

## Episode 19: From Military Procurement to Lactation Consulting: The power of a pause

[00:00:00] **Elyse:** Margaret. Thank you so much for joining us on the show today.

I've been so excited and looking forward to talking to you.

**Margaret:** Thank you. I'm excited to be here. I just love the idea of your podcast. I think it's so important. I remember sitting in seventh grade a long time ago and I had a teacher and he said to me, you will change your careers multiple times. Your parents stayed with one career choice and you guys will change and change and change and want to find happiness. And I remember that struck me as, no I won't! You know? Because our parents and their parents they just have a pension for 40 years to see, and that was the kind of goal.

So,

**Elyse:** yeah. And they drilled it into us too. There was a lot of, what are you going to do when you grow up? And it wasn't the sense of grow up and explore. It was a sense of, pick the one thing that you're going to do when you grow up .

**Margaret:** Yeah. Yeah. I think that's probably uniquely American too.

Cause living overseas and having [00:01:00] traveled a lot overseas and abroad meeting young people that are on their gap years or, that's just kind of a normal sense of finding yourself out. And when I say that I'm talking not about the developed world, but meeting a lot of people going, well, I don't know what I'll do.

I'm just finding myself, right. Oh, that's so nice. I didn't, I wish, I think it's a different time maybe now for people, but 10, 15, 20 years ago that wasn't the perception.

**Elyse:** Yeah. I'd love that. It's such a great perspective to have, and it really, I think helps take the pressure off because we put so much pressure in American society of like, go out, get your schooling, get into the right college, get your career, maybe go to grad school, but don't if you're not really sure what you want to do and then go do your thing and you'll be in that thing. And that's what you're going to do forever. And you need to know who you are by like age 11. And it just it's, I think it adds so much pressure and I love how [00:02:00] I love hearing stories from other countries because it's just so it's liberating in a sense.

**Margaret:** It is, I have three little kids and they're all early elementary age.

And it's interesting. They'll say I don't know what I want to be when I grow up. And in my husband, who's had a, a 20 year career, he'll say, neither do I? And that's just part of it, you know, just this kind of fear. Cause that's what everyone asks them to still, will you be when you grow up? I don't know.

**Elyse:** And that's fine. That's really why I started this show, was to normalize this sense of like, what you're doing now is great. And if you want to keep doing it, keep doing it. But if it's not fitting with who you are, or maybe a fit with who you are several years ago, and now it

doesn't anymore, change it. Why not? We're not stuck. We can take this mindset of exploring and experimenting and trying to find that thing that matches with who we are as we evolve as people. So I love we got off on this tangent right [00:03:00] at the beginning. Yeah.

It's perfect. But I actually, I know that obviously you made a real career change, a big career change which is why I asked you to come on the show, but I would love to just get a sense of what you were doing originally. I know you mentioned you were the contracting officer working in procurement for the military.

Can you tell us a little bit about what you did?

**Margaret:** Yes. It's so. Different from what I do now that sometimes you forget, you kind of shut the door on that life. It felt like another life, but it wasn't that long ago. I worked in procurement for the department of defense. I was a contract specialist and negotiator and became a contracting officer.

I really did that out of college. I was a business and political science major, thought hard about law school and then really decided to first write contracts and grants for the military. It was a great job. I was adequately compensated, I learned a lot. They do all your professional training.

Send you to all your coursework, has great benefits. And [00:04:00] I got to work with mostly engineers cause I worked in service and research and development contracts, they're developing robots and I'm writing and negotiating the contract for that, with the industry player. First you're looking at making sure that you're providing the contract according, obviously, to the law and that it meets all the regulations. So lots of law, lots of regulations. And then you compete the contract between the companies and you do lots of pricing built in and working with whoever is the person that needs the service.

So it was fascinating. Interesting. And yeah, that's what I did for, for some years.

**Elyse:** I mean, it sounds like, obviously very business focused, very finance focused. And you mentioned you had grown up in a military family, is that right?

**Margaret:** Yes, I did. So interestingly enough, my family is very science focused.

So my father was a nuclear submarine officer and so kind of an engineering background, [00:05:00] was in the military for decades, so long, his whole career, and then worked in industry after, and then in procurement, but I never gave a contract to him. I just would like to say that we were just to put it on the record.

I had to sign all these things that I will not. But And then my mother is an in she's an anatomy teacher and my brother is a Navy physicians and all my cousins and uncles and aunts, and everybody's very military. You kind of grow up and that's your life and you're around it.

It's interesting cause I'm in science or the medical field now, but I knew that I didn't I think I, Oh, that's what they do. So I'm going to do something different, but it still was in the lens of what do I know, I have a lot of connections with? So my internships in the summer were at

the Pentagon doing industrial procurements and kind of learning that field because you know it, You know what's needed and you know the life.

And so, I stayed close to that. It's also a very [00:06:00] flexible job for that life when you're always on the move too.

**Elyse:** So you were doing this role and, you kind of steeped in this family history of service, right. How did you get into this idea of wanting to work in women's health?

**Margaret:** Yeah. So I have always been really passionate about maybe because my life has been so military surrounded by pretty stiff guys that I have always been fascinated in women and women's issues. My dad is actually a big proponent of women and women on submarines. I went to a women's college and I'm really interested in women's health and I worked for, I did a little like summer program with domestic violence victims and just kind of my always had my finger on the pulse of women's issues.

It's something that I read on the side. And my brother is a Navy obstetrician. And so that was something I thought about, well, maybe I should go back and [00:07:00] become an obstetrician too, because I know that helping women and women's health is really fascinating to me.

I've always been interested in how the body works, but I think because maybe I'm the youngest child and just thought, Oh, that's what they're all doing. I should do something different. That I'm not maybe inherently don't have, I'm not inherent administrator or a contract writer, that's not that this doesn't fulfill any of my inherent skills, but it's something I could do.

And I learned to fight about money. But I shadowed my brother and I thought for a hot second about being an OB GYN. And then I was really taken by the nurses and the nurses at the bedside. And I don't love surgery. That's like my last interesting thing in the healthcare field.

I know it's you know, important. And and so I just thought, Oh, these nurses really spend the most time with the patient and that intrigued me. And so I looked at different nursing paths from there.

**Elyse:** As you were sort of [00:08:00] developing this interest, when did you like have the thought, I think I want to leave my job and maybe make a change into women's health. were you exploring all this on the side?

**Margaret:** Yes, I was just Googling, researching different paths at night. My brother was very interested in me changing and kind of following in his footsteps.

But I knew that wasn't right. It was difficult because here I had a very, you know, my, my job was great. It adequately compensated. I'm a military spouse and flexible. So any place I move I will be able to, there is defense procurement, because if you move with the military and the needed field, they really do need people in that field. And there's upward mobility, all the

logical, I always equate it to, it's like dating the guy that your parents love, and he has a job and he's nice to you, but you just don't, you don't love him.

**Elyse:** There's no connection. Right, right.

**Margaret:** There's no [00:09:00] connection, no passion. And so that's really hard.

So I did, I had a, and it always comes. We have a really hard fiscal year end in the defense procurement world, you hear fiscal year, the end of the fiscal year. And those are, I mean, people have like cots and they sleep in their office. You're up all night kind of processing the last contract and it's just to spend that money.

And so I think I had one too many of ha I'm pretty young was pre-kid, pre family starting years and going, to be kind of giving my all to this, which it's really important for me to show up with a full heart and give everything I have. And I don't love this.

And so I had that kind of like, I need something else, moments about five years, a little bit before and going, okay, I need to change. And so then I just really started researching all the different paths to nursing care. Originally, I thought I'd be maybe a midwife or a certified nurse midwife or something in [00:10:00] the nursing women's health role.

But I wasn't quite sure, but I just knew, I need to just start taking the classes and kind of getting there.

**Elyse:** So it was one too many nights on a cot at the end of the fiscal year, just trying to get these things processed. And you were like, Ugh. No, thank you. I also love what you said about being adequately compensated.

I just appreciate that term. But so what got you into lactation consulting? You love nursing, how did, how did what you're specifically doing now evolve?

**Margaret:** So when I became a nurse I did a, kind of a, almost like a nurse residency after nursing school with the UC system.

So UC San Diego, they're a baby-friendly hospital. UC San Diego is very much the cutting edge of lactation medicine and they have a milk bank. And so working there, we have to do kind of rotations and internships. And I did all of those primarily with UC system, but as soon [00:11:00] as I could, it was with mother, baby perinatal units and perinatal unit nursing and shadowing midwives, and just kind of, that was my interest and focus and working for them, kind of seeing.

I worked as a perinatal nurse. And so you kind of float through the NICU and postpartum and antepartum and you see women and children and you see the struggles of breastfeeding and particularly the vitality of lactation for premies and really just kind of saving lives. And then I saw it be on one sense, you know, I have my friends in very developed high socioeconomic communities being kind of shamed for not breastfeeding. And then I have had friends that, I was going to save their baby's life. And so there's just this dichotomy and, and different parts of the world, it really can save a baby's life. This breastfeeding thing is really, really interesting.

So it was working for a few years on on the floor as a nurse and [00:12:00] breastfeeding was so much a part of your job with her postpartum or in the NICU. And so it's kind of laid the trenches and then I had twins and I breastfed twins which was a lot of work. And then I had one babe right after. So I had three babies in 18 months and my husband was deployed.

I don't recommend it. I mean, I, I love them, but the timing was interesting. And my husband was deployed and I was working nights as a NICU nurse. Lots of baby crying, Elyse. And it's one thing I could do, you know, I could, I we go through the trenches, but I could make milk for those babies.

And it was an honor and I really kind of learned a lot. And then I started down into community health nursing and lactation is a huge part of being a visiting nurse and visiting moms and babies in the home and weighing babies. A lot of people need a lot of help in those early postpartum days and a big part of it is there in their confidence and setting the tone is having the assistance with breastfeeding. So it kind of started to start the process to becoming a lactation consultant [00:13:00] through that.

**Elyse:** Wow. So it's sort of evolved really organically. But going back to your it's procurement career, when, when was the moment that you actually left your contracting job and was it to go, was it to go to nursing school?

**Margaret:** So this is one of the beauties and hardship. So being a military spouse is that you almost never have to break up with anything because you move. Right. So I never really had to tell people like I'm leaving the field because I, I moved.

And when I moved, I had already applied and taken all my pre-recs on the side prerequisites for, gone back and taken the anatomy lab, which is really interesting. Cause by day your procurement officer with all these meals and working with all these male engineers, we really didn't, 15, 20, almost 20 years ago, it didn't have a lot of females in them that I was working with with engineer, which was another thing too. Sometimes in procurement, there are females, but I, I felt a little bit isolated as a [00:14:00] young female in that, in that world. And so nobody really spoke my language. And so we moved and when we moved, I had already applied for nursing school school.

And so then I started when we moved, I was doing contracting on the side. So I was kind of teleworking on some contracts that cause some contracts take kind of years to, to establish. So I was kind of. Not consulting because I was still working at part-time telework before that wasn't even a thing. Yeah, so.

Wow. It was a slow, slow burn, but that nobody, nobody really did. I didn't have to say I'm leaving you. I had to say, Oh, I'm moving right then. And then one day I wasn't in that, you know, I was in nursing school and I wasn't a contracting officer anymore. And that, that was, you know, interesting.

**Elyse:** Yeah. I bet. I mean, so you didn't necessarily have to tell your boss, or your coworkers, but you did have to tell your spouse and you did have to tell your family, I presume in your [00:15:00] friends. What did everybody think when you said I want to go into nursing?

**Margaret:** Yeah. So that is a great question because my husband in the beginning, as soon as I told them, I always say every dreamer girl needs a solid kind of rock guy.

And that is him. I could say tomorrow, I think I'm doing this. And he'd say, do you want to yeah, make it happen. I used his GI bill. He's been, he went to the Naval Academy and I was in Iraq and I used it as post 9/11 GI bill, and which was a blessing to be able to have that, I'm thankful.

And I thankful to him because he doesn't always, love it, you know, aspects of his career and he's been doing it. He's getting ready to be, to finish. And I think for someone who has kind of stayed the path. His whole family went to the Naval Academy. He went to the Naval Academy and has been on this kind of military trajectory and not had a lot of choice.

I think he sees me with the ability for choice and he says, go run with it. [00:16:00] Do what makes you happy. And that having that kind of base. it's pretty, pretty magical. Now my family who, my brother's a physician and his family, they're all professionals. And I had to say, I'm leaving.

I was at GS 12 or almost getting ready to accept a GS 13. So for people don't know, that's pretty, higher up, especially for, I was young and I had become a contracting officer, had a title, you know, business cards in my own. And was really had a great career and job. And I said, I want to go back to school to be a nurse and nurses, amazing.

There's so many different roles, but that isn't as prestigious as what I was doing. It wasn't going to be as lucrative. And it kinda, they go, huh? You sure you really want to do this? Because sometimes nursing has looked at is just changing bed pans, unfortunately, that is such not what it is, but there is that kind of stereotype of the, the nurse.

But kind of going from this more [00:17:00] professionally titled sounds better on paper, we'll use that word adequately compensated job too. More, almost sometimes hourly wage and nurses like teachers aren't aren't paid enough and kind of the thought, Oh, okay. Don't you want to be a doctor?

So yeah, I went through a little bit of that and I had to really know that this is what I wanted to do and I knew it was better for me.

**Elyse:** Yeah. You had to really kind of stick to your guns and to your passion for what you wanted to do eventually. We hear that, I mean we hear that a lot about families kind of like we'll pass you sort of job listings under the table, or we'll be like, well, okay, but you're going into this, but don't you want to do that one thing that's just a little bit more widely recognized as prestigious? But yeah, you really have to know what you're going for and be very focused on that.

**Margaret:** Right. Right. And then once I think once they knew I was [00:18:00] committed, and they knew that it was what would bring me joy and that it was really important to me to go down this path.

They were very, very supportive.

**Elyse:** Then one of the things you mentioned was that it was potentially a lower salary. You were going from a GS 12, GS 13. How did you and your husband work through the financial implications of that?

**Margaret:** Yeah. You know, my husband has always been he has undergrad and a master's in economics of finance, or I guess money management has been a priority for him.

And we did the numbers, you know, used the GI bill and we're still working part time. And we just saved, we had the, the fortunate aspect of, we hadn't started our family yet, so we didn't have that kind of financial pull yet. So we were able to budget for it really. And then we didn't know what it would look like after as much so that's unknown, but we knew it [00:19:00] was important enough to make that thankfully he had, we had one kind of stable salary, so.

**Elyse:** How did it affect you this idea that you weren't going to be making as much money? Did that, did that scare you at all?

**Margaret:** It did.

I was raised very experientially by my parents. I have to say for how kind of military they are, they're like military and their mindsets and money came up. But it just, it wasn't a huge dialogue and was raised with people that knew that they, they had to have enough to live the life that made them happy.

But I wasn't raised with parents that are or appear to be kind of, That was the bottom line for happiness or for building foundation. I have a friend the other day. She's like, let's not pretend that money isn't important, but it wasn't everything. And since I did, we had that kind of stable salary through my spouse, I was able to have that flexibility. and I was young too, you know, going back [00:20:00] now, I go, Oh my goodness. Sometimes I look at, go look at them you know, where I would be financially now if I had stayed with that trajectory, but you kind of realize though, I I'm so fulfilled professionally and I'm happy.

It really didn't become everything. I had to kinda swallow that, and swallow that idea that I wasn't going to be making as much, I wasn't going to have this kind of clear laid out plan. And, and then I had to just kind of accept it and go forward.

**Elyse:** Yeah. And there's not really a comparison, right?

I mean, when you talk about, if you had stayed in the military versus doing what you're doing now, it seems very apples to oranges because you also don't really know where your career in the military would have taken you.

**Margaret:** Yes. And I'm sorry, I just wanna to, I worked with, so I was a civilian, but with the military, you know, no, no, no.

It's okay. It's okay.

**Elyse:** Yeah, no, no, no. That's good to know with like, with the defense department and but anyway, but yeah, I mean, especially on the GS schedule too, right. Because it [00:21:00]

goes up to a 15, a GS 15, and then over there from there to the senior executive service and obviously it gets very competitive once you get up to those levels.

But it's also just a totally different lifestyle. And I think it's hard to say, you would have been better off one way or another. But what you're doing now obviously sounds very fulfilling.

**Margaret:** My friends that stayed with the procurement path, they are GS fourteens and fifteens, And so sometimes you go out, where would my life have been?

And that is wonderful and they are doing great things and you have to want it, right. Yeah.

**Elyse:** Yeah. You really, really do, especially to stick with the government that long. But it sounds like, so the support of your spouse was obviously absolutely crucial to your change, but I'm also curious if you had any other help, like when you were developing your business as a lactation consultant, or did you ever have [00:22:00] any other help from like mentors or coaches or friends? Yeah.

**Margaret:** I've worked with some amazing nurses and lactation consultants. I mean, just amazing women. They've been primarily women. I have worked with a fabulous male, lactation consultant, they do exist. But I've had a few people in and you really see that's the kind of nurse I want to be. That's the kind of lactation you take. And you're always learning in this field. It changes. I mean, from a year ago, what we recommend for breastfeeding, it changes where, because I think I just saw the statistics.

I just saw some statistic, there's more science and research on strawberries than there is on human breast milk, just because it wasn't something that could be marketed. And now that pumps are, something that can be marketed and all of the things that they're selling you hope for, for breastfeeding, it's become a little bit more of an industry where it wasn't an industry before .

It [00:23:00] was traditionally in the seventies, you had that kind of like lay lactation consultant, who is this, la leche leader and, and a different time. And now it's actually really grown as a profession specifically with the lactation consultant piece. But I have had some wonderful people that you just see, there was a lady early on in my career at UCLA. Carol Sands is her name and she was a nurse and a lactation consultant. And she just was so gentle in her approach. And you really, from an early point, I said, that's the kind of nurse I want to be is, with them at the, during their familial transition.

To the point where you're supporting and you're walking alongside them, but not kind of coming in and changing what mom's doing. And so really kind of a gentle approach and people like that, that I've met, that you kind of have your sights on and say, this is the kind of nurse and lactation consultant that I wanted.

**Elyse:** Yeah. Really role models and examples to learn from for sure. [00:24:00] Were there any other sort of obstacles that you encountered or had to overcome as you were going through this process?

**Margaret:** I think having to retake a lot of classes. When you go back and it's a different career, there's a lot of it's kind of loopholes. They want you to take a statistics class. I had been a political science business major, but because of the time expiration, so I had to go back and take some of these classes that I'm going, really?

And I go back and take this, that wasn't really relevant to what I'd be doing, but just punching a card. So I think for me, I want to know why we have to do this things and how it will contribute, particularly if I'm spending money and I'm investing my time.

So some of the things that you had to do and take to be able to go back to school and you really realize I had the luxury right of having financial support, but if you don't there's a lot of barriers and hindrance. And so I see that and I always kind of think about that. If I'm someone who has, you know, we have one stable [00:25:00] income and I'm doing this, then when you peel back the echelons of socio-economics and culture, and you see that there's a lot of barriers to people having upward or any kind of mobility, really. And so that, that kind of frustrated me is having to take this class for this one school, but not this other one. And that there wasn't a lot of standardization too, of what's needed for different universities and kind of everyone does something different.

And so that, that way. Yeah. You have to be kind of really expending a lot and, and that, that was just frustrating for me.

**Elyse:** It sounds like you really had to work a lot of it out for yourself and there wasn't a lot of guidance or, no structure around this career path right?

**Margaret:** No because I was just before the push, where lots of people are going back to school to be just the push before nurse practitioners kind of came into that a larger role. And we're going to get people direct entry to these [00:26:00] different nursing programs. So I was just at the beginning of kind of accelerated nursing programs for people who had done something else.

And I was fortunate in that I did do an accelerated nursing program. So after I did my prerequisites, I got into one. And so I was in nursing school, kind of my own little cohort with other people who had done different things. And so that was really neat. So engineers and, bio, bio mechanical engineers and lawyers and just people had done different things. So we were all in that same kind of what are we doing? You know? And so that was uplifting. Yeah.

**Elyse:** Yeah, absolutely. Well, at least you had a little community and that is just can be so powerful and encouraging.

**Margaret:** It can, it really can.

**Elyse:** Is there anything that you wish you had done differently?

**Margaret:** You know, I wish I would have started sooner.

I wish I would have started sooner. I love what I do. And imposter syndrome is always [00:27:00] a product, I think, of the female experience. And so, you know, sometimes you'll meet a lactation consultant and she'll say I've been doing this for 30 years. Well, I had a

career change, so I couldn't have just been doing it for that long. And so then you're like, Oh, I haven't been doing it that long, but it doesn't mean that I I'm not contributing. And I have been doing it for a while now, but so I just wished that I would've started sooner. Or maybe not. I mean, I'm thankful for my path. I'm thankful for my time as in procurement.

I think the older I get as a woman, I kind of gain of voice and I wasn't someone who knew exactly what I wanted to do at, you know, 21. And so maybe I would have taken more time off to kind of explore some of that before I went right into this career, I haven't really had any time off.

So sometimes I think about that maybe I should you know, we, I think we talked about it at the beginning. I was always busy and I'm so set on the next step and kind of getting things done that I didn't [00:28:00] really sit, sit with. The finality of some of these, these decisions.

**Elyse:** Well, it's so true.

I think it's because of a couple of reasons. Going back to what we were talking about at the beginning, you know, there's a lot of pressure on us to just find a career and do it. Over and over and over again. There's obviously financial pressure.

The older we get kind of the more responsibilities we have, overall at least the majority of us and, I think there's an intimidation aspect too, because when we think about I'm going to, okay, I'm going to quit my job and I don't really know what I want to do next, like that is a, that's a cliff. You don't know what's on the other side of that. And it's very hard to sit with that and actually say, okay, I am going to take some time and try to find myself. But I think we should all take a gap year. Yes we should.

**Margaret:** And maybe, maybe the gap year isn't an after high school or college or maybe the gap year is [00:29:00] mid career or, I think about my husband at close to retiring. We've been talking about because now it's part of my practices, virtual because of COVID well, maybe, you know, we'll take six months to a year before he settles into, after this, 20 year careers as a Naval officer said let's, you know, travel, in a post COVID world. Let's take a family gap year and that actually excites him for someone who's just kind of rolled right into, you know, at 17 being screamed at. So, yeah. So true.

**Elyse:** You hear about professors taking sabbaticals. You hear about people who have managed to make it so that they can take these mid-career breaks. I think that we should all do that. And maybe it's not just a one-time thing. Maybe it's every, so often throughout our careers in our lives, we take, you know, we take a break.

**Margaret:** I think we, as a culture, we really celebrate suffering. And we don't celebrate [00:30:00] pause and clarity, and maybe we'd have a little bit less cortisol stress if we took some time to, like you said, pause and celebrate that. It's okay to ask for help. It's okay to take breaks. And I see that with mothers, I work with, with mothers and babies and so quickly, there's just a need too, you know, we used to have women in the hospital for 10 days after they deliver. And now it's like two days and then there was expected to be back in their CrossFit gear with the baby, perfectly happy and all the things just quickly done. And so we can just pretend that that little time that wasn't productive, right because women are seen

as unproductive in their familial season, if they're unproductive, let's wrap that up quick so you can go back to, and that's really, really hurting women and mothers.

**Elyse:** Yeah. I don't have kids of my own, [00:31:00] but my sister my sister had a baby, my nephew who's now he's almost two.

And. I remember when she had him and she was on maternity leave. It was like every hour I was seeing articles about this makes you a bad mother that makes you a better mother or this other thing makes you a bad mother. And she's sending me articles and texts like, Oh my God, I accidentally gave him this thing.

He's going to die. I'm like, you're fine. You're fine. You're fine. You're fine. But it really, I mean, just the amount of pressure that society puts on mothers to be perfect at all times. While you're working, while you're taking care of your babies, while you're trying to get your body back, you know, from being taken over for the last nine months, right? Like it's just crazy.

**Margaret:** Yeah. Yeah. There's I thinking about that you know, what would it take to, to kind of elevate pause during the postpartum period, which is so important would be a culture that [00:32:00] also is okay with pauses in your professional career. So yeah, let's work on that at least.

**Elyse:** Okay. A hundred percent. If you're listening this episode, that is our takeaway is pause and I feel more relaxed just thinking about me too. Me too. But as we kind of wrap up here, I mean, obviously we just talked about pausing. And we talked about so much else today, but I am wondering if there's any other advice you would have for someone who's looking to make a career change?

**Margaret:** You know, it's a process. And in uncertainty that can feel really icky to us, right. Is the unknown we want, you know, we want that diagnosis. We want, from the medical perspective, just give me anything, tell me what we want to move forward. But sometimes there's a lot of beauty in that I wish I would've, it's taken more time and kind of reflected in my schooling, going back to school days, instead of just so quickly, the [00:33:00] I on I have to be a nurse and then I have to be this kind of nurse that I have to be this advanced, lactation consultant. I wish I would have paused a little bit, like I want my mama's to do that I care for, and, and really everyone to kind of embrace some of the, the sludge and the uncertainty. And it's going to be okay and that's coming from my own, my own lens. I fully realize that I have a financial support and all the things that have made it possible. Well, you know, not blind to that have all of my being fortunate.

Yeah. But I. I would say, you know, that if your heart's not in what you're doing, if you don't find joy in what you're doing, what you spent, we really spent so much time at work as American professionals. If you don't find joy in that, Then then look for what you can find joy in because whatever the process takes, because I think it's for how much time is spent at work.

We really need [00:34:00] to enjoy that contribution. as someone who has left a, a more lucrative and, and, and I say that, you know, nursing can be, can be, you know, depending on

which route you go, you can make money, but most I've never really met a nurse that got into it for the money. It's definitely for caring compassion.

So you know, embrace the, I think I've embrace the suck, embrace that the pain and the uncertainty of it, and really work to find, find joy. And it is possible to completely change your career. And It's okay.

**Elyse:** Absolutely. Absolutely. I think it's great advice. And my last question for you is, what is your definition of success?

**Margaret:** Mm, for me, success is in the try and the attitude. I, I think it was John D Rockefeller. He said, you know, pay a man far more for his attitude and ability to get along with others than any skill you must possess. And so I've had, I realized in nursing and [00:35:00] in procurement, there is very skill heavy, right?

There's people who are probably the best at giving us IVs just so and yeah. You know, somebody who could probably quicker write a government contract, I'm not sure or really knows how to use that charting system, and skills are very important and we need to learn them for our job.

But I really think that the attitude and the try and the effort and the kind of work effort and attitude is everything. And so I think in putting an effort and maintaining positivity or joy, I love that word joy, because I think it, I think it's so important. But having that kind of respect for myself, then that's in what I'm doing.

That to me is success. It's not maybe that I have reached this, you know, GS level at this age, which is great, you know, but that's something that maybe it's not so tangible, which is kind of respect for ourselves in what we're doing and what attitude I'm putting forth and what [00:36:00] work I'm putting forth.

And that I'm happy with it to me is success.

**Elyse:** Well, Margaret, thank you so much. It's been so inspiring to have you on the show. I really appreciate you sharing everything and your story with us. Thanks for being on.

**Margaret:** Thank you. Thank you for having me. If you're particularly, if you're interested in going back to, to nursing school or becoming a lactation consultant, you know, I'm an open book.

If you need somebody to talk to about that field. Yeah, never, never looked back and I am so thankful. I get to work with mothers and babies every day and see transformative changes. As someone who's made big transformative changes myself. And so yeah, I'm thankful and I'm thankful to have this experience to talk about it and going, yeah, this is why

I'm doing it.

So thank you.

**Elyse:** Yeah, of course. Where can people find you?

**Margaret:** Yes.

So my by day I'm a community health nurse and lactation consultant for the Navy Marine Corps, Relief society, which is a organization that supports military families [00:37:00] as a nonprofit, but I also have a virtual practice and a podcast.

So you can find me on Instagram at, @ the mobile milkmaid or you can go to my website, WW w dot the mobile milkmaid.com. And I also have a Facebook page, which is the mobile milk bank. So that's my kind of lactation name.

**Elyse:** Awesome. Well, thank you, Margaret.

**Margaret:** Thank you.