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Work. Pump. Repeat. The New Mom's Survival Guide to Breastfeeding and Going Back to Work

Jessica Shortall, Harry N. Abrams © 2015, 208 pages, hardcover, \$19.95

Available from: https://www.amazon.com/dp/B013PDP0CQ/ref=dp-kindle-redirect?_encoding=UTF8&btcr=1

Work. Pump. Repeat. provides its best advice in Chapter 3, Pumping School. “I imagine us like a bunch of cave people passing down life lessons from woman to woman—except with a weird machine on our boobs” (p. 33) as Ms. Shortall describes the importance of a face-to-face first pumping session. She continues to review what the “pumping professor”—aka friend who has pumped recently—will do in this rendezvous. Despite the wealth of information and support available from online sources and books such as these, the physical acts of breastfeeding and expressing milk are best taught in the flesh.

Perhaps because of this, the book is more a collection of tips and affirmations than a handbook. Ms Shortall excels in both the lighthearted banter and the more sensitive support for a mother's choices. There are very important tips, including the importance of a pumping bra and dress rehearsals. But some of the guidance sounds dated, even a mere 3 years after publication. In Chapter 8, Talking to Your Boss About Your Breasts, she continually emphasizes the importance of minimizing the impact of motherhood and lactation on your workday.

Breastfeeding your baby is fleeting, and while it's important to you, so is continuing to provide for your family and having a fulfilling work life ... Even if you mean not a word of it, communicate your excitement at the prospect of leaving your perfect, tiny baby to schlep back to work. This attitude will serve you, and it also adds another proof point that women can successfully work and breastfeed, and that employers should support that. (p. 76)

The recommendations of the Section on Breastfeeding (2012) note breastfeeding benefits follow a dose-response

structure, with risks decreasing when mothers breastfeed exclusively or continue breastfeeding longer than 1, 3, or 6 months. Is “fleeting” really the message we want to send? Workplace accommodations are an important factor in breastfeeding duration, and minimizing the support required may decrease the resources available (Kozhimannil, Jou, Gjerdingen, & McGovern, 2016).

The recommendations given for pumping at work may not be sufficient to maintain milk supply, which is a concern given the role lack of milk plays in premature cessation of breastfeeding. Three times a day may work for a short work day or an older infant, but frequency of milk removal is essential in maintaining lactation after the first weeks, due to the “supply and demand” control of milk production (Daly, Kent, Owens, & Hartmann, 1996; Wilde, Prentice, & Peaker, 1995). She does not suggest discussing flexible working hours or telecommuting as a possible solution, although both options are becoming more prevalent.

This book is an excellent source of practical knowledge and non-judgmental support. However, despite references to pumping outside of a desk job, her advice may be less useful for mothers who cannot afford the designer tops that don't look like breastfeeding clothing (p. 55) or those taking the bus to work instead of driving (and potentially pumping) in their own car. Instead of the stereotypical stay-at-home mom—typically represented as white and middle class (Thomas, 2018)—Ms. Shortall appears to be talking to a similarly privileged career woman. Her advice assumes a certain level of education and access to resources, and some of the anecdotes may be less relatable to a mother with a different background. However, the book fills an important niche that has

been underrepresented in breastfeeding self-help books: Just how do you practically juggle the *work. pump. repeat.* cycle without losing your job, your mind, or your milk?

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Michele Olson Pancoast, BS, RN, is working toward her PhD at the Virginia Commonwealth University (VCU) School of Nursing. Her research focus is on the biobehavioral interactions influencing lactation and how to support breastfeeding when a baby is unable to feed at the breast. Her other interests include the impact of social and economic disparities on motherhood, supporting LGBTQ and nonbinary parents in breastfeeding, and using technology to decrease disparities. She is passionate about leadership and is a Southern Regional Education Board Doctoral Scholar. As a mother of two young children, her passion for lactation support was inspired by her own experience exclusively pumping for her premature daughter and her subsequent breastfeeding experience with her son.

Children's Health Outcomes Data, Summarized From HRSA

The Health Resources and Services Administration has released the “2017 National Survey of Children's Health” data from nearly 21,000 households across the U.S. The 2016 and 2017 data can be combined to provide a nationally-representative sample of over 70,000 children: <https://mchb.hrsa.gov/data/national-surveys>. The survey found that in 2016-2017, 76 percent of infants up to one year old were placed to sleep on their backs most of the time. This voluntary survey was funded and directed by HRSA's Maternal and Child Health Bureau and provides annual national- and state-level estimates of key measures of child health and well-being. Since it began in 2003, the HRSA National Survey of Children's Health has informed HRSA's Maternal and Child Health Services Title V Block Grant national performance and outcome measures, as well as HHS's Healthy People objectives. HRSA works with the U.S. Census Bureau to conduct the survey, oversee sampling, and produce a final data set for public use.

Source: USBC