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FROM: SAF/MR
1040 Air Force Pentagon
Washington, DC 20330-1040

SUBJECT: Air Force Guidance Memorandum (AFGM) Establishing Requirement of Lactation Rooms for Nursing Mothers

By Order of the Secretary of the Air Force, this AFGM immediately implements guidance and procedures for women’s health by supporting nursing mothers with a private, secure (lockable from the inside) and clean (i.e. no visible dirt/debris) area, herein referred to as a lactation room, within unit facilities. The instructions contained herein detail responsibilities and procedural steps, as necessary, to enable commanders to align the needs of nursing mothers with mission requirements. Compliance with this publication is mandatory. To the extent its directions are inconsistent with other Air Force publications, the information herein prevails, in accordance with AFI 33-360, Publications and Forms Management.

The attachment to this memorandum provides guidance that is effective immediately.

This memorandum becomes void after one-year has elapsed from the date of this memorandum, or upon publication of an Air Force Instruction of the same policy and procedures, whichever is earlier.

JOHN A. FEDRIGO, SES
Principal Deputy Assistant Secretary
(Manpower and Reserve Affairs)

Attachment:
Establishing Requirement of Lactation Rooms for Nursing Mothers
1. **Overview:** The guidance contained herein details procedures for commanders to support nursing mothers with a lactation room to nurse or express milk in close proximity of a nursing mother’s workplace within unit facilities under the control of a unit commander or equivalent.

1.1. It provides roles, responsibilities, and requirements and applies to all Regular Air Force, Air National Guard, and Air Force Reserve units who have Service members or civilian employees that are nursing mothers.

1.2. The requirement for all elements of the Executive Branch to implement policies and procedures for lactation rooms stems from Public Law (PL) 111-148, *Patient Protection and Affordable Care Act*, §4207. Following passage of this Act, the President of the United States delegated authority to the Office of Personnel Management (OPM) to regulate implementation throughout the Executive Branch. OPM subsequently issued a *Nursing Mothers in Federal Employment* memorandum for heads of Executive departments and agencies, and *Guide for Establishing a Federal Nursing Mother’s Program*. Department of Defense (DoD) policy was then set out in the memorandum, *Department-Wide Policy for Nursing and Lactation Rooms*. Providing nursing mothers with a private space was further codified in (DOD) Unified Facilities Criteria (UFC) 1-200-01, *DoD Building Code (General Building Requirements)*, Chapter 3, paragraph 3-2.2.

2. **Air Force Policy:** It is Air Force policy to remain committed to women’s health as a core component of a lethal, ready force and will provide a lactation room in accordance with procedures shown in paragraph 3 below for Service member and civilian employee mothers who choose to breastfeed upon return to duty or work, respectively, following pregnancies. The procedures to implement a lactation room balance the mission readiness needs of units while affording nursing mothers the opportunity to continue breastfeeding, pursuant to the United States Surgeon General’s goals for increasing breastfeeding for a period of a minimum of one year after a child’s birth.

3. **Procedures:**

3.1. Unit Commanders will:

3.1.1. Identify a private, secure (lockable from the inside) and clean area as a lactation room in the immediate vicinity of unit facilities or temporary work-station that is available to meet the needs of breastfeeding Service members and civilian employees to breastfeed or express breast milk. *(T-0)*. This room can be temporary, depending on the unit’s circumstances and Service member/civilian employee needs. Temporary or flexible space can be available offices, conference rooms, break rooms or other rooms which meet criteria below. If a lactation room is configured for multiple users, the room will be configured so each user has privacy. *(T-0)*. When establishing the location of the lactation room, consideration will be given to the limited amount of time Service members and civilian employees may have for breaks. Units in close proximity to each other (within the same building complex or in buildings that have entrances within 100 feet) may choose to share lactation rooms. The time needed for nursing mothers will vary per individual and also includes concepts that nursing mothers should be relaxed, well hydrated, and in a space with comfortable temperatures and adequate lighting.

3.1.1.1. Lactation rooms must be clean and free of any visible dirt/debris. *(T-0)*. Do not use
restrooms, to include shower rooms and locker rooms. (T-0).

3.1.1.2. Ensure the units with industrial work settings identify and maintain lactation room consistent with direction for break rooms per Air Force Manual 91-203, *Air Force Occupational Safety, Fire, and Health Standards*. (T-1).

3.1.1.2.1. Lactation rooms will not contain toxic materials, chemicals, or industrial shop contaminants. (T-0).

3.1.1.2.2. Personnel using a lactation room will adhere to the same industrial hygiene practices as a break room, removing personal protective equipment, changing clothes when contaminated with solvents, lubricants or fuels prior to entry and washing their hands prior to using the lactation room. (T-3).

3.1.1.2.3. Installation Public Health shall periodically inspect the lactation rooms in the industrial work unit in the same manner as break rooms. (T-1).

3.1.1.3. The lactation room will be near a source of hot and cold water for hand washing/breast pump cleaning and contain multiple electrical outlets within the room for use of breast pumps. (T-0). It must contain a trash can, paper towels and cleaning supplies made available by the unit. (T-0).

3.1.1.4. The lactation room must have comfortable seating and a table or similar flat surface, other than the floor, to place the breast pump and other supplies. (T-0). The room must have adequate temperature control, adjustable lighting, and clothing hooks. (T-0).

3.1.2. Ensure supervisors provide Service members and civilian employees’ time to utilize the lactation room while balancing mission work schedules. (T-0) Commanders and supervisors will provide Service members and civilian employees with reasonable lactation breaks to allow adequate time for expression transport to storage location. (T-0). The duration of the lactation break varies, including the time to express breast milk (which depends on the age of the infant, the amount of milk produced, a stress free environment, quality of pump, etc.) as well as the distance the lactation room is from the work area, the convenience of water and refrigeration sources and cleaning supplies.

3.1.3. Establish organizational rules and procedures for scheduling and/or utilization, to include maintenance and cleaning, of the lactation room for nursing mothers. (T-3).

3.1.4. If the requirements of field training and exercises permit, commanders should ensure Service members and civilian employees have a clean, private space, specifically not a restroom or latrine, in which to pump breast milk. (T-1). With the consent of all lactation room users and provided adequate space exists, more than one nursing mother may utilize the lactation room at one time.

3.1.5. Consult with:

3.1.5.1. Appropriate installation civilian personnel offices for appropriated/non-appropriated fund employees to determine break time entitlements for nursing mother practices. (T-1).
3.1.5.2. The Base Civil Engineer to establish lactation rooms, based on need, pursuant to Department of Defense (DoD) Unified Facilities Criteria (UFC) 1-200-01, paragraph 3-2.2. (T-3). All work that modifies the facility should be coordinated with installation Civil Engineer Squadron or equivalent organization.

3.1.5.3. Installation medical services for information on nursing mother issues, cleaning requirements, or any other associated medical issues that may arise when establishing or maintaining a lactation room. (T-3).

3.2. In addition to 3.1., commanders must provide refrigeration and freezer storage units for expressed human breast milk for personnel TDY at the installation. (T-1).

3.2.1. If the requirements of field training and exercises permit, commanders should work with the supporting medical officer to determine whether milk storage or transportation will be feasible. If the Airman cannot transport expressed milk to their home station, the commander will permit her the same time and space to express and discard her breast milk with the intent to maintain physiological capability for lactation. Commanders will work with the supporting medical officer to counsel Airmen and discuss the potential risks of storing milk during field training and mobility exercises. (T-1).

3.2.1.1. Service members/civilian employees must comply with the following when storing expressed human breast milk in a food refrigerator or freezer (e.g., any unit used in whole or part to store human food and beverage):

3.2.1.2. Place in sealable separate package (bag, bottle) contained inside a larger, clean, covered, leak-proof container labeled with the individual’s name, unit, contact information, and date of milk expression. (T-1).

3.2.1.3. Breast milk should be contained and labeled by the Service member/civilian employee to avoid contamination by other items located in the vicinity. Information regarding breast milk storage is available on the CDC Breastfeeding Web page at: http://www.cdc.gov/breastfeeding/recommendations/handling_breastmilk.htm

3.2.1.4. Storage of expressed milk is contingent on storage space availability within the designated refrigeration or freezer storage units. Notify the responsible unit commander to determine alternate location if there is no room within the storage unit.

3.2.2. Discard refrigerated expressed breast milk not retrieved by the Airman after four days from the recorded date of expression. (T-1). Discard frozen expressed breast milk not retrieved by the Airman after four months from the recorded date of expression. (T-1). Discard expressed human breast milk immediately if not properly packaged, labeled, and dated in accordance with paragraph 3.2.1.1. (T-1).

3.2.3. Handle expressed breast milk according to the local policy for other food items during a refrigerator/freezer failure. (T-1). Make every effort to contact the nursing mother and obtain her decision on disposition. (T-1).

3.2.4. Recommended locations to store expressed breast milk include, such as but not limited to, lactation room refrigerators, lodging refrigerators, schoolhouse refrigerators, field kitchens, etc. (T-1).
3.2.4.1. Local dining facilities generally are not the preferred storage location; however, they are not excluded as a potential local storage location. Installations must assess the readiness of the dining facility to store expressed breast milk. (T-1). If no other installation storage facility capabilities are available, installations should be prepared to allow access to local dining facilities.

3.2.5. The time nursing mother’s need to pump or express breast milk should include additional time, if needed, transport milk to the storage location.

3.3. Service member/civilian employee nursing mothers must provide their own breast pump equipment and hygiene cleaning materials. (T-0).

References

1. PL 111-148, Patient Protection and Affordable Care Act, 23 March 2010
2. OPM Memorandum for Heads of Executive Departments and Agencies, Nursing Mothers in Federal Employment, 22 December 2010
3. OPM Guide for Establishing a Federal Nursing Mother’s Program, January 2013
4. Under Secretary of Defense for Personnel and Readiness Memorandum, Department-Wide Policy for Nursing and Lactation Rooms, 1 Nov 2016
5. DoD Unified Facilities Criteria (UFC) 1-200-01, DoD Building Code (General Building Requirements), Change 2, 1 November 2018

Abbreviations and Acronyms

DoD—Department of Defense
OPM—Office of Personnel Management
PL—Public law
UFC—Unified Facility Criteria