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House of Representatives

Standing Committee on Health & Ageing

Inquiry into the health benefits of breastfeeding

Submission: from the Australian Lactation Consultants Association (ALCA)

ALCA represents International Board Certified Lactation Consultants (IBCLCs) at both National and State levels. IBCLCs work with women and their families from pregnancy, through the intrapartum and postpartum period and beyond in the community. IBCLCs work in the public and private health system as well as in the community and are the only professional body of health professionals who specialise in breastfeeding and human lactation.

Breastfeeding according to the World Health Organization's recommendations of exclusive breastfeeding for six months with gradual introduction of solids and continuing to breastfeed for two years and beyond has been clearly shown to not only improve the health and well being of children but also play a significant role in reducing health care costs.

Initiation rates of breastfeeding in Australia are relatively high by world standards. The public health message of the importance of breastfeeding is well understood by most new parents and health professionals. The risks associated with not breastfeeding however, are not well understood. Too many in the community believe that artificial formula is equivalent to, or at least nearly as good as breastmilk. In an environment where commercial entities spend considerable sums of money perpetuating this fallacy the health of the Australian community continues to be adversely effected. Evidence clearly demonstrates that even in a developed nation such as Australia significant health risks are associated with artificial feeding and considerable health benefits to both the baby and the mother are associated with breastfeeding.

The Government's own targets for breastfeeding rates and durations in 2010 will not be achieved unless appropriate strategies are undertaken at a National level to inform, support and encourage ongoing breastfeeding durations.

ALCA recognises the following issues:

- Pre pregnancy education, prenatal and postnatal education should be freely available e.g. ABA programs, peer support programs, working with the socially disadvantaged - the young, the CALD, the intellectually challenged, low income earners who are pressured to return to work, the need for early visiting by Child and Family health, aboriginal women
- Initiatives to encourage breastfeeding are often adhoc with no national coordination of activities. The Knowles Report, (Feb 2001) in his Independent Report on APMAIF and the MAIF Agreement, recommended the appointment of a National Infant Nutrition Coordinator – this position has not been appointed to date

- Current marketing of artificial formula: The current MAIF Agreement does not address new products e.g. toddler formula; new media types e.g. internet; retailer own brands e.g. pharmacy own brands; products that have been identified to interfere with breastfeeding e.g. pacifiers/ dummies/ teats; sponsorship of health professional education; infant feeding/ health issue consumer information e.g. common feeding problems brochure
- Public health messages do not recognise that breastfeeding is the normal way to feed children in the early years of life. The language that is currently used to promote breastfeeding does not fully inform women of the risks associated with using artificial formula and falsely promotes the merits of artificial formulas as an appropriate product. The premise that using suitable language in health promotion would 'make bottle feeding women feel guilty' is no longer appropriate and does not encourage women to make an informed choice about infant feeding
- Lack of maternity leave options for many women: breastfeeding takes most mothers and babies six to twelve weeks to establish. Where women are required to return to work, often without workplace support to maintain breastfeeding, women are often left with no choice but to wean earlier than the recommended or desired time

How long a baby is breastfed is influenced by a number of factors as has been evidenced by a large number of studies internationally. The majority of these influences are vulnerable to positive influence through effective public health promotion strategies.

- Inclusion of information about breastfeeding as the norm in all education curricula
- Development of public health promotion strategies through all media
- Review current antenatal education and identify ways to:
 1. engage women from socially disadvantaged groups
 2. support a multidisciplinary approach to the development of antenatal programs including the involvement of IBCLC lactation consultants, Child & Family Health Specialists and the Australian Breastfeeding Association counsellors
- Review and strengthen the current postnatal and early post-discharge support and education
 1. develop mother/ baby led care in the postnatal period rather than relying on the Care-map style currently be used
 2. strengthen and support midwifery in home care services to six weeks postpartum
 3. develop National Clinical Indicators to ensure that all women have access to appropriate continuity of care from hospital to community.
 4. develop strategies within these Indicators that will identify mothers and babies with special needs and ensure that these women are seen within the first week post discharge
- Establishment of a National infant nutrition coordination role
- Requirement that all health facilities (hospital based and community) that work with pregnant women and new mothers meet Baby Friendly Health Initiative standards

- Requirement that funding for health professional education is not sourced by companies that manufacture artificial formula, bottles, teat and dummies
- Workplaces develop models for supporting breastfeeding employees to firstly have time to establish breastfeeding and secondly support them to continue when they return to work
- Provide Medicare/ private health fund rebates to enable women who are experiencing breastfeeding problems to consult with an IBCLC, have access to high quality breast pumps and equipment

ALCA, as the National Professional body, is well placed to advise and support the Inquiry's Terms of Reference and looks forward to being an active participant.

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