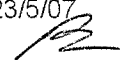


29 February 2007

Submission no. 361

AUTHORISED: 23/5/07



To: The Committee Secretary
Standing Committee on Health and Ageing

Dear Sir/Madam,

I am the mother of a 12-month old son, who is still breastfeeding. I am aware of the World Health Organisation recommendations and intend to maintain our breastfeeding relationship as long as my son and I are happy. The following is my opinion on how they government might encourage women to breastfeed for longer, based on my own experiences and observations.

I believe that more women would breastfeed for longer if they and their partners had access to **up-to-date, accurate** breastfeeding information. This includes information on the wide-ranging benefits of breastfeeding to both mother and baby, how breastfeeding "works" (the physiology/biology), what to expect when breastfeeding (the wide range of "normal"), problems that may be encountered and their solutions, parenting practices that can make breastfeeding easier (e.g. co-sleeping), and where to seek help.

I found out about the Australian Breastfeeding Association (ABA) by chance when I was pregnant, and my husband and I attended one of their Breastfeeding Education Classes (BEC's) before our son was born. The class covered a wide-range of information in the areas mentioned above. This got me off to the best possible start with breastfeeding. Like many other new mums I encountered a number of hurdles breastfeeding my son in the early months. I also encountered much breastfeeding misinformation - from Health Professionals, books, the media, other mums. However I was fortunate in that I knew about the ABA, and hence was able to access reliable information (and much needed reassurance and support) through their website and from their trained counselors on the breastfeeding helpline. I would like to see more government funding provided to the ABA, which I believe is funded mostly by subscriptions and run almost entirely by volunteers. Funding could be used to promote BEC's so that more women and their partners could learn about breastfeeding before their baby arrives. It could also be used to make the breastfeeding helpline a toll-free number and to train more breastfeeding counselors. If the government were to subsidise BEC's then all expectant parents would be able to attend. Along the same lines I believe that consultations with Lactation Consultants (LC's) need to be more affordable, perhaps these could be subsidised through Medicare.

Furthermore, Health Professionals who work with breastfeeding mothers (i.e. Midwives, Child Health Nurses, GP's, Paediatricians) need to be better educated about breastfeeding. It has unfortunately been my experience that *some* Health Professionals do not have a comprehensive and up-to-date knowledge of breastfeeding. Therefore, although they are well-meaning, they ultimately (unintentionally) sabotage many breastfeeding relationships.

Women also need support from their partner, family and friends if they are to successfully breastfeed. I was fortunate to have this, however many women are not.

Some women are told by well-meaning family and friends to “put baby on the bottle” as it is “easier and just as good as breastfeeding anyway”. Families, friends, even strangers can have a big impact (positive or negative) on the confidence of a new mother and the decisions she will subsequently make. Public education campaigns about breastfeeding (which could be co-coordinated by the government and/or the ABA) would help in this regard.

I also believe that the aggressive and sophisticated marketing of formula companies can negatively impact on the confidence of a breastfeeding mother. For example I have seen a number of different advertisements for toddler formulas, which have momentarily led me to reconsider my decision to continue breastfeeding my son. These ads imply that babies after 12-months *need* toddler formula, and that these formulae provide health benefits toddlers are unable to get elsewhere. This is despite the fact that it is normal for babies to breastfeed throughout their toddler years, and that the health benefits of breastfeeding are far superior to those of toddler formula.

In summary, I believe that the reason I have been able to breastfeed my son for 12-months, and plan to continue into the future, is that I have been able to access reliable, accurate information as well as support and reassurance from the Australian Breastfeeding Association. This has given me the knowledge, confidence and determination I needed to continue breastfeeding my son. My husband and our families have also been able to access information through the ABA, which has helped them be supportive of me.

I therefore believe that if the government wishes to increase breastfeeding rates they need to do the following:

- Increase funding to the ABA so they can continue and expand their vital work supporting mothers and educating parents, parents-to-be, Health Professionals and the wider community
- Subsidise/fund Breastfeeding Education Classes or other forms of antenatal breastfeeding education
- Subsidise consultations with Lactation Consultants
- Ensure Health Professionals receive comprehensive and up-to-date training on breastfeeding
- Fund Public Education campaigns about the benefits of breastfeeding, how breastfeeding works (redressing common breastfeeding “myths”), and the importance of supporting breastfeeding mothers.
- Adopt the full WHO code with regards to the marketing of breast milk substitutes.

Another issue that particularly concerns me, and which I am hopeful the Committee might investigate, is the importance of breast milk banks for mothers who are unable to provide enough of their own milk for their babies. Most other developed nations around the world have human milk banks. To my knowledge Australia has only 2 (Perth and the Gold Coast). I’m sure that through their investigations the Committee will be aware of the particular importance of human milk to the health of sick, premature and low birth-weight infants. Mothers of such infants are often unable to provide enough of their own milk for their babies. In these cases the babies should have access to donor human milk through milk banks.

Thank-you for taking the time to read my submission.

Yours Sincerely,

Alice Campbell