

Section A		
Institution: Middlesex University		
Unit of Assessment: 17 Business and Management		
Title of case study: Extending Maternity Protection and Reproductive Rights at Work in the Global South		
Period when the underpinning research was undertaken: 2013-20		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title)	Period(s) employed by submitting HEI
Dr Bianca Stumbitz	Research Fellow	2012-ongoing
Dr Lilian Miles	Senior Lecturer	2007-2019
Prof Suzan Lewis	Professor of Organizational Psychology	2006-ongoing
Dr Tim Freeman	Associate Professor in Leadership	2013-ongoing
Prof Fergus Lyon	Professor of Enterprise & Organizations	2001-ongoing
Period when the claimed impact occurred: 2014 - ongoing		
Is this case study continued from a case study submitted in 2014? No		
Section B		
1. Summary of the impact		
<p>Middlesex University (MU) research led by Stumbitz, Miles and Lewis addressed knowledge scarcity related to maternity protection (MP) and sexual and reproductive health (SRH) rights, particularly within small and medium-sized enterprises and informal economy workplaces in low and middle-income countries (LMICs) in the Global South. Cumulative findings from nine projects yielded significant impacts through: (a) shaping advocacy messages of key international actors including via the International Labour Organisation (ILO), World Health Organisation (WHO), United Nations (UN) and WABA (World Alliance for Breastfeeding Action) in relation to MP and breastfeeding at work; (b) influencing national policy and implementation of MP/SRH workplace strategies in Ghana, South Africa and Malaysia; and (c) improving workplace practice by building stakeholder capacity and developing firm-level responses.</p>		
2. Underpinning research		
<p>The UN Sustainable Development Goals (SDGs) increased exponentially the global policy salience of reproduction and employment issues. Reported impacts resulted from a research programme addressing maternity protection (MP) and sexual and reproductive health (SRH) rights at work. Research led by Lewis, Stumbitz and Miles and supported by Lyon and Freeman, comprised nine projects supported via funding from the International Labour Organization (ILO), the United Nations (UN), the World Health Organization (WHO), British Academy and British Council, to a total of £341,000. MP here refers to work advancing workplace support for women workers during pregnancy and upon their return to work. Research addressing the SRH of migrant workers concerns reproductive conditions, including sexually transmitted diseases and requirements for contraception and abortion. An estimated 800 million women globally are unprotected in terms of MP and SRH rights, with severe negative implications for maternal and infant mortality and morbidity, as well as for sustainable development.</p> <p>Located within the Business School's Gender & Diversity Research Cluster, this research built upon Lewis' pioneering cross-national research on work and family over 20 years. This identified the importance of national context, workplace culture and informal practices in developing supports and protections. In 2013, the ILO commissioned Lewis, Stumbitz and Miles, to undertake an international literature review on MP in SMEs [3.1; 3.2]. The review identified substantial gaps in knowledge on MP and SRH rights, particularly with respect to SMEs, the informal economy, and LMICs in the Global South; a finding particularly significant given SMEs account for 95% of global businesses and the large proportion of informal economic working in LMICs. Subsequently, funding was secured for a series of research projects addressing these knowledge gaps and practice challenges across the interrelated strands of MP (led by Stumbitz) and SRH (led by Miles).</p>		

Research at international, selected country (Ghana, Malaysia, South Africa, Burkina Faso, Paraguay, Montenegro, and Vietnam) and firm level, produced the following key findings:

MP and SRH workplace rights do not harm SMEs and informal economy businesses [Projects 1, 2]. Contrary to widespread perceptions, MU research confirmed that MP can be affordable to SMEs and in many cases provide substantial firm-level benefits. These comprise reduced staff absence and turnover, enhanced employee satisfaction and commitment associated with reciprocal improvements in performance and productivity, and broader societal benefits, including improved maternal and child health and wellbeing. Initially revealed by the ILO review [3.1; 3.2], findings were further evidenced in an ILO-funded study (Stumbitz, Lyon, Lewis) on MP at work in Ghana [3.3], which demonstrated the feasibility and affordability of low-cost supports (e.g. breastfeeding and informal childcare support) in informal, highly resource-scarce, working contexts in the Global South.

Diverse, context-sensitive approaches are required for effective implementation at national level [All projects]. MU research in Ghana [3.3], Malaysia [3.4; 3.5] and South Africa (research collaboration with Jaga from the University of Cape Town on breastfeeding support at work) [3.6] demonstrated how attitudes towards MP and SRH were rooted in specific cultural, political and economic histories differing between *and within* countries. Neglect of contextual specificities in implementation processes resulted in resistance and unsuccessful MP outcomes; a finding evidenced through country case studies (Burkina Faso, Paraguay, Montenegro, Vietnam) conducted as part of the WHO/UNICEF-funded MU project [5.5].

Absence of integrated stakeholder working [All projects]. ‘Silo’ working by stakeholders had a negative effect on successful responses to MP/SRH issues within businesses and at the broader inter/national level. For example, whilst breastfeeding is often treated as primarily a health issue, our research illustrated the need for multiple stakeholders working across health, employment and family policy and practice, to achieve required outcomes. Subsequent action research projects in Malaysia and South Africa demonstrated the feasibility of a multiple stakeholder approach, addressing challenges of capacity-building for partnership working at country and local levels.

Lack of awareness of employees’ rights and employers’ duties [All projects]. Designation of maternity and SRH as a ‘private’ issue resulted in a reduced emphasis on women’s rights and responsibilities within the workplace [3.3; 3.4; 3.5, 3.6]. Results showed this acted as a barrier to firm-level support within studies in Ghana, Malaysia and South Africa, and confirmed the potential of awareness raising strategies tailored to the characteristics of specific workplaces, for example community theatre in informal economy workplaces in rural Ghana [3.3]. Successful awareness raising of women’s workplace rights required interventions sensitive to local circumstances, including literacy levels, urban/rural differences and cultural expectations of the roles of mothers and fathers.

3. References to the research

- 3.1 Lewis S., Stumbitz B., Miles L. & Rouse J. (2014). *Maternity Protection in SMEs: An International Review* (ILO, Geneva).
- 3.2 Stumbitz B., Lewis S. and Rouse J. (2018). Maternity management in SMEs: a transdisciplinary review and research agenda. *International Journal of Management Reviews*, 20(2): 500-522. <https://doi.org/10.1111/ijmr.12143>
- 3.3 Stumbitz B., Lewis S., Kyei A.A. and Lyon F. (2018). Maternity protection in formal and informal economy workplaces: The case of Ghana. *World Development*, 110: 373-384. <https://doi.org/10.1016/j.worlddev.2018.06.007>
- 3.4 Miles L. (2016) The social relations approach: empowerment and women factory workers in Malaysia. *Economic and Industrial Democracy*, 37(1): 3-22. DOI:[10.1177/0143831X14533734](https://doi.org/10.1177/0143831X14533734)
- 3.5 Miles L., Lewis S., Wan Teng L. & Mat Yasin S. (2019). Advocacy for women migrant workers in Malaysia through an Intersectionality Lens. *Journal of Industrial Relations*, 61(5): 682-703. <https://doi.org/10.1177/0022185618814580>
- 3.6 Stumbitz B. & Jaga A. (2020). A Southern encounter: Maternal body work and low-income mothers in South Africa. *Gender, Work & Organization*, 27(6):1485-1500. <https://doi.org/10.1111/gwao.12527>

Selected funded research projects (from total of 9 projects: £341,000):

1. Lewis, S., Stumbitz, B., & Miles, L. (2013-2014). *International literature review on maternity protection in SMEs*. International Labour Organization (\$10,000).
2. Stumbitz, B., Lewis, S., Lyon, F. & Kyei, A. (2014-2015). *Study on Maternity Protection and Workers with Family Responsibilities in Ghana*. International Labour Organization (\$44,680).
3. Miles, L., Lewis, S. & Stumbitz, B. (2015). *Advancing Maternity Protection in Malaysia: Meeting Social Welfare and Business Needs and Contributing to Economic Development*. British Council/Newton Fund (£45,000).
4. Jaga, A. & Stumbitz, B. (2017-2019). *Advancing workplace support for breastfeeding in South Africa: An economic, health and social development need*. University of Cape Town and South African National Research Fund (£45,000).
5. Endut, N. & Lilian Miles, L. (2017). *A Study on the Sexual and Reproductive Health Rights of Women Migrant Workers in Malaysia: NGOs, Capacity Building and Women's Empowerment*. United Nations Gender Theme Group (£25,000).
6. Miles, L. & Freeman, T. (2020). *Piloting Health Interventions to advance the Sexual and Reproductive Health of Women Migrant Workers in Malaysia*. British Council (£150,000).

4. Details of the impact

MP and SRH rights are typically portrayed as personal and private concerns within LMICs. Global policy interventions are largely restricted to large businesses in the formal economy, bypassing the majority employed within SMEs and the informal economy, and seen as irrelevant to national policy agendas. Our research achieved impact in this challenging context by: (a) shaping advocacy measures of global organizations on MP and breastfeeding at work; (b) influencing the implementation of national MP and SRH strategies; and (c) improving practice through firm-level responses and building stakeholder capacity.

(a) Shaping advocacy measures of global organizations on MP and breastfeeding at work

Engagement with our findings by the ILO, UN, WHO and WABA (World Alliance for Breastfeeding Action), influenced their advocacy on the feasibility of providing MP without harming smaller firms, and the productivity and wider health and social benefits of supporting breastfeeding in the workplace. The MU authored MP report [3.1] remains the only systematic literature review of MP in SMEs and, as an ILO policy specialist observed, “*continues to serve as powerful source of evidence to corroborate the argument of the affordability of low-cost maternity protection measures and potential productivity benefits for employers, including in SMEs*” [5.1]. Through shifting perceptions on improved MP at work from business cost to business investment, “*MU research has helped to shape ILO’s advocacy messages relating to the need to extend maternity protection to all workplace contexts*” [5.1]. WHO [5.2], UNICEF [5.3] and WABA [5.4] have similarly used these findings in their messages and activities to promote MP and breastfeeding support at work.

MU researchers accepted invitations to speak on their findings at global events and policy discussions, subsequently securing contracts as advisors and shaping related advocacy. Stumbitz presented policy recommendations on MP in SMEs and the informal economy at the ILO centenary celebration in 2019. This high-profile event, organised in collaboration with UNICEF, UNWOMEN and WHO, drew a global audience of ILO constituents, EU representatives, senior policy makers, and NGOs, and received global attention through awareness-raising on social media. Stumbitz also represented UNICEF on MP policies and practices globally on its dedicated panel at the 2019 *Women Deliver Conference*, the world’s largest conference on gender equality.

Through her role as an invited academic advisor to WABA and the Global Breastfeeding Collective (GBC) - the principal global network of MP and breastfeeding advocates, NGOs and international organizations led by WHO/UNICEF - “*Stumbitz’s contributions helped to inform the Collective’s global advocacy focus repositioning breastfeeding as a workplace, gender equality and women’s empowerment issue*” [Manager of the GBC: 5.3]. This was reflected in the Collective’s position statement [5.5], which presented case studies from around the world in relation to maternity leave legislation in support of breastfeeding, and included recommendations in relation to the need for context-sensitive implementation and integrated stakeholder working based on MU research findings. Launched at the ILO centenary event in 2019: “*the paper initiated discussion on this issue in this global forum and provided it with a heightened profile*” [5.3].

Stumbitz contributed to WABA's work in multiple ways and ensured that: *"the challenges of the informal sector are now firmly anchored in WABA's global breastfeeding agenda"* [5.4] and mainstreamed throughout their activities and advocacy messages. Stumbitz was a co-author of WABA's policy and practice *Action Folder* in 2019; the key campaigning document for World Breastfeeding Week, organised by WABA. This was published in eight languages, downloaded from the campaign website (which received over 10 million hits) 52,266 times between July-October 2019. It resulted in 788 official pledges for actions to improve breastfeeding support by organizations and government departments from across the world, including from a large proportion of LMICs [5.4].

(b) Influencing the implementation of national MP and SRH policy and workplace strategies

Workplace MP/SRH policy development within Ghana, Malaysia and South Africa has been influenced by our findings on the need for context sensitivity and multiple stakeholder engagement in its implementation. Our recommendation to address the scarcity of MP research in LMICs [3.1] led directly to ILO commissioned report on MP in SMEs and informal economy businesses in Ghana [5.6]. This identified good practice examples and coping strategies and recommendations of culturally specific solutions to MP provisions at work, particularly those of value to small firms in the informal economy. The MP Steering Committee at the Ministry of Employment and Labour Relations in Accra used our recommendations, along with those of other commissioned studies, in the development of their strategy. These recommendations for progressing MP measures informed the drafting of a MP Bill which extended paid maternity leave in Ghana from 12 to 14 weeks [5.1].

MU research commissioned by UN Women in Malaysia (research project 5) demonstrated the national urgency of SRH related issues. Miles and Endut worked with national stakeholders from government ministries (Health; Home Affairs; Women, Family and Community Development), NGOs, public sector organizations and union representatives to identify a range of SRH-related policies and service. MU subsequently undertook participatory policy-making activities with stakeholder representatives to further clarify and prioritise policy priorities at the level of central government, employers and wider society comprising reforms related to: migration policy; epidemiology to inform SRH service planning and provision; employer obligations for SRH; and reducing the impact of discrimination on women migrant workers' SRH). These recommendations were detailed in a strategy paper [5.7] which informed the drafting of Malaysia's twelfth national development plan (2021-2025).

In South Africa, where return to work is a major reason for one of the lowest breastfeeding rates at six months in the world, findings from Stumbitz and Jaga (University of Cape Town) have raised public awareness on the issue of breastfeeding in the workplace through widespread media attention, including national radio and television coverage [5.8]. Collaboration of Stumbitz and Jaga with the Western Cape Government (WCG) has led to the co-development of a more context-specific Department of Health policy strategy. As stated by a senior WCG staff member, this now: *"recognises breastfeeding as a multidisciplinary challenge which integrates breastfeeding within the Province's broader [...] gender mainstreaming agenda"*. Joint efforts have further included the development of a framework for workplace breastfeeding support and testing of potential workplace interventions within Western Cape Government itself [5.9].

(c) Improving workplace practice by building stakeholder capacity and developing firm-level responses

Development and implementation of improved MP and SRH workplace practices in South Africa and Malaysia have actively built capacity through multiple local stakeholder engagement. Alongside employers and women workers, action research in South Africa involved Western Cape government, the South African Clothing and Textiles Workers Union (SACTWU), the South African Medical Research Council. In Malaysia, service development and implementation involved Tenaganita, Reproductive Rights Advocacy Malaysia (RAAM) and the Penang Family Health Development Association (FHDA). Both research streams include train-the-trainer provisions. In Malaysia, for example, 40 women migrant workers were trained as SRH advocates under the ongoing British Council funded research project, to provide guidance and support on SRH practice and further cascade training.

Findings on the affordability of context-sensitive workplace breastfeeding supports have led to the piloting of interventions for low-paid workers in clothing factories in South Africa and the provincial

Western Cape Government [5.9]. Initial changes introduced have included the introduction of lactation spaces for staff and the provision of fridges for safe breastmilk storage in all case study factories. In Malaysia, in order to improve institutional responses on the SRH of women migrant workers, Miles worked with NGOs engaged in SRH advocacy to develop the first 'toolkit' identifying a range of potential workplace interventions [5.10]. The BC funded project (6) is currently investigating the translation of the toolkit into practice, through evaluation of a number of pilot SRH workplace interventions for women migrant workers, designed and delivered by local NGO actors in a number of factories in Penang.

5. Sources to corroborate the impact

[5.1] Factual statement from ILO policy specialist detailing how MU research shaped ILO's campaigning messages with respect to MP in SMEs and the informal economy and contributed to an extension of paid maternity leave in Ghana's MP policy framework.

[5.2] [Breastfeeding initiation at birth can help reduce health inequalities](#), in *Entre nous – The European Magazine for Sexual and Reproductive Health* (2015); and [Good Maternal Nutrition - The best start in life](#) (2016): examples of WHO publications using MU findings that MP support is not a burden for business (including SMEs) and can lead to substantial business benefits.

[5.3] Factual statement from former Manager of the Global Breastfeeding Collective (GBC) at UNICEF on how collaboration with Stumbitz contributed to broadening advocacy messages of the GBC, led by WHO and UNICEF, beyond its previous focus on health.

[5.4] Factual statement from Director of WABA detailing Stumbitz's input into WABA's advocacy messages highlighting support for informal sector workers, the global impact of the World Breastfeeding Week [Action Folder](#) co-authored by Stumbitz (see [Pledge Map](#)) and her role as a reviewer for their Seed Grant Program.

[5.5] GBC position paper [Maternity Leave Legislation in Support of Breastfeeding – Case Studies Around the World](#). (2019) Geneva: WHO and UNICEF, which presents advocacy messages based on the findings of MU research.

[5.6] Stumbitz B, Kyei A, Lewis S. & Lyon, F. (2017) [The Legal, Policy and Regulatory Environment Governing Maternity Protection and Workers with Family Responsibilities in the Formal and Informal Economy of Ghana](#) (ILO, Geneva). Report with recommendations to improve the MP policy framework within Ghana, particularly in relation to SMEs and the informal economy.

[5.7] Miles, L. & Freeman, T. (2019) *Strategy Paper: SDG#5 Access to Sexual and Reproductive Health and Rights (SRHR) and Violence Against Women Migrant Workers Services (VAWMV) in Malaysia (UNWOMEN) (confidential report)*. Recommendations of this report informed the drafting of Malaysia's twelfth national development plan (2021-2025).

[5.8] [ETV news report on breastfeeding in the workplace](#) featuring an interview with research team partner Professor Jaga, presenting findings on the benefits of enabling breast feeding in the workplace as part of World Breastfeeding Week in 2019.

[5.9] Factual statement from Western Cape Government (WCG) Acting Director, Human Development, Policy & Strategy Unit, detailing how collaboration with MU/UCT led to implementation of a holistic multi-stakeholder approach to increase breastfeeding rates and the co-development of a context-specific policy approach and a *Workplace Support for Breastfeeding Framework*.

[5.10] Miles, L., Lewis, S., Endut, N., Ying, K., Wan Teng, L. & Mat Yasin, S. (2018). [A Toolkit to Promote the Sexual and Reproductive Health Rights of Women Migrant Workers in Asia](#) (United Nations Gender Theme Group, Malaysia).