

January 17, 2007

Dear Members of the House of Representatives,

Firstly, thank you for holding an inquiry into breastfeeding. It's a very important issue desperately needing addressing. My name is Stacey Revie and I have two beautiful girls.

I'm not an important person in the health sector, nor am I qualified to offer information on the sustainability of the health system in regards to breastfeeding, but I am a Mum and I am breastfeeding, which is by far the most challenging and important role I will ever hold.

I wish to address the terms of reference relating firstly to 'initiatives to encourage breastfeeding' and then 'examine the effectiveness of current measures to promote breastfeeding'.

#### **Initiatives to Encourage Breastfeeding**

My breastfeeding experience with my first child was a very rocky road, but not an uncommon one. I had troubles with my baby attaching from the beginning and so stayed in a private hospital for 5 days to try and get it sorted out. I was sent home following an unsustainable feeding regime using feeding aids and intermittently expressing. I went on to have troubles with engorgement, cracked and bleeding nipples, nipple thrush and finally thrush in my milk ducts. Each time I attached my baby to the breast, I cried and curled my toes in pain and tried desperately to get it all right. Despite my strong desire to continue breastfeeding I could no longer withstand the pain. Due to my commitment to breastfeeding, I then expressed full-time until my baby was 6 months old and able to start on solids. My second baby (who is 5 months old) and I are still having a lovely breastfeeding relationship. Experience, information, encouragement and support have made a monumental difference.

I tell you these details for the simple reason that I think with better health initiatives and support of the breastfeeding mother, Australian women will breastfeed their babies for longer and you will have made a difference to the overall health of the population. Following, are my recommendations for initiatives to encourage breastfeeding.

- Free breastfeeding education classes (from the ABA) to provide accurate and up to date information regarding the realities of breastfeeding and to introduce parents-to-be to a support network if they want to access it later.
- Positive information for women and their partners that breastfeeding does work and that many myths abound regarding why babies should be given an alternative to breastmilk. Knowledge and confidence in breastfeeding has made my second breastfeeding experience a successful one.
- Very early intervention with a Lactation Consultant when problems arise prior to discharge from hospital.

- A clear plan of action for mothers on discharge on what resources to access if trouble arises/continues with breastfeeding.
- **ACCESS TO A LACTATION CONSULTANT** free of charge, for a generous amount of time and in their own home, for mothers until their baby is 6 months old. I cannot urge you strongly enough that without access to free, qualified, experienced lactation consultants, women who are in need of urgent assistance with breastfeeding will continue to turn to a substitute through pure lack of support. If you want to encourage breastfeeding in the lower end of the socio-economic population, I believe this service has to be free.
- Access to a national ABA Breastfeeding Hotline number. I have accessed this number many times, often after hours when I was at my wits end. If this number had been charged at long-distance rates, I would certainly have hesitated and would have been at risk of looking for a breastfeeding substitute.
- Positive national advertising to educate the wider community of the benefits of extending their breastfeeding relationship. A large population of grandparents needs to know the positives of breastfeeding in order to support their adult children and the wider community with breastfeeding their children. The negative comments I have heard about breastfeeding are usually relating to babies older than a few months or that artificial substitutes are just as good. The comments come from pure ignorance about the benefits of extending breastfeeding.
- Establishment and ongoing financial support for Human Milk Banks. Providing donated human breastmilk instead of a substitute to particularly pre-term babies could potentially be a huge cost saving to the health system.
- Education of health professionals to provide information and advice supporting breastfeeding. For example, I rang a Queensland Health number 3 days ago to enquire about helping my nearly 6 month old baby to sleep through the night. Despite my clear statement that I wanted to continue to exclusively breastfeed until she was 6 months old, the health care professional suggested introducing an artificial substitute! When a Mother is looking for advice and support when she's tired and run down, all her good intentions are squashed when a health care provider advises to introduce an 'easy fix' with artificial substitutes. In this case I increased my supply naturally by resting more and expressing after feeds. My baby slept through the night 3 days later, and has ever since.

### **Examine the Effectiveness of Current Measures to Promote Breastfeeding**

The temptation to use breastfeeding substitutes before your baby is 6 months old is amazing. The lure of your baby 'sleeping through', or someone else being able to feed your child so you can have some much needed time out, is all so appealing. To promote breastfeeding and to sway the population in it's favour, the benefits have to be so factual and overwhelming that they will trump any lures. Of course, the benefits of breastfeeding are both, but who is aware of it? In my experience with the health system, breastfeeding was promoted in a minor way through the antenatal

classes – focusing primarily on the Mum-to-be. My suggestions regarding the promotion of breastfeeding are as follows -

- Promotion of breastfeeding needs to address the wider community. If mothers feel supported by an informed wider community, I feel sure that breastfeeding rates will rise. I think the promotion of breastfeeding at the moment is weak. The exception to this would be the recent bus shelter advertisements in Brisbane which were a welcome positive promotion of breastfeeding
- I think that the national body supporting breastfeeding, the ABA, can only promote breastfeeding on a limited scale, as it is not funded by the government.
- Breastfeeding support and promotion (for example the drop-in centre at Alderly, Queensland) are only open limited hours, clearly leaving a gap for struggling parents. At the time of writing this, the wait for an appointment to see a child health nurse in Brisbane is a greater than 3 weeks. I do not believe we can rely on this service to support troubled breastfeeding.

In summary, your inquiry is vital. Major changes to breastfeeding promotion and support are urgently needed if we are to meet Australia's objectives with regard to increased breastfeeding rates. I have made some simple and some more complex suggestions for improvements which would have directly influenced my situation when making decisions regarding continuing to breastfeed.

I hope you have found some or all of this letter useful and very much look forward to your recommendations.

Regards

Stacey Revie  
(Mum to Lily – just turned 2, and Emma – about to reach 6 months)