

As a breastfeeding mother, I'd like to take the opportunity to communicate my experiences of breastfeeding and some ways I believe that breastfeeding can be better supported in the Australian health care system.

Antenatal breastfeeding preparation

When I was pregnant I attended the public hospital's antenatal class. I remember very little about the breastfeeding information that we received, most of it focused on the birth. The best advice I received was from my local GP, who breastfed all her 3 children. She gave me a rundown on attaching and what to expect, and also advised me to come and see her after the baby was born if I was struggling.

When my baby was born I struggled with getting her to attach. It hurt and didn't feel right, and the advice I received from hospital staff was conflicting – each midwife would say something different. I did not find the lactation consultant at the hospital very helpful, when I asked her about the attachment she seemed too busy to take the time to really help me and answer my questions.

Support to breastfeed in the early stages

When I returned home with my new baby I had cracked nipples and also suffered mastitis when she was 1 week old. I was very fortunate to have a lactation consultant as a friend who I could ring and who also came over to help me get things sorted. It took about 4 weeks to really get things established, and those 4 weeks were very tough, and many times I felt like giving up. I saw my GP when my baby was 2 weeks old to check that the attachment was OK, and she was incredibly supportive. I had a long appointment with her and she took the time to help me and reassure me that I was doing great. However, from talking to others I have realised that this is very rare and I was extremely fortunate to have this support. Aside from her, I didn't know who else to turn to, as I didn't really know many people who had successfully breastfed their babies. It was at this stage that I discovered the ABA website, which helped immensely. I used the forum to read other people's experiences and post questions myself. This greatly encouraged me to keep persevering with breastfeeding. Since then I have joined the ABA and now attend group meetings, which has also encouraged me to keep on breastfeeding.

In the early months I attended a new mum's class (for mums with babies up to 12 weeks of age) ran by my local early childhood centre. This was just a discussion group with a nurse. One nurse was very helpful, but another one did not give breastfeeding information that was based on current research. I was told that my newborn shouldn't need to feed again before 3 hours has passed. This threw my confidence until I checked with my GP and the ABA, who reassured me that it was perfectly normal for my baby to feed frequently.

The importance of breastfeeding

Initially, I knew that breastfeeding was important for my baby because of the information given to me by my GP. I gave birth at the birth centre of my local hospital and my midwife also encouraged me to breastfeed. I did a lot of reading throughout my pregnancy and from that also it was clear that breastfeeding was the best thing for both my baby and me. After I had my baby and begin to receive conflicting advice from family and some health professionals, I did even more reading to understand

more about breastfeeding, how it works, and the importance of it. I am currently studying for my PhD so I am aware that reading and research comes naturally to me, however most of the population are not so inclined that way.

Breastfeeding support from health professionals

In the hospital antenatally I found the midwives (I saw mostly one) extremely supportive of breastfeeding. Postnatally the midwives were good, but the advice often conflicted in how the baby should be attaching, and they were often too busy to take much time to attend to me.

As previously mentioned, my GP was fantastic, having had breastfed herself. Another person close to me is also a GP (however not my personal one) and failed at breastfeeding after trying to 4hourly schedule her newborn, but believed that she didn't have enough milk. A simple understanding of how breastmilk is made i.e. supply and demand may have helped her to breastfeed successfully.

The baby clinic nurses I encountered in the early stages were varied. One was quite knowledgeable and helpful, however she left the centre shortly after I started attending. The other one was very controlling and did not provide current breastfeeding information (that a newborn shouldn't be feeding more than 3 hourly).

It astounds me that GP's and baby clinic nurses are not trained in breastfeeding, as most new parents will visit either for help as a first point of reference.

In relation to introducing solids I found that information varied greatly. Current research indicates that solids should not be introduced before 6 months, however on several baby food jars and baby feeding utensils it is stated that it is for babies from 4 months onwards!

Barriers to breastfeeding

The barriers to breastfeeding I have encountered are due largely to two factors: underlying cultural pressure and incorrect information. As mentioned above, I have been fortunate to have people around me that are knowledgeable about breastfeeding so I have been able to persevere however I know several woman that have been forced to wean prematurely due to incorrect information.

The underlying cultural pressure is a lot more subtle and also much more difficult to change. I have felt it mostly in the plethora of sleep training books available, and the implicit holy grail of parenting, i.e. if your baby is not sleeping through the night by 3-4 months of age, you have failed as a parent. I have read several of the most popular ones, and the breastfeeding information in these is inaccurate, and in many cases would lead to a mother unable to breastfeed as it would interfere with her milk supply, or feeling that she has to stop breastfeeding as it interferes with the child sleeping for longer stretches.

The fact is, breastfed babies do tend to wake more often at nights for feeds. Sleep is a big issue for new mums, the early months of parenting are draining and tough. I heard recently that in the Netherlands the mother receives 1 month of paid housework help

when she has a new baby. I am convinced that this would make a dramatic difference to new mums being able to rest and establish breastfeeding. Perhaps also better paternity leave entitlements could be explored.

While sustaining breastfeeding past one year I have realised that so many people are completely ignorant of breastfeeding, in particular the health benefits. I still feed in public but often wonder to myself what do others think, should I do this here, and that is not pressure I should have to feel as a breastfeeding mother.

Initiatives to support future mums in breastfeeding

I think that for expectant parents it is really important that they are aware of the benefits of breastfeeding so they can make an informed choice. They should have the opportunity to attend a breastfeeding class so as to minimise difficulties with breastfeeding early on.

For new mums in the hospital it is critical that health professionals are available to help them establish breastfeeding. There is a severe shortage of lactation consultants available and to see one privately is quite expensive. This should be funded under Medicare, or at the very least subsidised.

In the early weeks and months at home it is of crucial importance that mothers are supported to establish breastfeeding.

All health professionals that may encounter breastfeeding women should be trained in the current research on breastfeeding.

I think that to support breastfeeding the employment system should provide women with the time and space needed to express should they choose to continue breastfeeding. They should be flexible in work arrangements, for example allowing women to work from home and flexible work hours.

The risks of not breastfeeding

Who talks about the risks of not breastfeeding? Everyone is too scared to. All I heard was 'breast is best' but people are often too scared to talk about the risks of formula feeding for fear of making mothers feel guilty. I believe mothers are created to breastfeed, and if for whatever reason it does not work out, it is perfectly natural for them to feel disappointed and perhaps even guilty, yet these feelings are often swept under the carpet.

It wasn't until I came across this article that I really became aware of the risks of formula feeding

http://www.theecologist.org/archive_detail.asp?content_id=586

I believe every mother should have access to this information, and it is something that should be discussed between her and the health care worker dealing with her antenatally.

Concerns regarding the marketing of breast milk substitutes

It concerns me that 'formula' (which I will refer to as Artificial Breast Milk – ABM) is so readily available and is promoted as being just as good for your baby. As a breastfeeding mum the message I get from the marketing of ABM is that breastfeeding is a waste of time, interferes with your social life and ABM is just as good for your baby (fortunately I chose not to listen to this message).

I believe that formula should be known as ABM – formula implies that it is scientific and therefore good and better and more improved, whereas ABM says it exactly how it is, it is artificial breast milk – perhaps close to, but not the real stuff.

The advertising of ABM for children above 1 year (in particular a TV ad where a paediatrician is promoting a certain ABM) implies that breast milk is inferior and that a toddler should be given ABM to grow strong and healthy. The problem with this sort of advertising is the lines become blurred – who watching this isn't going to think that any ABM is going to make their child grow strong and healthy?

In order to be informed, I think that before their baby is born all parents should know of the longer term health risks to their baby.

I would summarise my main personal recommendations to support breastfeeding mothers as these:

1. All pregnant mothers should attend a breastfeeding class run by the ABA, funded by the government.
2. More funding should be given towards the training of more lactation consultants, and the consultation funded by Medicare, or at the very least substantially subsidised.
3. New mothers should be supported in the first month of parenting when the establishment of breastfeeding is especially crucial, either in the form of paid house help, or better paternity leave entitlements.
4. Every early childhood centre should work closely with the ABA and every new mum should have the opportunity to attend a breastfeeding information session at the early childhood centre, run by the ABA.
5. All health professionals dealing with breastfeeding mothers should be trained in the current research on breastfeeding.
6. Parenting books detailing any breastfeeding information should be carefully screened to ensure that the information given is up to date with publication being refused if it is not.
7. All baby food should be labelled as suitable for babies 6 months or older.

Thank you for this opportunity.