

**THE IMPACT OF CORPORATE SUPPORT ON LACTATING MOTHERS'
PRODUCTIVITY AT THE WORKPLACE: CASE STUDY- NAIROBI
METROPOLITAN AREA**

BY

MWENDE FLOSSIE PRUDENCE 17YAD102995

MOLLYNTER AKOTH 17YAD103009

MBUGUA ANN WANJIRU 17YAD102908

**A management research paper submitted in partial fulfillment of the requirements of the
award of bachelor of business administration human resource management in Riara
School of Business, Riara University.**

FEBRUARY, 2020

DECLARATION

We, Mwendu Prudence, Opondo Mollynter and Mbugua Ann declare that the work contained in this management research paper is our original work and has not been previously submitted by us or any other person for a degree at any university or institution.

Sign _____ Date _____

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This management research paper has been submitted for examination with my approval as the university supervisor.

Name; _____ Sign; _____ Date; _____

ACKNOWLEDGEMENT

We thank the Almighty God who has granted us His abundant grace and has seen us through the entire process. We appreciate the school for offering a conducive learning environment and providing us with the necessary resources needed to carry out our research. We are also indebted to our supervisor Mr. Zephania Thaisaiyi Opati for his guidance and constant intervention in reshaping ideas in this paper. You remain academically insightful and a blessing to many students who pass through your hands. We are also grateful to everyone who took their time to help us in the collection of data by filling in our questionnaires.

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ABBREVIATION AND ACRONYMS

ACA - Affordable Care Act

ILO - The International Labor Organization

MIYCN - The Maternal Infant and Young Child Nutrition

PLC – Public Limited Company

WHO - World Health Organization

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ABSTRACT

A majority of mothers with infants less than 1-year-old are participating in the labor force, as the ever-increasing populations of women who are in their childbearing period choose to become employed. Breastfeeding is essential as it provides unique health advantages to both the mother and the infant, which in turn benefits the employers to whom the breastfeeding mothers work for. A working environment which is lactation-friendly and supportive to the breastfeeding mothers helps predict the breastfeeding rates among the working women. To explore the impacts of lactation-friendly support on the productivity of a breastfeeding mothers, a research study will be conducted whose main purpose is to characterize the breastfeeding policies and programs currently offered at the workplaces in Kenya, and to hopefully identify improvement areas to support breastfeeding employees in the workplace. The main objective of this study is to examine the impact of company support on productivity of lactating mothers at the work place. The specific objective is to determine the impact of time allocation, space allocation and support on the lactating women's productivity at the workplace. The research will employ exploratory design. This method is deemed appropriate because it is most helpful where restricted information is accessible and therefore the scientist desires to possess flexibility to future explore areas of analysis. The data will be collected by approach of non-public interview directed by a semi-structured interview guide consisting of open-ended queries aboard developed questionnaires with a target of one hundred respondents. The respondents will be the female workers of companies in Nairobi metropolitan area who have had youngsters at intervals of their working period. The data will be analyzed through content analysis method since it is suitable for analyzing various qualitative and unstructured data such as those collected during unstructured or semi-structured interviews or web-based documentary research

CHAPTER ONE

1.1 Introduction

This chapter focused on The Impact of Corporate Support on Lactating Mothers' Productivity at The Workplace. It entails the background of the study, problem statement which explains what influenced the researchers to carry out the study and the objectives of the research which explain the reason behind the researchers' conduct of the study. It also consists of the research questions that will be answered at the end the research, significance of the study that explains the importance of the study to the employers, policy makers and lactating employees, delimitation of the study that elaborates on the parameters of the study and limitation of the study which explains the challenges and obstacles researchers experience while conducting the study.

1.2 Background of the Study

Breastfeeding is the traditional means of providing young infants with the nutrients they need for healthy growth and development. Nearly all mothers will lactate, provided they have correct data and the support of their family, the health care system and society at massive. Colostrum, the yellow, sticky breast milk made at the top of gestation, is usually recommended by World Health Organization (WHO) because it is excellent food for the newborn. It should be initiated within the first hour after birth (WHO, 2014).

Ryan (2002) stated that even though the absolute numbers are low, it's vital to notice that the quantity of employed mothers who have chosen to lactate has nearly doubled within the last five years. Growing attention to the difficulty of breastfeeding of the working mother is attributed to the growing numbers of mothers getting into and remaining within the labor force. Inaccessibility of time, space and support have been identified as barriers to working mothers' breastfeeding and their productivity. The employers got to perceive that mothers got to solely lactate for the primary six months of an infant's life and supply the fresh mothers within the geographic point support. Employers may gain advantage from their feminine workers' breastfeeding and lactation behavior as a study has shown that a friendly policy and regulation supporting a lactation program at workplace may improve employee's productivity and encourage mothers to come to work (Ryan, Wenjun & Acosta,2002).

In Indonesia, only 21.5% of outbuilding operating mothers get access to correct lactation facilities. It's calculable that 7.5% of women employees have the privilege to have access to adequate lactation program at their workplace. The prevalence of exclusive breastfeeding among working mothers, particularly plant employees in 2015 was solely 19%, which is so much behind national prevalence that was 32%. According to the Breastfeeding Mothers Bill 2017 –Kenya Law, employers shall give an affordable break time and a lactation place to a breastfeeding mother for functions of breastfeeding the baby or expressing breast milk for the baby throughout working hours. Though increasing variety of huge corporations, for instance, Safaricom Public Limited Company (PLC), are compliant with demands for a breastfeeding-friendly work

environment by providing lactation rooms and breast-pumping breaks, the effectiveness for intention to use these breaks to express milk is unsure (Breastfeeding mother's bill 2017).

1.1.1 Nairobi Metropolitan Area.

The Nairobi metropolitan area consists of five counties namely Nairobi, Kiambu, Kajiado, Machakos and Murang'a. Nairobi city is the capital of Kenya and a place where a lot of business is carried out. This county has seventeen constituencies. This county is home to many businesses and companies therefore generating a big chunk of the country's revenue.

It has a vision to be a city of choice with the mission to source out quality services that are not only affordable but quality. It is also its mission to create a suitable atmosphere for development in various areas e.g. social through the support of a team that is committed. It is also where the parliament is situated.

1.2 Problem Statement

This analysis can examine how company support affects productivity of lactating mothers at the workplace. Consistent with WHO and other nutritional programs, there are several benefits of breastfeeding to infants and mothers within the postpartum period. However, despite the documented benefits, most employers are of the contrary opinion and assume that lactating at the workplace entails some mounted prices like providing rooms for lactating mothers and allocating time to breastfeed. Impediments to breastfeeding at the workplace include employers' perception that the presence of infants at the workplace reduces mothers' productivity

1.4 Objectives of the Study

1.4.1 General Objective

To examine the impact of company, support on productivity of lactating mothers at the work place.

1.4.2 Specific Objectives

- i) To examine the impact of time allocation to breastfeeding mothers' productivity at the workplace.
- ii) To find out the link between allocation of space for breastfeeding and productivity of lactating mothers at the workplace.
- iii) To examine the result of providing support to lactating mothers and their productivity at the workplace.

1.5 Research questions

- i) Is there an impact of time allocation for breastfeeding to lactating mothers and their performance at the workplace?

ii) Is there a vital relationship between allocating space for breastfeeding and the lactating mothers' performance?

iii) Is there a positive result if support is offered to lactating mothers in regard to their productivity at the workplace?

1.6 Significance of the study

To the employers- This can be an associate eye-opener because it will give employers insight on how support on lactating mothers will increase productivity and motivation at the work place. In line with Kelley Zanfardino (2010), these advantages embrace raised worker retention, raised loyalty and productivity, tending savings and increased public image. Moreover, if employers are unaware of what's needed, this analysis will justify that the Kenyan law currently needs employers to produce breastfeeding staff with affordable break time and a personal, non-bathroom place to specific breast milk throughout the workday, up till the child's 1st birthday.

To the policy makers- This analysis makes them purpose to extend attention to, investment in, and action for cost-efficient interventions and policies which will facilitate lactating mothers within the workplace improve exclusive breastfeeding rates among infants below six months.

To the school- This analysis can build the faculty perceives and advocates a clean space or space and supply running water and privacy to the mother to pump her breasts or to breastfeed her baby. Refrigeration may additionally be counseled to modify storage of pumped-up breast milk which may be fed to the baby later at home. Moreover, it will allocate time for mothers to lactate throughout working hours.

1.7 Scope of study

This analysis solely specialized on lactating mothers who come back to work after their maternity leave. It will solely cover the impact of time, space and support given to lactating mothers at the workplace.

The study was conducted in the companies around Nairobi and Kiambu which are part of the metropolitan areas in Kenya. It looked at mothers who have youngsters aged 2-6 months and the way the support provided (if any) has affected their productivity.

1.8 Limitation of the study

The study won't be able to manage the responsiveness of the respondents as some could also be reluctant to participate within the interviews or answer questionnaires. It won't be able to also manage the biasness or unreliability of the information. The study is limited to the extent of information towards exclusive breastfeeding since the respondents could be ignorant. The study will also be unable to manage the availability of respondents for the analysis.

2.0 CHAPTER TWO; LITERATURE REVIEW

2.1 Introduction

This chapter covered theoretical review whereby the authors used Herzberg two factor theory that elaborated well on the interrelationship of corporate support and performance, empirical literature review which elaborated more on the variables that is time, space and support and how they affect the lactating mothers' productivity, conceptual framework showing the dependent variable and depended variable and finally gaps which elaborates researches that have been done before and to fill how to fill the gaps identified.

2.2 Theoretical review

2.2.1 Herzberg two factor theory

This theory was developed by psychologist Fredrick Herzberg in 1959. It states that there are certain factors in the workplace that causes job satisfaction while a separate that cause dissatisfaction, all of which act independently of each other. According to Sager, Rafat and Agarwal (2012), the term job satisfaction is wide and it varies.it can be described as happiness of the employees at work. Further, members of staff who are satisfied tend to do their job properly as their morale and motivation is uplifted (Rizwar&Mukhatar 2014).

Job satisfaction could be understood as the combined circumstances of psychological, physiological and environmental factors leading to employees feeling satisfied at work(Aziri, 2011).Herzberg defined two sets of factors in deciding employees working attitude and level of productivity, named motivation factors and hygiene factors (Robinson 2009).Motivation factors are intrinsic factors that will increase employee's job satisfaction; while hygiene factors are extrinsic factors that prevent any employee's dissatisfaction. In order to increase performance or productivity, motivation factors must be addressed.

The extrinsic factors are important as without them, members of staff in the organization would feel dissatisfied. Hence hygiene factors could be defined as basic needs of employees, for example favorable working environment, favorable policies, support from top level management and supervision from their respective supervisors. If the hygiene factors are fulfilled, the feelings of the members of staff in the organization remain unchanged and would remain neutral (Yusoff, Tan &Idris 2013).

Robinson and Judge (2013), states that intrinsic factors would provide meaning to the members of staff in the organization in relation to their jobs for example; feeling of recognition, achievement and growth opportunity. In short, the hygiene factors would eliminate staff dissatisfaction while the motivational factors would provide satisfaction and motivation at work (Yusoff et al.,2013).

Sidik, Hamid, Ibrahim and Zarina (2017) states that staff satisfaction is an essential factor which cannot be neglected as the employees are the prime movers of the organizational excellence. Therefore, meeting and fulfilling their needs are of great importance for continuous improvement of organizational productivity. They further states that although satisfaction is not relatively a

new issue and it has widely been studied, the rapid changes would require organizations to respond quickly and wisely towards staff satisfaction. Sidik (2017) adds that employees need to be managed accordingly as the predictors of job satisfaction would determine satisfaction level and eventually trigger them to stay or to leave. Employees who feel dissatisfied would react by applying for other jobs which would result in staff turnover (Sidik, Ibrahim & Zarina, 2017).

From the discussions above, it's evident that it is important to offer the above-mentioned factors to boost productivity at the workplace. For instance, lactating mothers may not only require the motivational factors but also hygienic factors like the favorable company policy that would incorporate some breastfeeding practices.

2.3 Empirical literature review

2.3.1 Time

Breastfeeding or nursing breaks are short periods that are reserved during work day to breastfeed one's child or express milk to be fed later to the child. They are usually consigned to breastfeeding mothers, who in some cases must prove by means of a medical certificate that they are in fact breastfeeding. This measure is expected to further promote breastfeeding and help to meet the target of 60.5 percent of mothers breastfeeding at six months (Washington, 2010). Perrine et al., 2015 view lactation as a process that is sensitive in time and physiologic in nature. They also say that experiences of the first hours and days after birth usually affect a mother's ability to continue breastfeeding after leaving the hospital. Their analysis from 2007-2013 revealed that key aspects of maternity care supportive of breastfeeding have shown consistent improvement. This means that if the lactating mothers at the workplace are given ample time to breastfeed their babies, they will be more productive in the long run.

Ryan, Wenjun and Acosta (2002) found out that women who participated in paid employment within the first 6 months after childbirth have a negative average number of hours worked per week related to breastfeeding duration. The more hours a woman worked, the more likely she was to discontinue breastfeeding. Mothers working part-time are more likely to initiate and continue breastfeeding or exclusive breastfeeding. Further, according to (Cardenas, 2002; Ryan et al., 2002), women working less hours after returning to work are more likely to continue breastfeeding because they have lower chances of experiencing time-based conflicts with regard to working and breastfeeding.

Bjerklie (2002) also addresses time-based conflict by echoing that lactating mothers at the workplace should be allowed to work on a flexible schedule and should have short breaks to either breastfeed or express milk. The study found that insufficient time to express is a major problem reported by working mothers who try to express breast milk at work. The break given to women to express milk must be sufficiently long enough for the woman to prepare the milk for storage and redress herself to return to work. This is particularly likely when onsite child care is not available.

Some organizations require employees to pump at specific times while others may give women the flexibility to pump when needed. Despite the employers having complied with the law, women may not feel supported enough to pump at work or the environment may hinder them

from breastfeeding. Women who have a sense of responsibility and greater job satisfaction were more likely to initiate breastfeeding (Guendelman et al., 2009). Sattari et al (2013) echo that job demands, manager support, and coworker support have been associated with breastfeeding duration for employed women. According to the Affordable Care Act (ACA) 2010, employers allocated time for women to pump milk in the workplace when need arose. It also states that lactating mothers should be provided with time to express milk at work. Earlier research conducted before the ACA showed that 94% of companies allowed lactating mothers to pump at work while 73% allowed them to pump when needed (Hojnacki, Bolton, Fulmer & Olson 2012). After the passage of the ACA, research indicated that 59% of breastfeeding employees had sufficient break time for milk expression (Kozhimannil, Jou, Gjerdingen & McGovern, 2016).

Waite and Christakis (2015) on the other hand found that increased awareness on the law on breastfeeding at the workplace may benefit employers since time allocation to breastfeed has been positively associated with job satisfaction among the lactating women. Hearsay, it would be more efficient if the lactating mothers at the workplace were given time to breastfeed their babies within the work area. It would motivate them more since they have the opportunity to work and still attend to the needs of their infants. This will in turn improve their overall productivity.

2.3.2 Space

The Maternal Infant and Young Child Nutrition (MIYCN) policy and strategy and the Health Act 2017 in Kenya requires that all employers establish lactation stations at the workplace among other requirements. However, a study by (Raju, 2006) showed that some employers still hold onto the perception that the presence of infants within the workplace reduces mothers' productivity, therefore put in place rules and different regulations that bar youngsters from the workplace, and an absence of kid care on the point of the workplace. These aspects of the work setting are therefore reported to be obstacles to breastfeeding e.g. lack of privacy (Taveras, 2003).

The number of employed mothers who have chosen to suckle has grown within the last five years (Ryan, 2002), therefore employers are being pushed to provide lactation rooms and lactation programs (Prince, 2002) despite their reluctance due to the perception most hold concerning breastfeeding in the workplace.

The Ministry of Health in Kenya in 2018 stated that the rooms ought to be sanitary with accessories like sinks. The space required does not have to be a very big room. However, it should sufficiently accommodate the assets such as refrigerators, chairs, breastfeeding pumps, and if a refrigerator is lacking, ice pack storage will be sufficiently preferable. The room should also be well ventilated and a good lighting system should be applied. The organization should also ensure that the equipment is fit for use and that there will be no compromises in terms of the health of the nursing mother and the infant. An assessment should be carried out before the room is declared fit for use in order to check whether the space is conducive for this purpose. Guidelines on how to control infections should be followed to latter (Ministry of Health, 2018).

According to Biagioli (2003), breastfeeding mothers could successfully put into use a number of diverse pumps. However, an electric pump that has been hospital graded pump. This type of

pump is a large and is considered to be more expensive. An individual use double electric pump has the same size as that of a briefcase and is easy to carry to and from work and is considered to best suit the women working away from their homes for more than 20 hours on a weekly basis. The hospital grade electric pumps may be usable by more than one individual. However, the individual pumps may cause viral diseases hence are usable by one person at the maximum (Biagioli, 2003). It is also to the best interest to have a refrigerator or container with ice packs available in the case a woman needs her milk expressed for her child to be later fed since human milk contains some properties that have antibacterial tendencies that maintain its freshness hence bringing in the necessary need for a good storage system (Ogundele, 2000).

Cardenas, an associate in Nursing Major (2005) expressly showed that an institution of such facilities can result into a work-life conflict resolution strategy and can also be a good avenue for promoting work-life balance among working mothers. Wyatt (2002) also strongly suggested improved that breastfeeding practices should be looked into and also be improved since (Tsai, 2013) pointed out that the least support measures taken in accordance with facilities for lactation at the place of work for women coming back from their maternal leaves has a big contribution to the practice of lactation practices that are below the recommended standards.

The International Labor Organization (ILO) in the year 2000 suggested that where practicable, nursing facilities should be availed hygienic conditions that are appropriate near or at the place of work. Employers therefore need to bring a balance between lactation and the concerned employee's work contract so as to assist them in revisiting the existing workplace policies; thus, planning help programs for them to maximize the implementation of breastfeeding support at the workplace setting (McIntyre, et al 2002).

In conclusion, there was a need to have a space set aside for the sake of facilitating breastfeeding for lactating mothers. If the employer is inconvenienced by having a permanent space for breastfeeding due to limiting factors such as a lack of enough resources or limited space, the employer may look for an alternative such as having an office temporarily set aside for lactating purpose.

2.2.3 Support

Increased education, professional preparations and changing norms regarding the participation of women in the workplace have resulted in an increased number of women who return to work in the first year following the birth of their infant babies. Cardenas and Major (2005) suggests that the strain a mother experiences in attempting to continue breastfeeding while working is influenced by the extent to which the organizational atmosphere is "lactation-friendly." The Healthy People (2020) intends to increase the proportion of employers who support "worksites lactation support programs" to 38% within their organizations (Havilland, et al. 2015). Support for breastfeeding can come from various sources such as spouses, healthcare providers, institutions, social or community organizations, cultural expectations, family, coworkers, friends, nurses, or managers (Rojo, A. 2016)

Organizations can offer support to breastfeeding mothers at work place through the following ways: Prenatal Education-Perhaps the most beneficial stand employers can take is to be advocates for and educators about the benefits of a minimum 6-month breastfeeding duration, particularly given that maternal education is among the strongest predictors of how long a woman will breastfeed (Ryan et al., 2002). Prenatal education shapes women's intentions with regard to breastfeeding durations as it builds realistic expectations regarding breastfeeding, which helps the mother develop a better sense of control in matters of breastfeeding their infants(Cardenas & Major, 2005). Women who have stressful jobs such as teaching may already feel emotionally, physically and mentally tired and exhausted, which can also impact their decision to breastfeed (Hooper, 2013). Further study by Heymman et al. (2012) also supports that women who do not have breastfeeding breaks will not be able to continue with the practice past the recommended six months duration.

The organizations should according to Crenshaw, (2005) ensure presence of a non-maternity staff nurse within the workplace, who can consult a mother-baby nurse or lactation specialist and enlist the need for support from the other employees, in order to ensure and encourage frequent mother-infant contact and protect lactation, this especially for mothers who have been separated from their infants due to illness. For example, a mother-baby nurse can show the mother and the non-maternity nursing staff how to hold the pump in place over each breast and how to determine the lowest effective suction rate. Further study by Payton (2019) suggests that employees who participate in a return-to-work consultation with a nurse on breastfeeding maintenance were able to breastfeed for at least 6months (Balkam, et al. 2011).

Lactation programs and equipment- According to Seijts, (2002) Reasonable accommodation for breastfeeding mothers at the workplace includes adjusting workplace policies and practices so that no one is disadvantaged for employment opportunities, denied benefits or blocked from carrying out the essential components of a job because of their individual differences. Employers' efforts to support lactation can range from merely providing space or equipment to sponsoring a comprehensive lactation program (Cardenas & Major, 2005).

A workplace lactation program can provide information to all employees about the benefits of breastfeeding and the organizational policy on breastfeeding. Specialized information and support on breastfeeding should be provided to the female employee who is pregnant, immediately after delivery and when she is ready to return to work. The organizations can also seek the assistance of professional lactation consultants to provide individual counseling and support groups for guidance and emotional support (Angeletti,2008).

Supervisor Support- Seijts (2002) concurs that there's a need to accommodate nursing mothers and improve breastfeeding experiences at work, as the job satisfaction of the nursing mothers may decrease if they find difficulties in breastfeeding due to opposition from colleagues and the management.

According to the ministry of Health (2018), the organizations can also encourage peer support from breastfeeding female employees, by consciously becoming a support system for one another, seeking information on breastfeeding friendly workplace practices, engaging in

negotiations that improve support for breastfeeding friendly workplace and aspire to be

champions for workplace support on breastfeeding. Payton, et al (2019) also says that senior management support on breastfeeding accommodation may be used to develop a written workplace lactation policies and practices that ensure they are communicated to the rest of the employees.

The support for women who choose to continue breastfeeding at the workplace by the employers through addressing and overcoming breastfeeding barriers, results in a more satisfied and loyal employee in the organization (Cohen, Lange, &Slusser. 2002; Mensah. 2011; Waite & Christakis. 2015). Corporate lactation support programs and exclusive breastfeeding for six months contributes for better health for the mother and her infant and also lowers the risks of sickness and thus helps save money which might otherwise be used for healthcare, which in turn helps keep kids healthier so that your employees can take less time off the job to care for their sick infants and also improves their loyalty towards their employers and the organization as a whole (Ministry of Health, 2018).

2.4 Conceptual Framework

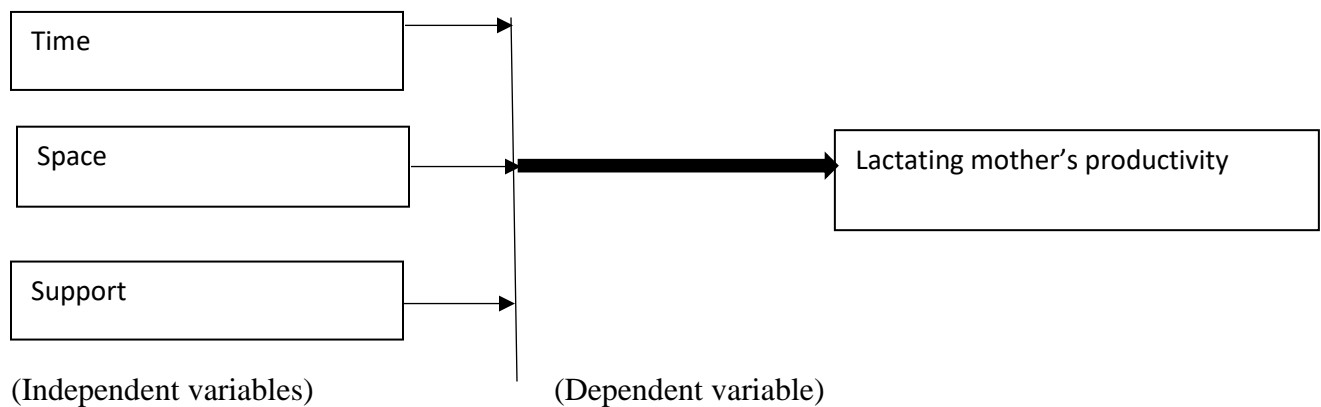


Figure 2.1 Conceptual framework showing impact of corporate support on lactating mothers' productivity Source: Authors (2020)

2.5 Gaps

In one of the interviews conducted by Stratton and Henry (2011) brought to light five main themes, one case stated that Support for breastfeeding was considered on a case-by-case basis, and that the cost of providing breastfeeding support outweighed the benefits. Secondly, there was lack of formal breastfeeding action despite the fact that employers had good attitude about breastfeeding at workplace. Moreover, employers interviewed had no intention of supporting workplace breastfeeding. Also, manager's interpreted limitations due to the size of the

organization. Lastly, the exact roles of employers in providing breastfeeding at workplace were not clear to them (Stratton & Henry 2011).

In other research on workplace breastfeeding done by Cardenas and Major (2005) suggests that future research should also explore factors that contribute to a woman's prenatal intentions to feed, particularly as they relate to her intentions to return to paid employment. In particular, research should investigate whether or not a woman's intentions to breastfeed impact the type or intensity of conflicts she experiences upon returning to work (Cardenas, 2005).

Another study by Kioko (2017) on the effect of family-friendly working environment on productivity of the working mother, a case of a demographic of working mothers across different industrial within Nairobi, Kenya found out that organization managers and supervisors sometimes act as barriers to workers achieving an appropriate work family life balance, which was in line with Kowalski and Swanson (2005) which stated that managerial supervisory support and the use of informal communication skills were factors that would influence the successful implementation of workplace breastfeeding policies and improve a mothers productivity, the study thus suggested that lactation rooms for breastfeeding and milk expression should be provided in organizations, and that communication on work life balance should be enhanced in the organization to help change the attitude of supervisors and other colleagues towards the working mothers, we as the researchers saw this gap and perceived it necessary and important to carry out a study on how these aspects concerning support for breastfeeding mothers are executed in organizations.

Furthermore, a research done on evaluation of workplace lactation support among employers in two Pennsylvania, states that future research should be conducted to justify lactation space and policy as well inquiring in details the employers' interpretation of lactation support at workplace (Pyton et al., 2002)

Moreover, a recent research done on importance of creating breastfeeding facilities for lactating mothers at the workplace, a case of Safaricom company (PLC), suggest that further studies should aim at investigating the experiences of lactating mothers working in the informal sector especially in the wake of Health Act (2015) that requires all employers to avail spaces for breastfeeding at workplace (Koballa, 2016). Despite the assorted researches showing the advantages of workplace breastfeeding, most employers still show no intentions of implementing formal breastfeeding programs. This analysis was thus been prompted by the necessity to supply a light-weight to the employers who have not adopted the support initiatives at workplace on the importance of supporting breastfeeding within the workplace and its advantages.

3.0 METHODOLOGY

3.1 Introduction

This chapter outlines the design used to conduct the research that is how the data was collected and analyzed, it further discusses the study population which was female workers in Nairobi metropolitan and data collection method that was utilized, which was primarily questionnaire and one on one interview, and finally the type of data collected and how it was analyzed.

3.2 Research design

Exploratory design was used. This study design is most helpful where restricted information is accessible and therefore the scientist desired to possess flexibility to future explore areas of analysis (Polonski&Waller 2005; Cooper& Schindler 2006). The primary goal of exploratory research is to realize higher understanding of an issue or situation and is an appropriate way to provide groundwork for later, additional studies. The information that is openly availed about a certain domain of study determines whether an exploratory or descriptive study will be undertaken therefore in this case, an exploratory research design best suits this case (Routio, 2007).

The authors liked the exploratory research design as there are few studies on workplace breastfeeding, and the few are abundantly out-of-date and so the authors wished to have interaction with employers to search out the association between company support on lactation and mother's productivity. This methodology was with success employed by Kelly (2008).

3.3 operationalization and Measurement of Variables

Table 3.1

Variable	Definition	Operationalization	Measurement Scale
Time	This in this case refers to the allocated time set for lactating mothers to breastfeed their young ones while at the workplace.	Breastfeeding and breastmilk expression take time. How much time depends on how old the baby is when the mother returns to work. Mothers who combine breastfeeding and formula feeding for their babies pump less frequently and for shorter time periods.	Ordinal
Space	This refers to the physical space/room that is consecrated or reserved for use specifically by the	There is the need to have a space set aside for the sake of facilitating breastfeeding for lactating mothers. The space provided should have breastfeeding equipment i.e.	

	lactating mothers in the workplace.	breast pumps, sitting chairs, stepping stool, refrigerator for storing baby milk, etc.	Ordinal
Support	Support refers to the actual support given to lactating mothers at the workplace by both the employer and the fellow colleagues.	The support for women who choose to continue breastfeeding at the workplace is exhibited by the employer organization through; pre- and post-natal education, lactation programs and equipment, supervisor's support, peer support, employer support groups etc. Breastfeeding employees who are supported in the workplace report higher productivity and loyalty, it also creates a positive public image for the org.	Ordinal

3.4 Target population

The study was conducted amongst the feminine workers of institutions in Nairobi metropolitan area, with a target of two main counties namely Kiambu and Nairobi which are part of this large area, who have had infants at intervals of their working period. The unit of research was the individual feminine worker. The researchers saw it fit to engage this study in this area since there is a short time frame to carry out the study. Any institution with feminine workers in the Nairobi metropolitan area was suitable for the researchers since the proximity is favorable to the researchers given the short time frame to complete the project at hand.

3.5 Data Collection

The researchers used the convenience sampling design. This is to mean that the researchers targeted those that are easily accessible and close to the place where they were collecting the data according to Lisa (2008). Since the collection was in random institutions around the areas that are in the metropolitan, the convenience sampling design best suits the researchers for easier data collection. The target population members that meet the requisites are all included to give information that aided the study. This design is easy and convenient to the researchers (Dorneye 2007).

3.6 Data Collection Procedure

The method mainly used through questionnaires. They were distributed among female workers to aid in the analysis via their email addresses as an online link. The link was shared through WhatsApp for convenience. The filled forms automatically registered on the researcher's end

once submitted. Alternatively, the analysis utilized primary knowledge which were collected by approach of non-public interview directed by a semi-structured interview guide consisting of open-ended queries aboard developed questionnaires. Where allowable, voice notes were recorded. This ensured that respondents provided maximum amount of information as doable and additionally offered a chance for the researchers to probe further. Harwood and Garry stated that these methods are easier for analysis during content analysis. It is the primary method and a better interpretation is enhanced when data is collected through these methods (Harwood & Garry, 2003).

3.7 Data Analysis and Presentation

The primary analytical method used in this study is content analysis. “Content analysis is a method for analyzing the content of a variety of data, such as visual and verbal data. It enables the reduction of phenomena or events into defined categories so as to better analyze and interpret them” (Harwood &Garry, 2003). Williams and Plouffe (2007) emphasize that such content analysis encourage researchers to “step back from their individual trees in order to assess the entire forest of knowledge generation within a discipline.

Content analysis is suitable for analyzing various qualitative and unstructured data such as those collected during unstructured or semi-structured interviews or web-based documentary research. By involving several researchers into content analysis, validity and reliability of (literature) sampling and data analysis may be broadly enhanced (Duriau ,Preffer&Reger 2007).

Content analysis focuses on meaning, structure, and patterns in text, in contrast with bibliometric analysis that explores publication trends and connections between texts, authors, and sources in a particular field using techniques such as citation analysis (Palmquist, n.d.; Thelwall, 2008).

Miles and Huberman, (1994) states that this technique of data analysis may also require both Semantic content analysis which includes coding and counting how frequent words appear on the questionnaire, and Inferred/ Latent content analysis, which involves coding for a latent feeling tone beyond what is directly said by the respondent to obtain the inferred meaning of a statement

or phrase. The information collected were analyzed in line with the precise study objectives as the major themes. Verbatim quotes are were used throughout knowledge presentation to amplify the voices of the informants. Respondents’ information is were given within the report (Miles & Huberman, 19918

3.8 Ethical issues

Research ethics are a set of ethics that govern how scientific and other research is performed at research institutions such as universities and how it is disseminated. According to this research, the following research ethics are going to be observed to the latter by the researchers.

Confidentiality in this research will apply where every information provided by the respondents is private and free from exposure to unauthorized persons. Every information that will be obtained herein is only for education purposes and will not be used for personal gains or otherwise. This research is intended to be honest and genuine in the delivery of the information collected without extrapolating unreasonably from the results obtained in this research.

This research was based on the researchers own effort and not plagiarized or copied from other people's work as our own. Respect to copyrights and patents as well as other forms of intellectual properties will be observed. The researchers also acknowledged any contributions to this research. The researchers intended to reduce any possible harm on parties involved to the minimum and maximize the benefits for both the participants and other people. The study aimed at avoiding any biasness in any aspect of the research and also approve that there will be no financial gains or personal interest in this research.

CHAPTER FOUR

FINDINGS, PRESENTATIONS AND INTERPRETATIONS

4.1 Introduction

In this research, data was collected and analyzed using qualitative methods, where the researchers were able to gather statistical information and collect testimonial narratives from participants with the use of a questionnaire.

The 13 sets of close-ended responses were analyzed to find the frequency of the replies given as well as to find common themes and patterns among the respondents. The researchers were able to get a glimpse of what the participants are or have experienced when breastfeeding at the workplace through thematic analysis.

4.2 Sample characteristics

The main elements that were used for this study included *Age* and *Education Level* of the participants among others in the collection of data, which gave the researchers a deeper understanding and knowledge on the information concerning the age and education backgrounds of the participants.

The questionnaire required responses such as strongly disagree, disagree, neutral, agree, and strongly agree; where the responses were tallied for each question and the percentages of the participants' responses were calculated out of the 31 total members. The emerged themes from the data collection and findings are presented.

4.2.1 The Study Response Rate

The study had not limited the number of respondents who should participate in responding to the online survey questionnaire as it used convenience sampling method, which required any available participant within the scope of the Nairobi metropolitan city, Kenya to participate in the survey. However, there were 40 attempts to the questionnaire with only 31 of them which were eligible enough for conducting data analysis and presentation. The response rate of the respondents is presented in Table 4.1.

Table 4.1 Distribution of the Respondents by Responses Rate

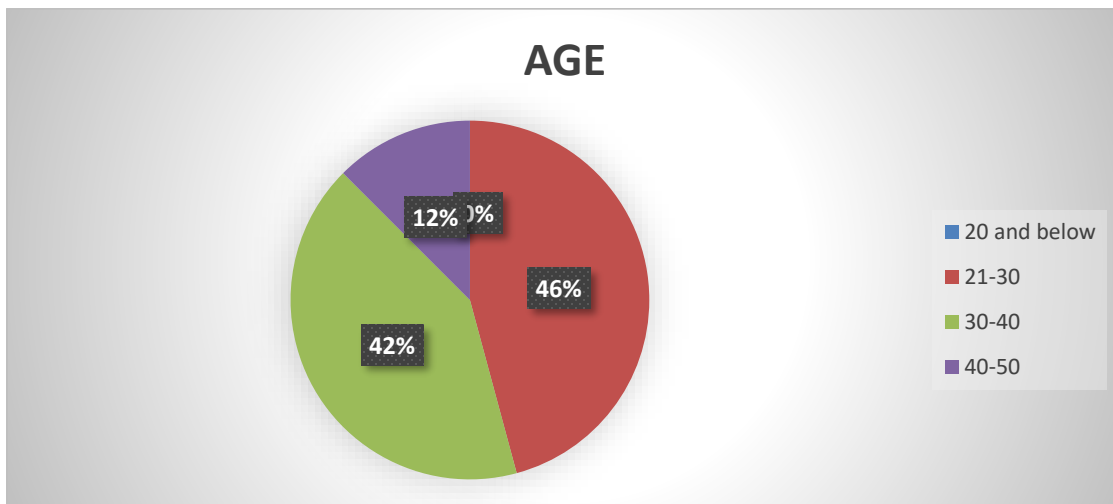
Number of Questionnaires issued out	100
Actual Responses	40
Spoilt Responses	9
Responses eligible for data analysis and presentation	31

(Source; Primary Data,2020)

4.2.2 Demographic Characteristics of the Respondents

The respondents in this section of the study were breastfeeding mothers who were within the scope of the Nairobi Metropolitan City, Kenya and who had infants aged between 2-6 months. The lactating mothers were categorized by their age differences and also by their education levels.

Figure 4.1 Distributions of Respondents by Age

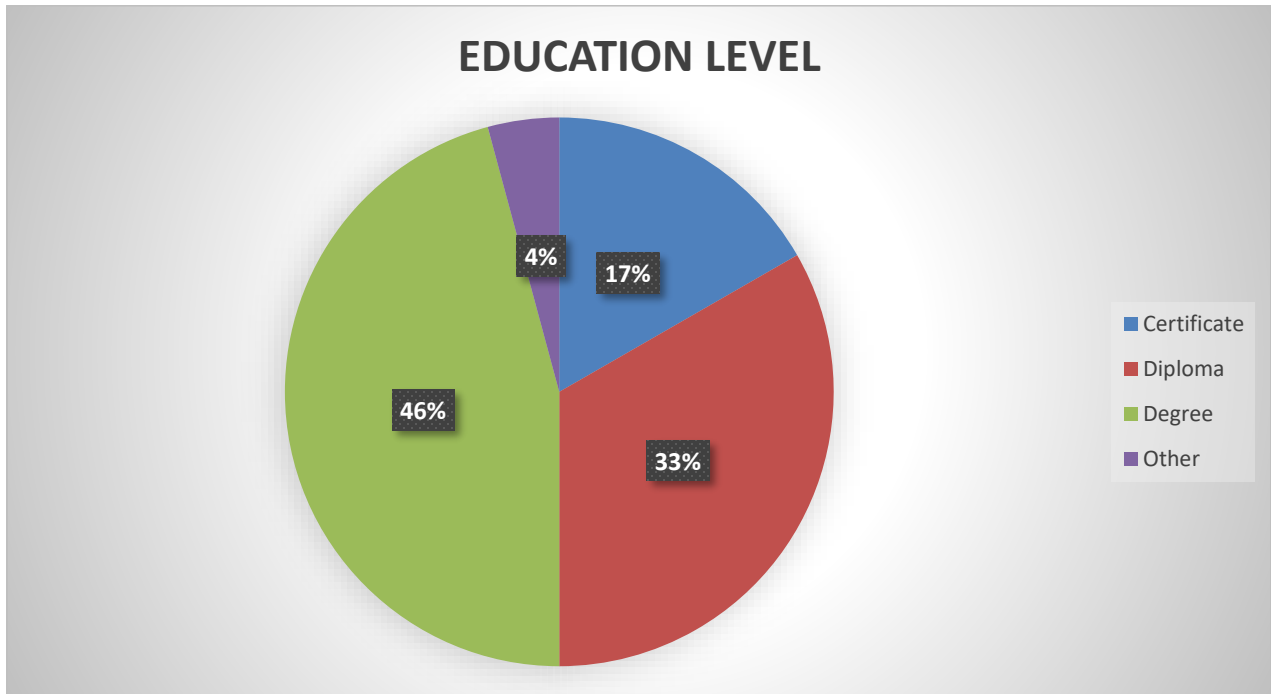


(Source: Primary Data, 2020)

The findings above shows that the respondents are mostly young people who are breastfeeding and are still working at the same time, with 46% of the total respondents aged between 21-30 years, 42% of them aged between 30-40 years, while 12% aged between 40-50 years and 0% for below 20 years of age. This means that most of the respondents are employed youth generation who are in marital status or are single parenting and are faced with the responsibility of taking care of their infants and hence find themselves having constraints in trying to balance work-life

and family. Therefore, having an organization that considers their needs and supports them helps reduce stress and hence are able to concentrate more on their work which yields higher productivity to the organization in return.

Figure 4.2 Distributions of Respondents by Education Level



(Source: Primary Data, 2020)

The findings on the distribution Figure 4.2 above shows that 17% of the respondents had attained the certificate level, 35% had attained Diploma programs, the majority of the respondents 47% had qualified for a degree program and finally only 1 % of the respondents had other educational qualifications. The findings hence indicate that majority of the respondents were educated with degree qualifications and it therefore means that most of them had knowledge of the importance of breastfeeding their infants for a duration of 6 months, they were also aware of how effective the organizations' support was, to the general productivity of the breastfeeding employees, for example through educational programs and support from their colleagues.

4.3 Descriptive Results and Analysis

This section will give a detailed report of the findings on the specific objectives of the study which include; Time, Space and Support provided to the breastfeeding mothers at the workplace, where the findings will be presented in form of graphs and percentages.

4.3.1 Time allocation

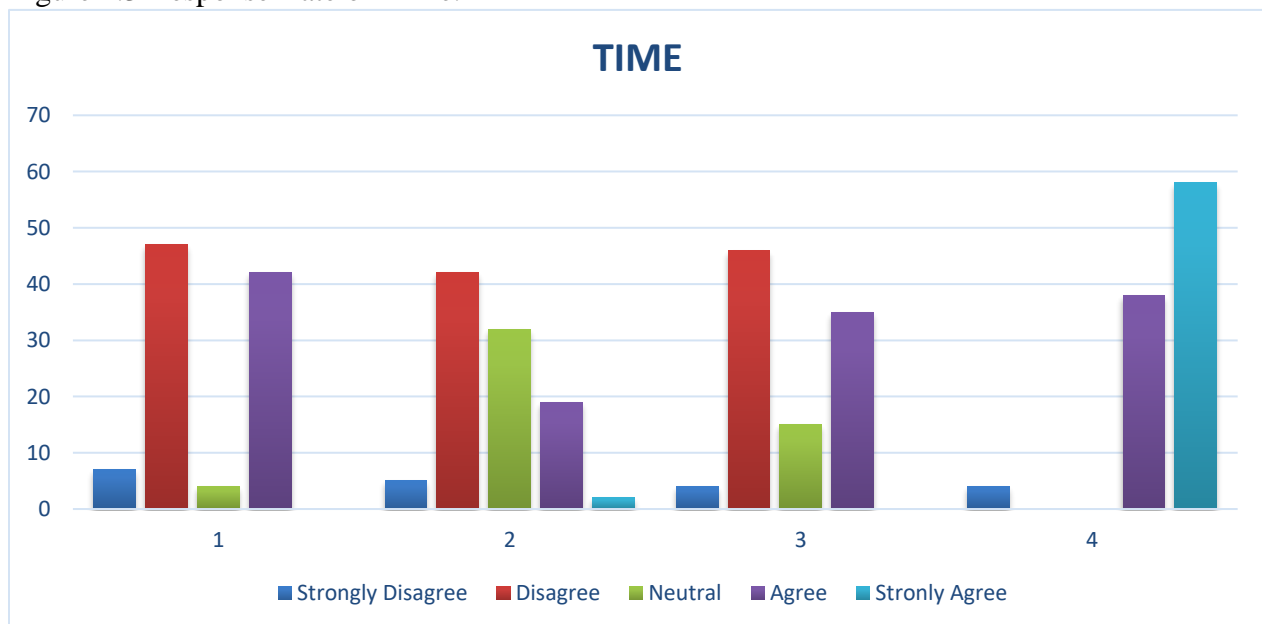
One of the objectives of the research was to find out whether time allocated to breastfeed at the workplace has an impact on productivity of lactating mothers. The table below clearly shows how the respondents feel about time allocation for breastfeeding at the workplace.

Table 4.2 Time responses tabulation

Question/statement	Responses in Percentages (%)				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The business allows breaks for breastfeeding or pumping milk	7	47	4	42	0
The breaks are long enough	5	42	32	19	2
The breaks are flexible	4	46	15	35	0
I feel pain or discomfort if I don't breastfeed or express milk	0	4	0	38	58

(Source: primary Data, 2020)

Figure 4.3 Response Rate on Time.



(Source: Primary Data, 2020)

From the Table 4.2 and Figure 4.3 above, most businesses do not allow breaks for breastfeeding or pumping milk at the workplace as shown by the highest percentage which is 47% of respondents who disagreed with the statement. This contradicts the Affordable Care Act (2010) which recommends that lactating mothers should be provided with time to express milk at work. In addition, the lactating mothers at the workplace find the breaks not to be long enough because most respondents accounting to 42% disagreed with the statement. This fails the expectations of Bjerklie (2002) who suggests that breaks given to express milk must be sufficiently long enough for the woman to prepare milk for storage and redress herself to return to work if childcare is not available at the workplace. Also, the breaks are not flexible because 46% of the respondents disagreed with the statement, which is in contrast to Bjerklie’s 2002 view that lactating mothers at the workplace should be allowed to work on a flexible schedule and have short breaks to breastfeed or express milk. It's also true to say that the lactating mothers feel discomfort if they do not breastfeed or express milk as justified by 58% of respondents who strongly agreed with the statement.

4.3.2 Space Allocation

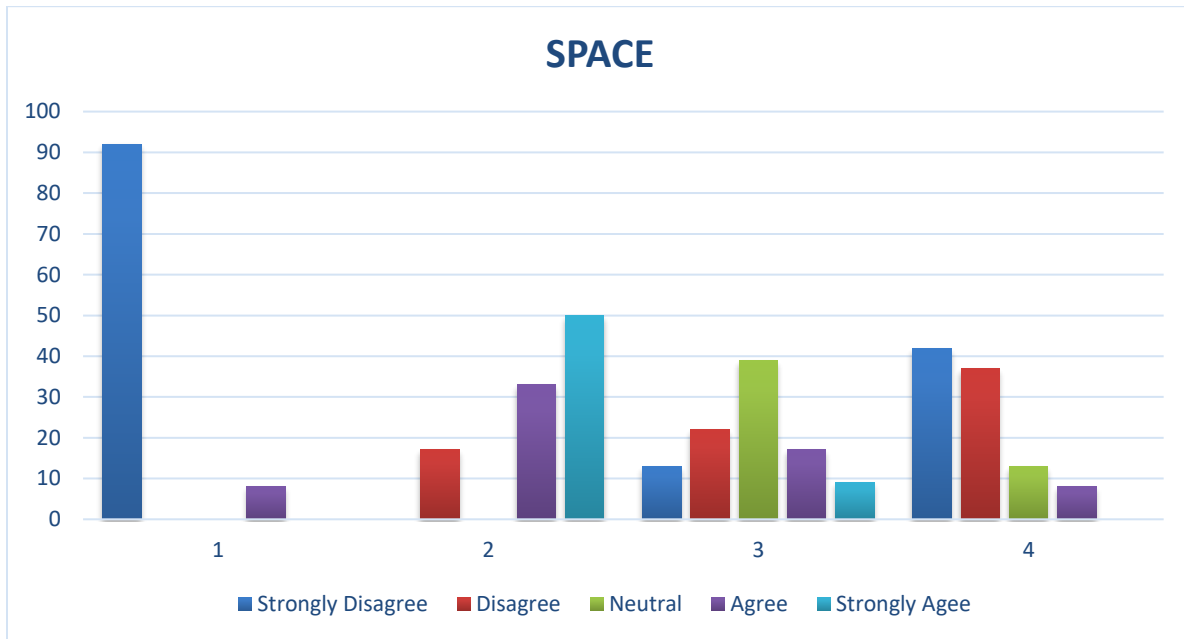
The availability of space and how it affects women in the workplace was another objective that was assessed during this research. The table below shows the results of the responses and views aired by women

Table 4.3 Space Responses tabulation

Questions/statement	Responses in Percentages (%)				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The organization provides a private room for pumping or breastfeeding other than a bathroom	87	5	0	8	0
There are breastfeeding facilities available in the room	0	17	0	33	50
I am allowed to carry personal breastfeeding equipment to work	13	22	39	17	9
The business provides a pump in the pumping area for employee use	42	37	13	8	0

(Source: Primary Data, 2020)

Figure 4.4 Response Rate on Space



(Source: Primary Data, 2020)

In Table 4.3 and Figure 4.4 shows the responses of the respondents on the questions concerning space. The Ministry of Health (2018) recommended that employers ought to provide a lactation room. However, from the results above, a big percentage did not provide a private room. Only 8% of the respondents agreed that there was a private room for such practices. However, most confirmed the presence of a bathroom. A positive response was that most of the respondents were provided with breastfeeding equipment despite the absence of private room. Only a few stated that there were no equipment provided for the purpose of breastfeeding.

A big number was neutral on whether they were allowed to carry such equipment to the workplace. Most of the women stated that they are not allowed to carry any of their own personal breastfeeding equipment to the workplace. A big chunk of the women were not sure on whether they are allowed to carry such equipment or not. This means that there is little support for them or in other cases, no guidelines at all on how to go about it. However, 26% agreed that they were given permission to carry their own equipment which is a good response.

According to Biagioli (2003) an electric pump is recommended for lactation. He also suggested a variety of other pumps. However, it is clear from the data above that there are very few organizations that have invested in purchasing a breastfeeding pump for milk expression. Only 8% of the women had such support. 79% of the responses show that there is little investment by

organizations for buying such equipment for their women workers while 13% of the women were not sure on whether their organizations have provided such equipment.

The above data shows that there are some efforts being put by employers into such an initiative such as allowing equipment into the organization. However, there is little investment put in by the same to provide important equipment and facilities since many have disagreed to having a room other than the washrooms. It also shows that there is a big percentage of women who are not well informed concerning this equipment and such causes an indifference.

4.3.3 Support

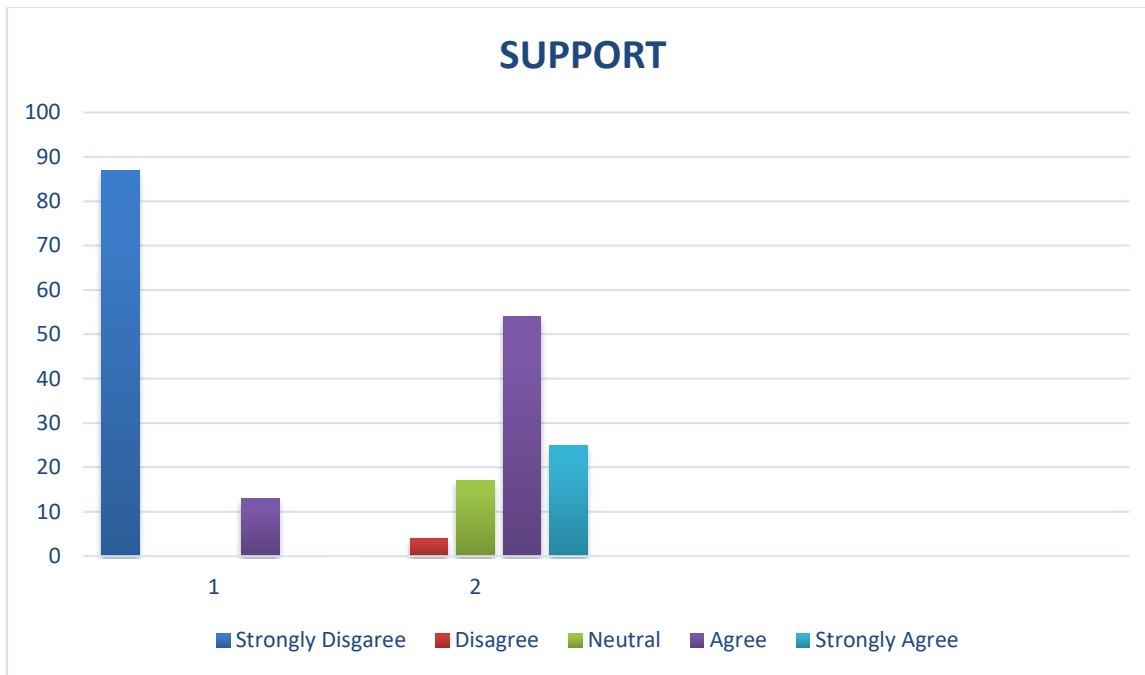
This last variable that the study was measuring is support from the organizations towards the lactating mothers at the workplace, the researchers wanted to see how support programs have been incorporated into the organization’s policies and the findings are presented in Table 4.4 and Figure 4.5 below

Table 4.4 Support Responses tabulation

Question/statement	Responses in Percentages (%)				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
There are education programs for pregnant and lactating employees	87	0	0	13	0
I find it comfortable discussing breastfeeding issues with fellow employees	0	4	17	54	25

(Source: Primary Data, 2020)

Figure 4.5 Response Rate on Support



(Source: Primary Data, 2020)

We see from Table 4.4 and Figure 4.3 above that 87% of the respondents strongly disagreed to the fact that there are education programs for pregnant and lactating employees in the organizations, while 13% of them agreed that there were education programs provided in the organizations they worked for. This indicates that only a small percent of the organizations have education programs installed in place for employees who are breastfeeding. The findings hence fails the expectations of the Healthy People, (2020) which intended to increase the proportion of employers who support “worksite lactation support programs” to 38% within their organizations (Havilland, et al. 2015) This might also mean that the level of employee performance in those organization is more likely to be lower than those with education programs for employees.

For the second question of whether the employees are comfortable discussing breastfeeding issues with their colleagues, 4% disagreed to it, 17% were not sure, 54% agreed and 25% of them strongly agreed. This thus shows that most of the organizations are “lactation-friendly” with employees who are sympathetic in terms of offering emotional, moral and mental support to the breastfeeding employees and thus supports the suggestion made by Cardenas and Major, (2005) which stated that the strain a mother experiences in attempting to continue breastfeeding while working is influenced by the extent to which the organization is “lactation-friendly”. This only shows that the organizations are experiencing the benefits in terms of productivity for supporting their employees who are breastfeeding through offering guidance and employee support.

CHAPTER FIVE

5.0 SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter concludes our report. It is broken down into three sections that includes general summary of the study, conclusions derived from the findings and finally the recommendations.

5.2 Summary of the study

This study was carried out to identify the impact of corporate support on lactating mother's productivity at the workplace. The research questions were to find out whether organisations provide support in terms of time, space and support programs at the workplace and if the support has an effect on their productivity. The research assessed whether employers within Nairobi county allows mothers with new born babies below six months to bring the babies at the workplace and if so, are they being given time to breastfeed, private rooms to breastfeed and whether there is certain educative lactation program in place. The target population were 100 employed breast-feeding mothers within Nairobi metropolitan area out of which only 31 responses were eligible for analysis.

The study indicated that most employers are still reluctant in offering support to lactating mothers at workplace and this to some extent hinders their productivity since they tend to be under stress and discomfort since most of them tend to be worried about the well-being of their infants.

Offering support to lactating mothers at workplace comes with benefits such as increased employees' retention, increased loyalty and productivity, health care savings and enhanced public image (Zafardino 2010). Most employers tend to look at the costs involved in providing support rather than weighing the benefits too and this have costed them much.

The study also showed that the few organisation who provides breastfeeding time still do not have the private rooms for breastfeeding and also they lack lactation program to educate breastfeeding mothers.

5.3 Conclusion

From the findings outlined in chapter four, the study revealed that most organisations still do not offer full support to the lactating mothers at the workplace. For instance, a higher percentage do not provide breastfeeding breaks to the mothers despite the fact that most of the women feel discomfort if they don't breastfeed. Further, there are no private rooms in organisations meant for breastfeeding and this might shy away some mothers from carrying their infants to work. Moreover, there are no educative lactation programs as confirmed by 87% of the respondents. The lactation programs are supposed to enlighten mothers about breastfeeding and especially first-time mothers who might not have ideas about motherhood.

Most employers consider presence of infants at workplace a distraction which lowers mother's productivity (Raju 2006). This notion is not true since when a breastfeeding mother is allowed to

breastfeed or pump milk, she will be much comfortable and active and hence perform better. Unlike when she is not allowed to breastfeed, she will be under discomfort and stress since most of the time she will be worried about the health of their infants and this might lower their productivity. This is because Prolonged duration of not breastfeeding causes milk accumulation pain, discomfort and emotional disturbances.

5.4 Recommendations

With regards to the conclusions above, the study hereby encourages employers to set favourable policies concerning workplace breast feeding to boost lactating mother's productivity. They should allow them to bring the infants below six months to work and provide them with necessary breast-feeding support.

Secondly, policy makers should be intensively involved in making favourable breastfeeding policies and ensuring that organisations adjust and practise them. They should ensure that lactating mothers be given opportunity to exclusively breastfeed for not less than six months as recommended by WHO and action taken against the companies that do not comply to that.

5.5 Suggestions for Further Study

Future research should be conducted to explore further on the effects of workplace breastfeeding on other employees' productivity that is, the extent to which support towards breastfeeding employees yields to either increased or decreased levels of the employees' performance and organizational productivity in general.

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APPENDIX 1: QUESTIONNAIRE ON IMPACT OF CORPORATE SUPPORT ON WORKPLACE BREASTFEEDING.

This questionnaire is to help in identifying the impact of corporate support on lactating mothers in Nairobi metropolitan areas, in relation to productivity. We would love to hear from you on this important issue. This questionnaire should only take five minutes of your time and your responses will be used for academic purposes only.

Instructions

Dear respondent,

- A. Please tick (✓) in the appropriate box or write in the spaces provided.
- B. All sections of this questionnaire are very important and require your honest response.
- C. The responses are purely for academic research purposes and privacy will be strictly maintained.

Age; 20 Years and below [] 21-30 [] 30-40 [] 40-50 []

Education Level; Certificate [] Diploma [] Degree []

Others _____

I should stop breastfeeding before your baby is 6 months old

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

I am allowed to carry my child to work

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

I feel that my infant becomes sick after I return to work due to change in breastfeeding patterns

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

The business allows breaks for breastfeeding or pumping milk

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

The breaks are long enough

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

The breaks are flexible

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

I feel pain or discomfort if I don't breastfeed or express milk

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

The organization provides a private room for pumping or breastfeeding other than a bathroom

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

There are breastfeeding facilities available in the room

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

I am allowed to carry personal breastfeeding equipment to work

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

The business provides a pump in the pumping area for employee use

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

There are education programs for pregnant and lactating employees

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

I find it comfortable discussing breastfeeding issues with fellow employees

Strongly Disagree [] Disagree [] Neutral [] Agree [] Strongly Agree []

APPENDIX 2: BUDGET

Table 3.2

BUDGET ITEMS	QUANTITY	COST PER UNIT	TOTAL CASH COST
Printing of questionnaires	350	5	1750
Transport	10	200	2000
Indirect Cost	N/A	N/A	12,000
TOTAL COST			<u>15,750</u>

APPENDIX 3: TIME FRAME

Table 3.3

OBJECTIVE	Wweek 1	Week 2	Week 3	Week4
Selection of the research topic				
Collection of data from books and journals				
Formulating research design				
Selection of appropriate research techniques				
Collection of data, data analysis and interpretation				
Analysis of the findings and conclusion				
Printing final copy				
Submission of the final report				