

**Submission no. 31**

AUTHORISED: *AMZ*

21/3/07

Original Message  
From: Sue Smith  
Sent: Sunday, 11 February 2007 11:17  
To: Cheryl  
Subject: *AMZ*

I am submitting this emailed letter as a mother of three breastfed children who are now adult and in wonderful health. The benefits of breast milk for the individual and for Australia's population is well recognised, especially since statistical analysis became available around 1880. Why are we still asking if breast milk is a healthy option for Australia's vulnerable children? The health benefits for me the mother of these children is also well documented and I have good health and am active at the age of 57 years.

Over the years the growth in the importers and manufacturers of breast milk substitutes has out-stripped the 1992 agreement made between the Federal Government and the then commercial companies. The situation in Australia of a weak manufacturers and importers agreement and the revitalisation of breastfeeding by public health promotion which is underpinned by the World Health Organisation Code of Marketing of Breast milk Substitutes (the WHO Code) provides Australia with a climate of guilt for other breastfeeding mothers and their families.

If help cannot be found for breastfeeding concerns and difficulties and breast milk substitutes are promoted and advertised then families make decisions for the health of their baby. What sort of message is Australia sending to families, on the one hand guilt if you don't breastfeeding and on the other that breastfeeding is only for the informed, which encourages a classed/socio-economic divide between populations. Why isn't breastfeeding promoted in primary/high schools as optimum health for future populations?

The Federal government scheme to increase birthrates (the Baby bonus) initiative has been successfully implemented through the taxation laws which has shown how enthusiastic the Federal government can be. This enthusiasm could be used to encourage breastfeeding. But encouraging and funding within Australian's fractured health arena that is between State and Federal governments is hampering the revitalisation of breastfeeding. For instance, (i) revitalisation of breastfeeding is hampered by the weak agreement with the marketing and manufacturers of breast milk substitutes (ii) that is what underpins state public health promotion. This situation requires enthusiastic leadership.

Federal governments need to tighten the 1992 agreement and follow the recommendations of the WHO Code if they want to revitalise breastfeeding continuation rates. Without this leadership from the top and a clear path of funding for breastfeeding which is invisible in the concept of 'nutrition' that is invisible in the Gross Domestic Product (unlike breast milk substitutes) thus requiring enthusiasm between state and federal governments. We cannot leave it to the other governments to fix the continuation rates and revitalise breastfeeding.

I would hope that the long term sustainability of Australia's health system will benefit if resources such as beds and wo/man power in the form of trained staff are tuned instead into acute care for Australia's ageing population. Breastfeeding concerns of families have been for years been able to be helped through volunteer associations. I would think that supporting breastfeeding volunteer associations (as set out in the WHO Code) would free up a cash strapped health system.

Sue Smith