

Submission to the Federal Inquiry into breastfeeding in Australia.

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Introduction

My name is Penelope Ellis; I represent the growing number of professional women having children later in life. I turn 35 this May. My husband and I have a daughter, Madeleine who turned one in January. I was born and raised in country South Australia where I received education to Tertiary level as a Registered Nurse. I commenced my working career in Central Australia with the Aboriginal people. I returned to Adelaide to complete post graduate studies in nursing, before changing vocation and completing a Bachelor of Dental Surgery. I am currently a mother and a Dentist working in private family practice in Adelaide and this submission reflects *my* experience of breastfeeding and a perceived culture of ignorance that exists in the general public surrounding breastfeeding.

This submission hopes to bring the following points to the attention of the reader;

Women need to be better educated about the guidelines and recommendations on breastfeeding duration.

We need a national health campaign promoting these guidelines.

Ensure milk substitutes carry large warnings about the overwhelming evidence and benefit to the baby of breastfeeding and only start using milk substitutes on the advice of a health professional.

Paid maternity leave will enable women to breastfeed their children longer.

My experience of breastfeeding.

The early days

Breastfeeding is about confidence. At first, you don't know what you are doing, it is uncomfortable if the baby is not attaching well, and you are tired and feel under relentless pressure to provide for the baby. The baby does not feed to a 'schedule' and from the beginning people give advice that may not be in the best interests of the baby but mainly to the mother. Parenting is about sacrifice and any other parent who thinks that a child will not change their life is not adequately prepared.

In the first 4 weeks I felt pressure because weight gain of our daughter was 'modest' according to the growth charts developed in the 1970's when majority of babies were fed milk substitutes. I was told repeatedly by health professionals that complementary feeding was necessary.

The turning point

How a General Practitioner, (trained as a lactation consultant), presented a balanced view about the pros and cons of giving our daughter milk substitutes, told me of the health benefits of breastfeeding to at least 12 months and how a fabulous group of fellow breast feeding mothers in the North Eastern suburbs of Adelaide helped to dispel common myths and gave continued support and confidence.

The continuing success.

Coming up to 14 months of breastfeeding and going strong

Women need to be better educated about the guidelines and recommendations on breastfeeding duration.

There is ample discussion surrounding the optimal duration a mother should breastfeed her child. The World Health Organization (WHO) recommends exclusive breastfeeding (the consumption of breast milk only) for 6 months with the introduction of complementary foods (milk substitutes and solids), and continued breastfeeding up to 2 years of age. In Australia, the National Health and Medical Research Council (NHMRC) recommend exclusive breastfeeding to around 6 months, and breastfeeding with appropriate complementary foods is encouraged up to at least 12 months of age.

Having worked in Central Australia with indigenous mothers one can appreciate first hand the overwhelming benefit of breastfeeding especially in underdeveloped communities where sanitation is a large issue. To understand the effect of the conditions in these communities, a whole paediatric ward in The Alice Springs hospital was dedicated to Infectious children with majority of them hospitalised for Gastrointestinal illness. Being able to boil water, clean and sterilize bottles or keep milk substitutes refrigerated are basic needs not always available to indigenous women in underdeveloped communities in Australia, and yet the marketing of milk substitutes in this area went on unabated. It is little wonder that the WHO recommend continued breastfeeding up to two years of age, as this simple recommendation in care of infants in underdeveloped communities can reduce the incidence of gastrointestinal illness.

Ensure milk substitutes carry clear warnings about the overwhelming evidence and benefit to the baby of continued breastfeeding and to only start using milk substitutes on the advice of a health professional.

It was remarked frequently at Child and Youth Health mothers group, "Are you **still** breastfeeding" and this was at 12 months.

These mothers saw 12 months as an abnormally long time to breastfeed. Don't you want to get your body back, don't you want to be able to eat and drink what you like? The overwhelming suggestion was that our daughter was being an inconvenience to my lifestyle. This represents a common misconception in that new mothers are only aware of the benefits of breastfeeding their **newborns**, what they fail to understand is that continued breastfeeding is not only recommended by the NHMRC to 12 months but has obvious health benefits to the child and, with the right support and attitude, can be easily achieved. Unfortunately we live in a society that shuns breastfeeding the older child; however few people are actually aware of these recommendations. These are not views presented by the pro breastfeeding groups like the Australian Breastfeeding Association, but The National Health and Medical Research Council and World Health Organization. We need a public health campaign targeted at the general public that is so the message is heard by people other than mothers (friends, relatives, employers) to change negative or uneducated attitudes. The child should come first and either when she decides she has had enough or when the health authorities on infant nutrition indicate to me it's enough, then surely these are the best indicators to stop.

Results from the 1995 and 2001 National Health Surveys reveal that the proportion of children receiving any breast milk declines steadily with age. In 2001, by age six months around half of all children were being breastfed. This had declined by half again with only 23% of children being breastfed by 12 months. If you presented the NHMRC and WHO guidelines to mothers and reiterated the health benefits not only to their child but also to themselves of continued breastfeeding, one would hope to see these rates increase.

We need a national health campaign promoting the NHMRC guidelines.

In order to bridge this gulf of knowledge there needs to be a public health campaign. This campaign should not only make the public aware of the benefits of breastfeeding but also the importance of breastfeeding and the risks associated with premature weaning. The campaign should be national and should present a clear message about breastfeeding to at least 12 months. In the words of the rock band TISM "You and me baby ain't nothing but mammals, so let's do it like they do on the discovery channel!"

Paid maternity leave will enable women to breastfeed their children longer.

Times change and we now see greater numbers of women returning to work within the first 12 months of their baby's lives. Many of them observe "it was just easier to bottle feed once I was back at work", with many stopping breastfeeding deliberately prior to recommencing work. Had these women been given paid maternity leave, (even three months), it may have greatly affected the amount of time they spent at home with their child prior to recommencing paid employment. It may even have affected the number of hours they then recommenced at work.

Paid maternity leave helps to enable choice and also makes it easier for women to continue to breastfeed. Many mothers do not want to go to work while their babies are young and that instead of providing funding to childcare the government might better enhance the health, economic status and wellbeing of society by providing universal paid maternity leave. This will make it easier for mothers to keep breastfeeding. Employers also need to be educated as to the costs to them of not supporting breastfeeding in high absenteeism in parents of children who attend childcare and children fed milk substitutes.

To conclude, **there is absolutely no disadvantage to the child of continued breastfeeding** and overwhelming evidence surrounding the advantages from financial and health perspectives.

Why is it then that so few children are being breastfed to 12 months? The Australian government needs to commit to a National campaign to reverse old attitudes surrounding breastfeeding and ensuring the ongoing health of our youngest Australians.