CO1.5: Breastfeeding rates and support policies

Definitions and methodology

This indicator presents breastfeeding rates for infants at 6 months of age. Breastfeeding here is defined as including infants who are either exclusively or partially breastfed (i.e. those receiving both breast milk and formula, or who have begun weaning). The 6-month threshold is based on the guidance by the World Health Organization (WHO, 2025), which recommend exclusive breastfeeding until six months of age. Only selected twelve countries are shown, based on the availability of robust data; however, some countries provide data for infants aged 4 or 5 months (e.g. Australia and Japan).

This indicator also considers breastfeeding support policies. These policies include general breastfeeding strategies to encourage mothers to breastfeed rather than use formula-based milk. as well as employment policies to ensure employers provide additional support for mothers who are breastfeeding. Such employment policies may include breastfeeding breaks and facilities, night-working restrictions, and protection from dismissal. Prima facie it is not clear at which point in time the protection of such measures should end and/or how the financial costs shall be allocated.

- Protection from work involving health risks (e.g. providing alternative work or extended leave to avoid biological and chemical hazards at work),
- Protection from night work (e.g. outright ban on night work, discouragement in government guidance, or requirements such as medical evidence to opt out or employee consent to do night work)
- Entitlement to breastfeeding breaks (e.g. regular breaks to either express milk for later use in a suitable area at work, or to feed a child either at work or at a nearby creche)
- Specific protection against dismissal during the breastfeeding period

Employment policies for breastfeeding women should be considered alongside broader maternity-employment policies (see Indicator. PF2.1 Key characteristics of parental leave systems). Specifically, more generous maternity and parental leave policies give new mothers a strong fallback option to stay at home and breastfeed. When maternity and parental leave rights are more limited, enforced regulations to ensure breastfeeding facilities at work are likely to be more relevant. Be that as it may, maternity protection policy is to protect working mothers and their children from health risks and to that end measures should be put in place, regardless of the intricacies of parental leave policies.

Employment-based breastfeeding policies have an important role in safeguarding working mothers' breastfeeding rights, while broader efforts to improve breastfeeding rates through a breastfeeding strategy may have an effect regardless of the level of maternity support for working mothers as they apply to all new mothers. Employment policies for self-employed breastfeeding women are necessarily limited: there is no scope to enforce the provision of breastfeeding breaks nor is it possible to protect against the equivalent of dismissal (i.e., loss of earnings). In theory, additional financial support could be provided to self-employed breastfeeding women, however, in practice it would be more straightforward to provide any support as part of maternity benefits for all self-employed mothers as compliance costs to check whether self-employed mothers of young children are breastfeeding during working hours would likely outweigh the cost of any support.

Other relevant indicators: PF2.1 Key characteristics of parental leave systems; PF2.2 Use of childbirth-related leave benefits

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The statistical data for Israel are supplied by and under the responsibility of the relevant Israeli authorities. The use of such data by the OECD is without prejudice to the status of the Golan Heights, East Jerusalem and Israeli settlements in the West Bank under the terms of international law.

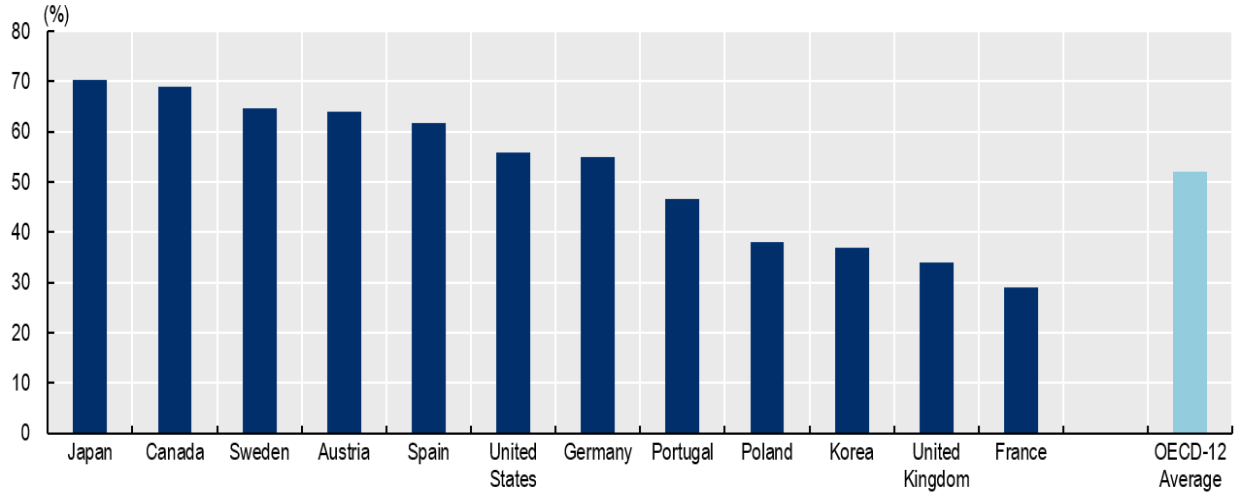
Key findings

Breastfeeding has many benefits both for infants and mothers. It provides essential nutrients for healthy development, reduces the likelihood of overweight, obesity and diabetes in children, and is associated with improved cognitive development. It can also reduce risks of breast and ovarian cancer in mothers (WHO, 2025, Victora et al., 2016).

Breastfeeding rates vary substantially across countries. Chart CO1.5.A shows that at around 6 months of age, infants in Japan (70% at 4-5 months), Canada (69%) and Sweden (65%) are more than twice as likely to be breastfed (either exclusively or alongside other nutritional sources) as those in France (29%) and the United Kingdom (34%). On average across 12 OECD countries, 52% of infants are breastfed at around 6 months of age.

Chart CO1.5.A. Breastfeeding rates

Share of children who are exclusively or partially breastfed at six months old, latest available data



Note: Only selected countries are shown, based on the availability of robust data on breastfeeding rates for infants aged 6 months. The measure includes infants who are exclusively or partially breastfed (i.e. both breastfeeding and formula feeding, or those who have begun weaning). Data for Japan refer to infants aged 4–5 months, and data for Australia refer to infants aged 5 months. Data for Japan refer to 2023, for Canada to 2022, for France and Sweden to 2021, for the United States to 2019, for Korea to 2018, for Poland and Spain to 2017, for Germany to 2012–2016, for Portugal to 2012, for Australia and the United Kingdom to 2010, and for Austria to 2006.

Source: Australia: Australian Institute of Health and Welfare (2011), *2010 Australian national infant feeding survey: indicator results*; Austria: Bürger, B. et al. (2021), *Breastfeeding Prevalence in Austria according to the WHO IYCF Indicators—The SUKIE-Study*; Canada: Government of Canada (2024), *Canada's breastfeeding dashboard*; France: Sante Publique France (2024), *Alimentation des nourrissons pendant leur première année de vie. Résultats de l'étude Épifane 2021*; Germany: Brettschneider, A., E. von der Lippe and C. Lange (2018), *Stillverhalten in Deutschland – Neues aus KiGGS Welle 2*; Japan: Children and Families Agency (2024), *Infant Physical Development Survey*; Korea: KIHASA (2019), *The 2018 National Survey on Fertility and Family Health and Welfare*; Poland: Królak-Olejnik, B., I. Błasiak and A. Szczygieł (2017), *Promotion of breastfeeding in Poland: the current situation*; Portugal: Nazareth, M. et al. (2024), *Early feeding and nutritional status of Portuguese children in the first 36 months of life: EPACI Portugal 2012–a national representative cross-sectional study*; Spain: Martín-Ramos, S. et al. (2024), *Lactancia materna en España y factores relacionados con su instauración y mantenimiento: estudio LAyDI (PAPenRed)*; Sweden: Socialstyrelsen (n.d.), *Statistics on breastfeeding 2021*; United Kingdom: NHS (2012), *Infant Feeding Survey - UK, 2010*; United States: CDC (2025), *Breastfeeding Report Card*

Many countries aim to facilitate breastfeeding, but few have comprehensive strategies to do so. While almost all OECD countries are committed to promoting breastfeeding, only some have formalised this commitment through explicit national strategies. Importantly, these strategies go beyond guidance for health practitioners and new mothers by systematically addressing the factors that influence breastfeeding and aiming to improve breastfeeding rates. They consider policies that can support breastfeeding from pre-natal education, support immediately after childbirth, post-natal support, and employment policies. Few strategies have a specific action plan with a coordinator to work across sectors. Indeed, research in 2020 showed that several European countries scored low in terms of meeting World Health Organisation recommendations for an Infant and Young Child Feeding strategy (Zakarija-Grković et al., 2020). Table CO1.5.A shows recent examples of national strategies in Australia, Germany, Ireland and Italy.

Table.CO1.5.A. Examples of national breastfeeding strategies

Country	National Strategy	Summary
Australia	National Breastfeeding Strategy (2019 and beyond)	This national strategy covers federal, state/territory, and local government policies. It aims to increase the number of babies who are breastfed, ensure access to education and clinical support, and promote breastfeeding-friendly environments, strengthen regulations around the marketing of infant formula, improve education and training for health professionals, raise awareness on the importance of breastfeeding.
Germany	National Strategy for the Promotion of Breastfeeding	This strategy aims to develop sustainable support for breastfeeding by connecting stakeholders, improving professional training, and promoting social acceptance of breastfeeding. Steps taken under the strategy include establishing breastfeeding monitoring, improved education for health professionals, disseminating best-practice examples from different municipalities, and public campaigns through the media.
Ireland	Breastfeeding in a Healthy Ireland Action Plan (2016-2023)	This strategy aimed to normalize breastfeeding and increase breastfeeding duration rates by 2% annually. From 2015 to 2023 exclusive breastfeeding at three months old increased by 20% in Ireland. The strategy aimed to improve workforce training, health service practices, and monitor breastfeeding alongside promoting breastfeeding through social marketing and community support initiatives.
Italy	National Guidelines on the Protection, Promotion, and Support of Breastfeeding	The Ministry of Health provides guidelines on breastfeeding, while breastfeeding is promoted through several activities, including training sessions for new mothers and healthcare workers, ensuring that hospitals encourage breastfeeding, promote the creation of support groups, avoid obstacles that may discourage breastfeeding, and regulation of marketing of infant formula.

Source: Australia: Australian Government Department of Health, Disability and Ageing (2025), Australian National Breastfeeding Strategy collection. Germany: Federal Ministry of Food and Agriculture (2024), National Strategy for the Promotion of Breastfeeding.Ireland: HSE Health and Wellbeing (2025), Breastfeeding - Healthy Childhood Programme. Italy: Ministerio della Salute (2023), Strategie nazionali sull'allattamento.

Almost all countries provide breastfeeding rights and protections for new mothers. Breastfeeding employment policies concern protections and rules for women at work who are breastfeeding their young children. These policies encompass a broad range of issues, from health and safety concerns about a hazardous work environment (e.g. through chemical exposure) that might indirectly affect an infant's health, to more general employment protection guaranteeing the breastfeeding woman's employment.

The EU has specific policy requirements that member states should enact for breastfeeding women (Box 1). These requirements are not completely exhaustive as they allow member states to make their own interpretation of some definitions. For instance, the Directive stipulates that breastfeeding workers should have leave granted if there is a danger to their (or their child's) health. It does not insist that the leave should be paid, or whether such paid leave should vary with the age of the child. As a result, different EU member states have implemented a variety of different levels of protection.

Box 1. Legal requirements on breastfeeding support in the EU

EU law covering breastfeeding women at work is primarily covered by the Council Directive 92/85/EEC of 19 October 1992, on the introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding (European Union, 2019).

The Directive sets out measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or who are breastfeeding. Specifically for breastfeeding women, there are three main points that Member States should follow:

- Ensure that risk assessments are carried out for breastfeeding workers, accounting for chemical, physical and biological factors at work. The risk assessment should also consider the impact of dangerous working conditions.
- If the risk assessment shows a danger to the safety or health of a breastfeeding worker (or their child) the employer should adjust working conditions or grant leave.
- There is also a requirement under the Directive (Article 7) that workers are not obliged to perform night work for a period following childbirth to be determined by national authorities. This pertains to all mothers with very young children, not just those who are breastfeeding.

Despite the risk assessment and adjustment, there is no explicit provision for breastfeeding breaks or provision of a suitable environment at work. However, the ILO Maternity Protection Convention (ILO, 2000) does provide for such breaks, the terms of which are to be determined by national law (including pay).

Moreover, the directive does *not* provide for protection against dismissal solely for reasons of breastfeeding; it does provide such protection for women until the end of their maternity leave and sets a minimum length of maternity leave of 14 weeks.

All EU countries have implemented legislation that enforce the EU directive under national law.

In addition to these specific policies, in some countries breastfeeding support in effect operates as extended maternity leave in situations where breastfeeding safely is incompatible with working. In these cases, maternity leave may be extended, or a separate benefit may be available. Moreover, all listed countries offer more general protection from workplace discrimination (for example dismissal due to breastfeeding). Due to anti-discrimination laws, breastfeeding women are likely to have general protection from dismissal (for instance terminating an employee due to an absence from work due to breastfeeding would typically be considered discrimination). The policies discussed below concern whether there are stronger protections against dismissal.

Annex Table CO1.5. sets out the approach that 29 OECD countries take towards breastfeeding women across four policy areas: protection from work involving health risks, protection from night work, entitlement to breastfeeding breaks, and specific protection against dismissal. Policies in Canada (Province of Ontario), France, Germany, Italy, Portugal, Sweden and the United Kingdom are discussed in more detail. In Annex CO1.5A).

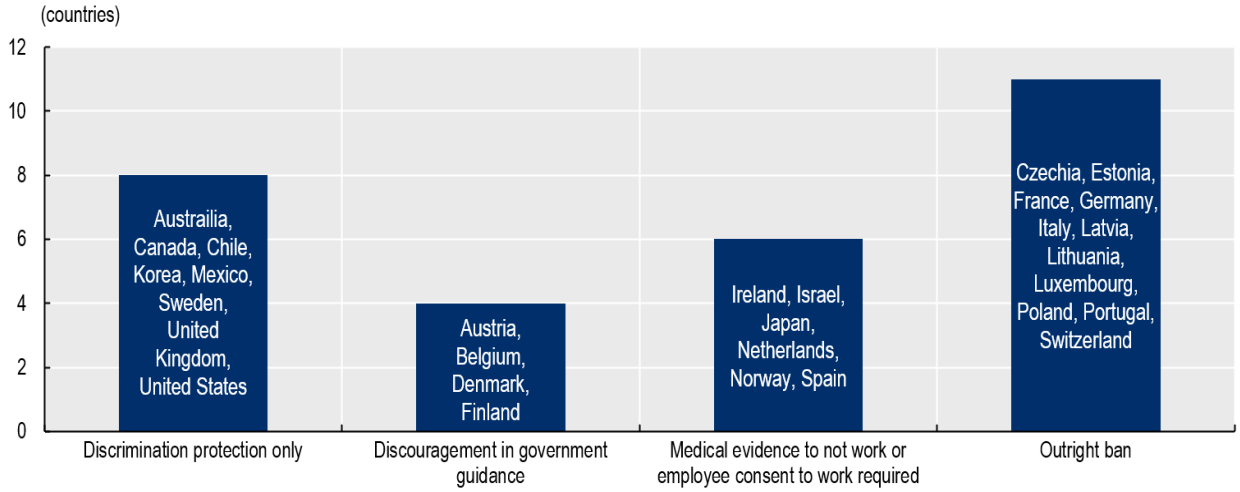
Almost all countries offer a form of statutory rights for breastfeeding women in terms of **avoiding dangerous work**. Employers are generally required to assess the risks to the breastfeeding women, and where appropriate find alternative work. For some countries there are clear supports in place when alternative work is not possible. This is provided most often through extended maternity or parental leave, sickness benefits, or in some cases a separate benefit (Spain, Portugal). In Portugal, the separate benefit does not appear to be time limited, although a doctor must continue to agree that the health of the child is at risk. In Spain, the benefit is limited until the child is 9 months old, after which the mother can take unpaid parental leave to continue breastfeeding. In some countries however, there is no clear provision if it is not

possible to change the employee's work (France, United States), or the cost is fully borne by the employer (United Kingdom). Clearly when the employer has to bear some of the costs, they have a strong interest to find suitable alternative work. There is limited evidence on the extent to which breastfeeding women stop work. Case law for countries in the European Equality Law Network on this issue is very limited and few countries have published data on the take-up of benefits for the specific reason of not being able to work due to health risks for breastfeeding mothers. Portugal, which has a specific breastfeeding risks benefit (Social Specific Risks Benefit) has fewer than 100 recipients (OECD, 2025).

Rules about **night working** vary significantly across countries. The most common approach across 11 of the 29 identified OECD countries is an outright ban on nightwork for breastfeeding women (Chart CO1.5.B). In most cases the countries do not stipulate a maximum age of the child, although in Italy the ban only applies to children aged under 12 months. Six other countries require that breastfeeding women have medical evidence that stipulates they must not work, or that women must explicitly consent to work at night, in effect providing strong restrictions on nightwork. In the Netherlands this consent is only required while the child is aged under six months. Four other countries only discourage nightwork in national guidance, but do not explicitly prevent it. The remaining eight countries do not actively discourage it, although even in these countries, breastfeeding women typically have strong employment protection under discrimination protection (for example see Canada discussed further below). Under discrimination laws it would still be legally difficult for employers to fire workers who were absent due to breastfeeding. For countries with an outright ban on nightwork, most do not define the hours, those that do generally define night work as between 8pm and 6am, although this can vary.

Chart CO1.5.B. Employment restrictions towards working at night for breastfeeding women

Categorisation of employment restrictions regarding working at night for breastfeeding women for 29 OECD countries



Note: Only policy for Ontario province shown for Canada.
Source: See Annex Table CO1.5.

Entitlement to **breastfeeding breaks** is generally encouraged, with most countries having statutory rules about the duration of breaks. Countries that do not have such provisions instead rely on a general duty for employers to accommodate their employees (see Canada discussed below). Most countries that stipulate the timing of breastfeeding breaks in legislation also stipulate the breaks should be paid, but not all.

Norway has explicit **protection against dismissal for breastfeeding women** and this form of strong employment protection (unless non-discriminatory grounds for dismissal can be documented, e.g. firm bankruptcy) is without any (time) restriction attached to it (Equality Law, 2025). Other countries have protection against dismissal for reasons *relating to* breastfeeding on grounds of discrimination. A woman

who can prove that she was dismissed because she was breastfeeding (for example needing breastfeeding breaks at specific times) would be able to legally challenge the dismissal. An employer would still be able to dismiss a breastfeeding employee for poor performance that is unrelated to breastfeeding, however. A number of countries also have stronger protection against dismissal for *all* women returning from maternity leave for a period of time, or for a period of time after childbirth), which in-effect provides protection for breastfeeding women.

There are potential trade-offs to consider for these policies. The burden of paying for breastfeeding leave when work is too hazardous or for night work may fall on the employer, social insurance fund (or general taxation), or on the employee. How the cost falls will create different incentives with policy trade-offs to consider: if the burden falls only on the employer, then this incentivises hiring discrimination against potential future mothers; if the burden falls on the employee, then this may encourage them to take unnecessary risks with the health of the baby; and if the burden falls on social insurance then it might encourage additional leave when it is not required. Breastfeeding policies must navigate these trade-offs, which will vary with the age of the infant. Notably, Italy imposes a cut-off for some health protections once the child is seven months old, while several countries ban night work until the child is a certain age (from six to twelve months), but most countries do not stipulate the age of the child at which protections for breastfeeding employees no longer apply.

Given the potential complexities, it is also important that breastfeeding policies are simple, clear to understand, and are consistent with maternity and parental leave policies.

Evidence on the extent to which breastfeeding policies apply in practice is limited. While case law on discrimination against pregnant women is extensive, there are very few cases on breastfeeding rights. There is also limited evidence of proactive enforcement in any country, for example, similar to occupational health and safety inspections. In France, authorities can inspect workplaces for compliance with the regulations, for instance on whether an employer has a breastfeeding room. However, there is no data on, or any reports of, employers being found in violation of the regulations.

Comparability and data issues

Data on breastfeeding rates are based on national statistics in each country, and definitions and survey questionnaires may therefore differ across countries. Only selected countries are shown, based on the availability of robust data for infants aged around 6 months. The measure includes infants who are exclusively or partially breastfed (i.e. receiving both breast milk and formula, or who have begun weaning). Data for Japan refer to infants aged 4–5 months, and data for Australia refer to infants aged 5 months.

The literature identifies several factors which can explain the differences of breastfeeding rates, many of which are likely to be country specific. These include self-efficacy, social support, culture, relationships between parents, happiness in breastfeeding, and social environment (Oktarianita, Wulandari and Supriyanto, 2024). Some new parents receive limited support in hospitals and may have a stigma attached to breastfeeding if not given early support. Moreover, cultural norms also play a role. In some cases, mothers may not be able to breastfeed. There is no systematic cross-country evidence on the relative importance of these factors, and some such as cultural attitudes are inherently difficult to measure.

Sources and further reading:

WHO (2025), *Breastfeeding*, https://www.who.int/health-topics/breastfeeding
European Equality Law Network (2025), *Countries page*, https://www.equalitylaw.eu/country
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ILO (2000), C183 - Maternity Protection Convention, https://normlex.ilo.org/dyn/nrmlx_en/f?p=NORMLEXPUB:12100:0::NO::P12100_INSTRUMENT_ID:312328.22.
OECD (2025), Towards a Unified Social Benefit in Portugal: A Review of the Existing Social Benefits in Portugal and Reform Proposals for an Improved System, OECD Publishing, Paris, https://doi.org/10.1787/29d04b2b-en.

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Victora, C. et al. (2016), "Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect", *The Lancet*, Vol. 387/10017, pp. 475-490, https://doi.org/10.1016/s0140-6736(15)01024-7

Oktarianita, O., R. Wulandari and S. Supriyanto (2024), "Exploring the determinants of exclusive breastfeeding practices among first-time mothers: A narrative review", *African Journal of Reproductive Health*, Vol. 28/10s, pp. 239-248, https://doi.org/10.29063/ajrh2024/v28i10s.28.

Annex Table. CO1.5. Summary of breastfeeding employment policies

Country	Protection from work with health risks	Protection from working at night	Entitlement to breastfeeding breaks	Specific protection against dismissal
Australia	Adjustment under anti-discrimination law	No	No	No
Austria	Must reassign from risky work, otherwise health/parental benefits depending on employer	Absolute ban from 8pm to 6am, but with exceptions for some workers.	45-90 minutes depending on working hours, pay varies	No, but protection for four weeks after continuous parental leave after birth
Belgium	Must reassign from risky work, otherwise paid leave. Breastfeeding breaks are covered partly by social insurance	Discouraged, but no absolute ban	1 hour if working full-time, paid at 82% of wage, funded by health insurance	No, but protection for 4 weeks after the end of maternity leave
Canada (Ontario)	Reasonable adjustments under anti-discrimination law	Reasonable adjustments under anti-discrimination law	Reasonable adjustments under anti-discrimination law	No
Chile	Must reassign from risky work, else can possibly claim compensation	No	1 hour per day, paid	No
Czechia	Labour code requires reassignment from risky work, else can claim various benefits	On request, employers are obliged to transfer a breastfeeding woman, up to nine months after delivery, from night work to day work.	Must provide breaks, paid	No
Denmark	Must reassign from risky work, not clear if benefit support	Guidance to avoid night work	Breaks by collective agreements	No, but protected for 14 weeks after birth
Estonia	Must reassign from risky work, if unable then full pay is paid by health insurance fund	No night work unless mutually agreed	1 to 1.5 hours per day, funded from general taxation	No
Finland	Employers must consider risks, otherwise parental leave or health benefits	The employer must strive to arrange for day work for a new mother, but no outright ban	No specific provision, but entitled to rest periods	No
France	Yes, but no additional leave	No night work for one month after returning to work from maternity leave	Up to 1 hour per day, unpaid	No, but protected for 10 weeks after returning from maternity leave
Germany	Yes, normal pay if extended leave required	No night work between 8pm and 6am	1 hour per day, paid	No, but protected for 4 months after birth
Iceland	Must reassign from risky work, if unable then full pay is paid by health insurance fund	No	1 hour per day, paid	No, but protected for a reasonable period after returning from maternity/parental leave
Ireland	Must reassign from risky work, if unable then full pay is paid by employer for 21 weeks then as health-and-safety benefit	If supported medical certificate.	1 hour per day, paid Maternity Protection Act allows for breastfeeding breaks for up to two years following the birth of the baby.	No, but protected for 6 months after returning from maternity leave
Italy	Protected from hazardous work, must reassign, otherwise extended maternity pay until child is seven months old	No night work from midnight to 6am for all mothers until child is 12 months old	2 hours per day, paid (reimbursed by social insurance)	No specific protection, but protection for all mothers until child is 12 months old
Japan	Must reassign from risky work	Prohibited at the worker's request	1 hour per day (30 minutes twice per day), unpaid	No, but protected during maternity leave and for 30 days thereafter, and also protected within one year of childbirth unless the employer proves that it was unrelated to maternity
Korea	Must reassign from risky work, possible health benefits otherwise	No general protection	No	No
Latvia	Must reassign from risky work, otherwise employer-paid leave at full earnings	Prohibited (10pm to 6am)	1 hour per day, paid	No, but protection until child is 24 months old

Country	Protection from work with health risks	Protection from working at night	Entitlement to breastfeeding breaks	Specific protection against dismissal
Lithuania	Must reassign from risky work, otherwise employer-paid leave at full earnings (partial compensation from social insurance possible)	Prohibited (10pm to 6am)	1 to 1.5 hours per day, paid	No, but protected for one year after returning to work
Luxembourg	Must reassign from risky work, else leave with full pay (employer funded)	Prohibited (10pm to 6am), until child is aged 1	1 hour per day, paid	No, but protected for 12 weeks after returning to work
Mexico	Must reassign from risky work, no other benefits	No general protection	1 hour per day, paid	No
Netherlands	Must reassign from risky work, else leave with full pay (employer funded)	Require employee consent for six months after birth	Up to 25% of working time. Employers are obliged, during the first nine months after birth, to give women the opportunity to interrupt their work in order to breastfeed or to extract breast milk.	No, but protected for 6 weeks after returning to work
New Zealand	Must reassign from risky work, else sick leave or paternity leave available	No	No	No
Norway	Must reassign from risky work, unclear if not possible	If supported medical certificate	1 hour per day, unclear if paid	Yes. There is no maximum period of protection against dismissals when it comes to breastfeeding
Poland	Must reassign from risky work, otherwise leave with full pay (employer funded)	Night work requires consent of the worker.	1 hour per day, paid	No, some protection until child is aged 3
Portugal	Must reassign from risky work, else specific pregnancy risk benefit	No night work (8pm to 7am). No limit on duration of breastfeeding, but subject to medical certificate.	1 hour per day, paid	Protection until child is 12 months old for all mothers
Spain	Must reassign from risky work, else benefit support (funded by taxation) limited until the child is 9 months old	Prohibited if medically recommended	Leave for the care of a breastfeeding infant,1 hour per day, paid, until the child is 9 months old; 12 months if both parents request it.	For all mothers until child is 12 months old
Sweden	Must reassign from risky work, otherwise statutory pregnancy leave is available exceptionally for breastfeeding mothers (funded by employer and social insurance)	No	Reasonable break time, paid	No
United Kingdom	Must reassign from risky work, otherwise leave with full pay	No	No	No
United States	Must consider environment, may receive disability benefits	No	Reasonable break time, unpaid	No

Note: Only policy for Ontario province shown for Canada.

Source: Australia: Fair Work Ombudsman (n.d.), *Returning to work from parental leave*; Austria: Arbeitsinspektion (2020), *Employment of pregnant workers, workers who have recently given birth or are breastfeeding*; Belgium: Equality Law (2025), *Belgium - Country report gender equality*; Canada (Ontario): Ontario Human Rights Commission (2014), *Policy on preventing discrimination because of pregnancy and breastfeeding*; Chile: Ministry of Labor and Social Security (2024), *Labor Code*; Czechia: Ministry of Labour and Social Affairs (2025), *Labour Law*; Denmark: Equality Law (2025), *Denmark - Country report gender equality*; Estonia: The Labour Inspectorate of Estonia (2025), *Working during pregnancy*; Equality Law (2025), *Estonia - Country report gender equality*; Finland: Equality Law (2025), *Finland - Country report gender equality*; FinLex (2024), *Government Decree on the protection of pregnant, recently given birth and breastfeeding employees from hazardous factors at work*; France: Légifrance (2025), *Section 1: Protection of pregnancy and maternity (Articles L1225-1 to L1225-34)*; Germany: Federal Law Gazette (2021), *Act on the Protection of Mothers at Work, in Training and at University [Mutterschutzgesetz – MuSchG] (translated)*; Iceland: Equality Law (2025), *Iceland - Country report gender equality*; Ireland: Electronic Irish Statute Book (2004), *Maternity Protection (Amendment) Act*; Equality Law (2025), *Ireland - Country report gender equality*; Italy: Equality Law (2025), *Italy - Country report gender equality*; Normattiva (2025), *Legislative Decree 26 March 2001, n. 151*; Japan: Ministry of Health, Labour and Welfare (2024), *Maternal health management for working women*; Korea: Ministry of Employment and Labor (2012), *Labour Standards Act*; Latvia: Equality Law (2025), *Latvia - Country report gender equality*; Lithuania: Equality Law (2025), *Lithuania - Country report gender equality*; Luxembourg: Equality Law (2025), *Luxembourg - Country report gender equality*; Mexico: Justia (2025), *Federal Labor Law*; Netherlands: Equality Law (2025), *Netherlands - Country report gender equality*; New Zealand: New Zealand Gazette (2010), *Code of Employment Practice on Infant Feeding*; Norway: Equality Law (2025), *Norway - Country report gender equality*; Poland: Equality Law (2025), *Poland - Country report gender equality*; Portugal: Equality Law (2025), *Portugal - Country report gender equality*; Spain: Equality Law (2025), *Spain - Country report gender equality*; Sweden: Equality Law (2025), *Sweden - Country report gender equality*; United Kingdom: Equality Law (2025), *United Kingdom - Country report gender equality*; HM Government (1999), *The Management of Health and Safety at Work Regulations*; United States: Department of Labor (n.d.), *FLSA Protections to Pump at Work*.

Annex CO1.5. Detail on rules around employer breastfeeding support in selected countries

Canada (province of Ontario)

Legislation and regulations regarding protection for breastfeeding women are generally set at the provincial level in Canada. For example, in the province of Ontario, the law is set out under the Ontario Human Rights Code under the policy on preventing discrimination because of pregnancy and breastfeeding (Ontario Human Rights Commission, 2014).

The legislation protects breastfeeding women at work from discrimination and requires employers to make accommodations for them. The rules are not prescriptive, but offer examples of accommodations that employers should make, including flexible work, additional breaks, an appropriate breastfeeding area. As the rules are not prescriptive, the code sets out an 'undue hardship' proportionality test for the accommodations. Employers must prove that accommodations would cause excessive cost or create health and safety issues. Beyond the general requirement to make accommodations at work, there are no rules about specific work that a breastfeeding woman is unable to do.

Beyond the protection against discrimination, breastfeeding women do not have any further employment protection in Ontario.

France

The law in France around breastfeeding at work is set out in the labour code, under legislation and regulations (Légifrance, 2025). It covers the obligations of the employers in providing time and facilities, prohibited work for breastfeeding women, and protection against dismissal. There is limited case law around these provisions (European Equality Law Network, 2025).

The law requires employers of breastfeeding women with time and facilities at the workplace to breastfeed. For one year after birth a breastfeeding employee has the right to two 30-minute breaks each day to breastfeed on the work premises, but legislation does not stipulate payment. . Employers with over 100 employees are required to provide a suitable breastfeeding room on the premises (hygienic, separate, ventilated, well-lit, access to water), although the breaks are reduced 20 minutes when such a room is provided. The employer must also provide each child using the room with clean bedding equipment and linen, and the room must be inspected by a doctor every week.

There are also various restrictions on specific activities that breastfeeding women are allowed to do at work (similar to, but identical to restrictions for pregnant women). Breastfeeding women must not be exposed to the following: a hyperbaric environment, various chemical agents, mercury, risk of internal ionising radiation, or use heavy machinery. In addition, where prescribed a doctor, a woman does not have to work at night for one month following their return to work after maternity leave (from 9pm to 6am). (There are also more general protections against night work for employees with pressing family obligations). Under such cases a breastfeeding woman shall be offered alternative work without loss of renumeration. It is unclear what would happen where this is not possible.

While there is no specific protection for breastfeeding women against dismissal, women are protected from dismissal for 10 weeks following the end of any maternity leave period (including any period of paid leave taken immediately after maternity leave). This protection does not apply in cases of serious misconduct or for the expiry of a fixed-term contract.

Germany

The law in Germany regarding breastfeeding women at work is set out under the Act on the Protection of Mothers at Work, in Training and at University (Federal Law Gazette, 2021).

Employers are required to give breastfeeding women two breaks of half an hour per day, or one whole hour per day (or longer if the working day is longer than eight hours) until the child is 12 months old.

Employers must also allow women to have breaks from work as necessary, with the facilities to lie down, sit and rest as necessary. Breastfeeding breaks are paid at the worker's average hourly rate.

There is a general requirement for employers to avoid any irresponsible risks to the breastfeeding women or their child by assessing the hazards and to reorganise their working conditions as appropriate. Specific restrictions include avoiding access to various hazardous substances. Moreover, breastfeeding women are excluded from participating in piecework or other work where pay is linked directly to output, and they are also not allowed to work at night (generally from the hours of 8pm to 6am, but they may work from 8pm to 10pm or in particularly justified individual cases from 10 pm to 6 am if the employee agrees).

In case of a work ban (if it is not possible to avoid the risks at work either by protective measures or by a change of workplace), the breastfeeding woman is entitled to receive maternity protection pay in full (100%).

There is no specific employment protection against dismissal of breastfeeding women, but mothers are protected from dismissal for at least four months after childbirth.

Italy

The law on employment protection and regulations for breastfeeding women in Italy is set out in Legislative Decree 26 March 2001, n. 151 (Normattiva, 2025).

Alongside a number of specific health risks for breastfeeding women (chemicals and toxic substances) Italy prohibits various physical activities for all women who have given birth until the child is aged seven months. Until this age the employer is required to find alternative work. If this is not possible then exceptionally the mother can benefit from extended maternity leave until the child is seven months old (maternity leave is, at a minimum, available for three months after the child's birth).Night work, from midnight to 6am, is prohibited for all mothers of children aged under 12 months.

Breastfeeding mothers are entitled to up to two hours of paid breastfeeding breaks per day (assuming they work full-time). Employers can recoup this cost from social insurance.

Finally, breastfeeding women do not benefit from any specific protection against dismissal in Italy but are covered by general protection from dismissal for all mothers until their child is aged 12 months.

Portugal

The law covering employees who are breastfeeding is set out in Portugal under the National Labour Framework and the Labour Code (Diario Da Republica, 2009). The law provides for several situations in which a female worker is entitled to be exempt from working between 8 p.m. and 7 a.m. throughout the entire duration of breastfeeding, if necessary for her health or that of the child, upon submission of a medical certificate (Equality Law, 2025).

For women who are unable to work while breastfeeding, there are specific benefits available to compensate for lost pay. There is no restriction on the age of the child, however a doctor must agree that there is a risk to the child's health which may be less clear once the child is able to acquire the majority of their calories from non-milk food sources. The *Subsídio (Social) por Riscos Específicos* benefit (Specific Risk Allowance benefit) is available as both contributory-based benefit and as a separate means-tested benefit for individuals who do not qualify for the contributory-based version. The contributory version of the benefit pays a daily rate of support equal to 100% of the average daily wage over the previous six months of work. The means-tested benefit pays 80% of the Social Security Index level (equal to EUR 418 per month in 2025) (Segurança Social, 2025).

Article 65 sets out that breastfeeding time at work is counted as paid time, up to one hour per day.

Article 63 of the Labour Code presumes that any dismissal of a breastfeeding employee is without "fair grounds" and that it is for the employer to prove grounds for dismissal with the government agency responsible for equal opportunities and the court *before* terminating employment.

Sweden

The rules governing breastfeeding employees are set out under the Work Environment Act (*Arbetsmiljölagen*) and the Social Security Code in Sweden (Equality Law, 2025). The relevant regulations are set out by the regulatory authority (Swedish Work Environment Authority, 2025).

Employers are responsible for ensuring there are no risks to the health of the breastfeeding woman or the child as a result of their work and take precautionary measures to mitigate any health risks, including changing employment tasks. When this is not possible, then the breastfeeding woman is exceptionally entitled to full maternity pay. It is not clear if there is a time limit or maximum child age.

There is no automatic protection against working at night for breastfeeding women, although employers must adapt work for employees with medical certificates that state that night work would be detrimental for the health of the baby or the breastfeeding woman.

Breastfeeding women are entitled to reasonable paid break time to breast feed although an amount of time is not stipulated.

There is no specific protection against dismissal of breastfeeding woman in Sweden, but dismissal due to any reason related to breastfeeding is discriminatory and unlawful and the employer would have to prove that the reasons for any dismissal are unrelated to breastfeeding.

United Kingdom

There are no specific laws or regulations regarding breastfeeding women in the United Kingdom (such as breaks or working hours). However, women are entitled to time-off for antenatal appointments (European Equality Law Network, 2025).

Moreover, more general rules under the Management of Health and Safety at Work Regulations 1999 apply to women who have recently given birth (HM Government, 1999). These regulations require an assessment of risks for to the mother and the newborn baby from working conditions and exposure to any materials or agents. The employer should alter the working conditions to avoid such risks where reasonable (including the hours of work), where this is not possible then the employer should suspend the employee (with full pay) as long as the risks exist (e.g. the duration of breastfeeding). There are no specific rules about night work, but night work can be included in scope if a breastfeeding woman's doctor states that she must not work nights on a medical certificate.

There is no specific protection against dismissal for breastfeeding women, however the law concerning protections for women on maternity leave covers all dismissals related to pregnancy and maternity (European Equality Law Network, 2025).

Sources and further reading (Annex CO1.5):

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