

To whom it may concern,

I read with interest the other submissions on the subject of breastfeeding, and felt the need to share my experiences and beliefs about what is needed to assist mothers with breastfeeding.

In August 2004, after months of trying and much online research I fell pregnant. I had taken out top level private health insurance and researched hospitals and obstetricians to ensure I had the best available support and facilities for this very important event. My husband and I attended ante-natal classes through our chosen hospital, but were limited to only 3-4 classes and so missed out on a breastfeeding class. I assumed that since Frances Perry is affiliated with the Royal Women's Hospital, they would be breast-friendly and I would receive assistance "on the job".

In April 2005, I delivered my beautiful baby daughter Katelyn at 8.28pm via Caesarean section. Though three weeks early, she was quite perfect and I was determined to breastfeed her immediately. I was instructed that it was hospital policy to forbid breastfeeding in theatre and to separate mother and baby for the first hour or two while I was stitched up and kept in (an empty) recovery room. Finally at almost 10pm, I was brought up to my room where my husband and daughter waited. I reached out for her and asked the attending nurse to assist me in breastfeeding, but was told my daughter was asleep and to leave her be and I could hold her later! I insisted on at least holding her immediately, and the nurse sighed and handed her to me, telling me not to unwrap her or breastfeed her yet since she didn't need it. She then left the room! Fortunately my friend (a mother of 3 who'd had Caesareans with all of them) was present and assisted me in safely holding and attaching my precious daughter to the breast where she eagerly fed and we were able to bond.

The next 24 hours were dreadful, I recall asking again and again for help in feeding Katie (I was bed-bound), and being told not to worry since in the first 24 hours babies don't want to feed and then that they'd already given her formula in the nurses station! (I had instructed that she only be given formula as an absolute last resort if I was unable to feed, but they never approached me to feed her.) I finally pinned a nurse down, who looked at the chart and noticed it had been **8 hours** since her last feed! She ticked me off for not telling them that it was time for me to feed Katie, and set me up to feed, then left. I then spent the next four days struggling with attachment and different "the ONLY method" instructions from various nurses, including being told to express breastmilk for the time being and give it to her from a bottle! I often had to wait up to 25 minutes for a nurse to respond to my buzzer when I needed feeding assistance, by when both my baby and I were beside ourselves with distress. After four days, I cried to a nurse that I was scared to go home and deal with the feeding problems alone, and feared I had PND. I was told that the health funds won't pay for extra days unless they're medically essential, my room was booked for another woman, and I'd be fine once I got home.

Three weeks later, my maternal health nurse finally listened to my worries about feeding and told me I ought to quit since it wasn't worth pursuing if it was difficult. She also gave me a tin of formula and said I'd best supplement feed Katie since she wasn't putting on enough weight. Again my fears of PND were fobbed off and my concerns over Katie's constant vomiting were put down to "maybe its something you're eating, it'll all be better on the bottle and you'll even be able to have a glass of wine with dinner!" I cried every time I put the bottle of commercial formula into my precious baby's mouth, each bottle felt like a nail in the coffin of me as a mother. I never realised that the formula supplements could and almost did, make me lose my milk supply, my MCHN never bothered to mention it.

I rang the ABA who were kind but useless (how can something so physical and practical be assisted over the phone?) and she said to go to a lactation consultant at Frances Perry - something I hadn't known existed there, even though as an in-patient I'd begged for help with breastfeeding. This was futile, as my appointment occurred at a time when Katie was sleepy and disinterested in a feed. The chairs in her tiny office were hard and uncomfortable, and we achieved very little.

Finally a private lactation consultant I found on the internet pointed me in the direction of the breastfeeding clinic in Ivanhoe, run by the Mercy Hospital. Two visits there and I felt I was finally on track, though still struggling with extreme shooting pains in my breasts at every feed, and Katie still vomited 10+ times a day. At my second visit, the lovely nurse took me aside and said

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she thought Katie may have reflux and to get my GP to check her out. (He did and agreed, prescribing Zantac.) Carmel hugged me and also said she felt I had PND and recommended I call North Park hospital to arrange a visit to their mother-baby unit. The first person who seemed to notice or care that I was falling apart!

So six weeks post-partum, I was admitted to North Park. Six weeks of sitting on my couch crying with my daughter in my arms, knowing if I put her down she'd wake and scream and want another feed. Too depressed to get dressed and too exhausted to move. Certain I was a failure as a mother because I couldn't nourish my daughter as nature intended. Certain she hated me since she screamed so much and fought me. Certain I was judged by everyone as a failure because I wasn't perfect enough. Deliriously tired from lack of sleep and little support. I was obsessed with breastfeeding, and felt my value as a mother depended on my ability to perform this simple task. Since I couldn't do it, I must be a bad mother and unworthy of my beautiful child.

North Park is surely staffed by angels, since we left five weeks later a content mother and child, breastfeeding easily and reflux properly treated. I'd received kindness, compassion and support for my worries and fears, as well as consistent practical support with breastfeeding problems and positioning. My nurses would sit with me for the duration of each feed, allaying my fears and soothing my concerns, gently guiding and adjusting us until we had it right. The staff were attentive, loving and gentle, mothering me, helping me to let go of my fears and recover from the dreadful experiences of our first six weeks. I'd been able to share my fears and thoughts with other mothers going through similar problems, and felt safe and protected as I finally was able to explore and enjoy motherhood. Katie's reflux was checked and the paediatrician explained that she screamed and fed constantly because her throat was raw and painful from the reflux and the breastmilk soothed it temporarily. A new medication eased this pain and I took home a peaceful, happy baby.

My daughter is now nearly two and we both still enjoy our nightly "booby time". It is a chance to cuddle and caress in the quiet comfort of Mummy's bed, a warm and nurturing cocoon. Had it not been for Carmel at the Mercy clinic and the angels at North Park, we'd never have known this lovely experience which is so precious to us both.

As a result of my experiences, I feel there are several things that MUST be done to support mothers.

1. Create **many** more breastfeeding day clinics such as the Mercy clinic at Ivanhoe. Some overnight services would also be helpful, as the middle of the night feeds can often be a problem. Make this service medicare/government funded and available for at least the first six months.
2. Promote these services with maternal health clinics and hospitals, and ensure that a brochure about them is included in the baby's 'blue book'.
3. Acknowledge how important breastfeeding is for women, and how entwined in our self-esteem as mothers it is. Many women in my PND support group (in and out of North Park) commented on how they'd felt their failure to breastfeed and lack of support for it was a strong trigger in the development of their PND.
4. Work with the health funds to allow women a longer stay in hospital for a first baby. Milk generally comes in around day 3-4, yet the mothers have been sent home already, with little or no support for the problems that may follow. I believe a solid 7 days for a first child, and 5 days for subsequent children would be more appropriate. My health fund saved themselves maybe \$1400 in getting me out of Frances Perry early, but cost themselves \$24,000 in my stay at North Park. What false economy!
5. Promote breastfeeding in the media. If the government can spend a fortune on television advertising telling people how to vote and other such obvious things, then they can afford a few ads a day promoting the benefits of breastfeeding and the support services for it.
6. Work to dispel the commonly held belief that a child should be weaned off the breast at 12 months, and to feed longer is 'wrong'. I couldn't believe the dirty looks and comments when I modestly breastfed Katie in public at 14 months of age!
7. Threaten to reduce funding to hospitals that don't actively support breastfeeding. The attitude and lack of attention I received at Frances Perry was astounding. My stay there cost my health fund approximately \$5000 for six nights, and I really felt I should have received better attention and treatment than I did for that kind of price.
8. Force the hospitals to have more lactation consultants on staff as an included service (instead of \$100+ per hour) and a better mother-nurse ratio. Overnight at Frances Perry, we had 2 nurses with 10 mothers, two of whom had twins!
9. Improve the quality of Maternal health nurses and improve the training, testing and monitoring of them. There are many maternal health nurses in the system who are not keeping up to date with services and treatments available. Some have simply lost interest in their job, or are following their own personal systems. My MCHN is extremely unpopular in our area due to her inattentiveness and vague answers, resulting in many women transferring to clinics out of the area. When our mother's group inquired how to lodge a complaint, we were told to follow such a lengthy and ridiculous procedure that none of us had the time or energy, and simply changed clinics. My new MCHN is wonderful and I'll never go back. This is dreadful for new mums who could be in the position I was in, and receive no guidance and little support, but not realise there are other options out there.
10. Ban MCHNs from stocking and promoting formula feeding unless breastfeeding is medically not possible.
11. Ban the advertisements for "Toddler milk" formulas. These simply encourage women to wean their babies at 12 months and put them on formula. Breast is still best, and these formulas are nothing more than that - a laboratory formula.
12. Offer incentives to businesses that allow women time and space to express milk for their babies if they have had to

return to work in the first 12 months.

13. Offer incentives to shopping centres to have decent parents rooms, allowing clean, comfortable, gently lit feeding areas away from the often noisy and crowded nappy changing area. Billboards should be displayed in these facilities to promote breastfeeding support clinics and PND services in the region.

Many thanks to you for allowing me to share my experiences, and I hope that some of this might help in improving the services available to other mothers so they don't struggle as I did.

Natasha Davis