

Committee Secretary  
Standing Committee on Health and Ageing  
House of Representatives  
Parliament House  
Canberra  
ACT 2600  
24<sup>th</sup> February 2007

In this submission I am not going to expound the many benefits of supporting breastfeeding in the Australian community as these have been well documented in numerous reports over many years.

This submission focuses primarily on the Terms of Reference *item d.* initiatives to encourage breastfeeding.

Successive governments and health departments have given voice to the importance of breastfeeding and set various targets for breastfeeding rates. Little action has happened and none of the targets have been achieved.

Some of the many reasons these targets have not been achieved and some possible solutions are listed below. The order does not reflect the importance of each point. *However, I'd put my money on the first four.*

**Problem:** *Advertising pressures on parents and health care workers from artificial baby milk companies.*

**Solution:** Adoption at a national level of all of the recommendations of the WHO International Code of Marketing of Breastmilk Substitutes.

Strengthening of the *Marketing in Australia of Infant Formula: Manufacturers and Importers Agreement (MAIF)* to bring it in line with the recommendations of the WHO Code.

**Problem:** *Mothers receiving conflicting information and care in hospital and especially in neonatal intensive care units.*

**Solution:** Education and funding for all hospitals to achieve Baby Friendly Hospital accreditation.

Employment of International Board Certified Lactation Consultants at all hospitals.

**Problem:** *Poor views in the community of breastfeeding in public and of continued breastfeeding of children beyond 12 months of age.*

**Solution:** Public awareness programs to promote the acceptance anywhere anytime of breastfeeding to 2 years as the norm for all children.

**Problem:** *Lack of knowledge in the community of the risks of not breastfeeding, and thus the risks to the physical and emotional health of children and later adults.*

**Solution:** All health care workers to inform parents of the risks of not breastfeeding.

National advertising campaigns similar to the antismoking campaign to educate the whole community about the risks associated with not breastfeeding.

**Problem:** *Early weaning due to poor information or lack of support.*

**Solution:** National breastfeeding policy and compulsory breastfeeding education for all health care workers to reduce the problems of conflicting advice which confuse and disempower women.

Establishment of free breastfeeding clinics in all regional centres.

Funding for the Australian Breastfeeding Association to promote breastfeeding and support mothers.

Funding for "1800" number Breastfeeding Helplines in each state which would be operated by Australian Breastfeeding Association counsellors.

**Problem:** *Family economics (especially the cost of mortgages) forcing women back into the workforce earlier than they would choose to, with childcare issues making it difficult to continue breastfeeding.*

**Solution:** Paid lactation leave for all women as occurs in Scandinavian countries.

Work-based childcare facilities.

Adoption and promotion of practices from the Australian Breastfeeding Association's *Breastfeeding Friendly Workplace Accreditation*.

**Problem:** *Childcare facilities which lack the knowledge and/or skills to care for breastfed babies.*

**Solution:** Knowledge of care of breastfed babies to be an essential criteria for accreditation of all childcare facilities and child care workers.

**Problem:** *High cost for mothers to see International Board Certified Lactation Consultants (IBCLCs) for help with breastfeeding.*

**Solution:** Give medicare provider numbers to practicing IBCLCs and private health insurance rebates.

**Problem:** *Pictures of baby bottles being used as a universal symbol to represent babies on signs, products and written articles, giving a subliminal message that babies need bottles.*

**Solution:** Adopt a different symbol for babies (perhaps a baby or parent and baby).  
Follow the WHO Code so that pictures of bottles can not be used in advertising.  
Design a new range of baby cards.  
Manufacture dolls that don't come with bottles.

**Problem:** *Not all babies have equal access to breastmilk.*

**Solution:** Establishment of Milk Banks to provide milk to babies who cannot receive milk from their own mothers for a variety of reasons.

**Problem:** *Lack of funding for research into the science and best practice management of breastfeeding.*

**Solution:** Provide more funding for lactation research.

**Problem:** *No national standard for the collection of breastfeeding statistics.*

**Solution:** Adoption of standard definitions for the terms *exclusive / partial / ever breastfed*.

**Problem:** *Research has shown the importance of the father in supporting breastfeeding, yet fathers receive little education about breastfeeding.*

**Solution:** A public education program for fathers.

**Problem:** *Teenage mums with little knowledge of breastfeeding.*

**Solution:** Include breastfeeding in the health and nutrition aspects of school curricula.

Current health concerns include the increasing incidence of heart disease, diabetes, and obesity with subsequent health costs to the community. Much research shows that breastfeeding is protective against all of these diseases.

Improving breastfeeding outcomes is an equity issue. Groups with the lowest rates of breastfeeding are from indigenous, multicultural and disadvantaged backgrounds. It is clearly unfair that the children born into these groups have poorer health outcomes as children and as adults.

I commend the national government for this Inquiry into Breastfeeding, I sincerely hope that breastfeeding strategies *will* be funded, because the long term costs to the whole community of not breastfeeding are huge.

Yours sincerely,

**Ros Fleetwood**

Mother to 3 beautiful healthy and intelligent breastfed children (18, 16 & 12 years old)

Australian Breastfeeding Association Counsellor (13 years)

International Board Certified Lactation Consultant (5 years)

Community Representative on the Northern Rivers Area Health Service Maternity Services Review, May 2000.