

# Crimson Cares

*A Guide To Harvard's Resources  
For Faculty of Arts and Sciences'  
Prospective & New Parents*



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## *A Guide To Harvard's Resources For Faculty of Arts and Sciences' Prospective & New Parents*

This resource was developed by WFD Consulting for the Harvard University Office of Work/Life Resources, Harvard Faculty of Arts and Sciences Human Resources, and Harvard School of Public Health Human Resources.

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# Welcome!

Planning for parenthood is an exciting experience, but you probably have a lot of questions about what's ahead for you and your family, how you will manage your new responsibilities at home, and what supports may be available to you at work.

Faculty of Arts and Sciences Human Resources is here to help. We have designed *Crimson Cares: A Guide to Harvard's Resources For Faculty of Arts and Sciences' Prospective & New Parents* to include the resources and information you need to understand the programs and policies that the University offers to assist you in your role as a working parent.

Whether you're planning for your first child or your third, or considering a domestic or international adoption, this resource will link you to work/life resources, health insurance information, leave policies, services for finding and paying for child care, and much more. It also includes materials on balancing your work and family needs before, during, and after parenthood, and tools to help you plan ahead for your family leave.

Now and in the future, Harvard's work/life programs and resources can help you navigate life's transitions.

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# Preparing for Family Leave

Transitioning from work to family leave and then back to work requires planning and preparation. In partnership with your manager, it is important to consider your job tasks and responsibilities and how these will be covered during your absence. Smooth transitions benefit everyone involved—you, your manager, and your colleagues.

## *Preparing for Family Leave*

**Consider speaking with others who have taken family leave to learn from their experiences.**

- What did they do that was beneficial?
- What would they have done differently?

In advance of your family leave, you will need to meet with Julia Hutchinson, FAS HR Coordinator, 617-384-7432, [jshutch@fas.harvard.edu](mailto:jshutch@fas.harvard.edu), (to prepare your Family Leave paper work and schedule an appointment with Ronnie Mae Weiss, FAS Work/Life Consultant) and your manager to discuss coverage of your job responsibilities. About two months prior to your leave, or at a time upon which you and your manager agree, develop a list of what you do, including day-to-day responsibilities and tasks specific to projects, current and expected in the near future.

Take a look at the *Work Responsibilities Coverage Form*. This may be a useful tool as you summarize your job responsibilities that require coverage during your leave. Most positions have both recurring tasks (aspects of your job that happen on a regular basis) and project work (responsibilities that vary based on the stage or status of a specific project).

## *How to Use the Work Responsibilities Coverage Form*

### **Section I. Recurring Tasks**

- Create a list of your recurring job tasks, including those you do daily, weekly, and/or monthly.
- Think about how the tasks are accomplished now and how they will be accomplished while you are on leave.
- Include small tasks that you may assume someone else will know to do—it's better to be overly inclusive.
- Consider potential challenges for colleagues, your team or department, your manager(s), and external contacts while you are on leave, and solutions to these potential challenges.
- Check your calendar for the past few months and for the period last year that corresponds to your leave for reminders of tasks that may need to be addressed.
- For a week or two, throughout your work day, check your list of tasks as you do them and add to it as necessary.

### **Section II. Project Work**

- Provide the information requested for each project.
- Think about how tasks are accomplished now and how they will be accomplished while you are on leave.
- Consider potential challenges for colleagues, your team or department, your manager(s), and external contacts while you are on leave, and solutions to these potential challenges.
- Be clear what your role is and the expectations of the team for the person covering for you during your family leave.

- Include timelines, deadlines, and descriptions of all aspects of project responsibilities.

For both sections, fill in all the information, except for the last column (Person(s) Covering Work During Leave). After you meet with your manager to discuss your projects, he/she will fill in the Person(s) Covering Work During Leave column. When you return, your manager and/or colleagues will provide you with status updates.



### Meet with your manager

- Arrange a specific time to speak with your manager/supervisor about your upcoming leave, rather than trying to have an informal conversation about coverage of your job responsibilities.
- Prepare for your meeting (you may want to use your completed *Work Responsibilities Coverage Form* as a basis for your conversation).
- Discuss current projects including: current status, expectations of developments during your leave, and what will be required of the person covering for you.
- Ask your manager about projects that may begin while you're out.
- If you think you will be participating in any work-related activities during your leave (or preparing for your return), discuss with your manager how you should account for your time, as appropriate, and come to an agreement regarding the accrual and/or use of compensatory time.

### Meet with the person(s) who will be covering your work while you are on leave

- Include co-workers and contacts (internal and external to FAS and the University), as well as managers/supervisors in these meetings.
- Be clear about your expectations regarding your access while on leave. Do you plan to check e-mail or voice-mail while on leave?
- Understand that this may change once you are on leave, as your actual availability and accessibility may differ from what you had anticipated.
- Establish appropriate boundaries, making it clear that you are on leave from your position, not working from a different location.
- What should be done with your non-work related mail? Do you want it sent to your home, opened by someone else, or held for you until you return?

### Shortly before your leave

#### **Update your outgoing voice-mail and activate your "out of office" e-mail.**

- Be specific about whom to contact for what purpose or indicate the person who will address all issues that need immediate attention. In either case, include name, phone number and e-mail address.

- Will someone have access to your e-mail or voice-mail while you are out of the office? If not, how often (if at all) will you check voice-mail and e-mail?

If you are considering returning to work on a flexible work arrangement, explore your options before going on leave. For more information on flexible work arrangements at Harvard, go to [http://harvie.harvard.edu/Work\\_Life\\_Balance/Flexible\\_Work/](http://harvie.harvard.edu/Work_Life_Balance/Flexible_Work/) or contact the FAS Work/Life Consultant, Ronnie Mae Weiss at [rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu).

## Returning from Family Leave

Prior to your return, start planning for the transition back to work. The *Returning to Work After Family Leave* section has some tips for reconnecting with your office prior to your return and other helpful suggestions to ease your transition back to work. In addition, you may want to consider the following:

- If you are returning on a reduced hours/part-time basis or other Flexible Work Arrangement, be sure that the necessary documentation has been completed, approved, and submitted prior to your return.
- If you have not been checking e-mail and voice-mail while you've been out, you may want to check your messages and e-mails before your return, to make the first day back at work a little less overwhelming.
- Schedule a call or an in-person meeting with your manager to get briefed on the status of your projects.
- Schedule a call or an in-person meeting with the person(s) who have been covering for you during your leave.

Upon returning to work, consult your *Work Responsibilities Coverage Form* for updates and to review status reports from your manager and/or colleagues.

### Harvard's Work/Life Resources

FAS Work/Life Consultant, Ronnie Mae Weiss  
[rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu)

FAS Human Resources  
<http://www.hr.fas.harvard.edu>

Harvard Office of Work/Life Resources  
[http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)





## WHEN?

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## WHAT?

### As you begin to plan for parenthood

Review the information and materials included in *Crimson Cares: A Guide to Harvard's Resources for Faculty of Arts and Sciences' Prospective & New Parents*.  
Become familiar with Harvard's health care, parental leave, and work/life benefits.

### 6-9 months before your parental leave

Think about when, how, and with whom you will share the news at work.  
Gather information and experiences from colleagues and friends.  
Re-visit Harvard's benefits sites for health care leave and other family supports.  
Contact Harvard's Employee Assistance Program (EAP) <https://harvard.eap.personaladvantage.com/articles>, 877-327-4278, for information about child care resources.

### 3-6 months before parental leave

Begin thinking about a leave plan. The sections *Preparing for Family Leave* and *Returning to Work After Family Leave* and the tool, *Work Responsibilities Coverage Form*, may be of help to you.  
Contact Julia Hutchinson, HR Coordinator, 617-384-7432, [jshutch@fas.harvard.edu](mailto:jshutch@fas.harvard.edu), to set up a meeting with the Work/Life Consultant to discuss your family leave and complete the necessary paperwork.  
Think about how, and when, you will let your supervisor/manager know about your plans.  
If you haven't done so already, contact Harvard's EAP <https://harvard.eap.personaladvantage.com/articles>, 877-327-4278, for information about child care resources.  
Look at Harvard's resources for selecting, finding, and paying for child care.

### 1-3 months before parental leave

Finalize your plans for your leave. You may want to complete the *Work Responsibilities Coverage Form* and schedule a meeting with your supervisor/manager to discuss your plans. If possible, finalize your plans for child care.  
The sections, *Preparing for Family Leave* and *Returning to Work After Family Leave* include suggestions and ideas for your consideration as you prepare for your leave.

### When your baby is born

Contact Julia Hutchinson, FAS HR Coordinator, in the FAS Human Resources Office, at 617-384-7432 or via email at [jshutch@fas.harvard.edu](mailto:jshutch@fas.harvard.edu) to tell her the date on which your baby was born.

### Within 60 days of the birth or adoption of your child

If you have your health plan through Harvard, contact the Benefits Services Group at 617-496-4001 to add your child as a dependent on your health insurance plan. You may also want to start or adjust a flexible spending account (FSA) for dependent care (DCAP).

### While you are on family leave

Review the section, *Returning to Work After Family Leave* for additional suggestions and ideas.  
Stay in touch with work and colleagues as agreed.  
If you haven't done so already, finalize your child care plans. Now is the time to plan ahead for backup care, too.

### Returning to Work

Review the section, *Returning to Work After Family Leave* for additional suggestions and ideas.  
Contact Ronnie Mae Weiss, FAS Work/Life Consultant, [rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu), 617-495-4275, to discuss your transition back to work.  
Contact Harvard's EAP, 877-327-4278, and ask about the New Parent Transition Program.  
If appropriate, familiarize yourself with the lactation program, policies, and Mothers' Rooms locations.  
Check out the FAS New Parent Group!

### And beyond

Remember that Harvard has many programs and services to support you in your new role as a working parent:  
FAS Work/Life Consultant Ronnie Mae Weiss [rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu)  
Harvard Office of Work/Life Resources [http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)  
Harvard's Employee Assistance Program (EAP) [http://harvie.harvard.edu/Work\\_Life\\_Balance/Employee\\_Assistance\\_Program/](http://harvie.harvard.edu/Work_Life_Balance/Employee_Assistance_Program/)





# Returning to Work After Family Leave

The transition from new parent to new working parent can be daunting. How can you continue to be a great parent to your baby, while also doing your best at work? Balancing family needs with work needs may require new supports and careful planning.

## *Re-Connecting with Your Office during Your Parental Leave*

Your professional life may be the furthest thing from your mind during the first weeks or months of parenting a new child, and that's natural. Still, to ease your transition back to work life, you may want to make time every now and then to communicate with your office during your parental leave. That way you'll be up to speed on any changes around the office, help your co-workers to understand your commitment to them and to your work, and avoid feeling like an outsider when you return.

The extent to which you stay connected to your office during your leave is up to you. There is no one "right way" to stay in touch. Any of the following actions will help ease the transition at the end of your parental leave.

**Send occasional e-mails to co-workers and supervisors.** Keep it casual. Let them know how you and the baby are doing.

**Bring the baby in for a visit.** This will also help remind you, and demonstrate to your co-workers as well, that your baby and your work are both important to you.

**Socialize.** You might call every now and then just to chat, or arrange to meet a colleague for lunch or a quick bite. If there's a social gathering of the people you work with, you may want to attend. Whether or not you choose to talk about work, these informal connections help maintain the ties you have built with those at work and will help you look forward to your return.

**Stay informed.** Keep up with professional journals if appropriate. Contact your supervisor or a co-worker to see if there are any status reports, project memos, or similar updates that will help you be ready for things when you return. If someone else has been filling in for you during your leave, you might get in touch with him or her to express your gratitude and find out about any work you will be taking over upon your return. You may find it helpful to arrange to have particular work-related files sent to your home the week before you return to work.

## *Getting Comfortable with Your Child Care Arrangement*

As you reach the end of your family leave, it's essential that you have arrangements in place for good and dependable child care. Look also for backup alternatives for those times when your regular care may not be available. Here are some suggestions:

**Phase in your new child care arrangement,** beginning about two weeks before you return to work. Most parents find it helpful to ease into a child care arrangement slowly. A week or two before the end of your leave, you might schedule some opportunities for your baby to get together with his/her new provider. Start with one morning or afternoon and spend the first hour or so there with him/her. Then, over the next several days, gradually shorten the time you stay and increase the time your child is with the provider. This will give your baby time to adjust to his/her new caregiver and perhaps to a new environment. And you'll have time to adjust to the routine as well, getting familiar with drop-off and pickup processes and picking up on the rhythms that will mark your baby's world.

Make arrangements to communicate with your child care provider about your baby. Speak with your provider about ways to stay in touch about your baby's day. What is the best time to talk? What is the best way to reach each other: cell phone? E-mail?

**Accept your emotions.** It's normal to have mixed emotions. It's natural to feel nervous or sad about leaving your child with someone else, even if that person is your spouse or mother. You may feel a longing to be with your baby – and a longing to be back at work. You may feel guilty about leaving your baby to go back to work – or about looking forward to returning to work. If you have given birth, post-pregnancy hormones may also affect your emotions. Remind yourself that you're doing what's best for you and your family. Remind yourself, too, that most parents share your feelings. Most likely, once you and your child have become comfortable with his or her child care arrangement and you have gotten back into the rhythm of work life, your emotions will even out.

## *Setting Up a New Routine*

You've already adjusted your life and your schedule to meet your child's needs. However, some more adjustments may be needed in order to find a balance of being a working parent.

### **If you are breastfeeding, think about whether you will continue.**

If you plan to stop breastfeeding, you will need to taper off gradually and give your baby time to adjust to formula. Be sure to speak with your pediatrician about your plans. If you wish to continue breastfeeding, become familiar with Harvard's resources to support lactating mothers, ([http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/New\\_Parents/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/New_Parents/)). It's a good idea to let your supervisor and co-workers know about your plan to pump at work.

### **Decide with others how you will share home and family responsibilities.**

The arrival of a new baby creates additional responsibilities while taking time away from those that existed before, and this will continue. There will be visits to the pediatrician and a host of possible daily and weekly occurrences: picking up and dropping off the baby at child care, bringing him/her to play activities, and handling late-night or early-morning feedings. In addition, tasks such as cooking, cleaning, grocery shopping, and laundry will always need to be done. At least a week before your scheduled return to work, sit down with the others in your life and decide who will be responsible for each household and child care need and when.

For instance, you and your spouse or partner may agree to take turns doing a week's grocery shopping each weekend while the other prepares meals for the coming week. Perhaps one person can bring the baby to child care and the other can pick him/her up. A grandparent or mothers' helper may be willing to help with some chores occasionally. Now is the best time to enlist the help of those who care about you and the baby while they also make their own adjustments to life with this new loved one.

### **Do a “practice run” of your new morning and evening routines.**

If your baby will be cared for someplace other than your home, do a dry run one morning. Go through all the tasks needed to get out the door with the baby: feeding him/her, changing diapers, packing his/her bag, and getting him/her dressed (including outerwear). Note how long these tasks take you, and then add ten minutes to allow for some “wiggle room.” Map out different routes from home to child care to work and then back again. Then get on the road and practice traveling those routes. This will give you an idea of how much time to allocate to each leg of your commute.

### **Be prepared to consider—and reconsider—your return to work.**

As you get closer to your return date, you may have a variety of thoughts including: how will I handle returning to work full time; do I have the right work schedule for me and my family; and maybe even, should I really return to work? Perhaps you have already agreed to a part-time or transitional schedule with your supervisor. Many parents find that a gradual ramping up of work hours helps avoid some stress upon re-entry. If you did not discuss a flexible work schedule with your supervisor before your leave, now is the time to review your department’s and the University’s policies regarding flexible work arrangements [http://harvie.harvard.edu/Work\\_Life\\_Balance/Flexible\\_Work/](http://harvie.harvard.edu/Work_Life_Balance/Flexible_Work/).

Plan some time and activities just for you before and after your return. Getting into the habit of good self-care and stress management will serve you well as you navigate through this and future transitions.

The decision to work or stay at home is not an easy one—especially at this stage—and you want to make the best decision for you and your family. Some experts suggest that you take a few months to establish your new routine and gain some perspective, before making any long-term decisions. Child care, finances, quality of life, career, personal and family needs all have to be considered. Here are some questions you may want to answer as you consider your options:

- Do you have appropriate, affordable, and reliable child care for your child?
- Do you have backup care if your primary care arrangement falls through?
- What is the financial impact on your family’s quality of life if you work part-time or not at all?
- What work-related benefits are you giving up if you decide to stay at home?
- Can you use Harvard’s flexible work arrangements and plan a schedule that better suits your family’s needs at this point in time, but maintains your job and career growth?
- What are your long-term career goals and how will leaving affect these goals?
- How can other members of your family support you?
- How will you make the time to take good care of yourself as well as your family and your job?

The FAS Work/Life Consultant at FAS Human Resources can help you. Contact Ronnie Mae Weiss at 617-495-4275, [rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu), for more information about flexible work arrangements and other work/life supports and resources.

## *Your First Weeks Back at Work*

In your first weeks back, aim to get back up to speed without being overwhelmed. Here are some tips for you to consider:

*If you can, come back on a Thursday. Make your first week at work a two-day week. This will help ease both your separation pangs and re-entry stress.*

**Help yourself focus at work.** Working parents generally find that they are able to focus on work while they are at the office and on their children when they are at home. That sometimes takes a while, though. Make it easier on yourself by minimizing the number of baby photos around your desk and the time spent talking to co-workers about your baby. Sticking to business in these first few weeks will also reassure your colleagues that you are indeed ready to get back to work.

**Find others with similar experience.** Seek out other people, both at and outside of work, who have taken parental leave and returned to work. The FAS *Parenting Your Infant and Toddler Group* meets monthly for conversation and support. It's helpful to have someone with whom you can let down your guard, who understands what you are feeling. They may also have some helpful tips to offer.

**Be sensitive to your co-workers' feelings.** The person who handled your work during your leave may find it hard to withdraw from some matters. It will help both of you if you continue to communicate in a respectful manner about the work matters you have shared. Don't hesitate to express to all of your co-workers your appreciation of the extra efforts they may have taken while you were away.

**Be realistic in planning work goals.** Make a list of your work responsibilities and the tasks involved and then estimate how much time to allocate to each task. Be aware that everything may take you a little more time as you adjust to being at work again. Think about how you might handle working late during project "crunch times" if necessary. If you are working fewer hours now, you may find that others expect you to perform the same amount of work as you did under your previous full-time schedule. Try not to make commitments that may be impossible to keep. Instead, set clear and realistic expectations about what you will accomplish and when.

**Review your re-entry with your manager after a month or two.** If you are working a changed or reduced schedule, review how your schedule is working out, how realistic the workload really is, and any adjustments that you should make going forward.

**Know what to expect when you arrive home from work.** For parents of babies and young children, the early evening hours are usually the hardest. Your entire family may be exhausted – the adults, after a day at work, and the children, after their activities in child care or school. It's helpful to have your dinner plans in mind before you reach home, to avoid a frantic search for ingredients. You'll also feel more rested for the night ahead if you take a few minutes immediately after arriving home to change your clothes, play quietly with the baby, or just sit and talk with family members.

**Take care of yourself.** With all the competing demands on a new parent's time and energy, it's all too easy to overlook your own needs. Doing so, however, is likely to lead to more stress and exhaustion and will not benefit you or your family. It's important to take care of yourself. Consider taking shortcuts or eliminate some chores. You'll also be better rested and more energetic in the long run if you make sure that your daily schedule includes some time just for yourself. Take a hot bath, listen to music, or retreat to your room to read or nap. Try to get regular exercise-in fact, an exercise or dance class may present a perfect opportunity for "me time." If your evening hours and responsibilities don't allow for exercise, try to find opportunities during the day. Even a 15-minute walk around the block can do wonders for your physical and emotional health and provide an energy boost for the rest of the day.

### **Harvard's Work/Life Resources**

FAS Work/Life Consultant, Ronnie Mae Weiss  
[rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu)

FAS Human Resources  
<http://www.hr.fas.harvard.edu>

Harvard Office of Work/Life Resources  
[http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)

Harvard's Employee Assistance Program (EAP)  
<https://harvardeap.personaladvantage.com/articles>  
Phone Consultation: 877-327-4278

### **More Resources**

The New Parent Transition Program provided through Harvard's Employee Assistance Program  
<https://harvardeap.personaladvantage.com>  
Phone: 877-327-4278







# A Child Care Primer

Choosing a child care arrangement is one of the most important decisions a parent will make. There are three basic types of arrangements: child care in your own home, child care centers, and care in someone else's home. In addition, many families rely on family, friends, and neighbors to help with child care, either in the child's home or at the caregiver's. This article will help you understand your options and outline the advantages and disadvantages of each type of arrangement so that you can choose the one that best matches your family's needs. It also includes information about Harvard's resources; including child care subsidies and backup child care, and a list of questions you can use to interview prospective providers.

Harvard has a variety of resources to help you find child care: as a Harvard benefits-eligible employee you can call Harvard's Employee Assistance Program (EAP) at 877-327-4278 and ask for the child care resource and referral service.

## Identifying Your Child Care Needs

Here are some factors to consider in choosing child care:

**Preference.** With which type of care or program are you more comfortable: one-on-one; a small, informal group; or a larger, more organized program in an institutional setting? Do you want your child to have individual care, or be with other children? Is the child care you are considering consistent with your values? It is important to have a good match here. Parents should feel comfortable with whichever choice they make. Also, consider the physical and emotional well-being of your child. The child's needs are a critical consideration in your choice of child care. You may find that your child will require different types of care at different ages or developmental stages, or that your choice may reflect the differences in each child's temperament.

**Availability.** When should you begin to look for child care? Across all communities, regardless of the type of care you prefer, finding care for an infant (as compared to a preschooler or older toddler) can be the most difficult and time-consuming. If you are looking for care for an infant, some experts suggest you begin to gather information about potential providers and even sign up or put your name on a waiting list before the baby is born. At the very least, you will want to give yourself several months of lead-time to find a provider before you return to work from family leave.

**Quality.** What are the elements of quality care that you should look for? How can you tell if a program or provider offers quality care? Researchers have identified the elements of quality care: a warm, nurturing, attentive and trained caregiver; low staff to child ratios; a well-planned, well-equipped, and organized physical setting; and a safe and healthy environment. Accreditation is one measure that says a child care center or family child care provider meets a higher standard than state regulations. The National Association for the Education of Young Children <http://www.naeyc.org/accreditation> accredits child care centers and the National Association of Family Child Care [http://www.nafcc.org/accreditation/about\\_accreditation.asp](http://www.nafcc.org/accreditation/about_accreditation.asp) offers a similar accreditation program for family child care homes. You can ask providers if they are accredited or are in the process of becoming accredited.

**Location.** Would you prefer child care near your home or near work? Where is your pediatrician located? Do you drive to work or do you need child care near public transportation?

**Schedule and duration.** Do you need full-time or part-time care? Do your hours of work change? Do you need a flexible schedule? Do you need care year-round?

**Cost.** What can you afford to pay? In-home providers tend to be the most expensive (depending on the number of children needing care) and family child care providers tend to be the most affordable option. For how many children are you paying child care costs?



## *Evaluating Your Options*

In general, there is no “best” type of child care arrangement. But research in child development does indicate what matters most for all children. We know that whether cared for in child care centers, family child care homes, in their own homes or at someone else’s, children do best when they receive care from a consistent, engaged, responsive adult or adults, in a rich, nurturing and safe setting. Look for these qualities and bear in mind that your child care provider’s chief role will be to support the most powerful influence on your child – the parenting he/she receives from you.

Children of all ages need a clean, safe, nurturing environment, a balance between active and quiet activities, some outdoor time, consistency of care provider(s), and love.

A child care center provides care in a group setting with planned activities. The children may be grouped according to age, or they may be placed in a mixed age grouping. The teachers are trained and supervised, and the center is open all weekdays except in severe weather or pre-announced closings for holidays or vacation weeks. Child care centers may offer both full and part-day enrollment, and some may offer other part-time options as well. Centers may have minimum requirements for enrollment, such as two or three days a week. When your child is sick, he/she may not attend.

A child care center is licensed by the state and conforms to the state’s regulations for staff to child ratio, group size, staff qualifications and facilities. Centers will vary in philosophy, size, cost, number of qualified staff in each classroom, the site and the facilities, whether they are for-profit or non-profit, and the activities they offer for parent participation.

### **Child care centers offer the following advantages:**

- Care is always available during hours of operation, even if a caregiver is ill or on vacation.
- Throughout the day there is a structured program with routines and activities.
- The facility is licensed and regulated, and all staff have relevant experience and training.
- Staff are supervised at all times.
- Your child interacts with a range of other children.

### **The disadvantages of child care centers are:**

- Your child receives less individual attention.
- There is greater exposure to illness.
- You have less control over who your child plays with and the activities in which he/she takes part.
- The staff may not be flexible enough to respond to your child’s individual temperament and needs.
- There is typically no flexibility regarding hours of care, and there may be late fees imposed if a child is picked up late.
- You will need to arrange drop-off and pick-up at the center.
- You will need to arrange backup care if your child is ill.

**A family child care provider** offers care for children in the provider's own home. Family child care providers run their own businesses and set their own policies and rates. In most states, this person has to meet specific licensing or certification guidelines. They also may offer more flexibility in enrollment and fee structure. Family child care settings vary in terms of the provider's experience with children, the nature of activities, the physical environment, the availability of materials and equipment, and the number of children for whom they care. Your child will be in a group with other children who will likely be of varied ages. Depending on your state's regulations, there may be up to twelve children in the caregiver's home, although the most common number is up to six (including the caregiver's own children). A family child care provider who is licensed or certified has met the requirements of the state and has passed background checks. To maintain licensing, the provider usually is subject to, and must pass, unscheduled visits from state licensing authorities. Family child care may be a good choice for an infant or toddler or a child who needs more attention and accommodation than a child care center can provide.

### **Family child care homes offer the following advantages:**

- Care may be less expensive than a child care center or in-home care.
- Your child receives consistent care from one or more caregivers in a safe home environment.
- Your child may receive more individual attention than at a child care center.
- Your child interacts with a small group of children, often of varying ages.
- There may be some flexibility regarding hours of care, and accommodation of emergency needs or "last minute" schedule changes.
- The provider is licensed and regulated, the provider may be required to attend annual trainings, and typically must pass background checks and unscheduled home inspections.

### **The disadvantages of family child care homes are:**

- The care is unsupervised.
- There may not be the same variety of toys, equipment, and activities that a child care center provides.
- The provider may not have formal child care training.
- You will need to arrange for backup care if the provider is ill or on vacation, or if your child is ill.
- You will need to arrange drop-off and pick-up from the child care home.

**In-home care** can be provided by a live-in nanny or au pair, or by another caregiver (e.g., nanny, babysitter, or relative) that comes to your home on a daily basis. Generally this child care arrangement is the most convenient option and provides you with the most flexible hours and, if necessary, longer hours of care than a child care center or family child care.

A nanny may live in your home or come to your home each care day. You may hire a nanny directly, such as through a newspaper or web ad, or you may work with a nanny employment agency. These providers usually have professional training in child care and development. Full time nanny care is generally the most expensive type of child care, especially if you have only one child. You will also have an employer's obligations under federal and state law to pay Social Security taxes, unemployment insurance, and possibly workers' compensation, and to report your nanny's wages to the IRS. See the IRS Publication 926, Household Employer's Tax Guide

for more information <http://www.irs.gov/publications/p926/index.html>. To minimize costs and provide more socialization for their children (and where state child care licensing laws permit), some families share a nanny with the children being cared for at the same time in one family's home. Visit <http://www.childcare.harvard.edu/childcare/nanny.shtml> for Harvard's nanny resources.

An *au pair* is typically a student from another country who lives in your house for a specific period of time and is treated as a member of your extended family. Depending on the au pair's country of origin, he/she may stay, legally, with his/her host family for three months to two years. Au pair care is less expensive than nanny care, and provides the advantage of exposing your family to another culture and language. On the other hand, an au pair may have little or no child care training or experience. Also, the au pair's stay will be limited, so your child will face separation from someone he/she has become close to, and your family will have to find and adjust to a new caregiver. Another consideration is that you will be responsible for a young person who is far from home, and you may be called upon to provide guidance, advice, and emotional support.



### **In-home child care offers the following advantages:**

- Your child receives individual attention.
- Your child receives consistent care from one person.
- There is less exposure to illness than in a group child care setting.
- The caregiver's availability may be more flexible. The caregiver may be able to adjust his/her hours to meet the family's needs, and care is available when your child is sick and perhaps, even to cover your business travel needs.
- Care providers may transport children to and from school and activities.
- Light housekeeping may be provided.
- The parent has more say in child care.

### **The disadvantages of in-home care are:**

- There is no government regulation or licensing for this type of child care.
- You may feel a lack of privacy and space if a live-in caregiver shares your home.
- Your child may miss out on regular social interactions with peers, unless the caregiver takes him/her to play dates and other scheduled activities.
- You will need to arrange backup care if the provider is ill or on vacation, or if he/she leaves.
- The care is unsupervised.

**Family, friends, and neighbors**, as well as extended family such as grandparents, may be counted on by parents to care for their child, either in the child's home or at the relative's home. Or you might find that a friend or neighbor is willing to care for your child in his own home.

These informal arrangements are especially helpful for parents who work nights or at other times that more formal child care options are not available. In many cases, the parent puts together a combination of several types of child care arrangements to meet the family's need. For example, a child might be enrolled at a child care center in the morning, and be cared for at a neighbor's home in the afternoon.

### The advantages of this type of care are:

- Especially in the case of a relative, the child is cared for by someone he/she knows well, and who loves and cares for him/her.
- Your child may be cared for in a particular language, cultural, or values-based setting.
- Your child may receive more individual attention.
- The caregiver is likely to be flexible in accommodating your hours and needs, and in caring for your child if he/she is ill.
- There is less exposure to illness than in a group child care setting.
- This type of care may be the least costly.

### The disadvantages are:

- The caregiver is unsupervised.
- The quality of care, as well as health and safety precautions, are unregulated.
- This type of care may be irregular or unreliable.
- Your child may miss out on regular social interactions with peers, unless the caregiver takes him/her to play dates and other scheduled activities.
- You will need to arrange backup care if the caregiver is ill or on vacation, or if your relationship with the caregiver breaks down.
- There may not be as wide a variety of toys, equipment, and activities as a professional child care setting would offer.

Negotiating child care arrangements with family, friends or neighbors may present special challenges. Whether you are swapping child care with a friend or a neighbor or leaving your baby with



grandparents, it's especially important to lay out clear expectations for areas such as discipline, feeding, and sleeping from the outset. Setting clear ground rules can help avoid some potential pitfalls of this type of care, where different parenting styles – based on generational, cultural and personal differences – may lead to discomfort on both sides of the arrangement. Discuss or write out your expectations before the first day of care and be sure that all parties understand that these are expectations for raising this child, not criticisms of anyone's particular style. It is a good idea to build in a plan to review the arrangement at certain intervals, such as one month, three months, and so on. That way, all parties will have planned opportunities to discuss possible adjustments to the arrangement.

Regular check-ins can keep small concerns from escalating into larger interpersonal difficulties.

## *Interviewing Child Care Providers*

Whether you have decided that you would like a nanny, family child care provider, or a child care center for your child, you will first need to identify several potential providers that are convenient to your home or work location. Contact Harvard's individualized child care resource and referral service offered through Harvard's EAP to help you locate care and provide you with support and information in choosing care. You may also want to ask friends, neighbors, and co-workers for referrals. But regardless of where you get your referrals from, it's important that you get your own "feel" for each provider because each family has its own particular needs and preferences.

### **Here are some ideas about what to look for and ask when choosing a child care provider:**

#### **Child care centers**

Begin with some screening phone calls to make sure that a center meets your basic needs. When you call the center, start by telling them your child's age and the date your child needs to begin child care. Then ask:

- Do you have openings?
- If there are no openings, is there a waiting list? How long is it?
- What is the cost?
- What days and hours are you open?
- Is part-time care available? What schedules are available?
- Are you accredited?
- Are you licensed?
- How many children would be in my child's group, and how many caregivers for each group?
- What would be a good time for me to visit?

If the center meets your needs, finish up your call by making an appointment to meet with the director and tour the center.

**Note:** If you have already contacted Harvard's EAP, <https://harvardeap.personaladvantage.com/articles>, Phone Consultation: 877-327-4278; they should have already provided you with much of this information.

**Observe for yourself.** Based on the answers to your telephone questions, choose at least three centers to visit. Try to be at the center at a time when you're likely to see children interacting with staff and also when some parents may be picking up or dropping off their children. During your visit, ask yourself the following questions, and at each center, take notes that respond to them.

## How does the center look?

- Is it clean, colorful, and inviting?
- Is there an outside play space?
- Is it safe and “child proof”? Look for smoke detectors, fire extinguishers, covered electric sockets, bumpers covering sharp edges, and a fence around the outside space.
- Are there different areas for each activity?
- Are there sufficient and appropriate toys and equipment for a variety of play?
- Is there sufficient and appropriate indoor and outdoor play space? (Most states require at least 35 square feet per child of usable play space indoors and at least 75 square feet per child in the outside play space. These space requirements vary based on the age of the child.)
- Is there a schedule of activities posted?
- Do the furnishings enable toddlers and pre-school children to do things for themselves, such as having child-level cubbies or storage bins, lower sinks or short step-stools?

### Staff

- Are the caregivers actively involved with the children, rather than talking among themselves or doing paperwork or chores?
- Are good health habits maintained, such as washing hands after diapering?
- Do the caregivers spend time holding and talking to individual children?
- Do the staff talk to the children pleasantly, respectfully, and in a way that children understand?
- Is discipline given firmly and calmly, without yelling or threatening?

### Children

- Do the children seem to be comfortable, happy, and friendly to each other?
- Can you envision your own child fitting in with this group?
- Are the children encouraged to be independent and “do it myself”?
- Is there a balanced schedule that includes active and quiet times, group and individual times, and indoor and outdoor play?
- Are the children given choices about participating in various age-appropriate activities that include features that are important to you (e.g., activities that are multicultural, gender-balanced, literary-focused, etc.)?

**Ask questions about general operations. When you meet with the center’s director, take note of the answers to these questions:**

### Mission and policies

- Does the center have a mission statement or a philosophy on which you base your programming and your interactions with the children?
- What is your discipline policy?
- Do you sign written agreements with parents? How does payment “work” (weekly, monthly, by invoice, etc.)?
- Do you provide parents with a written handbook that includes your rules?
- (If your child takes daily medication) Do you administer medication prescribed by our pediatrician?
- What is your sick child policy? Can my child come to the center if he/she has a mild illness? In what circumstances must I keep my child at home?
- What is your vacation policy? Do you close down at certain times, such as school vacations?
- What is your policy for late pickups?





### **Center/parent interactions**

- How do you handle parent complaints or concerns?
- Do parents receive reports (written or oral) of their child's activities? How often?
- Are parents welcome to make unannounced visits? (Don't be alarmed if you're asked to avoid certain times as long as the provider gives a sensible reason, such as visits being too disturbing during nap or lunch time.)

### **Safety, health, and security**

- Is there a written policy for handling injuries and illnesses?
- If children are transported anywhere, are car seats or safety belts used?
- What meals do you provide, and how is the food stored and prepared? Ask to see a current menu.
- How often are toys and equipment cleaned?
- Are there first aid supplies on hand?
- How are the facilities kept secure? (For instance, are the outside doors locked?)

### **Staff qualifications and turnover**

- Tell me about your caregivers' educations and relevant backgrounds.
- What background checks do you perform before hiring staff?
- Do staff members receive ongoing training? Do they attend seminars and workshops? Have they received formal education about child development?
- Are all staff members trained in first aid and CPR (and specifically infant first aid and CPR)?
- How long has each caregiver been working at this center?
- How long has the director been working at this center?

**Ask questions relating to your child's age (now and at the "next step up"). Here are some questions for the director or the staff member who would be caring for your child:**

#### **Babies**

- Is there a single feeding schedule for all the infants, or is this flexible? If you will be continuing to breastfeed your baby once he/she is in care, ask the center if they have facilities for nursing mothers and their procedures for handling breast milk.
- Are there scheduled diaper changes in addition to needed changes?
- What do you think a baby needs from a caregiver at this developmental stage?

#### **Toddlers**

- How are children who are strong-willed handled?
- What activities do the children take part in and enjoy?
- How do you handle toilet training, and at what age?
- What is the center's philosophy about the bottle, pacifier, and security objects for this age group?

### Preschoolers

- What skills do you expect and help children to develop?
- What reading and pre-reading activities does the center offer, and how often?
- What other activities are available?
- How is discipline handled?
- What is the gender composition of the group?



**Ask for references, and follow up on them.** To get a balanced picture of each child care center, it's a good idea to talk with parents whose children are currently enrolled. Ask the center director to give you contact information for at least three current parents. Then be sure to call and ask not only about how satisfied they are with the child care, but also about how the center communicates with parents and responds to parent concerns. You may also post a question about the center on Harvard's parent-to-parent child care bulletin board found at <http://www.childcare.harvard.edu/>. The child care center you choose will be your partner in caring for your child, so the lines of communication should be open and comfortable all the time.

### Children with disabilities/medical/other conditions:

With some exceptions (child care centers run by religious entities, for example), all child care providers, including home-based providers, must comply with Title III of the Americans with Disabilities Act (ADA), according to the U.S. Department of Justice. As a general matter, programs cannot exclude children with disabilities/medical conditions unless their presence would pose a direct threat to the health or safety of others or require a fundamental alteration of the program. For more information, please visit: <http://www.ada.gov/childq%26a.htm>.

Assuring yourself that a program is ADA-compliant is a first step, but you should still carefully evaluate any program to be sure that the caregivers are either experienced caring for children with disabilities/medical conditions and are actively willing to learn about your child's requirements; the space is barrier-free; and that appropriate accommodations and services are provided. Parents should expect to provide all pertinent information, and to be an active partner in helping the program provide the best care possible.

### Interview questions for a family child care provider:

- What is the provider's educational background and experience with young children?
- Do the children watch television? If so, what, when, and for how long?
- Are other electronic devices available to the children in care; if so, what are they?
- Are there other family members home during the day or when children are in child care?
- Does anyone in the house smoke?
- Is the license posted?
- Are there pets in the house?
- Ask for and follow-up on references.
- Will the provider supply you with his/her tax ID number? (You will need this in order to use a Flexible Spending Account, claim the child care tax credit, or receive an awarded Harvard Child Care Scholarship payment.)

## Interview questions for an in-home caregiver:

- What is the caregiver's experience with caring for children? What ages?
- What is the person's philosophy of child rearing?
- How long a commitment will this person be willing to make?
- Observe how he/she interacts with your child.
- How does child care fit in with the caregiver's personal goals?
- Is your provider able to be flexible in his or her hours should you require it?
- Is he/she willing to do some light housekeeping chores?
- If you want your provider to transport your child, does he/she drive and is he/she willing to do so?
- Ask for and follow-up on references.

## *Paying for Child Care*

Child care is expensive and is a major household expense for many parents of young children, according to the National Association of Child Care Resource and Referral Agencies <http://www.naccrra.org/>. The average price of full-time care for an infant in a child care center in Massachusetts is almost \$15,000 a year; in the greater Boston area the cost is more than \$20,000 a year. The cost for a nanny is even higher.

## Harvard has several programs to help working families defray the cost of child care.

### Child Care Scholarships

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/Affording\\_Child\\_Care\\_Scholarships/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/Affording_Child_Care_Scholarships/).

Harvard employees may be eligible for one of several child care scholarship programs. Each year these programs make limited funds available, based on need, to eligible employees. Programs are available for benefits-eligible faculty, academic appointees, post-docs, administrative/professional staff, non-bargaining unit support staff, HUCTW and SEIU/Service & Trade union members.

## *Flexible Spending Accounts*

[http://harvie.harvard.edu/Compensation\\_Benefits/Health\\_Benefits/Flexible\\_Spending\\_Accounts.html](http://harvie.harvard.edu/Compensation_Benefits/Health_Benefits/Flexible_Spending_Accounts.html).

Harvard employees are eligible for a dependent-care flexible spending account that allows them to set aside money on a pre-tax basis to pay for eligible expenses associated with the care of a dependent child or adult.

Visit [http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/Affording\\_Child\\_Care\\_Scholarships/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/Affording_Child_Care_Scholarships/) for more information, scholarship rules, guidelines, applications, and other financial resources for child care.

Your family may also be eligible for a variety of state and federal child care tax credits. You can read more about the federal programs on the IRS website [www.irs.gov](http://www.irs.gov). See Publication 503, Child and Dependent Care Expenses. For more information on what your state offers, you can check with your state's tax agency. The National Women's Law Center <http://www.nwlc.org/> also has materials and other resources on state-level child and dependent care tax provisions.



Harvard's EAP can help you find financial and legal professionals at <https://harvardeap.personaladvantage.com/articles>. The EAP can also help you with free legal consultations by phone at: 877-327-4278.

### *Planning Ahead for Backup Child Care*

Now that you have taken care to find the right child care provider or program for your child and family, you may think your job is done – but even the best child care arrangements can't fit every situation or fill every gap. Schools and child care centers close for vacations. Nannies and family child care providers get sick. Your child may become ill and be unable to go to child care or school.

It's important to plan ahead for occasions when your regular child care isn't available. And it's a good idea to do your planning well before the need arises, so you'll be able to take as much care in choosing a backup care provider as you did your regular care provider.

**Do the ground-work before the need arises.** It's not possible to predict every day that you'll need backup child care. Still, there are some dates you can be sure of, such as school vacations and some occasions that you know will come up, even if the dates are undetermined, such as occasional out-of-town trips. You can begin planning for backup care for those days and occasions. Here are the first steps to take:

#### **Know both parents' options at work.**

Understand the University's policies about time off, personal days, vacation, use of sick time to care for your dependents, floating holidays, and other leaves.

**Flexible Work at Harvard** [http://harvie.harvard.edu/Work\\_Life\\_Balance/Flexible\\_Work/](http://harvie.harvard.edu/Work_Life_Balance/Flexible_Work/) will help you understand the options available to you and how you can use them. HUCTW members may also call 617-661-8289 or visit <http://www.huctw.org/>.

- **Is it possible to switch shifts with a colleague?** Or to work on a paid or floating holiday, and apply that paid time off to another day instead? Speak with your supervisor about occasional work-at-home options. On a day when an older child is home sick or home because of a school closure, each parent may be able to work at home for part of the day so that there is overlapping child care coverage. Working at home when a younger child is ill may not be an appropriate solution, as direct child caring activities are generally incompatible with work that is usually performed at the workplace.
- **Create a calendar.** It's easier to plan for your future needs when you can see the dates laid out in front of you. Gather the calendars for your children's schools and any other programs in which they are enrolled. If your child is in informal child care, ask his caregiver about any planned vacation periods. Find out what days are considered paid holidays by both parents' employers. Then, with all these dates in hand, go through each month on a blank master calendar and mark off the days that you know you will need backup care.

- **Talk with family and friends.** Grandparents, neighbors, other parents, and friends are often happy to help out. These are often the best option when urgent situations arise, such as a last-minute need for a parent to go out of town before the school day starts, or when you are delayed at work and need someone to pick your child up from child care. You've got to ask first, though, in order to know who you can count on in a pinch.
- **Register for one or more of Harvard's backup care programs.** Faculty, academic appointees, and staff may be eligible to use one or all of Harvard's Emergency/Backup Care benefits. As a benefits-eligible employee you may use these services when you need to be at work and your regular child care is unavailable, to ease your transition back into a regular work schedule when returning from family leave, to accommodate changes in flexible work arrangements, and other situations where backup care is required. Harvard's backup care supports for faculty, academic appointees, and staff are provided by Parents in a Pinch, Just in Time Care, and Harvard's EAP. To learn more about these services, eligibility, costs, subsidies, and how to register, visit: [http://harvie.harvard.edu/docroot/standalone/Work\\_Life\\_Balance/Caring\\_for\\_Children/Finding\\_Child\\_Care/Backup\\_EmergencyCare.shtml](http://harvie.harvard.edu/docroot/standalone/Work_Life_Balance/Caring_for_Children/Finding_Child_Care/Backup_EmergencyCare.shtml).
- **Choosing backup care.** It's important to use the same criteria in choosing a backup child care provider as you would an everyday care provider. Ask each program and provider for references and be sure to check them. Arrange for your child to spend some time with each child care provider (for pay), so they can get to know and be comfortable with each other. Take your child to visit the programs you're interested in and see his level of comfort.

School-age children need school vacation and summer care. Many summer camp programs are fully registered by the preceding January, and may require payment in full by February. If your child is in kindergarten, you should start to talk to other parents about recommendations as early as the fall. Harvard's EAP can help you find school camps and summer day camps that are offered on campus, in your local community, and nationwide.

Make sure you're prepared when the time comes. You'll want to be able to secure care at a moment's notice, the same morning your child wakes up with a sore throat or you're called to go out of town. Be sure that the information you need to contact your backup care providers is easily accessible along with the hours you can call to arrange care and any other pertinent information. If pre-registration is required, be sure to complete that process before you need to use the backup care.

### **Harvard's Work/Life Resources**

FAS Work/Life Consultant, Ronnie Mae Weiss  
[rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu)

FAS Human Resources  
<http://www.hr.fas.harvard.edu>

Harvard Office of Work/Life Resources  
[http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)

Harvard's Employee Assistance Program (EAP)  
<https://harvardeap.personaladvantage.com/articles>  
Phone Consultation: 877-327-4278

### **More Resources**

Harvard University Child Care Resources and Referrals (child care centers, family child care, in-home care)  
[www.childcare.harvard.edu](http://www.childcare.harvard.edu)

Harvard University Child Care Bulletin Board  
<http://isites.harvard.edu/icb/icb.do?keyword=k13666&pageid=icb.page61800>

Harvard-Affiliated Child Care Centers  
<http://www.childcare.harvard.edu/childcare/centers.shtml>

American Nanny Company (provides discount to Harvard affiliates)  
<http://www.americannannycompany.com/>  
or call 617-244-5154

National Association of Child Care Resource and Referral Agencies  
<http://www.naccrra.org>

National Resources Center for Health and Safety in Child Care and Early Education  
<http://nrckids.org/>

Massachusetts Department of Early Education and Care  
<http://www.eec.state.ma.us/>

**FAS Human Resources would like to acknowledge that some information for the Child Care Primer section was contributed by the Harvard Medical Center Office of Work and Family and Harvard University's Office of Work/Life Resources.**





# Breastfeeding and Work

You don't have to choose between working and breastfeeding. Many women have continued to breastfeed after returning from family leave by pumping at work, nursing on breaks, or supplementing feedings. Nursing your baby can be a loving and relaxing way to reconnect after being apart during the workday. Spouses and partners of breastfeeding mothers can play an important role in supporting and supplementing the breastfeeding of a baby.

It takes a bit of planning and time, but you have many choices.

### *Here are some variations:*

- Pump your milk at work and store it for child care (for the location of the private Mother's Rooms in the Cambridge and medical area, go to: [http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/New\\_Parents/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/New_Parents/)).
- Visit your baby at child care during a break.
- Nurse before and after work and supplement with formula and/or solids, if age appropriate, during work hours.

### **Elements of Pumping Success**

**A place to pump.** Harvard is committed to supporting a mother's choice to breastfeed her baby while pursuing her career and provides access to lactation rooms throughout the university, including the Cambridge and Longwood Medical campuses. The lactation rooms are private, comfortable spaces available to all Harvard-affiliated nursing mothers (faculty, academic appointees, staff, students and their breastfeeding spouse/domestic partner).

The rooms are equipped with hospital-grade Medela(tm) "Lactina Select" pumps. You will also find information about using the pumps, where to purchase your necessary personal accessories, books and pamphlets about breastfeeding, and contact numbers for professional lactation consultants who can provide problem solving and education, should you need it.

### *The Lactation Rooms (Mothers' Rooms) located in Cambridge are:*

- Holyoke Center, 1350 Massachusetts Avenue  
Contact: Natalie Beaumont-Smith, 617-495-4100  
Registration form: [http://harvie.harvard.edu/docroot/doc-lib/400\\_Work\\_Life/400\\_Child\\_Care/HolyokeCtrLactationRoomRegistration.pdf](http://harvie.harvard.edu/docroot/doc-lib/400_Work_Life/400_Child_Care/HolyokeCtrLactationRoomRegistration.pdf)  
Instructions (including exact location) will be emailed upon registration.
- Observatory/Center for Astrophysics, Perkin Lab, 60 Garden Street  
Contact: Antonelle Fruscione, 617-496-7851
- Biolabs Building, 16 Divinity Avenue  
Contact: Renate Hellmiss, 617-496-9159
- CGIS, CGIS/Knafel Building, 1737 Cambridge Street  
Contact: Matt Stec, 617-384-7230, [stec@fas.harvard.edu](mailto:stec@fas.harvard.edu) (email preferred)
- School of Education, Longfellow Hall, 13 Appian Way  
Contact: Thelma Hernandez, 617-495-8035  
*\*Please note that a special access ID card is needed for the room*
- Harvard Law School, Areeda Hall, 1545 Massachusetts Avenue  
Contact: Molly Sloan, 617-495-1880





*The Lactation Rooms (Mothers' Rooms) located in Allston are:*

- Aldrich Hall, 35 Harvard Way  
Contact: Cathy Francisco, 617-495-6814
- Cumnock Hall, 33 Harvard Way  
Contact: Cathy Francisco, 617-495-6814
- Teele Hall, 60 N. Harvard Street  
Contact: Sadia Jiminian, 617-495-6944

*The Lactation Rooms (Mothers' Rooms) located in the Longwood Medical Area are:*

- Tosteson MEC, 260 Longwood Avenue, Room 147b
- New Research Building (NRB), 77 Avenue Louis Pasteur, Room 260b, Department of Genetics
- Harvard School of Dental Medicine, 188 Longwood Avenue, Room 005, Lower Level
- Harvard Institutes of Medicine (HIM), 4 Blackfan Circle (accessible from the NRB, 77 Avenue Louis Pasteur, in the Women's Room near the doors to HIM from Elements Cafe) Room 1C4.

*The Lactation Rooms (Mothers' Rooms) located at HSPH are:*

- Kresge Building, 677 Huntington Avenue, Room G11A, Ground Level
- FXB Building, 651 Huntington Avenue, Room G01
- Landmark Center, 401 Park Drive, Room 043A, 3rd Floor East

*The Lactation Room (Mothers' Room) located at Harvard Forest is:*

- Shaler Hall, 324 N. Main Street, Petersham, MA  
Contact: Kristina Stinson, 978-756-6184

**You will need to prepare a bag with the following items:**

- Insulated cooler and ice packs.
- Bottles and lids or milk storage bags (not disposable liners).
- Marker to label and date your milk.
- A picture of your baby, toy, or piece of clothing to help with the let-down response.

**Scheduling your pumping times.** Typically, nursing mothers need to pump approximately once every three hours. So, if you can nurse right before you separate from your baby at about 8:30 AM, pump at noon and 3 PM, you will be ready to nurse again when you reunite.

If you pump twice a day, consider getting two sets of horns or flanges, saving you clean-up time at work. You can place the horns in a plastic, sealable bag for cleaning at home.

You should plan on spending approximately 15-30 minutes when you pump.

**Trying the bottle.** When your baby is approximately 6 weeks of age, be sure to practice expressing or pumping your milk and offering him/her a bottle before breastfeeding is well established. You may want to:

- Let your spouse, partner, or another caregiver offer the bottle.
- Try different nipples.
- Try the bottle when your baby is hungry but not ravenous.

Start stocking your freezer with milk while on maternity leave. This will ensure a supply in the event that you pump less than the baby eats during a given day.

### **Lactation experts suggest the following:**

**Keeping up your milk supply.** Try not to compare the amount you pump to the amount of formula a baby would drink. The nutritional values are very different. It is perfectly normal to pump a different amount than someone else, so don't compare the amount you pump with the amount someone else pumps.

It is important to nurse frequently when you are with your baby. A plentiful supply is also dependent on the complete draining of your breasts, seven times a day if your baby is breastfeeding exclusively. If you find your supply decreasing, your pump may not be fully emptying your breasts. Eating well, taking in enough fluids, and getting enough sleep is vital to keeping up your supply.

**Storing your milk.** According to the La Leche League, human milk can be kept safely at 60°F in an insulated cooler with ice packs for up to 24 hours. For additional information on storing human milk please see La Leche League's website at <http://www.llli.org/FAQ/milkstorage.html>.

The American Academy of Pediatrics recommends breastfeeding for at least a year and until you and your child decides to stop. Continuing to breastfeed after returning to work will provide long term health benefits to you and your baby. Natural immunities in breast milk will protect against many of the routine colds and viruses that are present in child care settings. Pumping or expressing your milk while at work is a nice way to stay connected with your baby and provide him/her with something no one else can.

Although experts believe breast milk is the best nutritional choice for infants, breastfeeding may not be possible for all women. For many women, the decision to breastfeed or formula feed is based on their comfort level, lifestyle, and specific medical considerations.

For mothers who are unable to breastfeed or who decide not to, infant formula is a good alternative. Some women feel guilty if they don't breastfeed. But if you feed your baby with a commercially prepared formula, be assured that your baby's nutritional needs will be met. And you'll still bond with your baby just fine. After all, whether with breast milk or formula, feeding is an important time of connection between mother and baby.

### **Harvard Work/Life Resources**

FAS Work/Life Consultant, Ronnie Mae Weiss  
[rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu)

FAS Human Resources  
<http://www.hr.fas.harvard.edu>

Harvard Office of Work/Life Resources  
[http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)

Harvard's Employee Assistance Program (EAP) New Parent Transition Program  
<https://harvardeap.personaladvantage.com/articles>  
Phone Consultation: 877-327-4278

### **More Resources**

Harvard University Lactation Room Information and Registration  
[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/New\\_Parents/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/New_Parents/)

La Leche League International, a source for breastfeeding information and support  
<http://www.llli.org/>

Nursing Mothers Counsel (provides breastfeeding information and support)  
<http://www.nursingmothers.org/>

Breastfeeding.com: Answers to common breastfeeding questions and listings of lactation consultants [www.breastfeeding.com](http://www.breastfeeding.com)

*The Womanly Art of Breastfeeding* by La Leche League International. (Plume. 2004).

*Nursing Mother, Working Mother* by Gail Pryor and Kathleen Huggins. (The Harvard Common Press. 2007).

# HARVARD RESOURCES

## ADOPTION

Adoption Resources

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/Adoption\\_Resources/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/Adoption_Resources/)

The Harvard Adoption Assistance Plan

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/Adoption\\_Resources/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/Adoption_Resources/)

Harvard's Employee Assistance Program (EAP)

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Employee\\_Assistance\\_Program/](http://harvie.harvard.edu/Work_Life_Balance/Employee_Assistance_Program/)

Phone Consultation: 877-327-4278

Family Leave for Adoptive Parents (staff)

*Paid time off*

[http://harvie.harvard.edu/Compensation\\_Benefits/Time\\_Off/Maternity\\_Paternity\\_Leaves.html](http://harvie.harvard.edu/Compensation_Benefits/Time_Off/Maternity_Paternity_Leaves.html)

*Unpaid time off*

[http://harvie.harvard.edu/Life\\_Changes/Taking\\_Time\\_Off/](http://harvie.harvard.edu/Life_Changes/Taking_Time_Off/)

*Family and Medical Leave Policy (administrative and professional staff)*

[http://harvie.harvard.edu/docroot/standalone/Policies\\_Contracts/Staff\\_Personnel\\_Manual/Section8/Leave.shtml](http://harvie.harvard.edu/docroot/standalone/Policies_Contracts/Staff_Personnel_Manual/Section8/Leave.shtml)

*Family and Medical Leave Policy (HUCTW members)*

[http://harvie.harvard.edu/docroot/doc-lib/500\\_Labor\\_Employee\\_Relations/300\\_HUCTW/huctw-manual.pdf](http://harvie.harvard.edu/docroot/doc-lib/500_Labor_Employee_Relations/300_HUCTW/huctw-manual.pdf)

*Changing/Adding Benefits*

[http://harvie.harvard.edu/Life\\_Changes/Family\\_Status/](http://harvie.harvard.edu/Life_Changes/Family_Status/)

## BIRTH OF A CHILD

Maternity Leave (staff)

*Short-term disability*

[http://harvie.harvard.edu/site-map/200\\_Compensation\\_Benefits/600\\_Disability\\_Life\\_Insurance/100\\_Short\\_Term\\_Disability.page.xml](http://harvie.harvard.edu/site-map/200_Compensation_Benefits/600_Disability_Life_Insurance/100_Short_Term_Disability.page.xml)

*Paid time off*

[http://harvie.harvard.edu/Compensation\\_Benefits/Time\\_Off/Maternity\\_Paternity\\_Leaves.html](http://harvie.harvard.edu/Compensation_Benefits/Time_Off/Maternity_Paternity_Leaves.html)

*Unpaid time off*

[http://harvie.harvard.edu/Life\\_Changes/Taking\\_Time\\_Off/](http://harvie.harvard.edu/Life_Changes/Taking_Time_Off/)

*Time off for Multiple Births*

[http://harvie.harvard.edu/docroot/standalone/Policies\\_Contracts/Staff\\_Personnel\\_Manual/Section8/Leave.shtml](http://harvie.harvard.edu/docroot/standalone/Policies_Contracts/Staff_Personnel_Manual/Section8/Leave.shtml)

*Parental Leave (staff)*

[http://harvie.harvard.edu/Compensation\\_Benefits/Time\\_Off/Maternity\\_Paternity\\_Leaves.html](http://harvie.harvard.edu/Compensation_Benefits/Time_Off/Maternity_Paternity_Leaves.html)

*Family and Medical Leave Policy (staff)*

[http://harvie.harvard.edu/docroot/standalone/Policies\\_Contracts/Staff\\_Personnel\\_Manual/Section8/Leave.shtml](http://harvie.harvard.edu/docroot/standalone/Policies_Contracts/Staff_Personnel_Manual/Section8/Leave.shtml)

*Extended Maternity Leave*

[http://harvie.harvard.edu/docroot/standalone/Policies\\_Contracts/Staff\\_Personnel\\_Manual/Section8/Leave.shtml](http://harvie.harvard.edu/docroot/standalone/Policies_Contracts/Staff_Personnel_Manual/Section8/Leave.shtml)

*FAQs about Parental Leave*

[http://harvie.harvard.edu/docroot/standalone/Policies\\_Contracts/Staff\\_Personnel\\_Manual/Section8/faq-fml.html](http://harvie.harvard.edu/docroot/standalone/Policies_Contracts/Staff_Personnel_Manual/Section8/faq-fml.html)

*Changing/Adding Benefits*

[http://harvie.harvard.edu/Life\\_Changes/Family\\_Status/](http://harvie.harvard.edu/Life_Changes/Family_Status/)

## **PARENTING AND CHILD CARE**

Caring for Children

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/)

Harvard's Employee Assistance Program (EAP) and Personalized child care referral resources

<https://harvardeap.personaladvantage.com/?refid=1>

Phone Consultation: 877-327-4278

FAS Human Resources

*FAS Work/Life Consultant*

Ronnie Mae Weiss

[rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu)

<http://www.fas.harvard.edu/~fashr>

Harvard Office of Work/Life Resources

[http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)

Harvard's Employee Assistance Program (EAP)

<https://harvardeap.personaladvantage.com/articles> Phone Consultation: 877-327-4278

## **OTHER RELATED RESOURCES**

Flexible Spending Accounts

[http://harvie.harvard.edu/Compensation\\_Benefits/Health\\_Benefits/Flexible\\_Spending\\_Accounts.html](http://harvie.harvard.edu/Compensation_Benefits/Health_Benefits/Flexible_Spending_Accounts.html)

Flexible Work Arrangements

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Flexible\\_Work/](http://harvie.harvard.edu/Work_Life_Balance/Flexible_Work/)

Financial and Legal Services and Programs - Harvard's EAP

<https://harvardeap.personaladvantage.com/articles> Phone Consultation: 877-327-4278

Life Insurance

[http://harvie.harvard.edu/site-map/200\\_Compensation\\_Benefits/600\\_Disability\\_Life\\_Insurance/600\\_Life\\_Insurance.page.xml](http://harvie.harvard.edu/site-map/200_Compensation_Benefits/600_Disability_Life_Insurance/600_Life_Insurance.page.xml)

Long-term Disability

[http://harvie.harvard.edu/Compensation\\_Benefits/Disability\\_Life\\_Insurance/Long\\_Term\\_Disability.html](http://harvie.harvard.edu/Compensation_Benefits/Disability_Life_Insurance/Long_Term_Disability.html)

Lactation Programs and Supports

*For FAS Resources*

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/New\\_Parents/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/New_Parents/)

*For University Wide Resources*

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/New\\_Parents/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/New_Parents/)

*New Parent Transition Program*

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/New\\_Parents/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/New_Parents/)

*Section 529 College Savings Plan*

<https://harvardeap.personaladvantage.com/content?cat=10000006&sub=10000077&cnt=1005619>



# Manager's Guide for Family Leave Transitions

When a member of your team is preparing to go on leave for the birth or adoption of a child, devoting time and effort to planning for their leave will increase the likelihood of a smooth transition and appropriate coverage of job responsibilities. Helping an employee prepare for leave and the transition back to work are also critical to that employee's retention and productivity once back at work.

## *Good preparation and planning ahead will lead to decreased stress levels for all involved.*

**Begin the planning process about two months before the employee goes on leave (or at a time you and the employee agree to), allowing for issues and questions to be addressed well before the employee's leave begins.**

- Familiarize yourself with Harvard University's Family Leave Policies, including the Family and Medical Leave Act (FMLA). [http://harvie.harvard.edu/docroot/standalone/Policies\\_Contracts/Staff\\_Personnel\\_Manual/Section8/Leave.shtml](http://harvie.harvard.edu/docroot/standalone/Policies_Contracts/Staff_Personnel_Manual/Section8/Leave.shtml).
- Work with your Human Resources Consultant, consulting them early in the process and, as necessary, throughout the employee's leave and return to work.
- Contact the FAS Work/Life Consultant, Ronnie Mae Weiss, [rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu), 617-495-4275 with questions.
- Contact Harvard's EAP (877-327-4278) for a management consultation if you feel worried or uncomfortable about any aspect of this transition.
- Suggest your employee read the *Preparing for Family Leave and Returning to Work* section, review the *Work Responsibilities Coverage Form* and meet with the FAS Work/Life Consultant, Ronnie Mae Weiss, [rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu) or 617-495-4275 before you meet. If possible, base your conversations with the employee on information contained on that form.

### **Meeting with the employee**

If possible, use the *Work Responsibilities Coverage Form* as a basis for your discussion.

Clarify the employee's expectations regarding when the leave will begin and when he/she anticipates returning from leave.

### **Discuss the employee's accessibility during leave**

- Will he/she be checking e-mail and/or voice-mail?
- Does he/she want to be informed of significant events in the office?
- Are there meetings that he/she will want to call in to or attend in person?
- Are there social events he/she would like to be included in (holiday party, retirement party, etc.)?

Encourage your employee to be realistic about how connected to work he/she will be during leave. Be clear about your understanding that the employee will be on leave, not working from home, and emphasize your flexibility given that accessibility may vary from what is anticipated.

If the employee is interested in a phased return to work (i.e., returning to work part-time) and this is a possibility, discuss the details of the Flexible Work Arrangement and direct the employee to [http://harvie.harvard.edu/Work\\_Life\\_Balance/Flexible\\_Work/](http://harvie.harvard.edu/Work_Life_Balance/Flexible_Work/) so that he/she may complete the necessary documentation in advance of his/her return. Consult your Human Resources Consultant or the FAS Work/Life Consultant as needed.

### **Distributing the employee's job responsibilities**

When you review the employee's *Work Responsibilities Coverage Form*, consider all of the tasks and projects listed and who might best take over these responsibilities during the employee's leave.

- Ask the employee going on leave for ideas about colleagues/subordinates who might be appropriate for temporarily taking on his/her responsibilities. He/she may have some ideas given his/her knowledge of the tasks involved.
- On the *Work Responsibilities Coverage Form*, complete what you can in the Person(s) Covering Work during Leave column, leaving blank what is still to be decided.
- Think about developmental opportunities for current employees – are there job responsibilities of the person going on leave that could be given to other employees to increase their skill sets?
- Check with other managers about employees who may be interested in taking on additional responsibilities. Consider utilization levels, workload, and potentially conflicting priorities.
- Consult your Human Resources Consultant, as appropriate, for ideas of other employees who might be interested and qualified to take on some of the responsibilities requiring coverage.
- Consider what might be postponed until the employee returns from leave.
- Determine if hiring a temporary employee will be necessary.

This planning process should decrease the likelihood that you (the manager) will be responsible for an unreasonable amount of work while the employee is on leave.

### **Helping the employee transition back to work**

- Look at the employee's *Work Responsibilities Coverage Form* periodically while he/she is on leave and fill in status updates so it will be easier to get the employee back up to speed upon his/her return.
- Invite the employee to participate in calls prior to his/her return, with the understanding that he/she may decline the invitation but may welcome the opportunity to begin getting involved with work again.
- When making staffing decisions for future projects, consider the employee who is on leave in order to weave him/her back into the work flow.
- Schedule a call prior to the employee's scheduled return to work date, to check in and start the re-entry process.
- Speak with the staff who have taken responsibility for the employee's work during his/her leave.

It's important that the transition at the end of the leave is smooth for these people as well, and that their efforts are recognized and appreciated.



*Facilitating a smooth transition will support productive, positive working conditions moving forward.*

- If the employee is returning to work on a Flexible Work Arrangement, confirm that all necessary documentation has been completed, approved and submitted.

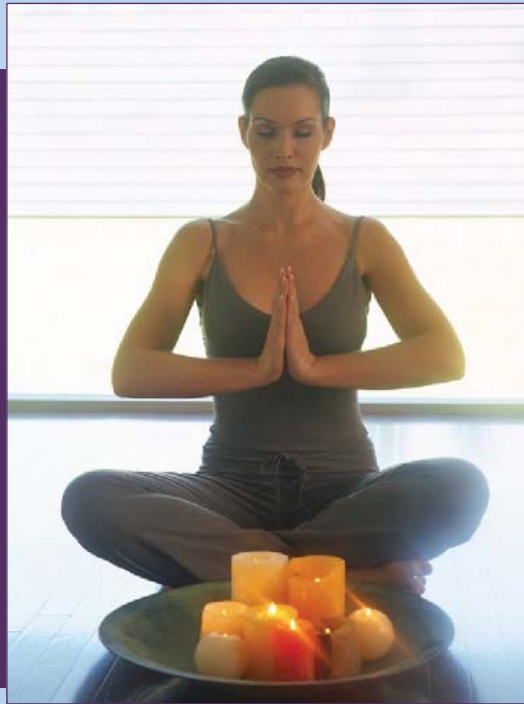
**Harvard's Work/Life Resources**

FAS Work/Life Consultant, Ronnie Mae Weiss  
[rweiss@fas.harvard.edu](mailto:rweiss@fas.harvard.edu)

FAS Human Resources  
<http://www.hr.fas.harvard.edu>

Harvard Office of Work/Life Resources  
[http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)

Harvard's Employee Assistance Program (EAP)  
<https://harvardeap.personaladvantage.com/articles>



## *Other Paths to Parenthood*

# Addressing Infertility: Balancing Your Work and Medical Needs

Much about infertility is unpredictable—from the cause to the possible treatment options to the outcome. What may be more predictable is the volume of medical visits. There may be a lot, and it may take a fair amount of time management to minimize their impact on the rest of your life.

For the woman, there may be blood drawings, ultrasounds, and an array of tests and treatments. While the man's medical involvement tends to be less, he may wish to accompany his partner to stressful medical appointments. And while you may be able to plan the timing of some procedures, the truth is that you do not know the duration of your treatment.

## *You may find that infertility can make it tough to get your work done.*

If you are taking time off, experiencing physical discomfort from medications, or seem preoccupied, others may notice this. It's a good idea to think about whom to confide in. You may need some strategies to deal with the comments, sometimes unwelcome, from friends and co-workers, and you need a plan to help you survive the gatherings (such as holiday parties and baby showers) that regularly occur. Like any medical journey, fertility treatment can be stressful; you may want to learn some techniques to help you to relax.

### **Here are some tips that can help.**

Understand your health care benefits for infertility treatment. Harvard offers several health coverage options, which provide flexibility and quality care for employees and their dependents, spouses, and qualified domestic partners. You will need to check with your medical provider to understand the benefits provided through your plan. You can compare the services offered by the various health care plans available through Harvard at [http://harvie.harvard.edu/docroot/doclib/100\\_Benefits/400\\_Medical\\_and\\_Dental/MedicalComparisonChart.pdf](http://harvie.harvard.edu/docroot/doclib/100_Benefits/400_Medical_and_Dental/MedicalComparisonChart.pdf).

Know your treatment options. Despite your best efforts, what if your work hours conflict with your medical appointments? It's a good idea to make sure you've covered all the bases on the medical end.

- Have you checked to see if appointments are available before or after your workday or on weekends?
- Do you have a complete list of infertility specialists in your area?
- If your physician is not part of a group practice or infertility clinic, you might want to look into switching into such a practice. They often offer more flexible hours for treatment.

### **Disclosing your treatment at work: Should you tell?**

**Why not?** A decision to have a child is private, and the particulars of your infertility diagnosis and treatment are personal. Only you can decide whether to confide in your colleagues. You know that infertility can require long-term treatment and you may not want your co-workers or your manager to make judgments or decisions about your career based upon the information you divulge. Or you might feel that this experience is too intensely personal to share.

**Why?** The reality of infertility may include medical appointments, and possibly many of them. If you don't disclose, your manager may assume from your absences that you're either malingering or job hunting (and those conclusions won't help your career). Also, you may not want to feel like you are sneaking around when you are actually seeking medical treatment. You might prefer your co-workers to know as well for a variety of reasons. Or your job may require hours or a travel schedule that is plainly incompatible with infertility treatment and you will need to arrange for a schedule change.

**How much should you disclose? It's up to you to decide how much you want to say, how you say it, and to whom you say it.**

- You might only say, “I’m experiencing a short term medical issue for which I’ll need treatment.”
- You can state that you’re undergoing infertility treatment, but not go into the particulars. You might take this route if you are a private person generally, or you don’t want others to know exactly when you might find out if you’re pregnant; you might not want to share the disappointment if you’re not pregnant, or the stress of the early stages of pregnancy if you are.
- Or, you might decide that your employment situation will be best served if your manager fully understands your treatment. This way, you can negotiate specific arrangements to help you to balance your work responsibilities and infertility treatment.
- The Office of the Disability Coordinator ([marie\\_trottier@harvard.edu](mailto:marie_trottier@harvard.edu)) can help you sort through any questions that you may have around disability laws and rights/responsibilities. Further information on this topic may be found at <http://www.accessibility.harvard.edu/>.

**Having the conversation.** First, you’ll need to assure your manager that although you are dealing with a personal situation, you still value your job and are asking for appropriate adjustments so that you may do your best work. It is up to you to convey your commitment to your work and your desire to develop a plan that will result in the least possible work disruption. You might state that you are initiating this conversation because you want to be a responsible employee, and you think it’s fair to let your manager know that you are undergoing infertility treatment. Consider in advance what would help:

- More flexible hours?
- Occasionally working from home?
- A reduced work schedule?
- A change of responsibilities?
- The use of sick or vacation time to pursue treatment?
- Unpaid time off to pursue treatment?

Flexible Work at Harvard [http://harvie.harvard.edu/Work\\_Life\\_Balance/Flexible\\_Work/](http://harvie.harvard.edu/Work_Life_Balance/Flexible_Work/) will help you understand the options available to you and how you can use them.

**Do your best to stay calm.** This is a highly emotional time, and you may be taking medications that affect your emotions, too. To stay calm and feel well prepared for this meeting, it may be helpful to practice your presentation in advance (perhaps in front of your spouse or partner or a trusted friend). Get their feedback and advice before you meet with your supervisor.

**People who pry.** For some reason, some people seem to think they’re experts on infertility. “You just need to relax, and you’ll get pregnant.” “Adopt, and then you’ll get pregnant.” “Just stop thinking about it . . .” Sound familiar? How about “why did you wait so long?” They may mean well, but chances are you’ve heard it all too many times, and it’s upsetting to hear it again. At times like these, it’s fine to tell people that while their concern is welcome, you prefer to focus on advice and opinions from your medical team. Depending upon who the person is, you might state that you’d rather not discuss the subject.

**Gatherings.** Whether it's the annual holiday party where everyone seems to be pulling out the family photos or the baby shower for your pregnant co-worker, you may be dreading the event. Some solutions to consider are:

- Arrive late and/or leave early.
- Offer an excuse to be absent.
- Plan to spend time with someone who knows your situation.
- Gravitate towards the singles and/or the men.
- Just skip it. Why torture yourself?

**When a close friend or co-worker is pregnant.** You may wish that you could feel only joy for her, but the truth is that you may find it intensely painful to be in her presence. If she is someone who knows about your infertility, you might consider telling her that although you care about her, you won't be able to be there for her at this time. You can explain that it is not her fault but you are feeling very sad and you'd like her to try to understand. If she doesn't know about your situation, you might disclose that you find yourself reflecting on the fact that you would like to have children, but it "just hasn't happened yet."

**When intense emotions come to the surface.** You're likely undergoing medical tests and procedures, you may be taking medications that affect your emotions, and your life plans have gone awry. It's understandable that you may be in a fragile state. But if you cry at work, it may be best to leave the situation. Go to an empty office, the rest room, or outside. Take a break and compose yourself before you rejoin your co-workers.

## Stress Reduction Strategies and Techniques

*Here are some suggestions that others have found helpful:*

**Keep busy.** This may be a good time to develop a new hobby or read a great book. For many people, work can be a panacea.

**Stop being so busy.** This may be a good time to slow down, focus on your own needs, or create some space away from the demands of others. For some people, work can be a hungry beast.

**Join a support group.** Infertility can be isolating, and at a support group you can find out that your feelings are shared by others. Women's, men's, or couples' groups can be places where you can deal individually with infertility and, if you have a partner, learn how to handle disagreements about infertility. You can find out more about the medical choices in your community, and you can explore options like adoption and child-free living. Information about support groups is available at your infertility clinic, local hospital, or local chapter of Resolve, the national infertility association <http://www.resolve.org/>.

**Make a list.** You know how difficult it can be to balance the demands of your work, home, partner, and infertility treatment. It may ease your anxiety if you are organized. Make a list of the tasks you need to accomplish for your infertility and family plan, and focus on how to best avoid letting

them interfere with the rest of your life. If you aren't a "list maker", this may be a good time to begin a habit that will serve you well in many other situations—especially that of parenthood.

**Keep a journal.** Write down your concerns, and troubleshoot ways to cope. You can also keep track of your responses to medical treatments.

**Practice a focusing technique.** When your mind wanders, take a deep breath and remind yourself where you are, who is with you, and what task is before you. Repeat as necessary to stay in the moment.

**Exercise.** It's a great way to decrease anxiety. When you're infertile, however, it's best to follow medical advice regarding your usual exercise routine or begin a gentle routine like walking or swimming. Many doctors discourage you from beginning a new routine of strenuous exercise, especially if you are taking infertility drugs.

**Relaxation response techniques.** It's not hard to learn these exercises, and they can help you to lower your heart rate and blood pressure, decrease muscle tension, gain energy, and change negative thoughts. You can use these techniques to unwind, to get through intrusive and painful medical procedures, and even to relax when you're giving blood samples. Whichever relaxation exercise you choose, try to do it regularly.

**Breathe deeply.** This can help reduce stress—and you can do it anywhere. Release the tension from your body as you exhale fully, counting to five, and letting your shoulders slump. Inhale fully, filling your lungs into your belly, while counting to five. Exhale fully, again counting to five. Repeat the process for five minutes.

**Visualization.** Practice at home, making sure to avoid distractions. Find a comfortable place to sit or lie down, place your hands gently on your belly, and shut your eyes. Breathe slowly and deeply, feeling your hands rise and fall with each breath. Feel yourself relax, and let the tension be released from each part of your body as you breathe. Imagine yourself in a peaceful place, and visualize yourself moving about, seeing, listening, feeling, touching, and smelling what is around you. Feel the beauty and peacefulness of your surroundings. When you are ready, open your eyes. Know that you can visit this place whenever you need to relax.

**Muscle relaxation.** Again, relax in a quiet place with your eyes shut. Slowly tense and then relax each muscle group in your body, tensing for at least 5 seconds and relaxing for at least 30 seconds. You may begin with your head and move downwards, or toes on upwards. Be aware of where in your own body you tend to store tension. Focus your energies on that place and consciously work on relaxation.

**Get help.** A therapist may help you design a stress reduction program that works for you. If stress feels overwhelming, don't be afraid to seek professional help. You can also find added support in the form of relaxation tapes and CDs, available through bookstores and online.

**Harvard University Health Services (HUHS)** provides online resources on topics relating to emotional health.

<http://huhs.harvard.edu/Resources/HealthInformationByTag.aspx?ucItemTagFilter:ddlServices=100017>

**The Center for Wellness** offers programs (movement/exercise, yoga, safety) and services (acupuncture, massage, Reiki, shiatsu) that may help reduce stress.

<http://cw.uhs.harvard.edu/about/index.html>

The Center's web site also features a quick online stress-relieving self-hypnosis video; click on the "Relaxation Room" link <http://huhs.harvard.edu/assets/File/OurServices/CWHCrelex.html>.

### **Harvard's Work/Life Resources**

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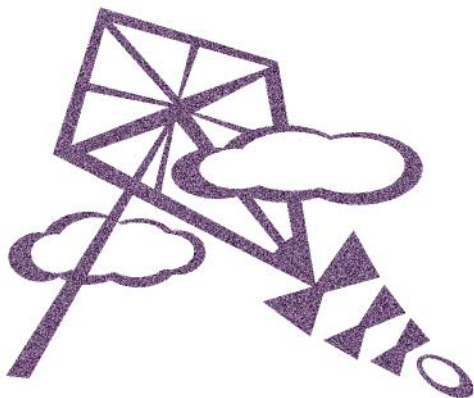
FAS Human Resources  
<http://www.hr.fas.harvard.edu>

Harvard Office of Work/Life Resources  
[http://harvie.harvard.edu/Work\\_Life\\_Balance/](http://harvie.harvard.edu/Work_Life_Balance/)

Harvard's Employee Assistance Program (EAP)  
<https://harvardeap.personaladvantage.com/articles>  
Phone Consultation: 877-327-4278

### **More Resources**

Resolve, a national infertility association  
<http://www.resolve.org/>





## ***Other Paths to Parenthood***

# **Exploring Adoption**

The decision to adopt always comes from the heart, although many different paths may lead to that decision. For some couples, adoption is the next choice after struggling with infertility. Others may wish to add a “waiting child”—including a relative’s or partner’s child—to their existing families. In increasing numbers, gay couples and single adults turn to adoption as a way to fulfill their dreams of loving and raising children.

Whichever path has led you to consider adopting a baby or child, there are many questions to ask and choices to consider as you map out your journey to parenthood. It’s a good idea to consult with an attorney who specializes in adoption, and particularly one with expertise in cases relevant to your own situation (for instance, LGBT or single-parent adoptions, or identified or international adoptions). Most important, spend some time becoming knowledgeable about adoption. Here are some basics to understand and consider.



## *Finding the child of your dreams*

How do you envision your future child? Are you intent on adopting a child of a certain age, race, gender, or background? Would you consider adopting siblings or a child with physical or emotional challenges? These considerations will shape your route through the diverse range of adoption options. For example, many domestic adoption agencies, and all public agencies, such as Massachusetts' Department of Children and Families (DCF), do not accommodate gender preferences. Likewise, international adoptions may not be a good choice for those seeking only a newborn. The more options you are open to, such as older children and those with special needs, the greater the chance that you will find your child before too long.

Availability of adoptable children also depends to some extent on your own situation. Some agencies, and most birth mothers, prefer to place children with parents who are no older than forty. In addition to your age, you may expect an agency to consider your marital status, income, health, religion, sexual orientation, and current family size. (Bear in mind, however, that you needn't be rich or fit into a "typical parent" mold to adopt; usually, no one factor is decisive in itself.) Many agencies also require an adoptive parent to stay at home for the first six months after the child joins his or her new family.

## *Types of adoption*

**There are three main ways to adopt: through a public or private agency; an identified adoption; or an international adoption. (A fourth option available in most states other than Massachusetts is an independent adoption handled privately, without any agency involvement. In addition, special procedures apply when adopting a relative or stepchild.)**

**Agency adoption.** Agencies can be public or private. Massachusetts' public agency, DCF, matches children to adoptive parents at no cost to the new parents. Most of the children available through DCF are of elementary school age and older, and many have had a difficult start in life and may have special medical, emotional, or academic needs. Private agencies charge for their service and may be costly. There are more infants and babies available through private agencies. At DCF, social workers determine which prospective parents and children make a fitting match, while private agencies often include birth parents in placement decisions. Private agencies typically have waiting lists, and prospective parents may be expected to be ready to bring their child home on very short notice, as soon as the applicant reaches the top of the waiting list and a likely match becomes available for adoption.

There are several advantages to working with agencies. Agencies have systems in place to identify children in need of parents, so you do not need to search through private networks to locate an adoptable child. They can guide you through the legal processes involved. Agencies also require prospective parents to receive counseling, which can help you resolve any issues you may have about adoption and answer your questions about parenting an adopted child. In addition, DCF provides some financial support to parents adopting certain special-needs children.

**Identified adoption.** In this type of adoption, the prospective parents conduct their own search for a child through networking and advertising. When a birth mother is identified and both the birth mother and prospective parents agree to go forward, an agency steps in to take over the rest of the adoption process. This type of adoption provides the benefits of an agency adoption—assistance with administrative processes, along with counseling services—while avoiding the waiting lists often found at private agencies. An identified adoption offers a greater sense of control over the process of finding a child, as you are actively pursuing leads rather than waiting for an agency to call. Also, by meeting the birth mother, you may learn more about her, her family, and your child’s father and background.

**International adoption.** In an international adoption, parents adopt a child who is a citizen of a foreign country. Most people choosing this option work with an American agency that specializes in international adoptions, thus avoiding the difficulties involved in meeting the legal requirements of both countries and dealing with language and cultural differences. The availability of children from a particular country depends on the current state of affairs both within that country, and between the United States and the child’s country. This option has become very popular, and there are many support and social groups available to adoptive families. For some adopters, one advantage to international adoption is that the search for a child can be focused on a preferred gender, such as a girl from China. Additionally, many prospective parents prefer to avoid the openness of an identified adoption. In some cases, international adoption proceeds more quickly than domestic adoption because there are many children in foreign orphanages, already awaiting loving homes, and waiting lists may be shorter or entirely nonexistent. On the other hand, most children adopted internationally have been in institutional care, under conditions that vary from place to place, and information about your child’s personal and family history may not be available. International adopters may run into administrative delays, including some countries’ requirements that prospective parents stay in the country for a set time. While the fees for international adoptions tend to be lower than those for domestic adoptions, you will need to factor in the costs of international travel for you and your child. You will also need to consider the amount of time you will spend in the other country.

## *The home study*

**The first step in any agency’s process is a home study—an investigation to assess your capacity to provide a loving, safe environment for a child. This investigation is made up of a series of meetings, typically with a social worker, over the course of about three to six months. At least one home visit is included, during which the social worker will meet with any other people living in the home. The aspects of your life that are investigated in the home study include:**

- Financial and employment stability. Will you be able to provide for a child’s needs? Are you reliable and responsible?
- Relationship stability. Preference is usually given to those who have been together for more than three years.

- Lifestyle. Is your environment healthy for a child? Is there any history of alcohol or drug abuse?
- Your health. Your medical records may be examined, and a psychological evaluation may be requested.
- Fertility. Some agencies and foreign countries give preference to those who are infertile.
- Other children. Some agencies prefer to place infants in homes where there are no other children.

The home study also often provides an educational, informative service to the prospective parents. The social worker can help prepare you by discussing issues often faced by adoptive parents and sharing information and resources with you.

### **Your own first steps**

You, too, will need to do some investigating. It's important to gather as much information as you can about adoption and the agencies you are considering, including talking with adoptive families about their experiences. If your circle of acquaintances does not include any adoptive parents, you can seek out families through adoptive-parent groups, including through social networking websites.

### **When you contact adoption agencies, you might start by asking these questions:**

- Are you currently accepting applications?
- What are your requirements for adoptive parents?
- What services do you provide, both before and after adoption?
- What is your fee, and what services does it cover?
- How long is your waiting list?
- How many children did you place last year? In what age groups?
- Can you tell me about your home study process?
- What kind of information will I receive about the child I am adopting and about the birth parents?

## Harvard's Work/Life Resources

Whichever route you take to parenthood, you can count on Harvard's resources. If you're considering adoption or beginning the adoption process, we're happy to provide both informational and financial support. Harvard's EAP offers an extensive library of resources at <https://harvardeap.personaladvantage.com/adoption>. You can also access other Work/Life resources at:

Office of Work/Life Resources [http://www.harvie.harvard.edu/Work\\_Life\\_Balance/](http://www.harvie.harvard.edu/Work_Life_Balance/)

Employee Assistance Program (EAP) <https://harvardeap.personaladvantage.com/articles>

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Harvard University Adoption Resources

[http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/Adoption\\_Resources/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/Adoption_Resources/)

You may also be eligible for The Harvard Adoption Assistance Plan, [http://harvie.harvard.edu/Work\\_Life\\_Balance/Caring\\_for\\_Children/Adoption\\_Resources/](http://harvie.harvard.edu/Work_Life_Balance/Caring_for_Children/Adoption_Resources/), which provides up to \$5,000 to assist with qualified adoption costs. Financial need is not a factor. Only expenses directly related to the legal adoption of a child are valid. This plan cannot cover adoption of your spouse's/partner's child. To find out more or to get an application, please email [childcare\\_scholarships@harvard.edu](mailto:childcare_scholarships@harvard.edu).

For more information on Harvard benefits for adoptive parents, log on to [http://harvie.harvard.edu/Life\\_Changes/Family\\_Status/](http://harvie.harvard.edu/Life_Changes/Family_Status/)

## Local, state and national adoption resources

Child Welfare Information Agency, [www.childwelfare.gov](http://www.childwelfare.gov)

*Adoptive Families Magazine*, [www.adoptivefamilies.com](http://www.adoptivefamilies.com)

This magazine's website links to a comprehensive Adoption Guide ([www.theadoptionguide.com](http://www.theadoptionguide.com)) covering all aspects of adoption, including information on adoption processes and policies of sixteen foreign countries.

The Adoption Connection, 508-532-1261; <http://www.adoptionconnection.org/homepage1.asp>  
Assists in the adoption search process; offers support meetings and workshops.

Massachusetts Adoption Resource Exchange, 800-882-1176; <http://www.mareinc.org/>  
Provides adoption information and referrals. It works with public and private agencies to help find permanent homes for waiting children.

National Adoption Center, 800-TO-ADOPT;

[http://www.adopt.org/assembled/single\\_parents.html](http://www.adopt.org/assembled/single_parents.html)

Refers families to agencies in their communities for home studies. Registers approved families and waiting children with special needs. Their website includes social networking forums for single, disabled, and LGBT parents.

National Adoption Foundation, 203-791-3811

<http://www.nafadopt.org/how-we-can-help/how-we-can-help.shtml>

Offers programs to provide financial assistance for adoption expenses to qualified prospective parents.

The National Council for Adoption, 202-328-1200 <http://www.adoptioncouncil.org/>

Association of private adoption agencies and individuals interested in adoption.

North American Council on Adoptable Children, 612-644-3036

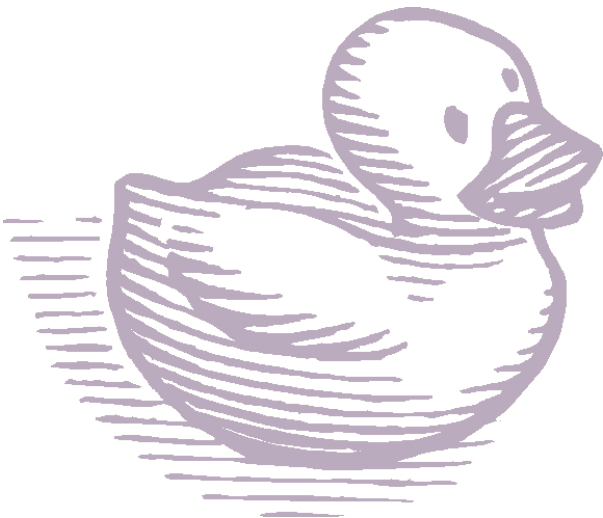
<http://www.nacac.org/parentgroups/database.html>

Association for adoptive parent support groups. Their website includes a searchable database of support groups for all types of pre- and post-adoptive parents.

Adoption Community of New England, Inc. 508-366-6812

<http://adoptioncommunityofne.org/pages/programs/preadoption.php>

This Westborough-based organization provides adoption information and support, including educational presentations.



## NOTES