother's breast is uncovered during or incidental to the breastfeeding.

Miss. Code Ann. Ch. 5 § 13-5-23 (2006) Provides that breast-feeding mothers may be excused from serving as jurors.

Miss. Code Ann. Ch. 25 § 17-25-7/9 (2006) Prohibits against ordinance restricting a woman's right to breastfeed; provides that a mother may breastfeed her child in any location she is otherwise authorized to be (S.B. 2419).

Miss. Code Ann. Ch. 20 § 43-20-31 (2006) Provides for regulations for child care facilities to promote breastfeeding by mothers of children being cared for in the facility.

Miss. Code Ann. Ch. 1 § 71-1-55 (2006) Prohibits against discrimination toward's breast-feeding mothers who use lawful break-time to express milk.

Miss. Code Ann. Ch. 29 § 97-29-31 (2006) Requires that a woman breastfeeding may not be considered an act of indecent exposure.

Miss. Code Ann. Ch. 35 § 97-35-3/7/11/15 (2006) Requires that breastfeeding may not be considered an act of disorderly conduct, indecent exposure, or disturbance of the public peace.

Missouri

Mo. Rev. Stat. § 191.915 (1999) requires hospitals and ambulatory surgical centers to provide new mothers with information on breastfeeding, the benefits to the child and information on local breastfeeding support groups or a consultation. The law requires physicians who provide obstetrical or gynecological consultation to inform patients about the postnatal benefits of breastfeeding. The law requires the Department of Health to provide and distribute written information on breastfeeding and the health benefits to the child. (SB 8)

Mo. Rev. Stat. § 191.918 (1999) allows a mother, with as much discretion as possible, to breastfeed her child in any public or private location.

Montana

Mont. Code Ann. § 50-19-501 (1999) states that the breastfeeding of a child in any location, public or private, where the mother otherwise has a right to be is legal and cannot be considered a nuisance, indecent exposure, sexual conduct, or obscenity. (SB 398)

Nebraska

Neb. Rev. Stat. § 25-1601-4 (2004) state that a nursing mother is excused from jury duty until she is no longer breastfeeding; nursing mother must file qualification form supported by certificate from her physician requesting exemption.

Nevada

Nev. Rev. Stat. § 201.232, 201.210, 201.220 (1995) states that the breastfeeding of a child in any location, public or private, is not considered a violation of indecent exposure laws. (SB 317)

New Hampshire

N.H. Rev. Stat. Ann. § 121:1, et seq. (1999) states that breastfeeding does not constitute indecent exposure and that limiting or restricting a mother's right to breastfeed is discriminatory. (HB 441)

New Jersey

N.J. Rev. Stat. § 26:4B-4/ 5 (1997) entitles a mother to breastfeed her baby in any location, including public accommodations, resorts or amusement parks. Failure to comply with the law may result in a fine.

New Mexico

N.M. Stat. Ann. § 28-20-1 (1999) permits a mother to breastfeed her child in any public or private location where she is otherwise authorized to be. (SB 545)

N.M. Chapter No. 2007-18 Requires employers to provide a clean, private place (not a bathroom) for employees who are breastfeeding to pump. Also requires that the employee be given breaks to express milk, but does not require that she be paid for this time.

Express
only
↓

New York

N.Y. Chapter No. 547 (2007) States that employers must allow breastfeeding mothers reasonable, unpaid break times to express milk and make a reasonable attempt to provide a private location for her to do so. Prohibits discrimination against breastfeeding mothers.

N.Y. Civil Rights Law § 79-e (1994) permits a mother to breastfeed her child in any public or private location. (SB 3999)

North Carolina

N.C. Gen. Stat. § 14-190.9 (1993) states that a woman is allowed to breastfeed in

any public or private location, and she is not in violation of indecent exposure laws. (HB 1143)

North Dakota
Ohio

Ohio Rev. Code Ann. Sec. 3781.55 (2005) A mother is entitled to breast-feed her baby in any location of a place of public accomodation wherein the motner otherwise is permitted.

Oklahoma

Okl. Stat. tit. 40 § Sec. 435 (2006) Provides that an employer may provide reasonable unpaid break time each day to an employee who needs to breast-feed or express breastmilk for her child; requires the Department of Health to issue periodic reports on breast-feeding rates, complaints received and benefits reported by both working breast-feeding mothers and employers. (HB 2358)

Both
BF &
Express

2004 OK Laws, Chap. 332 allows a mother to breastfeed her child in any location that she is authorized to be and exempts her from the crimes and punishments listed in the penal code of the state of Oklahoma. Additionally, mothers who are breastfeeding can request to be exempt from service as jurors. (HB 2102)

Oregon

Or. Rev. Stat. § 109.001 (1999) allows a woman to breastfeed in a public place. (SB 744)

Or. Rev. Stat. §§ 10.050 (1999) excuses a woman from acting as a juror if the woman is breastfeeding a child. A request from the woman must be made in writing. (SB 1304)

2007 Or. Laws, Chap. (HB2372) allows women to have unpaid 30 minute breaks during each 4 hour shift to breastfeed or pump. Allows certain exemptions for employers.

Both

Pennsylvania

2007 Pa. Laws, Act 28 allows mothers to breastfeed in public without penalty. Breastfeeding may not be considered a nuisance, obscenity or indecent exposure under this law. (SB34)

Rhode Island

R.I. Gen. Laws § 23-13.2-1 (2003) calls for employers to provide a safe private place for an employee to breastfeed her child and express breast milk. (HB 5507/SB 151)

Both

R.I. Gen. Laws § 23-72-1 (2001) requires the Department of Health to prepare a consumer mercury alert notice. The notice shall explain the danger of eating mercury-contaminated fish to women who are pregnant or breastfeeding their children. (HB 6112)

R.I. Gen. Laws § 11-45-1 (1998) excludes mothers engaged in breastfeeding from disorderly conduct laws. (HB 8103, SB 2319)

South Carolina

S.C. Code Ann. § 20-7-97-116 (2005) Provides that a woman may breastfeed her child in any location where the mother is authorized and that the act of breastfeeding is not considered indecent exposure.

South Dakota

SD § 22-22-24.1 (2002) exempts mothers who are breastfeeding from indecency laws.

Tennessee

Tenn. Code Ann. § 68-58-101 (2006) Permits a mother to breastfeed an infant 12 months or younger in any location, public or private, that the mother is authorized to be, prohibits local governments from criminalizing (under public indecency or sexual conduct laws) or restricting breastfeeding (H.B. 3582).

Tenn. Code Ann. § 50-1-305 (1999) requires employers to provide daily unpaid break time for a mother to express breast milk for her infant child. Employers are also required to make a reasonable effort to provide a private location (other than a toilet stall) in close proximity to the work place for this activity. (SB 1856)

Express
only

Texas

Tex. Health Code § 161.071 (2001) calls for the Department of Health to establish minimum guidelines for the procurement, processing, distribution, or use of human milk by donor milk banks. (HB 391)

Tex. Health Code Ann. § 165.001, et seq. (1995) authorizes a woman to breastfeed her child in any location and provides for the use of a "mother-friendly" designation for employers who have policies supporting work site breastfeeding. (HB 340, HB 359)

Both -
not required
("encourage")

U.S. Virgin Islands
Utah

Utah Code Ann. § 17-15-25 (1995) states that city and county governing bodies may not inhibit a woman's right to breastfeed in public.

Vermont

Utah Code Ann. § 76-10-1229.5 (1995) states that a breastfeeding woman is not in violation of any obscene or indecent exposure laws. (H.B. 262)

Vt. Acts, Chap. No. 117 (2002) finds that breastfeeding a child is an important, basic and natural act of nurture that should be encouraged in the interest of enhancing maternal, child and family health. The law allows a mother may breastfeed her child in any place of public accommodation in which the mother and child would otherwise have a legal right to be. The law directs the human rights commission to develop and distribute materials that provide information regarding a woman's legal right to breastfeed her child in a place of public accommodation. (S.B. 156)

Virginia

Va. Code 2.2-1147.1 (2002) guarantees a woman the right to breast-feed her child on any property owned, leased or controlled by the state. The bill also stipulates that childbirth and related medical conditions specified in the Virginia Human Rights Act include activities of lactation, including breast-feeding and expression of milk by a mother for her child. (H.B. 1264)

HJ 145 (2002) Encourages employers to recognize the benefits of breastfeeding and to provide unpaid break time and appropriate space for employees to breast-feed or express milk.

Va. Code § 18.2-387 (1994) exempts mothers engaged in breastfeeding from indecent exposure laws.

Va. Chapter No. 195 (2005) Provides that a mother who is breast-feeding a child may be exempted from jury duty upon her request. The mother need not be "necessarily and personally responsible for a child or children 16 years of age or younger requiring continuous care . . . during normal court hours" as the existing statute provides.

Washington

Wash. Revised Code § 9A.88.010 (2001) states that the act of breastfeeding or expressing breast milk is not indecent exposure. (HB 1590)

Wash. Revised Code § 43.70.640 (2001) allows any employer (governmental and private) to use the designation of "infant-friendly" on its promotional materials if the employer follows certain requirements. [Chap. 88]

West Virginia

Wisconsin

Wis. Stat. §§ 944.17(3), 944.20(2) and 948.10(2) (1995) provides that breastfeeding mothers are not in violation of criminal statutes of indecent or obscene exposure. (AB 154)

Wyoming

Wyo. House Joint Resolution 5 (2003) encourages breastfeeding and recognizes the importance of breastfeeding to maternal and child health. The resolution also commends employers, both in the public and private sectors, who provide accommodations for breastfeeding mothers.

Wyo. Chapter No. 166 (2007) Exempts breastfeeding mothers from public indecency laws and gives breastfeeding women the right to nurse anyplace that they otherwise have a right to be. (H.B. 105)

Both - but not required ("encourage")

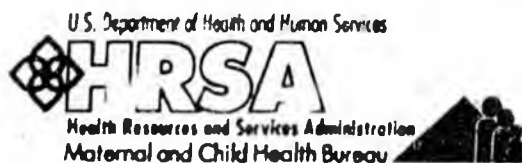
Both - not required ("encourage")

Sources: National Conference of State Legislatures and StateNet 2007.

Note: List may not be comprehensive, but is representative of state laws that exist. NCSL appreciates additions and corrections.

Top of Page | Maternal and Child Health Home Page | MCH Resources | Health Program Home Page

This site is made possible by project, MCU 1 H03 MC 00017, from the Maternal and Child Health Bureau (Title V, Social Security Act), Health Resources and Services Administration, U.S. Department of Health and Human Services.



AMERICAN ACADEMY OF PEDIATRICS

Work Group on Breastfeeding

Breastfeeding and the Use of Human Milk

ABSTRACT. This policy statement on breastfeeding replaces the previous policy statement of the American Academy of Pediatrics, reflecting the considerable advances that have occurred in recent years in the scientific knowledge of the benefits of breastfeeding, in the mechanisms underlying these benefits, and in the practice of breastfeeding. This document summarizes the benefits of breastfeeding to the infant, the mother, and the nation, and sets forth principles to guide the pediatrician and other health care providers in the initiation and maintenance of breastfeeding. The policy statement also delineates the various ways in which pediatricians can promote, protect, and support breastfeeding, not only in their individual practices but also in the hospital, medical school, community, and nation.

ABBREVIATION: AAP, American Academy of Pediatrics.

HISTORY AND INTRODUCTION

From its inception, the American Academy of Pediatrics (AAP) has been a staunch advocate of breastfeeding as the optimal form of nutrition for infants. One of the earliest AAP publications was a 1948 manual, *Standards and Recommendations for the Hospital Care of Newborn Infants*. This manual included a recommendation to make every effort to have every mother nurse her full-term infant. A major concern of the AAP has been the development of guidelines for proper nutrition for infants and children. The activities, statements, and recommendations of the AAP have continuously promoted breastfeeding of infants as the foundation of good feeding practices.

THE NEED

Extensive research, especially in recent years, documents diverse and compelling advantages to infants, mothers, families, and society from breastfeeding and the use of human milk for infant feeding. These include health, nutritional, immunologic, developmental, psychological, social, economic, and environmental benefits.

Human milk is uniquely superior for infant feeding and is species-specific; all substitute feeding options differ markedly from it. The breastfed infant is the reference or normative model against which all alternative feeding methods must be measured with regard to growth, health, development, and all other short- and long-term outcomes.

Epidemiologic research shows that human milk and breastfeeding of infants provide advantages with regard to general health, growth, and development, while significantly decreasing risk for a large number of acute and chronic diseases. Research in the United States, Canada, Europe, and other developed countries, among predominantly middle-class populations, provides strong evidence that human milk feeding decreases the incidence and/or severity of diarrhea,¹⁻⁵ lower respiratory infection,⁶⁻¹¹ otitis media,¹⁰⁻¹⁴ bacteremia,^{15,16} bacterial meningitis,^{13,17} botulism,¹⁸ urinary tract infection,¹⁹ and necrotizing enterocolitis.^{20,21} There are a number of studies that show a possible protective effect of human milk feeding against sudden infant death syndrome,²²⁻²⁴ insulin-dependent diabetes mellitus,²⁵⁻²⁷ Crohn's disease,^{28,29} ulcerative colitis,²⁹ lymphoma,^{30,31} allergic diseases,³²⁻³⁴ and other chronic digestive diseases.¹⁵⁻¹⁷ Breastfeeding has also been related to possible enhancement of cognitive development.^{35,36}

There are also a number of studies that indicate possible health benefits for mothers. It has long been acknowledged that breastfeeding increases levels of oxytocin, resulting in less postpartum bleeding and more rapid uterine involution.³⁷ Lactational amenorrhea causes less menstrual blood loss over the months after delivery. Recent research demonstrates that lactating women have an earlier return to prepregnant weight,³⁸ delayed resumption of ovulation with increased child spacing,³²⁻³⁴ improved bone remineralization postpartum³⁹ with reduction in hip fractures in the postmenopausal period,⁴⁰ and reduced risk of ovarian cancer⁴¹ and premenopausal breast cancer.⁴²

In addition to individual health benefits, breastfeeding provides significant social and economic benefits to the nation, including reduced health care costs and reduced employee absenteeism for care attributable to child illness. The significantly lower incidence of illness in the breastfed infant allows the parents more time for attention to siblings and other family duties and reduces parental absence from work and lost income. The direct economic benefits to the family are also significant. It has been estimated that the 1993 cost of purchasing infant formula for the first year after birth was \$855. During the first 6 weeks of lactation, maternal caloric intake is no greater for the breastfeeding mother than for the nonlactating mother.⁴³⁻⁴⁵ After that period, food and fluid intakes are greater, but the cost of this increased caloric intake is about half the cost of purchasing formula. Thus, a saving of ~\$400 per child

The recommendations in this statement do not indicate an exclusive or alternative treatment or source of medical care. Variations, refinements, and individualization of care are necessary when appropriate.

PEDIATRICS (ISSN 0031-9173) Copyright © 1997 by the American Academy of Pediatrics.

for food purchases can be expected during the first year.⁵²

Despite the demonstrated benefits of breastfeeding, there are some situations in which breastfeeding is not in the best interest of the infant. These include the infant with galactosemia,⁵³ the infant whose mother uses illegal drugs,⁵⁴ the infant whose mother has untreated active tuberculosis, and the infant in the United States whose mother has been infected with the human immunodeficiency virus.⁵⁵ In countries with populations at increased risk for other infectious diseases and nutritional deficiencies resulting in infant death, the mortality risks associated with not breastfeeding may outweigh the possible risks of acquiring human immunodeficiency virus infection.⁵⁶ Although most prescribed and over-the-counter medications are safe for the breastfed infant, there are a few medications that mothers may need to take that may make it necessary to interrupt breastfeeding temporarily. These include radioactive isotopes, antimetabolites, cancer chemotherapy agents, and a small number of other medications. Excellent books and tables of drugs that are safe or contraindicated in breastfeeding are available to the physician for reference, including a publication from the AAP.⁵⁷

THE PROBLEM

Increasing the rates of breastfeeding initiation and duration is a national health objective and one of the goals of Healthy People 2000. The target is to "increase to at least 75% the proportion of mothers who breastfeed their babies in the early postpartum period and to at least 50% the proportion who continue breastfeeding until their babies are 5 to 6 months old."⁵⁸ Although breastfeeding rates have increased slightly since 1990, the percentage of women currently electing to breastfeed their babies is still lower than levels reported in the mid-1980s and is far below the Healthy People 2000 goal. In 1995, 59.4% of women in the United States were breastfeeding either exclusively or in combination with formula feeding at the time of hospital discharge; only 21.6% of mothers were nursing at 6 months, and many of these were supplementing with formula.⁵⁹

The highest rates of breastfeeding are observed among higher-income, college-educated women >30 years of age living in the Mountain and Pacific regions of the United States.⁶⁰ Obstacles to the initiation and continuation of breastfeeding include physician apathy and misinformation,^{61,62} insufficient prenatal breastfeeding education,⁶³ disruptive hospital policies,⁶⁴ inappropriate interruption of breastfeeding,⁶⁵ early hospital discharge in some populations,⁶⁶ lack of timely routine follow-up care and postpartum home health visits,⁶⁷ maternal employment⁶⁸ (especially in the absence of workplace facilities and support for breastfeeding),⁶⁹ lack of broad societal support,⁷⁰ media portrayal of bottle-feeding as normative,⁷¹ and commercial promotion of infant formula through distribution of hospital discharge packs, coupons for free or discounted formula, and television and general magazine advertising.⁷²

The AAP identifies breastfeeding as the ideal

method of feeding and nurturing infants and recognizes breastfeeding as primary in achieving optimal infant and child health, growth, and development. The AAP emphasizes the essential role of the pediatrician in promoting, protecting, and supporting breastfeeding and recommends the following breastfeeding policies.

RECOMMENDED BREASTFEEDING PRACTICES

1. Human milk is the preferred feeding for all infants, including premature and sick newborns, with rare exceptions.⁷³⁻⁷⁵ The ultimate decision on feeding of the infant is the mother's. Pediatricians should provide parents with complete, current information on the benefits and methods of breastfeeding to ensure that the feeding decision is a fully informed one. When direct breastfeeding is not possible, expressed human milk, fortified when necessary for the premature infant, should be provided.^{76,77} Before advising against breastfeeding or recommending premature weaning, the practitioner should weigh thoughtfully the benefits of breastfeeding against the risks of not receiving human milk.
2. Breastfeeding should begin as soon as possible after birth, usually within the first hour.⁷⁸⁻⁸² Except under special circumstances, the newborn infant should remain with the mother throughout the recovery period.^{83,84} Procedures that may interfere with breastfeeding or traumatize the infant should be avoided or minimized.
3. Newborns should be nursed whenever they show signs of hunger, such as increased alertness or activity, mouthing, or rooting.⁸⁵ Crying is a *late* indicator of hunger.⁸⁶ Newborns should be nursed approximately 8 to 12 times every 24 hours until satiety, usually 10 to 15 minutes on each breast.^{87,88} In the early weeks after birth, nondemanding babies should be aroused to feed if 4 hours have elapsed since the last nursing.^{89,90} Appropriate initiation of breastfeeding is facilitated by continuous rooming-in.⁹¹ Formal evaluation of breastfeeding performance should be undertaken by trained observers and fully documented in the record during the first 24 to 48 hours after delivery and again at the early follow-up visit, which should occur 48 to 72 hours after discharge. Maternal recording of the time of each breastfeeding and its duration, as well as voidings and stoolings during the early days of breastfeeding in the hospital and at home, greatly facilitates the evaluation process.
4. No supplements (water, glucose water, formula, and so forth) should be given to breastfeeding newborns unless a medical indication exists.^{92,93} With sound breastfeeding knowledge and practices, supplements rarely are needed. Supplements and pacifiers should be avoided whenever possible and, if used at all, only after breastfeeding is well established.^{94,95}
5. When discharged 48 hours after delivery, all breastfeeding mothers and their newborns should be seen by a pediatrician or other knowledgeable health care practitioner when the newborn is 2 to 4 days of age. In addition to determination of

infant weight and general health assessment, breastfeeding should be observed and evaluated for evidence of successful breastfeeding behavior. The infant should be assessed for jaundice, adequate hydration, and age-appropriate elimination patterns (at least six urinations per day and three to four stools per day) by 5 to 7 days of age. All newborns should be seen by 1 month of age.⁹⁹

6. Exclusive breastfeeding is ideal nutrition and sufficient to support optimal growth and development for approximately the first 6 months after birth.¹⁰⁰ Infants weaned before 12 months of age should not receive cow's milk feedings but should receive iron-fortified infant formula.¹⁰¹ Gradual introduction of iron-enriched solid foods in the second half of the first year should complement the breast milk diet.^{102,103} It is recommended that breastfeeding continue for at least 12 months, and thereafter for as long as mutually desired.¹⁰⁴
7. In the first 6 months, water, juice, and other foods are generally unnecessary for breastfed infants.^{105,106} Vitamin D and iron may need to be given before 6 months of age in selected groups of infants (vitamin D for infants whose mothers are vitamin D-deficient or those infants not exposed to adequate sunlight; iron for those who have low iron stores or anemia).¹⁰⁷⁻¹⁰⁹ Fluoride should not be administered to infants during the first 6 months after birth, whether they are breast- or formula-fed. During the period from 6 months to 3 years of age, breastfed infants (and formula-fed infants) require fluoride supplementation only if the water supply is severely deficient in fluoride (<0.3 ppm).¹¹⁰
8. Should hospitalization of the breastfeeding mother or infant be necessary, every effort should be made to maintain breastfeeding, preferably directly, or by pumping the breasts and feeding expressed breast milk, if necessary.

ROLE OF PEDIATRICIANS IN PROMOTING AND PROTECTING BREASTFEEDING

To provide an optimal environment for breastfeeding, pediatricians should follow these recommendations:

1. Promote and support breastfeeding enthusiastically. In consideration of the extensive published evidence for improved outcomes in breastfed infants and their mothers, a strong position on behalf of breastfeeding is justified.
2. Become knowledgeable and skilled in both the physiology and the clinical management of breastfeeding.
3. Work collaboratively with the obstetric community to ensure that women receive adequate information throughout the perinatal period to make a fully informed decision about infant feeding. Pediatricians should also use opportunities to provide age-appropriate breastfeeding education to children and adults.
4. Promote hospital policies and procedures that facilitate breastfeeding. Electric breast pumps

and private lactation areas should be available to all breastfeeding mothers in the hospital, both on ambulatory and inpatient services. Pediatricians are encouraged to work actively toward eliminating hospital practices that discourage breastfeeding (eg, infant formula discharge packs and separation of mother and infant).

5. Become familiar with local breastfeeding resources (eg, Special Supplemental Nutrition Program for Women, Infants, and Children clinics, lactation educators and consultants, lay support groups, and breast pump rental stations) so that patients can be referred appropriately.¹¹¹ When specialized breastfeeding services are used, pediatricians need to clarify for patients their essential role as the infant's primary medical care taker. Effective communication among the various counselors who advise breastfeeding women is essential.
6. Encourage routine insurance coverage for necessary breastfeeding services and supplies, including breast pump rental and the time required by pediatricians and other licensed health care professionals to assess and manage breastfeeding.
7. Promote breastfeeding as a normal part of daily life, and encourage family and societal support for breastfeeding.
8. Develop and maintain effective communications and collaboration with other health care providers to ensure optimal breastfeeding education, support, and counsel for mother and infant.
9. Advise mothers to return to their physician for a thorough breast examination when breastfeeding is terminated.
10. Promote breastfeeding education as a routine component of medical school and residency education.
11. Encourage the media to portray breastfeeding as positive and the norm.
12. Encourage employers to provide appropriate facilities and adequate time in the workplace for breast-feeding.

CONCLUSION

Although economic, cultural, and political pressures often confound decisions about infant feeding, the AAP firmly adheres to the position that breastfeeding ensures the best possible health as well as the best developmental and psychosocial outcomes for the infant. Enthusiastic support and involvement of pediatricians in the promotion and practice of breastfeeding is essential to the achievement of optimal infant and child health, growth, and development.

WORK GROUP ON BREASTFEEDING, 1996 TO 1997
Lawrence M. Gartner, MD, Chairperson
Linda Sue Black, MD
Antonette P. Eaton, MD
Ruth A. Lawrence, MD
Audrey J. Naylor, MD, DrPH
Marianne E. Neufert, MD
Donna O'Hare, MD
Richard J. Schanler, MD

Comparison of Maternal Absenteeism and Infant Illness Rates Among Breast-feeding and Formula-feeding Women in Two Corporations

Rona Cohen, Marsha B. Mrtek, Robert G. Mrtek

Abstract

Purpose. A comparison was made between breast-feeding and formula-feeding among employed mothers. Absenteeism directly related to child care was examined.

Design. This quasi-experimental study followed convenience samples of breast-feeding and formula-feeding mothers until their infants were weaned or reached 1 year of age.

Setting. Two corporations with established lactation programs were used. One had approximately 100 births annually among 2400 female employees, and the other had approximately 30 births annually among 1200 female employees.

Subjects. A sample of 101 participants, 59 feeding breast milk and 42 using commercial formula, was composed of employees returning from maternity leave for a medically uncomplicated birth.

Intervention. The programs provided counseling by a lactation professional for all participants and facilities to collect and store breast milk.

Measures. Confidential participant diaries provided descriptive data on infant illnesses and related absenteeism that the lactation consultant verified with health care providers and through employer attendance records.

Analysis. Attribute counts of illnesses and absenteeism were reported as percentages. Single degree of freedom χ^2 tests were used to compare rates between nutrition groups.

Results. Approximately 28% of the infants in the study had no illnesses; 86% of these were breast-fed and 14% were formula-fed. Men illnesses occurred 25% of all 1-day maternal absences were among breast-fed babies and 75% were among the formula-fed group.

Conclusions. In this study fewer and less severe infant illnesses and less maternal absenteeism was found in the breast-feeding group. This was not an experimental study. Participants were self-selected, and a comparison group was used rather than a true control group. Corroboration of these findings from larger experimental studies is needed to generalize beyond these groups. (*Am J Health Promot* 1995;10[21]:148-53)

Key Words: Corporate Lactation Program, Breast-feeding Duration, Maternal Absenteeism

INTRODUCTION

In American society the mother has traditionally borne the responsibility for the health care of her children. The dramatic increase in the participation rate of women in the work force, from 28% in 1940 to 56.6% in 1988, has not significantly altered that tradition.^{1,2} By 1990, 71% of the women employed in the civilian labor force had children, with 53% returning to the workplace before their children reached 1 year of age.¹

At the same time the number of employed women has been increasing, the tradition of the extended family has been waning. As a consequence, most children of employed mothers are cared for by nonfamily members either in group care or in-home arrangements. Day-care providers who are not family members seldom assume responsibility for a child's health care. Even in group care situations in which one sick child can pose a serious threat to the health of all the children, the family is called on to deal with an episode of illness. In these circumstances, it is usually the mother who handles any emergencies—often to the detriment of her attendance record at work.⁴

This parenting "fact of life" has fiscal implications for companies. Permitting employees to take time off for family responsibilities may result in lower productivity, but the consequences of not doing so can be expensive as well. An employee who is required to remain at the worksite while worried about a sick child may be less productive than one whose

Rona Cohen, RN, MN, FPNP, CLE, is Assistant Clinical Professor, Maternal Child Health Division, School of Nursing, University of California, Los Angeles, California. Marsha B. Mrtek, PhD, is Research Consultant for Medela, Inc., McHenry, Illinois. Robert G. Mrtek, PhD, is Professor, Medical Education, College of Medicine, University of Illinois, Chicago, Illinois.

Send reprint requests to Rona Cohen, RN, P.O. Box 6241, Beverly Hills, CA 90212.

This manuscript was submitted June 2, 1994, and revised version accepted for publication June 4, 1995.

Copyright © 1995 by American Association of Health Promotion Specialists, Inc. 0890-4065/95/100148-06\$06.00

entire attention can be focused on the job. To the extent that an employee finds no available compromise in making choices on the basis of concern either for family or for employment, job satisfaction may be eroded. By displaying a lack of concern about the family needs of employees, the employer may sacrifice a measure of loyalty that might eventually result in increased employee turnover and the attendant upheavals and expenses.

It has frequently been demonstrated that infants who are fed breast milk rather than formula for the first 5 to 6 months of life exhibit more robust health.⁵⁻⁷ In addition to other health advantages, breast milk has been shown to decrease the incidence of gastrointestinal illnesses and otitis media.^{5,8-10} These are common illnesses among infants that, if left untreated, can lead to hospitalization.

At least 50% of women who are employed when they become pregnant return to the labor force by the time their children are 3 months old.¹¹ Continuation of breast-feeding among these women after the time they return to work could have important consequences for infant health. National norms, however, indicate that only 10% of employed mothers continue feeding their infants breast milk for the recommended first 6 months of life.¹²

Because infant illness is a frequent cause of absenteeism among employed mothers, programs that aim to improve infant health may also bring about a reduction in maternal absenteeism. An important component of the evaluation of corporate lactation programs is an assessment of their direct and indirect costs and benefits. A previous study conducted in the same setting as this one demonstrated that corporate lactation programs can be effective in enabling participants to feed their infants breast milk for the first 6 months at the same rate as women not employed outside the home.¹¹ The purpose of this study is to examine the possibility that feeding breast milk can alter the frequency and/or severity of infant illnesses and therefore reduce that portion of absenteeism among employed mothers directly attributable to the necessity of caring for a sick child.

METHODS

Design

A descriptive longitudinal study of quasi-experimental design was used to investigate the relationship between maternal absenteeism necessitated by infant illness and the use of commercial formula or breast milk as the infant's nutritional source. The dependent variables were infant illness episodes, incidence and length of maternal absences from work, illness diagnosis, and severity of the disease. The independent variable was the infants' source of nutrition, either commercial formula or breast milk. Each mother and infant was observed until weaning or for 1 year after birth to provide comparable data.

Sample

The study was conducted at two corporations with on-site lactation programs. One was a utilities company with 11,000 employees, 22% of whom were female. Approximately 100 births per year occur in this company. The second was an aeronautics corporation with 3,900 employees, 31% of whom were female. Approximately 30 births per year occur in this company.

All participants had medically uncomplicated deliveries between June 1988 and June 1990. One group of women breast-fed either fully or partially with no more than two supplementary bottles of formula per day. While at work, these women collected and stored breast milk through the lactation program at their company. A second nonequivalent group of women fed their infants commercial formula. Convenience samples were obtained from these two employee cohorts. Volunteers completed a questionnaire on return from maternity leave and were assigned to groups sequentially as questionnaires were returned.

A total of 101 mothers were studied in the two companies; 59 fed breast milk, and 42 used commercial formula. Fifty-six women from the utility company volunteered; 28 fed breast milk, and 28 fed formula. At the aeronautics company, 31 breast-feeding and 14 formula-feeding mothers volunteered.

The participants closely matched

the profile described by Ryan and Martinez¹² for individuals most likely to combine full-time employment and breast-feeding: women older than 25 years of age, well-educated (college), in a higher income group (>\$25,000), and living in the western portion of the United States. Two of the women (one in each nutrition category) were younger than 25 years of age. All but one participant had at least a high school diploma. More women with higher education (college and advanced degrees) were found in the breast-feeding group. More than 80% of the participants who chose breast-feeding earned at least \$30,000 annually; 26% earned more than \$60,000. Among formula-feeding participants, 40% earned \$30,000 or more, and 15% earned more than \$60,000. The formula-feeding group was 74% Asian or Hispanic and 26% white, African-American, and others. The breast-feeding group included 28% Asian or Hispanic and 72% white, African-American, or others. The birth order was almost evenly divided between first or second. All but two of the women were married.

Measurement

Demographic data, including age; ethnic background; income level; education; marital status; number, age, and gender of children; and family members' smoking habits, were obtained from the questionnaires used to identify the study sample. The questionnaires also provided information specifically related to the pregnancy such as prematurity, gestational age of the infant, medical problems encountered, length of maternity leave, use of breast milk or formula, infant's age when the mother returned to work, and type of child care.

Descriptive data regarding infant illnesses were reported retrospectively from confidential diaries maintained by the women as a condition of participation. For the purpose of this study, an illness episode was defined as the occurrence of one or more symptoms lasting for more than 1 day. Unusual patterns of infant behavior (such as "fussiness") lasting for 1 day or less, without other accompanying symptoms, were not counted.¹³ Infant illness information was verified by a health

care provider in all except 21 of the 205 episodes reported during this study. Six of these were in the breast-feeding group, and 15 were in the formula-feeding group. Data were gathered for breast-fed babies until they stopped using breast milk or until they reached 1 year of age, whichever period was shorter. Formula-fed babies were followed up until 1 year of age. The following definitions were applied.^{15,16}

- Upper respiratory infections were specified as cold, cough, bronchitis, or ear infection when it occurred as part of a cold.
- Gastrointestinal infections referred specifically to diarrhea.
- Otitis media was limited to a moderately severe ear infection without an accompanying cold.

The severity of an illness episode was characterized as mild, moderate, or severe using the definitions below.

- Mild: Characteristic symptoms of an illness were present but were not sufficiently severe to warrant a physician's visit.
- Moderate: Symptoms led to a confirmed diagnosis after a visit to a health care professional.
- Severe: Symptoms were so serious that hospitalization was necessary.

A medical follow-up visit to confirm a continuing illness or recovery was considered to be a part of the same illness episode. An illness episode was deemed resolved when the baby no longer had symptoms and returned to its normal activity level.

Instances of maternal absenteeism directly attributable to infant illness

were self-reported. Each participant was assured confidentiality to avoid possible employment complications regarding the use of time away from work to provide child care. The lactation consultant contacted each participant at least once a month to ensure that records were maintained in a timely and accurate manner. Independent verification of absence dates was obtained from department records. Absences were recorded there as "sick" or "personal time." These data were used to calculate absence rates and make comparisons across nutritional sources.

Intervention

On-site study management, including recruitment of participants and data collection and verification, was the responsibility of the lactation consultant for the two corporate lactation programs where the study was conducted. The corporate lactation programs maximized the opportunity for employed mothers to continue breast-feeding after their return to work by providing the physical facilities and equipment needed within the framework of a management-supported program. The employees collected and stored breast milk using a pump room provided at the worksite at scheduled times during their work shift. A lactation professional managed the program, provided prenatal classes, maintained the equipment and schedules, and provided individual counseling for employees and their families as needed. These programs were described in specific detail in a previous publication.¹³

Counseling by the lactation professional was available for both nutritional groups throughout the study. The only obligation accepted by the mothers participating in this study was to maintain a confidential diary of infant illnesses and directly related absenteeism and to clarify the data submitted when necessary.

Analysis

The data collected in this study were attribute counts summarized as percentage rates: number of ill babies, number of illness episodes, days of maternal absenteeism, diagnostic category of illnesses, severity of illnesses. Results from this study are reported with both the infant and the individual illness episode as units of analysis, with statistical comparisons being made across the nutritional source groups. The frequency and severity of illness episodes were compared separately between nutritional sources within each company. Data from the two companies were combined after no significant differences were found between the companies. In each instance the significance of the observed differences in percentage rates between nutritional groups was assessed using single degree of freedom χ^2 tests corrected by Yates' method for continuity in small samples.¹⁷ Null hypotheses were tested across the nutritional groups for equivalent percentage rates among disease prevalence, severity of illness episodes, and maternal absence days per illness episode. Statistical analyses were conducted using the SPSS analysis package (SPSS, Inc., Chicago).

Table 1
Distribution of Well and Ill Babies by Nutritional Groups*

Illness Episode	Breast Milk				Formula				Total	χ^2 (p)
	Number Observed	Number Expected ^b	Column (%)	Row (%)	Number Observed	Number Expected	Column (%)	Row (%)		
Well babies	24	16.35	41	86	4	11.65	10	14	28	10.398 (<.005)
Ill babies	35	42.65	59	48	38	30.35	90	52	73	
Total	59	—	—	—	42	—	—	—	101	

*Well babies experienced no illness episodes during the study; ill babies displayed one or more episodes of one or more symptoms lasting more than 1 day.

^bExpectancies for χ^2 based on Null hypothesis of equivalent prevalence rates in each nutritional group.

^c χ^2 with 1 degree of freedom; p , two-tailed probability that the percentage rates are the same.

RESULTS

The study was composed of 101 babies, 59 breast-fed and 42 formula-fed. Other than ethnoracial composition of the groups, no significant differences were found among the two nutritional groups for any of the demographic variables. Approximately 28% (28 of 101) of the infants were "well babies," who experienced no illnesses during the study. The "well babies" group was composed of 24 breast-fed babies (86%) and 4 formula-fed babies (14%). The sixfold difference between rates of occurrence in the two nutritional groups is statistically significant ($p < .005$). This proportion did not differ significantly between the two companies. Table 1 and Figure 1 summarize these results.

Counting only the number of babies who were sick can be misleading. One infant may experience a greater number of illness episodes than another. Each episode of infant illness is a potential cause of maternal absenteeism. Therefore individuals are the measurement units only for well babies. All other results are reported

using illness episodes as the unit of analysis.

All the breast-fed babies in this study received breast milk exclusively (or not more than two bottles of supplement daily) until at least 6 months of age. When babies received more than two supplement bottles daily, they were considered as being weaned from breast milk and were excluded from the study. Sixteen of the 59 breast-fed babies remained in the study for 12 months, but others were weaned sooner. The average length of time in the study for the breast-fed babies was 9 months.

Nonuniform time periods in this study do not adversely affect comparisons of percentage rate of illnesses within each group. Percentages of illnesses categorized in some way, for each group separately, are not affected by unequal numbers of illness episodes in the groups. For this reason it is possible, for example, to compare the percentage of illness episodes that resulted in maternal absenteeism in the breast-feeding group with the similarly calculated percentage in the formula-feeding group.

A total of 205 illness episodes occurred among 73 babies during the period of this study: 88 occurred in 35 breast-fed babies and 117 in 38 formula-fed babies. The rates are significantly different from expecta-

Figure 1

Distribution of Well and Ill Babies by Nutritional Groups

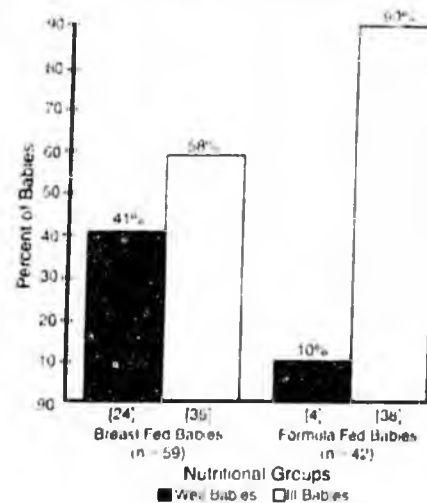


Table 2

Distribution of Infant Illness and Maternal Absences Between Nutritional Groups

Illness Episode	Breast Milk				Formula				Total	$\chi^2 (p)$
	Number Observed	Number Expected*	Column (%)	Row (%)	Number Observed	Number Expected	Column (%)	Row (%)		
Diagnosis										
Upper respiratory infection	58	60.92	66	41	84	81.08	72	59	142	0.168 (<0.7)
Gastrointestinal infection	9	—	10	53	8	—	7	47	17	N.C. ¹
Otitis media	20	16.02	23	48	22	23.98	19	52	42	0.212 (<0.7)
Hospitalized for any reason	1	—	1	N.C.	3	—	3	N.C.	4	N.C.
Total	88		(100)		117		(101)²		205	
Severity										
Mild	29	21.88	33	57	22	29.12	19	43	51	3.508 (<0.1)
Moderate	58	64.35	66	39	92	85.65	79	61	150	0.932 (<0.4)
Severe	1	—	1	N.C.	3	—	3	N.C.	4	N.C.
Total	88		(100)		117		(101)²		205	
Maternal absence (days illness)										
0	65	56.63	74	49	67	75.37	57	51	132	1.916 (<0.2)
1	10	17.16	11	25	30	22.84	26	75	40	4.527 (<0.05)
1-4	11	—	12	42	15	—	13	58	26	N.C.
4	2	—	2	N.C.	5	—	4	N.C.	7	N.C.
Total	88		(100)							

*Expectancies for χ^2 based on Null hypothesis of equivalent prevalence rates in each nutritional group.

¹ χ^2 with 1 degree of freedom, corrected for continuity (Yates) p two-tailed probability that the percentage rates are equivalent.

²N.C. not calculated.

Does not total 100% because of rounding.

tion ($p < .05$), assuming equal illness rates in both groups after adjusting for group size. These results are summarized in Table 2. Upper respiratory tract infections and otitis media were the two diagnoses occurring frequently enough to be tested reliably. The rates of occurrence of each diagnosis among the illness episodes in the two nutritional groups were not statistically different.

Among the illnesses reported, 51 were labeled mild, 150 moderate, and 4 severe. Within each severity category, the differences between rates of occurrence in the two nutritional groups were not significant. The statistical test for mild illnesses, however, is suggestive of a real difference. Among breast-fed babies, 33% of all illness episodes (29 of 88) were "mild," 66% (58 of 88) were "moderate," and 1% were "severe." This compares with 19% (22 of 117) "mild" episodes, 79% (92 of 117) "moderate"

episodes, and 3% (3 of 117) severe episodes for the formula-fed babies.

Absenteeism was reported only when directly attributable to infant illness. "Well babies," by definition, were never ill. Thus the 24 mothers of well babies in the breast-feeding group and 4 in the formula-feeding group were not absent from work during the course of the study.

Table 2 and Figure 2 show that some documented illness episodes were sufficiently mild in nature that no maternal absenteeism was necessary. In the breast-feeding group 74% of all episodes reported (65 of 88) were "zero-absence" illnesses, as were 57% (67 of 117) of all episodes reported in the formula-feeding group. Forty-nine percent of all "zero-absence" illnesses occurred in breast-fed babies and 51% in formula-fed babies. These results are not statistically different from expectation on the basis of an assumption of equal

percentage (50%) distribution in the two groups.

Of 40 illnesses causing 1 day's absence, 25% occurred in breast-fed babies and 75% in formula-fed babies. This rate difference is significant ($p < .05$) on the basis of an expectation of equal percentage occurrence in the two groups (see Figure 2). Absences lasting more than one 8-hour day up to 4 full workdays were reported for 11 episodes in the breast-feeding group and 15 in the formula-feeding group. The remaining illnesses, regardless of cause, were complicated and often required hospitalization. Absences caused by these seven episodes ranged from 5 to 25 days.

DISCUSSION

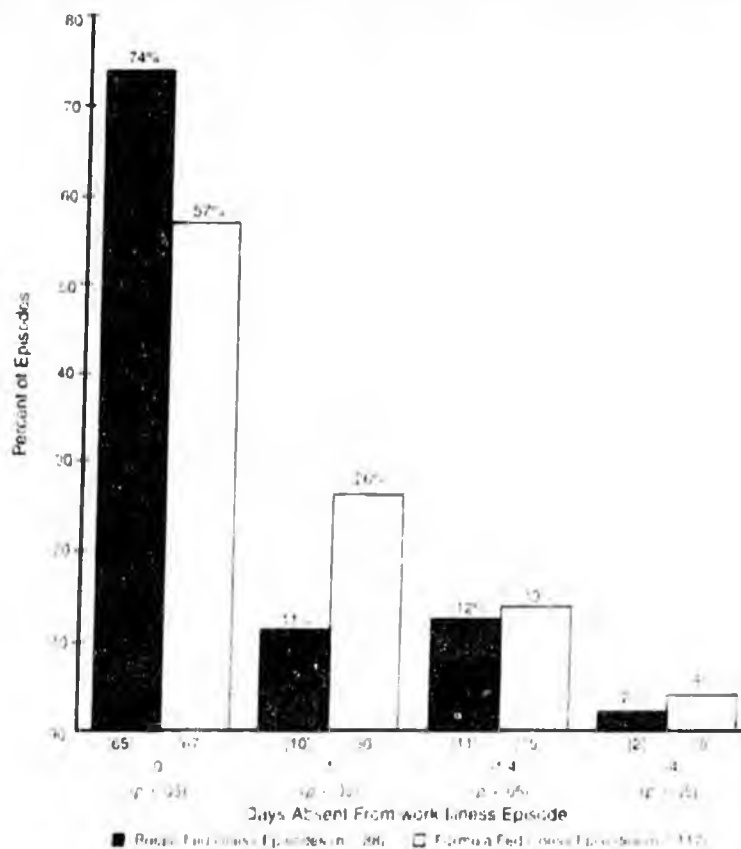
Results of this study support widely published findings that, when compared with formula-fed babies, infants receiving breast milk have lower rates and less severe episodes of the common illnesses studied.⁵⁻¹⁰

The data support the assumption that infants in each nutritional group had a similar risk of acquiring the specific illnesses studied. Similar percentages of each diagnostic category were found. Also, the difference in percentage rates of illness occurrence at each level of severity across the nutritional groups is not significant.

An employee in this study was not absent if her infant was never sick or had only mild illnesses that did not require her to remain at home to provide care. In the breast-feeding group "well babies" were six times more prevalent, a difference that is statistically significant. This proportion did not differ significantly between the two companies. In the breast-feeding group 74% of illness episodes did not cause maternal absenteeism, compared with 57% in the formula-feeding group. The observation that 1-day absences occurred more than twice as often among formula-feeding mothers was significant (26% versus 11%, $p < .05$). Fewer than 20% of all infant illnesses regardless of nutritional source resulted in absences longer than 1 day. Once babies became ill enough to require medical intervention, the absence pattern of all

Figure 2

Distribution of Illness Episodes and Maternal Absenteeism by Nutritional Groups



mothers was similar with no apparent nutritional source influence.

Increasing awareness that feeding babies breast milk is beneficial and compatible with the mother's return to work is an important health promotion goal. Preliminary evidence supports the assertion that activities such as corporate lactation programs can influence infant health by promoting and supporting breast-feeding continuation. This study also suggests that corporate lactation programs can partially offset their expense by reducing maternal absenteeism and health care costs.

This study was limited in that it did not use an experimental design. Participants were self-selected on the basis of nutritional choice and were a convenience sample from programs already in place. A comparison group with similar demographic characteristics was used rather than a true control group. Equal group sizes could not be achieved within the constraints of this nonrandomized study because of the prevalence of breast-feeding. Observations based on these relatively small groups indicate trends, but should not be used for predictions regarding other groups. These results must be viewed within this limited context and

should be corroborated using true experimental methods before attempts are made to generalize the findings.

SO WHAT? Implications for Health Promotion Research, Practitioners

This study shows that women who breast-feed their babies are less likely to be absent from work because of baby-related illnesses and less likely to have long absences when they do miss work compared with women who feed their infants formula. These findings should be considered preliminary because of limitations of the study methods and the lack of other studies on this issue. If the findings are replicated, programs to help women breast-feed their babies may be beneficial for employers.

References

1. Petachek MA, Barber-Madden R. Promoting prenatal care and breastfeeding in the workplace. *Occup Health Nurs* 1985;33(2):86-9.
2. Statistical Abstract of USA 1990. 110th ed. Washington, DC: US Department of Commerce, Bureau of the Census 1990. Table 625.
3. Statistical Abstract of USA 1992. 112th ed. Washington, DC: US Department of Commerce, Bureau of the Census 1992. Table 93.
4. Prever HB, Baldwin W. Child care as a constraint on employment prevalence, correlates, and bearing on the work and fertility nexus. *Am J Sociology* 1980;85:1202-13.
5. Cunningham AS, Jelliffe DB, Jelliffe EP. Breast-feeding and health in the 1980s: a global epidemiologic review. *J Pediatr* 1991;118:1-8.
6. Kwar MG, Serdula KK, Marks JS, Fraser DW. Review of the epidemiologic evidence for an association between infant feeding and infant health. *Pediatrics* 1984;74:615-38.
7. Lawrence RA. *Breastfeeding: a guide for the medical profession*. 2nd ed. St Louis: Mosby, 1985.
8. Michelman DE, Faden RR, Lichten AC, Buxton KS. Pediatricians and breastfeeding promotion attitudes, beliefs, and practices. *Am J Health Promot* 1990;4:181-6.
9. Breast-feeding: report of the Nutrition Committee of the Canadian Paediatric Society and the Committee on Nutrition of the American Academy of Pediatrics. *Pediatrics* 1978;62:591-601.
10. Duncan B, Ey J, Halberg CJ, et al. Exclusive breast-feeding for at least 4 months protects against otitis media. *Pediatrics* 1993;91:867-72.
11. Klerman J, Leibowitz A. Child care and women's return to work after childbirth. *Am Econ Rev* 1990;80:284-8.
12. Ryan AS, Martinez GA. Breast-feeding and the working mother: a profile. *Pediatrics* 1989;83:524-31.
13. Cohen R, Mink MB. The impact of two corporate lactation programs on the incidence and duration of breastfeeding by employed mothers. *Am J Health Promot* 1994;8:436-41.
14. Wald ER, Dashefsky B, Byers C, Guerra N, Taylor F. Frequency and severity of infections in day care. *J Pediatr* 1988; 112:540-6.
15. Jarman FC, Kohlenberg FM. The health effects of day care. *J Pediatr Child Health* 1991;27:272-81.
16. Haskins R, Kotch J. Day care and illness: evidence, costs, and public policy. *Pediatrics* 1986;77(Suppl):951-82.
17. Norusis MJ. *The SPSS guide to data analysis (release 4)*. Chicago: SPSS, Inc., 1990:302.



Workplace Breastfeeding Support



Women with infants and children are the fastest growing segment of the U.S. labor force.

Among employed women with children under age 3, approximately 70 percent work full time. One-third of mothers return to work within 3 months after giving birth, and two-thirds return within 6 months.^{1,2}

Breastfeeding offers proven health benefits for babies and mothers, but women often find it difficult to continue breastfeeding once they return to the workplace.

Challenges include lack of break time and inadequate facilities for pumping and storing human milk.

Many of these workplace challenges can be reduced with a small investment of time, money, and flexibility.

Providing accommodations for breastfeeding offers tremendous rewards for the employer, in cost savings for health care, reduced absenteeism, employee morale, and employee retention.

Benefits for Employers

Companies that have adopted breastfeeding support programs have noted:

- cost savings of \$3 per \$1 invested in breastfeeding support
- less illness among the breastfed children of employees
- reduced absenteeism to care for ill children
- lower health care costs (an average of \$400 per baby over the first year)
- improved employee productivity
- higher morale and greater loyalty
- improved ability to attract and retain valuable employees
- family-friendly image in the community

What's Needed

Simple strategies can allow infants, mothers, and employers to experience the benefits of workplace breastfeeding support. The strategies are feasible, safe, and relatively easy to imple-

ment, and they require only a modest budget.

These strategies have proven effective in a wide range of settings, including corporations, educational institutions, local government offices, manufacturing and sales organizations, and tribal organizations.

Develop a breastfeeding support program tailored to the company.

Each company, organization, or agency should develop a breastfeeding support program tailored to its needs and resources. Possible components of a workplace breastfeeding support program appear in Table 1.

It may be useful in larger companies to convene a task force to assess women's needs. Potential task force members include human resource specialists, company nurses, expectant mothers, an employee who is or recently was a breastfeeding mother, and a lactation consultant hired on a short-term basis.

Table 1: Components of a Workplace Breastfeeding Support Program

The table below outlines components of several levels of workplace breastfeeding support. The choice of components depends on the number of women who need support and the resources and realities of the workplace.

Adequate	Expanded	Comprehensive
Facilities		
<p>A clean, private, comfortable multi-purpose space (that is not a bathroom) with an electrical outlet in order to pump milk or to breastfeed.</p> <p>Employee provides her own breast pump.</p> <p>Table and comfortable chair.</p> <p>Sink, soap, water, and paper towels. If these are very far from BMBR, extra time is allowed for cleaning hands and equipment.</p> <p>Employee supplies cold packs for storage of milk.</p>	<p>A Breastfeeding Mothers' Break Room (BMBR) for use only by breastfeeding women.</p> <p>Employer provides one multi-user electric breast pump, and employees provide their own collection kits.</p> <p>Improved aesthetics to promote relaxation.</p> <p>Items listed in "Adequate" column are available near the BMBR.</p> <p>Employer makes available refrigerator space designated for food near BMBR.</p>	<p>A Breastfeeding Mothers' Break Room (or rooms) close to women's worksites.</p> <p>Employer provides collection kits. Additional multi-user electric pumps are provided if needed.</p> <p>Room large enough to accommodate several users comfortably.</p> <p>Items listed in "Adequate" column are available in the BMBR.</p> <p>Employer provides a small refrigerator in the BMBR for storage of human milk.</p>
Written Company Policy		
<p>Employer grants a 6-week unpaid maternity leave.</p> <p>Employer allows creative use of accrued vacation days, personal time, sick days, and holiday pay after childbirth.</p> <p>Employer allows two breaks and a lunch period during an 8-hour work day for expressing milk or breastfeeding the child.</p>	<p>Employer grants 12-week unpaid maternity leave (FMLA).</p> <p>In addition, employer allows part-time work, job sharing, individualized scheduling of work hours, compressed work week, or telecommuting.</p> <p>Employer allows expanded unpaid breaks during the workday for expressing milk or breastfeeding the child.</p>	<p>Employer offers a 6- to 14-week paid maternity leave (ILO).</p> <p>In addition, mother can bring child to work, caregiver can bring child to workplace, or on-site day care is available.</p> <p>Nursing breaks are paid and are counted as working time.</p>
Workplace Education		
<p>Company breastfeeding support policy is communicated to all pregnant employees.</p> <p>Employer provides a list of community resources for breastfeeding support.</p>	<p>New employees, supervisors, and coworkers all receive training on the breastfeeding support policy.</p> <p>Employer contracts with skilled lactation care provider on an "as needed" basis.</p>	<p>Breastfeeding education is offered to the partners of employees who are expectant fathers.</p> <p>Employer hires a skilled lactation care provider to coordinate a breastfeeding support program.</p>

Key factors include the number of women who are likely to use the program, the potential available space, and the needs and priorities of potential program users. Other successful breastfeeding support programs can be used as models.

Information about types of pumps and how to obtain them can be acquired from a local hospital, a lactation consultant, a health department, or a mother's support group.

Employers can contract with breast pump manufacturers to arrange discounted rates on purchased personal-use pumps. They can also rent or purchase multi-user pumps for placement in a Breastfeeding Mothers' Break Room.

Providing key decision-makers with information on specific costs for at least two levels of breastfeeding support can facilitate the planning process.

Smooth and safe operation of the breastfeeding support program is easiest with a designated lead person, even though minimal programs generate only a few hours of work each month.

Inform all employees about the company's breastfeeding support policy.

A workplace breastfeeding support program should be governed by a written policy communicated to all employees.

The policy should spell out details of the workplace support program, such as facilities provided and time allotted for breaks.

The policy should also prohibit harassment of and discrimination against breastfeeding employees. It should include job protection for



employees during and after maternity leave, and a ban on assigning breastfeeding employees to less desirable jobs.

Consider flexible scheduling options.

Flexible work arrangements can ease new mothers' return to work following childbirth. Regardless of flexibility, there will be a period of adjustment. Examples of scheduling options that can benefit both mothers and employers include:³

- *part-time work*
- *earned time*, in which sick time, vacation time, and personal days are grouped into one set of paid days off work, from which workers can take time at their own discretion
- *job-sharing*, in which two workers each work part time and share the responsibilities and benefits of one job
- *phase-back*, in which workers return from leave to their full-time work load over several weeks or months

- *flex-time*, in which workers arrange to work unusual hours to accommodate their home schedules
- *compressed work week*, in which employees work more hours on fewer days
- *telecommuting*, where employees work all or part of their jobs from home

Allow women sufficient break time to breastfeed or express milk on the job, and provide space in a private, clean place (not a bathroom).

Breastfeeding or expressing milk during working hours enables a mother to keep up a good supply of milk for her child.

The number of breaks needed to breastfeed or express milk is greatest when the child is younger, then gradually decreases.

For milk safety reasons, mothers must have clean hands and must clean equipment after use. Proximity of a sink is important. In addition, secure cold storage capability is essential

(this could include coolers with cold packs, provided by employees).

Women who work in a variety of sites throughout the week or the workday have special challenges and need authorization from their employer to use creative solutions. Solutions may include expressing milk in a vehicle or in a nursing mothers' room in a shopping mall.

Provide education.

Many parents get information and support for family issues from friends and coworkers. The worksite can be a significant source of support for breastfeeding.

Information collected by the breastfeeding support program can be provided to pregnant and breastfeeding employees, as well as to new or expectant fathers, so that each family does not have to go through the same information-gathering process.

Useful information includes a list of child care facilities near the worksite and a list of resources for obtaining breast pumps.

Support and be aware of legislation and policies promoting workplace support for breastfeeding women.

Legislators and policymakers have played an important role in promoting workplace support for breastfeeding women.

More state and federal laws are needed to:

- protect breastfeeding women from discrimination
- promote adequate maternity leave
- encourage employers to accommodate the needs of breastfeeding employees (e.g., through tax

incentives, mandates, honoring model practices)

- establish worksite support programs for government employees
- replicate existing model legislation and policies in new locations
- reconsider aspects of welfare-to-work legislation that have made breastfeeding more difficult
- develop systems to assist businesses wanting to improve breastfeeding support

These laws should apply to all sectors of the work force, including part-time workers and welfare-to-work participants. Particular attention is needed for disadvantaged families, who suffer the most illness, have the lowest breastfeeding rates, and often work in jobs lacking workplace breastfeeding support.

Several states have passed or are considering legislation mandating that employers make available appropriate space and sufficient time for mothers to breastfeed or express milk in the workplace.

Other states' legislation does not include mandates but offers tax incentives to companies with strong breastfeeding support.⁴

Legislators, government agencies, and business leaders are responsible for providing the vision and leadership on a national level that will support breastfeeding mothers, reward progressive and forward-thinking companies, and encourage others to join the effort.

Tax incentives for breastfeeding support, paid maternity leave, and model family support programs in government agencies are all part of this vision and leadership.

Conclusion

The majority of new parents work hard to be both dedicated, quality workers and dedicated, devoted parents. Many industries, companies, departments, and divisions work creatively to make their work environments family-friendly.

Increased initiation and duration of breastfeeding are important national and global public health goals. By falling short of these goals, we put babies and mothers at increased health risk. Breastfeeding support in the workplace is an essential component of meeting these goals and is truly a win-win-win for mothers, babies, and employers.

References

1. Fein SB, Roe B. The effect of work status on initiation and duration of breast-feeding. *Am J Public Health* 1998; 88(7): 1042-1046.
2. Roe B, Whittington LA, Fein SB, Teisl MF. Is there competition between breastfeeding and maternal employment? *Demography* 1999; 36(2): 157-171.



Workplace Breastfeeding Support

3. Bar-Yam NB. Workplace lactation support, part II: working with the workplace. *J Hum Lactation* 1998; 14: 249-254.
4. Baldwin EN, Friedman KA. A current summary of breastfeeding legislation in the U.S. Schaumburg, IL: La Leche League International. Available at: <http://www.lalecheleague.org/LawBills.html#>. Accessed on November 22, 2002.

Additional Resources

American Academy of Family Physicians (AAFP). *Position statement on breastfeeding*. Available at: <http://aafp.org/policy/x1641.xml>.

American Academy of Pediatrics (AAP). *Breastfeeding and the use of human milk*. *Pediatrics* 1997 Dec; 100(6). Available at: <http://www.aap.org/policy/re9729.html>.

Association of Women's Health Obstetric and Neonatal Nurses (AWHONN). *Position statement: breastfeeding and lactation in the workplace*. Available at: <http://www.awhonn.org/awhonn/?pg=875-4810-7250>.

Cohen R, Mrtek MB. The impact of two corporate lactation programs on the incidence and duration of breast-feeding by employed mothers. *Am J Health Promotion* 1994; 8: 6.

Cohen, R, Mrtek MB, Mrtek RG. Comparison of maternal absenteeism and infant illness rates among breast-feeding and formula-feeding women in two corporations. *Am J Health Promotion* 1995; 10: 148-153.

International Labor Organization Maternity Protection Convention, 2000 (C183). Available at: <http://iloex.ilo.ch/1567/cgi-lex/convde.pl?C183>.

International Labor Organization Maternity Protection Recommendation, 2000 (R191). Available at: <http://iloex.ilo.ch/1567/cgi-lex/convde.pl?R191>.

U.S. Department of Health and Human Services, Office on Women's Health.

HHS blueprint for action on breastfeeding. Washington, DC: U.S. Department of Health and Human Services, Office on Women's Health; 2000. Available at: www.4woman.gov/Breastfeeding/blupmt-bk2.pdf.

U.S. Department of Labor. *Women's jobs: 1964-1999*. Washington, DC: U.S. Department of Labor, Women's Bureau; 1999. Available at: <http://www2.dol.gov/dol/wb/public/jobs6497.html>.

United Nations Children's Fund (UNICEF). *Facts for life: breastfeeding*. Available at: http://www.unicef.org/m/04/key_messages.htm.

United States Breastfeeding Committee. *Breastfeeding in the United States: a national agenda*. Available at: <http://www.usbreastfeeding.org/StratPlan.html>.

Washington Business Group on Health. *Breastfeeding support at the workplace: best practices to promote health and productivity*. *Family Health in Brief* 2000 Mar; Issue 2.



Goals of the United States Breastfeeding Committee

protecting | promoting | supporting

The mission of the United States Breastfeeding Committee (USBC) is to protect, promote, and support breastfeeding in the United States. The USBC exists to ensure the rightful place of breastfeeding in society.

The USBC works to achieve the following goals:

Goal I

Ensure access to comprehensive, current, and culturally appropriate lactation care and services for all women, children, and families.

Goal II

Ensure that breastfeeding is recognized as the normal and preferred method of feeding infants and young children.

Goal III

Ensure that all federal, state, and local laws relating to child welfare and family law recognize and support the importance and practice of breastfeeding.

Goal IV

Increase protection, promotion, and support for breastfeeding mothers in the work force.

Visit us at www.usbreastfeeding.org.

This paper was funded in part by the Health Resources and Services Administration's Maternal and Child Health Bureau and the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

© 2002 by the United States Breastfeeding Committee. Cite as: United States Breastfeeding Committee. *Workplace breastfeeding support* [issue paper]. Raleigh, NC: United States Breastfeeding Committee; 2002.