

Hon Mr Alex Somlyay MP, Chairman  
Standing Committee on Health and Ageing  
House of Representatives  
PO Box 6021  
Parliament House  
Canberra ACT 2600

27 February 2007

RE: Inquiry into Breastfeeding

I welcome the government's inquiry into breastfeeding and the opportunity to submit my personal experiences and thoughts for consideration. I will address the terms of reference A, B, D and E and wish to preface my submission with my key beliefs:

1. I do not believe that I would have continued to breastfeed my baby without the support of the Australian Breastfeeding Association (ABA).
2. The Australian Government needs to urgently provide adequate funding and policies for education, promotion and support of breastfeeding in order to positively impact Australia's current low rate of breastfeeding.

**A. The extent of the health benefits of breastfeeding:**

I do not intend to present you with a long list of health benefits of breastfeeding as I am confident that submissions from the ABA and NH&MRC will give justice to this particular term of reference. However I do request that due consideration is given to both the physical and emotional health effects on both baby and mother, including the empowerment and sense of fulfilment that breastfeeding can provide a mother.

Breastfeeding is often thought of as the optimal or 'better' way to feed babies, however, it is important to note that it is actually the normal and natural way to feed babies and young children. One might argue that we should be discussing the risks of *not* breastfeeding, as opposed to the benefits of breastfeeding. However some breastfeeding mothers fear that use of this terminology may alienate or offend mothers who do not breastfeed. So for the sake of diplomacy we soften our words when mentioning or celebrating some of the positive outcomes associated with breastfeeding.

Whilst I think the *concept* of 'breast is best' is well known in society, I do not believe that the majority of people have a good understanding of the extent of the health benefits breastfeeding brings the mother and baby. It was only once I subscribed to the ABA that I began to learn just how important it was for me to breastfeed my baby. It saddens me to think about all the women who have ceased breastfeeding under the misbelief that formula was 'just as good'.

## **B. Evaluate the impact of marketing of breast milk substitutes on breastfeeding rates and, in particular, in disadvantaged, Indigenous and remote communities:**

I personally find the constant bombardment of advertisements for formula very frustrating and discouraging, even though my breastfeeding relationship with my baby is well established. For a mother who is having difficulty breastfeeding her baby and perhaps in need of some support and encouragement, formula advertisements may undermine her confidence and raise doubt as to whether her baby is 'missing out' on 'a nutritious and specially formulated' product.

The practice of some Maternal and Child Health Nurses giving out free samples of formula to mothers of young babies is extremely detrimental to breastfeeding and must be stopped, along with a range of other marketing techniques employed by formula manufacturers. I strongly believe that if Australia implemented The WHO/UNICEF International Code of Marketing Breast Milk Substitutes, we would experience a significant increase in breastfeeding rates.

## **D. Initiatives to encourage breastfeeding:**

- ✓ Extensive government funding for the ABA and Lactation Resource Centre
- ✓ Free or subsidised membership to the ABA
- ✓ Free or subsidised ABA Breastfeeding Education Classes
- ✓ Breastfeeding related products and services to be tax deductible
- ✓ National television, radio and newspaper advertising campaign highlighting the benefits of breastfeeding, the WHO recommendation, dispelling myths and common misconceptions regarding breastfeeding
- ✓ Posters and brochures on display at GP clinics, obstetrician rooms, MCH centres, hospitals
- ✓ Implementation of the WHO/UNICEF International Code of Marketing Breast Milk Substitutes
- ✓ Removal from sale any doll which comes with a bottle to avoid early modelling of abnormal feeding practices
- ✓ Regular training of hospital midwives and MCH Nurses to achieve consistency among advice and support, techniques of attachment, management of breastfeeding related issues
- ✓ Breastfeeding classes and support groups to be conducted in all maternity hospitals
- ✓ Implementation of the 'Baby Friendly Hospital Initiative' in all maternity hospitals
- ✓ Advertising to promote and normalise breastfeeding beyond one year of age
- ✓ Funding for Lactation Consultants and Breastfeeding Counsellors to do home visits for new mothers
- ✓ Implement the new WHO infant growth standards into the MCH service to avoid the misleading mothers of breastfeeding babies that their baby is "underweight"
- ✓ Government funding for training and support of more Breastfeeding Counsellors and Community Educators, two valuable roles undertaken voluntarily by ABA members
- ✓ The ABA Breastfeeding hotline to be a free telephone call nationwide
- ✓ Human Milk Banks to be established in all major cities
- ✓ Legislation to assist breastfeeding mothers when they return to paid work such as paid lactation breaks, a private room to express milk, a fridge for storage of expressed breast milk

## **E. Examine the effectiveness of current measures to promote breastfeeding:**

In my opinion, the government currently does very little to promote breastfeeding. I do not recall reading any brochure or information sheet or seeing any advertisement or promotion in relation to breastfeeding that was produced by the government. I believe the only body which actively promotes breastfeeding is the ABA, which receives very little government funding.

The ABA does a fantastic job promoting breastfeeding within the financial constraints under which it operates. However, they are unable to fund major advertising campaigns, something which I believe is necessary to help educate the public regarding the importance of breastfeeding.

In my experience, many nurses who work in The Maternal and Child Health Service do not have adequate training or current knowledge of good breastfeeding practices. In the first 12 weeks of my daughter's life we had some difficulty establishing breastfeeding. When I told the MCH Nurse about the problems we were experiencing, she was of little help. She did not offer to watch me feed to check the attachment, nor did she offer any suggestions which could actually help me. If it were not for the support of trained volunteer Breastfeeding Counsellors from the ABA, I may not have been able to overcome the early challenges that I was faced with.

It was also clear to me that my General Practitioner did not have updated knowledge about breastfeeding. My GP advised me to introduce solids to my daughter at the age of 4 months, which is clearly against the current recommendation of the World Health Organisation. The reception area of my GP clinic did not have a single poster or brochure promoting breastfeeding.

Breastfeeding was discussed in my hospital antenatal classes. However, once I had my baby and was faced with some difficulties establishing breastfeeding, the support I received from the midwives was limited. Each midwife had a different way of assisting us with attachment. From my hospital room, I didn't have access to the information and support that I needed. I was instructed to attend the physiotherapy class which was conducted in the maternity ward. However, there was no breastfeeding class to assist mothers like myself who were desperately trying to feed their babies.

I believe the current measures that are in place to promote breastfeeding are inadequate. The lack of support provided by some hospitals, MCH Nurses and GPs often means that mothers choose to stop breastfeeding prematurely. Furthermore, since breastfeeding is not promoted to *the general public*, many people remain uninformed about how important breastfeeding is. This means that a new mother is often surrounded by family, friends and even health professionals who may undermine her confidence and perpetuate some of the silly and discouraging misconceptions regarding breastfeeding.

## **Conclusion**

I believe the government needs to start funding the education, promotion and support of breastfeeding as a national health priority. The ABA needs to be financially supported to allow them to continue and expand upon the excellent work they do.

Breastfeeding did not come easily for me, however with the support of the ABA, I was able to overcome early difficulties and continue breastfeeding. The more I learn about the benefits of breastfeeding, the more I am inspired to keep feeding my daughter in the way nature intended. Knowing that I am providing my daughter and myself with multiple health benefits brings me immense personal fulfilment and a strong sense of empowerment as a woman.

I only hope that the government is able to implement some new initiatives to make Australia more breastfeeding friendly. If society in general is more supportive of breastfeeding in both principle and practice, then more women and babies will be given the opportunity to reap the health benefits of breastfeeding. The long term impact on the health of Australians and on our health system will inevitably follow.