

VIC 3550

28th February 2007

The Secretary of the Committee on Breastfeeding
House of Representatives
PO Box 6021
Parliament House
Canberra ACT 2600

I am a mother of four children and a grandmother of two and I am writing this submission because breastfeeding is not the norm in Australian society. This is despite the many messages of the health benefits for both the mother and the baby from breastfeeding from federal and state government departments, and health professionals and organizations including hospitals, doctors, nurses, pharmacists, dentists, speech pathologists and psychologists. Much more needs to be done to encourage mothers to breastfeed their infants, and to not wean their infants onto a breast-milk substitute.

The health benefits of breastfeeding are well known, and are easily found published on the internet and in medical publications. Continuing research has been supporting and extending the known health benefits for both the mother and the infant. Health benefits include reduced obesity for the infant; reduced cancer-risk for both the mother and the infant; reduced risk of diabetes for the infant; reduced risk of allergies and asthma for the infant; greater rates of survival and less illness in premature babies; reduced bacterial and viral illness in the infant, which is especially beneficial once the mother returns to work, and including reduced incidence and severity of ear-infections and rotavirus. The health benefits for both mother and infant extend from birth to the grave, are greater the longer the duration of breastfeeding, and do not cease but continue to accumulate once the baby is 12 months old. A breastfed infant and its mother will, on average, be less of a burden on the health system, during their entire lifetime, with the burden decreasing the longer that breastfeeding has been maintained.

Looking just at the burden on the health system of the rotavirus: there is a call for the Federal Government to fund \$25-28 million a year for a vaccine against a single rotavirus strain to be given to Australian babies. This is currently estimated to cost the health-care industry \$30 million a year to treat.

<http://www.smh.com.au/news/national/call-for-rotavirus-vaccine-funding/2007/02/20/1171733763720.html> Presently *"Rotavirus puts 10,000 Australian children in hospital each year, with many more turning up at hospital emergency wards and at doctors' surgeries with symptoms of acute diarrhoea and vomiting... On average 27 children are admitted to hospital with rotavirus each day and even more in winter. It's a problem which has placed significant strain on hospitals. Some wards are being closed and elective surgery cancelled because of it."* This is a virus against which infants that are not breastfeed have no protection. The promotion of breastfeeding, and the promotion of breastfeeding beyond the age of 12 months, would greatly reduce this burden on the Australian Health system. If instead of spending \$25 million a year on a rotavirus vaccine the Federal Government put \$25 million dollars in

the promotion of breastfeeding, it would save not only much of the estimated \$30 million a year, but many more health dollars in the treatment of other health conditions as well.

I read on the Australian Government Department of Health and Aging web-site (<http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pubhlth-strateg-brfeed-index.htm>) that *"Breastfeeding is one of the most important contributors to infant health. Breastfeeding provides a range of benefits for an infant's growth, immunity and development...In addition, breastfeeding benefits maternal health and contributes economic benefits to the family, health care system and workplace."* I wonder why it only talks about breastfeeding to the age of 6 months *"Exclusive breastfeeding to around six months of age gives the best nutritional start to infants and is recommended by the Australian Government Department of Health and Ageing, the World Health Organization (WHO) and other health authorities"* when the health benefits continue past this age, and many of them, e.g. the reduction in the risk of obesity in the child, and the benefits towards the maternal health in the area of reduced cancer risk, only start to apply when breastfeeding continues past the age of 12 months, and increase when breastfeeding continues to two years and beyond.

I read the on the World Health Organisation website their **Global Strategy for Infant and Young Child Feeding** and see much more that needs to be done in Australia. (http://www.who.int/nutrition/topics/global_strategy/en/index.html)

"The strategy calls for action in the following areas:

- 1. All governments should develop and implement a comprehensive policy on infant and young child feeding, in the context of national policies for nutrition, child and reproductive health, and poverty reduction.*
- 2. All mothers should have access to skilled support to initiate and sustain exclusive breastfeeding for 6 months and ensure the timely introduction of adequate and safe complementary foods with continued breastfeeding up to two years or beyond.*
- 3. Health workers should be empowered to provide effective feeding counselling, and their services be extended in the community by trained lay or peer counsellors.*
- 4. Governments should review progress in national implementation of the International Code of Marketing of Breast milk Substitutes, and consider new legislation or additional measures as needed to protect families from adverse commercial influences.*
- 5. Governments should enact imaginative legislation protecting the breastfeeding rights of working women and establishing means for its enforcement in accordance with international labour standards."*

The federal and state government health departments make recommendations to exclusively breastfeed to the age of 6 months, and, when it is mentioned, make recommendations about the health benefits of breastfeeding to the age

of 12 months, but rarely beyond. This is not in line with the Global Strategy above. This needs to change.

Health workers are not adequately trained in breastfeeding. This needs to change, especially as, as a direct result, the advice that health workers give mothers is often contradictory.

More assistance also needs to be given to trained lay/peer counsellors in the community, and specifically the volunteers of the Australian Breastfeeding Association. Assistance can be in the way of additional funding:- funding for the telephone help-line, funding for advertising in national magazines (which the Association cannot currently afford, but Formula companies can), and continued and increased funding for general running expenses. The Queensland Government promotes the Australian Breastfeeding Association to Aboriginal and Torres Strait mothers in its publication "Growing Strong – Feeding you and your baby". More government departments at a state and federal level need to do the same – for all Australians. The Aboriginal and Torres Strait Islander communities deserve good health advice, and so does the rest of the community.

<http://www.health.qld.gov.au/phs/Documents/tphun/18914.pdf> (page 38)

Talk to mums who have breastfed

- *Learn as much as you can from women who have already breastfed, especially from those who enjoyed it and are positive about breastfeeding.*
- *Ask what was good about breastfeeding for them.*
- *Talk about how they coped with any difficulties they had.*

Watch babies breastfeeding

- *Watching babies being breastfed will let you observe things that their mothers might find hard to put into words.*
- *Australian Breastfeeding Association (ABA) groups hold meetings at which there are usually lots of breastfeeding babies. If there is a group in your area it will be listed in the telephone book under Australian Breastfeeding Association.*

Watch videos about breastfeeding

- *Videos can be very useful. Your ABA group, Child Health Clinic or Community Health Centre may have videos you can borrow or check out the local library.*

As a mother the best information that I ever received was from a volunteer organization, the Australian Breastfeeding Association. I was unable to successfully breastfeed my first child, and without their support and assistance I would never have been able to successfully breastfeed my second and subsequent children. Today the Association continues to give support, assistance and advice to my daughter as she breastfeeds her infant. My first contact with the Australian Breastfeeding Association was through their telephone help-line. I also later attended mother-to-mother support meetings. It was only at these mother-to-mother support meetings that I felt normal when my children were small, and my daughter has also expressed similar sentiments. In other social settings, because breast-milk substitutes are so prevalent, breastfeeding beyond the first few months, and especially beyond 6 to 9 months, is not readily accepted.

In line with the World Health Organization's Global Strategy are the initiatives towards assisting Aboriginal and Torres Strait Islander mothers to initiate and sustain exclusive breastfeeding for 6 months and ensure the timely introduction of adequate and safe complementary foods with continued breastfeeding up to two years or beyond by the Queensland Government, and the Northern Territory Government in conjunction with the Australian Government Department of Health and Aging.

In their publication for the education of Aboriginal and Torres Strait Islander mothers "Growing Strong – Feeding you and your baby"
<http://www.health.qld.gov.au/phs/Documents/tphun/18914.pdf> the Queensland Government states at the bottom of page 33:-

- When baby is eating solids, breastmilk is still an important part of his diet.
- As long as baby continues to breastfeed, it will help keep him healthy, even when he is an active toddler.

In their publication "A Story About Feeding Babies" for the education of Aboriginal and Torres Strait Islander mothers
http://www.nt.gov.au/health/docs/ifg_flipchart.pdf the Northern Territory Government in conjunction with the Australian Government Department of Health and Aging show from pages 8 to 15 by way of script and illustration that breastfeeding should continue for babies over the age of 12 months.

The Aboriginal and Torres Strait Islander communities deserve good health advice, and so does the rest of the community. This message, that breastfeeding beyond the age of 12 months, is good for the health of Australian children, needs to be communicated to **all** Australians.

Currently the MAIF does not extend to retail organizations (including pharmacies), or to breast-milk substitutes for infants over the age of 12 months. Formula companies also continue to sponsor training of health professionals in Victoria, and possibly other states. This is not in line with the World Health Organization's Global Strategy or the International Code of Marketing of Breast milk Substitutes, and needs to change. This marketing of breast-milk substitutes is detrimental on breastfeeding rates in the community; and especially for breastfeeding rates of the disadvantaged, indigenous and remote communities, some of the communities that have the worst breastfeeding rates in Australia. The health of these communities is compromised.

Retail organizations and pharmacies should not be exempt from the MAIF. Whenever I go into my local pharmacy I need to walk around a large display of breast-milk substitutes just inside their front door, giving the message to mothers that these substitutes are suitable for infant feeding.

The marketing of breast-milk substitutes for infants over 12 months should also not be exempt. My local pharmacy also has brochures on display about formula called 'Nutrition for your baby', with a graph comparing breast milk and formula, making it look like the only difference was the antibodies in breast milk with the rest broken down into proportions of carbohydrates, protein, sodium

and fat. Whenever I walk into my local supermarket I find advertising from formula companies in the baby needs aisle close too and attached to breast-milk substitutes for infants of all ages. In retail outlets breast-milk substitutes designed for infants under the age of 12 months are placed next to, and even on the same advertising display, as toddler milk. Advertising of toddler milk is perceived by consumers to cover both products. Large advertisements are taken by formula companies in national magazines extolling the virtues of their product, and photos of children younger than 12 months are included in their advertisements and on their web-pages. On the Wyeth web-page for their breast-milk substitutes parents have to click on a button that states their agreement to formula feed if they want to look at recipes for foods that can be given to infants under the age of 12 months. Advertising is also found in Children's hospital wards throughout the country, again containing photos of babies under the age of 12 months. Advertising is also misleading including that breast-milk substitutes are including some of the immunological benefits of breast milk, and that they contain the same vitamins, minerals, and other nutrients. For example the new Nutricia formulas are currently sitting on supermarket shelves espousing that their food enhances health. A parent reading this information could get any other impression but that this breast-milk substitute is a healthy food for their babies. Samples are given out and promotions are run through popular magazines. Samples are also given out through maternal and child health nurses. My daughter was recently offered a sample of Toddler Milk from her child and maternal health nurse, even though the nurse knew she was breastfeeding her toddler, and nutritionally had no need of it. Use of Toddler Milk, if she had accepted it, would be detrimental to her continuation of breastfeeding to the age of two years or beyond.

Two additional initiatives that could be taken to promote breastfeeding in the Australian community would be to make breast-milk substitutes only available on prescription, and to place warning labels on formula tins. Breast-milk substitutes need to be used with care to avoid further compromising the health of Australian families.

Sincerely
Anne Davis