COMMENTARY

Empowering Students Who Are Breastfeeding a Child While Enrolled in Pharmacy School

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Pharmacy students wishing to maintain their breastfeeding relationship with their child while also excelling within a Doctor of Pharmacy program require important resources and a culture of support. This Commentary examines the challenges that pharmacy students who are breastfeeding face, highlights the importance of pharmacy schools and colleges providing breastfeeding and lactation support, and identifies best practices for implementing support measures for these students. We aim to guide institutions in not only supporting breastfeeding students but empowering them to excel personally, professionally, and academically.

Keywords: pharmacy students, wellbeing, lactation support, breastfeeding support

INTRODUCTION

In 2015, the US Breastfeeding Committee issued a statement that “every health professional should understand the role of lactation, human milk, and breastfeeding in … enhancing health and reducing long-term morbidities in infants and young children [and] morbidities in women.” Unfortunately, the health professions students who have been educated about these benefits for their patients often find themselves unable to maintain their own breastfeeding relationships. While the challenges faced by breastfeeding mothers returning to work are better understood, less is known of the issues faced by breastfeeding students entering or returning to higher education programs, including Doctor of Pharmacy (PharmD) programs. Not unlike faculty, students must overcome numerous obstacles to successfully maintain breastfeeding relationships while in school. These include difficulty scheduling time to express milk (“pump”) around classes, examinations, and other assessments; a lack of appropriate lactation spaces; and insufficient support from peers, faculty, and administration. Challenges unique to breastfeeding students have been identified, including disparities in access to lactation rooms, problems related to carrying lactation equipment and storing milk on campus, and sensitivities to how they are perceived by faculty and peers. For pharmacy students, meeting this important personal goal while also navigating a rigorous curriculum may feel unattainable, especially in instances where support is not vocalized or appropriately addressed.

Pharmacy educators and administrators are well-positioned to affect proactive and inclusive change, which can empower breastfeeding students to excel both personally and academically. In our recent commentary, A Call to Action for Lactation Support at Colleges of Pharmacy, we highlighted the benefits of providing lactation support to faculty members and provided strategies for implementation of much-needed services. While some of these measures will benefit students, their lactation support needs and the challenges they face in voicing and securing these needs are unique. In this article, we examine the challenges breastfeeding students face, highlight the importance of breastfeeding and lactation support for students, and provide actionable steps to assist institutions in not only supporting breastfeeding students, but empowering them. The terms “breastfeeding” and “lactation” are used interchangeably.

DISCUSSION

Creating and Promoting a Culture of Support

Developing a culture of support that enables pharmacy students to meet breastfeeding goals is crucial. At the foundation of this initiative is educating faculty, staff, administrators, and students on the importance of breastfeeding and lactation and the provision of support services. All institutions are encouraged to complete a needs assessment to determine what resources are needed, and students should be included in this process. Developing strong support policies is a key component, and we call on schools and colleges...
of pharmacy to lead the charge within the health professions education space. Recognizing some institutions may have model policies in place, we recommend those be shared more broadly throughout the Academy. For institutions in the beginning stages of policy development, The Fair Labor Standards Act (FLSA) can serve as a useful guide.\textsuperscript{10}

During policy development, legal protections of breastfeeding students should be considered. Robertson and colleagues note important disparities exist between breastfeeding employees’ federal legal protections and those of students.\textsuperscript{6} While the Affordable Care Act benefits employees through its requirement to provide lactating mothers both time and space to pump, these benefits do not extend to college students unless they are employees of the institution.\textsuperscript{11} However, under Title IX and the laws of some states, breastfeeding students have a right to certain accommodations.\textsuperscript{12} Because breastfeeding is considered a pregnancy-related condition, schools are obligated to find ways to help students who need to pump while on campus.\textsuperscript{12} Additionally, students cannot be penalized for missing class to pump and must be allowed to make up missed work during those times.\textsuperscript{12} We recommend institutions also research state-specific laws, which can be accessed on the National Conference of State Legislatures’ website.\textsuperscript{13}

Lactation support policies should clearly delineate the roles of faculty, staff, and students and be easily accessible, preferably included within course syllabi and learning management systems. Institutions may choose to make policies publicly available for prospective students or incorporate language into their student handbooks. Numerous policies are available for reference from universities with strong lactation support systems in place. At the Warren Alpert Medical School of Brown University, lactation rooms are established and advertised not only on campus, but at each of seven affiliated hospitals.\textsuperscript{14} The university also has an affiliated preschool program.\textsuperscript{14} The University of Northern Colorado’s “Toolkit for Establishing Lactation Support on University and College Campuses” provides extensive guidance on lactation support considerations, a lactation support checklist, and specific resources for students.\textsuperscript{15} To maximize resources and gain financial support, colleges can establish internal and external partnerships.\textsuperscript{9} External collaborators may include local Le Leche Leagues and hospitals, while internal partners could include student affairs, human resources, and diversity, equity, and inclusion offices.\textsuperscript{9} Example policies and resources are listed in Table 1.

### Considerations for Academic Institutions

The FLSA requires provision of an appropriate physical space for mothers to express milk until their child is one year of age.\textsuperscript{10} Per these guidelines, lactation spaces cannot be located within a bathroom, must be shielded from view, and be free from intrusion by colleagues or the public.\textsuperscript{10} Other requirements include a chair or other type of seat, a flat surface for equipment, and an electrical outlet.\textsuperscript{10} Additional amenities that should be strongly considered include a computer workstation to allow for studying and/or remote learning, a hospital grade pump, comfortable seating and temperature, lighting which can be dimmed, a sink for cleaning and disinfecting supplies, and a clean, designated refrigerator or freezer for storage of breast milk.\textsuperscript{9} Consideration should also be given to creating dedicated lactation spaces and ensuring enough space is available should multiple students need to pump simultaneously. Ideally, lactation spaces should be positioned near lecture halls to allow for convenient access during class sessions, and signage should be utilized for easy identification. Students should be oriented to lactation spaces during new student orientation. Recognizing financial and space limitations associated with lactation rooms, alternative suggestions include repurposing conference rooms or similar facilities for such use. Simple privacy barriers are an inexpensive option which can be utilized in these and other settings.\textsuperscript{15} Institutions may also consider

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<th>Table 1. Examples of Lactation Support Policies and Resources for Students Who Plan to Breastfeed Their Child While Enrolled in Pharmacy School</th>
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<td><strong>Resource</strong></td>
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<td>The University of New Mexico Lactation Support Program</td>
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installing lactation pods. These are a more expensive option, with prices ranging from $9,000-$22,000 excluding shipping and installation costs.15

Schools and colleges should consider allowing breastfeeding students flexibility regarding their curricular schedules. Institutions should also consider allowing remote learning for a predefined time following the birth of a child. Students who attend courses should not be discouraged from breastfeeding during lectures and have the choice to either remain on screen or turn off their camera during virtual learning. Once breastfeeding students return to campus, administrators and faculty should assist students in planning a conducive pumping schedule. Ideally, students should be provided time each time they need to express milk.10 This frequency will vary based on the age of the baby and the mother’s milk supply. Early on, mothers will need to express milk every two to three hours.16 A typical breastfeeding session can last anywhere from 15 minutes to an hour.16 Expressing milk takes a similar amount of time, but colleges should account for time needed to travel to and from the lactation space, set-up and clean equipment, and store milk.6 Course directors should also work with students to provide appropriate accommodations for testing and assessment scenarios, and institutions may choose to develop an accommodation request process for breastfeeding students. Sample accommodation requests are available.15 For students preparing to take the North American Pharmacist Licensure Examination (NAPLEX) and other licensure examinations, administration should make students aware of the following provision: “Pearson VUE supports test-takers that require an exception to breastfeed, express, or pump breast milk during their exam. Your exam program must approve your accommodations request for you to breastfeed, express, or pump during your exam.”15

Finally, there are innovative ways in which colleges can provide further resources and support to breastfeeding students. At the Northeast Ohio Medical University (NEOMED) College of Pharmacy, NEOMED Plus is a campus organization for students who have or will have children during their time at NEOMED. Organizations such as this provide vital support, mentorship, and resources to students looking to successfully balance school and life responsibilities. A breastfeeding support event hosted by such an organization may include a panel of students who previously navigated breastfeeding during pharmacy school and are available to answer questions and provide advice to current students. Schools and colleges of pharmacy can partner with their student affairs or similar office to develop this type of organization, which would require a faculty member (or members) knowledgeable and passionate about this topic to serve as an advisor. Online support communities could also be developed for pharmacy students seeking lactation and breastfeeding support.

Internships and Experiential Training Considerations

While the impact of experiential training on breastfeeding patterns has yet to be described for pharmacy students, information exists for medical trainees. Medical trainees who were members of the American Academy of Pediatrics Section on Medical Students, Residents, and Fellowship Trainees were surveyed to assess breastfeeding support during training and the impact on their attitude toward breastfeeding.18 Of the 927 respondents, 45% had children and 37% had breastfed their children.18 The respondents reported poor breastfeeding support, with one in four not having access or being unaware of private space for breastfeeding or expression of breast milk, one in four unable to meet their breastfeeding goals, and one in three unable to meet their goal of exclusively breastfeeding their child.18 Forty percent had to extend their medical training because they had to take a longer maternity leave, with 44% citing breastfeeding needs as one of the reasons for needing this longer leave.18 For those who did not meet their goals, many had negative emotions about the experience.18 The negative impact of a trainee’s own experiences and struggles with breastfeeding/lactation may affect the care and advice these future healthcare professionals provide to their patients and caregivers, and may affect them personally long term because of the negative emotions regarding their own perceived “failures” in this area.18 This survey highlights the need for support among medical trainees such as those in pharmacy.

We recommend experiential education offices, preceptors, and breastfeeding students work together to ensure breastfeeding students have appropriate and necessary accommodations during this training. Proactive discussions regarding the need for such accommodations and their impact on rotations may help to mitigate issues. Experiential offices may assist with educating pharmacy preceptors about institutional lactation support policies. These policies should include breastfeeding considerations pertaining to students completing all types of experiential education. A potential source for development of this section is the American Academy of Family Physicians’ Breastfeeding and Lactation for Medical Trainees policy.19 As stated in this policy, minimum standards should include lactation room access, appropriate protected time to express milk, establishment of a culture of support in the institution, and delineated responsibilities of administration, trainees, and supervisors.19 Student evaluations and grades should not be negatively impacted as a result of the accommodation given for time to express milk.
Colleges may consider structuring experiential schedules and syllabi to support breastfeeding students while ensuring they complete necessary experiential requirements.

**Responsibility of the Student**

Students should inform their supervisor (advisor, course director, preceptor) of their need for accommodation to express breastmilk. Communication should be initiated early, prior to maternity leave, to allow time for any necessary adjustments in schedules. While students in need of lactation support should not feel embarrassed or intimidated to seek out necessary and appropriate accommodations, some may feel nervous engaging in these discussions with preceptors they have not yet met. These conversations may be additionally challenging given that many students only have initial contact with preceptors through email and are not able to have these discussions face-to-face before their rotation begins. Finally, students may work with multiple preceptors throughout the year, entailing the need to have the conversation many times. Given these challenges, we suggest programs offer support in navigating this conversation with preceptors if requested by the student.

**CONCLUSION**

As the Academy looks to optimize student well-being, we must take actionable steps to ensure breastfeeding students can succeed while balancing important school and life responsibilities. This may not only improve student well-being but promote the college as a family-friendly institution for current and prospective students. Colleges and schools of pharmacy are encouraged to complete a student lactation support needs assessment, and institutions experiencing success may share ideas and experiences with the larger academic community. Successful lactation support initiatives may serve as a starting point to enact additional family-friendly measures that support student parents during their educational journeys.

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**REFERENCES**


