

051026 0700 Letter & Submission Work & Family - Bishop Inquiry

Submission by Dr Peter S. Cook
to the

STANDING COMMITTEE ON FAMILY AND HUMAN SERVICES

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Terms of Reference: Balancing Work and Family

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"The House of Representatives Standing Committee on Family and Human Services has reviewed the 2003-2004 Annual Report of the Department of Family and Community Services and resolved to conduct an inquiry. The Committee shall inquire into and report on how the Australian Government can better help families balance their work and family responsibilities. The Committee is particularly interested in:

- 1 the financial, career and social disincentives to starting families;**
- 2 making it easier for parents who so wish to return to the paid workforce; and**
- 3 the impact of taxation and other matters on families in the choices they make in balancing work and family life."**

Adopted by the Committee 9 February 2005

Submission

Introduction

A personal note about the author is in Appendix 8.

The matters below relate mainly to possibilities for government action under the term of reference no 3 – "The impact of taxation and other matters on families in the choices they make in balancing work and family life". But where do the needs of babies and children come in? Family life usually includes babies and children, but are they and their needs to be omitted from the discussion? Without them, balancing work and family life is hardly a problem needing a big Inquiry. This leads to the continuing issue of childcare and the needs of babies and little children. So I will pose a question: "In this search for 'balance', what account do we take of the particular needs of babies, infants and toddlers? Do they need to feel loved by their carers?" I think that for optimum development they do.

But it cannot be a job requirement of a nanny or childcare worker job that she *love* the children she cares for. In 1988 Karl Zinsmeister wrote: "the deepest problem with paid child-rearing is that someone is being asked to do for money what very few of us are able to do for any reason other than love. Competent baby-sitting, that is not so hard to hire. What will always be difficult is finding people who feel such affinity with the child that they will go out of their way to do the tiny things that make children thrive..." (Brave new world: how day-care harms children. *Policy Review*, Spring 1988: Washington, DC. - summarized in *The Readers Digest* and cited in my book, p.149).

In 1996-7 I published a book *Early Child Care – Infants and Nations at Risk*, with a foreword by Professor Jay Belsky. Chapter 1 covers "The Species-Normal Experience for Human Infants – a biological and cross-cultural perspective." See http://www.naturalchild.org/peter_cook/ecc_ch1.html

Chapter 2 covers "Meeting the optimum needs of infants and their mothers." These are core topics in balancing the worlds of work and family. Many issues arising out of non-familial care of infants are covered in the book's succeeding chapters. There is incessant clamour for more ever more funds for child care, but half-truths and ill-informed ideology abound in the common popular consideration of these topics. I will send a digital copy of my book to the Secretary of this Inquiry, so it can be available to anyone who wishes to see it. I own the copyright and it may be copied by anyone, with acknowledgement, provided that it is not already covered by someone else's copyright.

Appendix 7 offers the frontispiece to my book - *Creativity, Women and Parenting* by Jenny Cullen. She outlines how the dormant creativity of many adults can be awakened through imaginative interaction with their children. Parenting offers special opportunities for personal development where "you can become a creative artist, choreographing your own dance in partnership with your child." Life with young children provides continuous opportunities for identifying problems and solving them creatively, and the insight and

interpersonal skills for managing emotions and relationships which can be developed are increasingly valued in the workplace.

Theme: *We must learn to work with nature, not against it*

1 The roles of both parents to “balance work and family responsibilities”, may conveniently be recalled by “five P’s”, which need to be balanced: **playmate, partner, parent, protector, and provider**. The role of providing is the main one from which others (including governments) most seek to make profits. The pressure on parents today is heavily on providing, and this imbalance puts the other roles under strain, so that the non-material roles of parenting, especially mothering, are most at risk to suffer. Babies, infants and very young children are vulnerable to lifelong ill-effects from the consequences of this imbalance. In materialist societies this pressure is increased, as skilful advertising, especially of fast foods through television targeting children, has aggravated the ill-effects.

The short-life design of many manufactured goods helps to keep most people too busy - on a kind of rat-race treadmill - as described in my talk “**Wear-out products, prosperity and environmental degradation: effects on the economy, the consumer and the environment**”, which was broadcast by the Science Unit of the ABC as an Ockham’s Razor talk on Radio National, Dec 9, 1995. (Available on request from pcook@midcoast.com.au).

2 The importance of the very early years. For optimum national health and wellbeing it should be officially recognised that the first three years, and especially the first 2 years, of a child’s life are, for many reasons, uniquely special and important in human development, and offer an opportunity to aim to give all Australians a good start in life. This was prominently brought to wider attention by the 1999 Report to the Government of Ontario by Mc Cain and Mustard, *Reversing the Real Brain Drain - The Early Years Study*. The foundations of many physical and emotional disorders are believed to originate in the failure to meet the biologically-based physical and emotional needs of this period of development.

3 In parenting, mothering and fathering are different and not equal. Both are important, but in early infancy, mothering is (normally) far more significant. It should be officially and nationally recognised that healthy mothering, including breastfeeding whenever possible, is of special importance in laying the foundations of physical and mental health, personal development, and intelligence, both in childhood and throughout life, even into old age. (See Appendix 6: A note on Maternal and Equality Feminism).

i Breastfeeding: Mothers are normally the only ones who can best breastfeed a baby. There is ample evidence that we should recognize the unique health and economic contribution that women make to national wellbeing in giving their babies healthy early mothering and breastfeeding. There should be community recognition and support to mothers to fulfill this special role.

The Government can help by legislating for (and funding) adequate maternity leave. Mothers with babies do not normally “need” early institutional (long day) childcare. They need help and social and community support to care for their babies and infants, at the very least up to age two, and preferably to beyond age three. This should include help when they wish to resume their paid work and careers, when their children are at least 4 or 5 years of age, depending on other circumstances.

Retirement and superannuation provision should acknowledge the value of mothering and compensate for earning opportunities forgone to provide healthy parenting to their young children.

Three authoritative reports on breastfeeding document its importance, cite a mass of evidence, and make expert recommendations to governments and others. These reports by the Australian National Health and Medical Research Council, The American Academy of Pediatrics, the WHO/UNESCO, and also by the Australian Breastfeeding Association (launched in August 2004 by Health Minister, the Hon Tony Abbott) include calling for facilitation and support of breastfeeding through government policies, since this is in the long-term national interest and economically sound. I summarized some facts and recommendations from these reports in **Equal opportunity for babies: breastfeeding as a strategic priority**. *Byronchild* Sept 2005, also on http://www.naturalchild.org/peter_cook/equal_opportunity.html

Also outlined there is how Norway has provided a case study in showing that government initiatives can greatly increase breastfeeding rates and reduce the demand for expensive early institutional childcare.

Offered the choice of subsidy income for childcare with outside paid work, or the same funds for the care of their babies, most mothers opted to take the home-caring option, with breastfeeding. This was achieved through the policies of Dr Gro Brundtland as Prime Minister, before she went on from Norway to become a distinguished Director-General of the World Health Organization. (Alvarez L. Norway leads industrial nations back to breast-feeding. New York Times October 2, 2003.)

ii **Pedigree for successful mothering** The pedigree (through inevitable natural selection for survival) of mothers and fathers has selected them for quite different capacities and biology. All women (logically and undeniably) have a direct maternal pedigree of natural selection which is quite different from that of males, with biological and emotional differences consequent upon this. Whether you believe humans were created 6000 years ago, or accept a much longer biological selection pedigree, your direct maternal ancestors (i.e. your mother's mother's mother's mother and so on, all the way back) were, in general, all selected for success in pregnancy and giving birth to a live female child, who would in most cases be breastfed and carried for a prolonged period by the mother, and protected and nurtured well enough to grow up and do likewise. Many of their siblings have no present day survivors, so it follows that *all mothers today have an unbroken pedigree of biological success in being mothers – i.e. in mothering.*

Fathers have no such pedigree. Father's were selected for different attributes, but in view of the vulnerability of the human infant, because, among placental mammals, human babies are uniquely immature at birth (see next paragraph) there would likely be selection value in favour of those fathers who supported and protected the mothers of their offspring. Therefore, while mothers and fathers are both important, they are not, and were never, of "equal" significance in early parenting. It is an error with serious consequences to promote an ideological position which claims they are. We must learn to work with nature, not against it. (This is expanded in the first chapter of my book *Early Child Care – Infants and nations at risk* on http://www.naturalchild.org/peter_cook/ecc_ch1.html and also in *Simplified Parenting for Mental Health* http://www.naturalchild.org/peter_cook/simplified_parenting.htm)

Moreover it is valuable (for parenting education and healthy childrearing theory) to realize that *all these mothers, as baby girls, (and fathers as baby boys) "succeeded" in so pleasuring and "rewarding" their mothers (and often their fathers) that they were protected and nurtured well-enough to grow up and do likewise.* Departures from this norm are likely to be related to the effects of a disturbed environment.

iii **Attachment.** The phenomenon of early attachment in infancy and its importance should be recognized and respected. The survival of all mammals has depended on the success of the mother and her young in staying together during the breastfeeding period. Separation from the mother of an infant who has developed attachment to her is normally followed by a sequence of distress reactions, which can lead to psychopathology. Because humans have developed large brains, they must be born at a very early stage of development, and the brain develops very rapidly in the early postpartum years, especially the first year. Therefore the period of dependency and attachment is very long, compared with that of some other mammals. (I have outlined this in "**Attachment and separation: what everyone should know.**" http://www.naturalchild.org/peter_cook/attachment.html)

4 What should be done?

i **We need parent-friendly options.**

In the sequel to my 1999 article "Rethinking the early child care agenda" in *The Medical Journal of Australia*, I published an outline of what should be done. It was an Opinion article in *The Australian* March 24, 1999, and may be seen on http://www.naturalchild.org/peter_cook/home_truths.html It reads:

Home truths absent in early childcare debate: We need parent-friendly options

More subsidised, universally available, affordable, high quality, professional childcare is often advocated as a way of advancing the interests of women.

Yet early long daycare is not in the best interests of very young children and their families. Evidence increasingly suggests that this childcare agenda is misconceived, because it:

- Is unrealistic, as it is often unaffordable and unachievable.
- Overlooks accumulating evidence of risks of undesirable outcomes.
- Is contrary to much expert opinion about what is likely to be best for very young children and is contrary to the desire of many working mothers to care for their own young children if they could afford to;

- Relies partly on the now-discredited ideology of cultural determinism, which denied the relevance of biology to human behaviour, arguing that mothers can be largely replaced by trained carers.
- Makes adequate breastfeeding difficult or impossible.

A rethink is needed.

We each have a pedigree of maternal ancestors who, overall, were selected, over thousands of generations, for their success in all aspects of healthy mothering: pregnancy, childbirth, breastfeeding, attachment, and the protecting and rearing of baby girls who grew up to do likewise, not in splendid isolation, but in social groups with others having an enduring interest in the child.

The question should not be "how can everybody have affordable, quality childcare?" It should be: "how, in our de-tribalised societies, can we best help and support parents who wish to do a mutually satisfying job of mothering and fathering their infants and young children without jeopardising their own futures?"

If some of the effort devoted to seeking high-quality childcare were used creatively to support high quality parenting, we would be nearer to our real goal of enhancing the well-being of mothers, young children and society.

We could recognise that mothers with infants and young children are an essential, vulnerable group, unique in society, having special needs for a few short years. Infancy cannot be re-run later.

Governments can encourage community appreciation of home-caring parents for their parenting and other contributions to society. In the gross domestic product, we could show the multi-billion-dollar value of mothers' work and mothering at home.

Parents should be free to make informed decisions, but economic justice for the family is a pre-condition for real choice. The next advance in women's rights could be affirmative action in favour of mothers of young children, to give freedom of choice.

If we are to pay for the care of children, why not pay mothers to do it?

We need family incomes policies offering equal opportunity for home-caring parents, especially mothers of children under three. Economic policies have been unfavorable to these families, compared with two-income families using subsidised childcare.

Governments could be neutral, offering the available money fairly to all parents, to care for their very young children as they choose, especially while children are under five. Mothers also need provision for superannuation, if the economic sacrifices of early childrearing are not to become a lifelong handicap.

Mothers' needs for relief, help and company must be addressed. Programs of voluntary visiting of new mothers can offer many benefits.

Some childcare centres could become like Swedish "open pre-schools", open to parents, and providing companionship, educational opportunities and facilities for children and their parents.

We need parenting-friendly policy options put before Governments and decision-makers, by the bureaucracy, the Opposition, academe, and the Institute of Family Studies.

Until recently, one ideologically-based view held a monopoly of counsel. It is an unsustainable way of helping women, because it deprives the next generation of women of mothering while they are infants, and also deprives the little boys who will be their partners, and the fathers of their children. Preparation for marriage begins at birth.

This is not "returning to the 1950s". Many problems were inherent in the social isolation and child-rearing ideas of those days. Today we can help young people understand how to achieve more satisfying parent-child relationships than were common in the past.

Preferably, the approach to these issues should be bipartisan, rather than having parties compete in spending on childcare, while neglecting the importance of healthy mothering, and the developmental needs of infants and their families.

ii An earlier and fuller presentation was in my book *Early Child Care Infants and Nations at Risk*, where Chapter 10 is entitled "**What should be done? : suggestions for meeting the needs of infants and parents.**" See Appendices. The whole book is available in digital form to the Committee as herewith sent by me. I own the copyright, and it may be freely reproduced, with acknowledgement, provided it is not already covered by someone else's copyright. It is still in print in paperback.

iii Some updating material was published in *The Australian* as Cook PS. **Make mothers matter: Childcare is just that – not parenting.** *The Australian* July 24, 2002, Sydney. Available on the archives of the website of *The Australian* www.theaustralian.com.au and as "Mothering Matters" on http://www.naturalchild.org/peter_cook/mothering_matters.html (Included here in Appendix 3.)

iv **Breastfeeding** In the four reports cited, there are authoritative recommendations and references to what should be done in relation to national policies on breastfeeding. These Reports are summarized in my article Cook PS. 2005. **Equal opportunity for babies: breastfeeding as a strategic priority.** *Byronchild* Sept 2005. http://www.naturalchild.org/peter_cook/equal_opportunity.html (presented here in Appendix 1) and are:

- National Health and Medical Research Council. Dietary Guidelines for Children and Adolescents in Australia; incorporating the Infant Feeding Guidelines for Health Workers. The National Health and Medical Research Council. 2003. Canberra. <http://www.nhmrc.gov.au/publications/files/n34.pdf>
- American Academy of Pediatrics. Policy Statement. Breastfeeding and the use of human milk. *Pediatrics* 2005;115:496-506. (216 references). <http://aappolicy.aappublications.org/cgi/reprint/pediatrics;115/2/496.pdf>
- WHO/UNICEF. On the protection, promotion and support of breastfeeding. Innocenti Declaration. Florence, Italy, 1990, 1 August. http://www.unicef.org/nutrition/index_24807.html and <http://www.waba.org.br/inno.htm>
- Australian Breastfeeding Association. Australian Breastfeeding Leadership Plan, 2004. PO Box 4000, Glen Iris, Victoria, 3146. <http://www.breastfeeding.asn.au/advocacy/030804abastrategy.pdf>

These document that breastfeeding improves children's intellectual, mental and physical health prospects in childhood and throughout life. It promotes bonding between mother and baby - a foundation for lifetime emotional well-being; it reduces risks of a wide range of infectious diseases, asthma, overweight, obesity, diabetes, heart disease, arthritis, and some malignancies. For mothers it promotes recovery from childbirth, and reduces some cancer risks and later osteoporosis.

A more honest and valid way of expressing all this is to say that formula feeding of infants, without breastfeeding, raises the risks of all these disorders. The promotion of such feeding has been illegal in India since 1992, following the WHO and UNICEF 1990 *Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding*. They urged that "for optimal maternal and child health and nutrition, **all women should be enabled to practise exclusive breastfeeding and all infants should be fed exclusively on breast milk from birth to 4-6 months of age. Thereafter, children should continue to be breastfed, while receiving appropriate and adequate complementary foods, for up to two years of age or beyond. This child-feeding ideal is to be achieved by creating an appropriate environment of awareness and support so that women can breastfeed in this manner.**" They further urged that "**All governments should develop national breastfeeding policies and set appropriate national targets ...**"

The American Academy of Pediatrics, in their 2005 Statement *Breastfeeding and the Use of Human Milk*, documents "diverse and compelling advantages for infants, mothers, families, and society from breastfeeding and use of human milk for infant feeding." They say: "These advantages include health, nutritional, immunological, developmental, psychological, social, economic and environmental benefits". They urge exclusive breastfeeding for 6 months and then, while adding suitable complementary foods, continuing for "at least the first year and beyond for as long as mutually desired by mother and child".

Likewise, the Australian National Health and Medical Research Council, in their 2003 Dietary Guidelines say: "The total value of breastfeeding to the community makes it one of the most effective prevention measures available and well worth the support of the entire community ... it will contribute to the health of all

Australians from birth." As a "best-buy" to reduce the obesity epidemic, the National Obesity Task Force (2004) advised increasing breastfeeding. A program to achieve this is outlined in the Australian Breastfeeding Association's Leadership Plan.

So there should be full government support at both Federal and State levels for the Australian Breastfeeding Association. Australian Breastfeeding Leadership Plan, 2004.

Breastfeeding is not just a matter of supplying better milk. In their 1999 Report to the Government of Ontario, *Reversing the Real Brain Drain: the Early Years Study*, McCain and Mustard describe the importance of the *experience* of breastfeeding, with its opportunities for skin-to-skin touch and smell stimulation. When a baby is being breastfed, cuddled and rocked in his mother's arms as she smiles and coos at him, his brain is busily receiving signals through the sensations of warmth, touch, taste, sight, sound and smell. In the first three years, when the brain's pathways are being "wired", these experiences help to develop structures and functions of the brain in ways that will set the base for lifelong effects on learning, behavior, and emotions, influencing his sense of security and social relationships throughout life. They also affect the endocrine and immune systems, and hence responses to stress and risks of disease throughout life; so the quality of the early sensory stimulation and nurture can have far-reaching effects. When breastfeeding is not possible for some reason, then holding and cuddling the baby while feeding, with skin-to-skin contact where convenient can still provide valuable loving sensory experiences for the nursing couple.

Norway used to have extensive infant bottle-feeding, but following an active government program to mobilize community awareness and practical support for mothers, breastfeeding is now reportedly initiated by up to 99% of mothers, and at 6 months around 80% of mothers continue to breastfeed. Norway provides generous maternity leave and other work-related consideration for lactating mothers, as part of the system of social supports that have enabled this national benefit to be achieved. Over a span of 35 years it has become a role model for how to swap bottles for breasts.

Breastfeeding can influence a nation's way of life in many ways, even possibly improving its average national IQ by up to six points! In the *Journal of the American Medical Association*, Mortensen in 2002 reported on two large groups born in Copenhagen, whose breastfeeding histories were known. Independent of a wide range of confounding factors, a significant positive association between duration of breastfeeding and intelligence was observed. For example, those who had been breastfed for nine months averaged six points higher IQ than those breastfed less than a month. The first group were 2280 18-year old males, called before the Danish draft board, and the findings were confirmed in another group of 973 men and women aged around 28 years.

Reducing a nation's overall average IQ by six points right across the normal distribution curve has far-reaching costs and implications for the whole of society. For example, at the upper end, there is the loss of the brightest, who are all 6% points less intelligent; at the lower end, there are the remedial education and social costs associated with the six-point IQ reduction. In emergency or war situations, infants who are breastfed survive much better than those who are not.

It is a serious shortcoming of social policies when many women in some of the world's most affluent societies can no longer afford to breastfeed and mother their own babies, however much they may wish to do so. The "economy" is said to require their labour, but who has a greater claim on a mother's presence than her own baby?

We were all babies once. The fruits of good mothering and early nurture are among the greatest blessings a person can have in life. In offering these to their babies, mothers and fathers are setting patterns of relationships which can be creative, mutually rewarding and last for the rest of their lives.

We now have good evidence that, as well as being sound economics, following the above infant feeding recommendations can significantly benefit a nation's health and overall well-being. Is there any more cost-effective way of spending and investing the health dollar than in promoting this equal opportunity for babies?

Appendices

Appendix 1

Cook, PS. Equal Opportunity for Babies: Breastfeeding as a Strategic Priority
http://www.naturalchild.org/peter_cook/equal_opportunity.html

Appendix 2**Cook PS. Home truths absent in early childcare debate: We need parent-friendly options***The Australian Opinion*. March 24, 1999.**Appendix 3****Cook PS. Make mothers Matter***The Australian Opinion*, July 24, 2002.**Appendix 4****Cook PS. Chapter 10 : Suggestions for meeting the needs of infants and their parents**From Cook PS, *Early Child Care – infants and nations at risk***Appendix 5****Some "givens" of being human - your pedigree for success**From Cook PS. 2005. **Simplified parenting for mental health - a framework**. On website of The Natural Child Project, USA. http://www.naturalchild.org/peter_cook/simplified_parenting.html**Appendix 6****A note on Maternal and Equality Feminism**See Cook PS. **Feminism, childcare, and family mental health: have women been mis-led by equality feminism?** *ByronChild*, Sept. 2004, and on http://www.naturalchild.org/peter_cook/feminism.html**Appendix 7****Creativity, Women and Parenting, by Jenny Cullen****Appendix 8****About the author and his writings relating to child and family health**Dr Peter S. Cook, MB, ChB, FANZCP, MRCPsych, DCH.
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Appendix 1 Equal Opportunity for Babies: Breastfeeding as a Strategic Priority by P.S. Cook

http://www.naturalchild.org/peter_cook/equal_opportunity.html

Equal Opportunity for Babies: Breastfeeding as a Strategic Priority

by Dr. Peter S. Cook

In March 2005 in Canberra, three MPs decided to breastfeed their babies while in Parliament House. This could have stimulated wider understanding of the far-reaching importance of breastfeeding for human health and well-being. Yet despite some stir in the media, the underlying issue of equal opportunity for babies was not recognized. These infants (officially "strangers in the House") could have reminded legislators of all those who are disadvantaged at their most vulnerable ages by social policies that effectively prevent their mothers from breastfeeding them. For long-term national and individual well-being, we should support mothers who wish to follow this natural practice, removing any barriers that stand in their way.

Breastfeeding improves children's intellectual, mental and physical health prospects in childhood and throughout life. It promotes bonding between mother and baby - a foundation for lifetime emotional well-being; it reduces risks of a wide range of infectious diseases, asthma, overweight, obesity, diabetes, heart disease, arthritis, and some malignancies. For mothers it promotes recovery from childbirth, and reduces some cancer risks and later osteoporosis.

A more honest and valid way of expressing all this is to say that formula feeding of infants, without breastfeeding, raises the risks of all these disorders. The promotion of such feeding has been illegal in India since 1992, following the WHO and UNICEF 1990 *Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding*. They urged that "for optimal maternal and child health and nutrition, all women should be enabled to practise exclusive breastfeeding and all infants should be fed exclusively on breast milk from birth to 4-6 months of age. Thereafter, children should continue to be breastfed, while receiving appropriate and adequate complementary foods, for up to two years of age or beyond. This child-feeding ideal is to be achieved by creating an appropriate environment of awareness and support so that women can breastfeed in this manner." They further urged that "All governments should develop national breastfeeding policies and set appropriate national targets ..."

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Likewise, the Australian National Health and Medical Research Council, in their 2003 Dietary Guidelines say: "The total value of breastfeeding to the community makes it one of the most effective prevention measures available and well worth the support of the entire community ... it will contribute to the health of all Australians from birth." As a "best-buy" to reduce the obesity epidemic, the National Obesity Task Force (2004) advised increasing breastfeeding. A program to achieve this is outlined in the Australian Breastfeeding Association's Leadership Plan.

But breastfeeding is not just a matter of supplying better milk. In *Reversing the Real Brain Drain: the Early Years Study*, McCain and Mustard describe the importance of the *experience* of breastfeeding, with its opportunities for skin-to-skin touch and smell stimulation. When a baby is being breastfed, cuddled and rocked in his mother's arms as she smiles and coos at him, his brain is busily receiving signals through the sensations of warmth, touch, taste, sight, sound and smell. In the first three years, when the brain's pathways are being "wired", these experiences help to develop structures and functions of the brain in ways that will set the base for lifelong effects on learning, behavior, and emotions, influencing his sense of security and social relationships throughout life. They also affect the endocrine and immune systems, and hence responses to stress and risks of disease throughout life; so the quality of the early sensory stimulation and nurture can have far-reaching effects. When breastfeeding is not possible for some reason, then holding and cuddling the baby while feeding, with skin-to-skin contact where convenient can still provide valuable loving sensory experiences for the nursing couple.

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Breastfeeding can influence a nation's way of life in many ways, even possibly improving its average national IQ by up to six points! In the *Journal of the American Medical Association*, Mortensen in 2002 reported on two large groups born in Copenhagen, whose breastfeeding histories were known. Independent of a wide range of confounding factors, a significant positive association between duration of breastfeeding and intelligence was observed. For example, those who had been breastfed for nine months averaged six points higher IQ than those breastfed less than a month. The first group were 2280 18-year old males, called before the Danish draft board, and the findings were confirmed in another group of 973 men and women aged around 28 years.

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Peter S. Cook is a retired consultant child psychiatrist who writes on child and family mental health

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Appendix 2 Home truths absent in early childcare debate : We need parent-friendly options. *The Australian Opinion*. March 24, 1999. http://www.naturalchild.org/peter_cook/home_truths.html

Home truths absent in early childcare debate: We need parent-friendly options

PETER COOK

More subsidised, universally available, affordable, high quality, professional childcare is often advocated as a way of advancing the interests of women.

Yet early long daycare is not in the best interests of very young children and their families. Evidence increasingly suggests that this childcare agenda is misconceived, because it:

- Is unrealistic, as it is often unaffordable and unachievable.
- Overlooks accumulating evidence of risks of undesirable outcomes.
- Is contrary to much expert opinion about what is likely to be best for very young children and is contrary to the desire of many working mothers to care for their own young children if they could afford to;
- Relies partly on the now-discredited ideology of cultural determinism, which denied the relevance of biology to human behaviour, arguing that mothers can be largely replaced by trained carers.
- Makes adequate breastfeeding difficult or impossible.

A rethink is needed.

We each have a pedigree of maternal ancestors who, overall, were selected, over thousands of generations, for their success in all aspects of healthy mothering: pregnancy, childbirth, breastfeeding, attachment, and the protecting and rearing of baby girls who grew up to do likewise, not in splendid isolation, but in social groups with others having an enduring interest in the child.

The question should not be "how can everybody have affordable, quality childcare?" It should be: "how, in our de-tribalised societies, can we best help and support parents who wish to do a mutually satisfying job of mothering and fathering their infants and young children without jeopardising their own futures?"

If some of the effort devoted to seeking high-quality childcare were used creatively to support high quality parenting, we would be nearer to our real goal of enhancing the well-being of mothers, young children and society.

We could recognise that mothers with infants and young children are an essential, vulnerable group, unique in society, having special needs for a few short years. Infancy cannot be re-run later.

Governments can encourage community appreciation of home-caring parents for their parenting and other contributions to society. In the gross domestic product, we could show the multi-billion-dollar value of mothers' work and mothering at home.

Parents should be free to make informed decisions, but economic justice for the family is a precondition for real choice. The next advance in women's rights could be affirmative action in favour of mothers of young children, to give freedom of choice.

If we are to pay for the care of children, why not pay mothers to do it?

We need family incomes policies offering equal opportunity for home-caring parents, especially mothers of children under three. Economic policies have been unfavorable to these families, compared with two-income families using subsidised childcare.

Governments could be neutral, offering the available money fairly to all parents, to care for their very young children as they choose, especially while children are under five. Mothers also need provision for superannuation, if the economic sacrifices of early childrearing are not to become a lifelong handicap.

Mothers' needs for relief, help and company must be addressed. Programs of voluntary visiting of new mothers can offer many benefits.

Some childcare centres could become like Swedish "open pre-schools", open to parents, and providing companionship, educational opportunities and facilities for children and their parents.

We need parenting-friendly policy options put before Governments and decision-makers, by the bureaucracy, the Opposition, academe, and the Institute of Family Studies.

Until recently, one ideologically-based view held a monopoly of counsel. It is an unsustainable way of helping women, because it deprives the next generation of women of mothering while they are infants, and also deprives the little boys who will be their partners, and the fathers of their children. Preparation for marriage begins at birth.

This is not "returning to the 1950s". Many problems were inherent in the social isolation and child-rearing ideas of those days. Today we can help young people understand how to achieve more satisfying parent-child relationships than were common in the past.

Preferably, the approach to these issues should be bipartisan, rather than having parties compete in spending on childcare, while neglecting the importance of healthy mothering, and the developmental needs of infants and their families.

Dr Peter S. Cook, is a retired consultant child psychiatrist. This article is partly based on his paper Rethinking the early childcare agenda, published in *The Medical Journal of Australia* in January 1999.

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Appendix 3 Make mothers Matter

The Australian Opinion, July 24, 2002 www.theaustralian.com.au

and as "Mothering Matters" on http://www.naturalchild.org/peter_cook/mothering_matters.html

Peter S. Cook: Make mothers Matter

We pay almost anyone to look after infants except their mothers. Evidence that good mothering matters, both for the individual and for society, is steadily growing.

New reports from the Early Child Care Network of the US National Institute for Child Health and Development increase concerns about early childcare and its effects on young people. Some 25 top US scholars co-ordinate this multi-million dollar study, following more than 1000 babies from birth, to compare the effects of maternal care with various alternatives. Fathering is important, but this article is about mothering.

In Australia we fund the Institute of Family Studies for expertise in family matters. In 1994 it published *Effects of Child Care on Young Children: Forty Years of Research* by Gay Ochiltree. She dismissed research suggesting risks in early childcare, especially US studies, arguing that Australian childcare is so good that American findings of adverse outcomes don't apply. She claimed: "No evidence has been found that good quality childcare harms children."

The NICHD Network reported in *American Educational Research Journal* that, although higher quality childcare was associated with better cognitive performance at 4, the more time during these four years that these children had spent in any type of non-maternal childcare, regardless of its quality, the more assertiveness, disobedience and aggression they showed with adults, both in kindergarten and at home.

At school one year later, they continued to be more aggressive and disobedient, not just assertive or independent. So non-maternal childcare, whatever its quality, is associated with important risks.

NICHD warns that even modest adverse effects on behaviour can have serious social consequences when large numbers of children are affected.

NICHD studies also found that when children spent more time in childcare, their mothers displayed less sensitivity when interacting with them at six, 15, 24, and 36 months of age. Sensitive, responsive mothering through the early years was the best predictor of social competence at six years, which in turn predicts schooling success.

Early childcare also precludes longer breastfeeding, which, besides better health, is known to give significantly higher IQs in adults (*Journal of the American Medical Association*, May 8).

The movement for women's "liberation", while advancing women in the workplace, devalued and undermined their role as mothers. This denied infants' needs for mothering, and mothers' needs to provide it.

Healthy mothering includes breastfeeding, holding, carrying, attachment bonds, and making infants feel loved. These basic needs of infants are hardly met in institutional childcare, especially when profits must be maximised in private centres. Professor Jay Belsky, a distinguished member of the NICHD Network, described a staff ratio of one carer to five infants under two (the NSW standard) as nobody's idea of quality, but rather a licence to neglect.

Childcare is now one of Australia's most profitable growth "industries" (*BRW Rich 200*, February 2). It promotes circumstances that fuel its own expansion, as two-income couples bid up the price of homes, and two incomes are needed to raise a family. Mothering is out. Childcare is in. We pay almost anyone to look after infants except their mothers. Mothering and fathering happen after work in "quality" time.

Yet Penelope Leach's large survey found that most child development professionals privately believe it's best for infants to be cared for mostly by their mothers. Like the NICHD studies, they don't support the view that parents are interchangeable, but that they complement each other.

We need to do whatever it takes to help women give their babies and young children the lifelong benefits of high quality mothering, and stop subsidising an ideology that promotes risky and inadequate substitutes.

Peter S. Cook is a retired consultant child psychiatrist who writes on child and family mental health.



Appendix 4: Suggestions for meeting the needs of infants and their parents

From *Early Child Care – Infants and nations at risk* by Peter S. Cook

Chapter 10: Suggestions for meeting the needs of infants and their parents

Recognition of special needs

National policies are needed which lead to community and legislative recognition that **children in the first three to five years of life - especially infants, and also their mothers, form a discrete and vulnerable group with special and important needs** during a limited period. This emphasis does not preclude recognising the importance of subsequent periods of childhood.

Respect and social status as homecaring parents

Governments and opinion makers could encourage community attitudes of respect and appreciation towards full-time parenting, especially where children under three to five years of age are involved.

Some home-caring parents feel that society sees them as indulging a personal hobby, since centre-based child care is promoted as being as good for an infant as mother care. It is lamentable that the strength of the movement against full-time mothering has led to a situation where it is sometimes not politically correct to say *publicly* that the mother is the best person to look after her baby or young child.

Affirmative action to support mothering - the next advance in women's rights?

The next important advance in women's rights could be *affirmative action* in favour of mothers to give them freedom of choice, both through support for home-caring, especially when their children are under three to five years of age, and subsequently if they seek to return to work.

A new deal for baby girls and boys! In Sweden parents have some choice between universally available quality day care and financial and social support for personal parenting by either parent for 12 months. Nevertheless, a national poll showed that more than 80% of Swedes still regarded it as ideal to care for those children at home until they reach the age of three (Leach 1994, p.72). Expert professional opinion supports this view.

Encourage the carrying of babies from birth

At birth, every mother and father in Western societies, on the birth of their first baby, could receive a simple, body-contact baby-carrying sling or pouch as a birthday present. It would be a simple practical gift of symbolic power. It might also encourage breast feeding, which is certainly in any nation's national interest. In many parts of the world such carrying is taken for granted and suitable slings can be purchased for less than US\$5.

When an early reviewer of this book dismissed this suggestion as a gimmick, I deleted it, to the dismay of Dr James Prescott. He said it was the most important and practical recommendation of all, since much good research, including his own, supports the value of such baby-carrying, for *optimal* emotional and neurological infant development.

Being a one-off cost, it is arguably the simplest, cheapest single thing that could actually be done to improve the long-term emotional wellbeing of the nation. By strengthening attachment bonds between parents and their infants it might even produce financial savings for a government, by reducing the demand for expensive early child care places. Many of those parents who have discretion in the matter might decide that caring for their infant was more important to them than the net cash left from going to work, after deducting day care, income tax and other work-related costs. These benefits would be additional to other gains to society, as outlined in chapter 2 and those which Prescott describes.

Support in open pre-schools as in Sweden, or childplaces

A form of open pre-school could be available as a drop-in facility to help provide support and social stimulus for home caring parents and family day care mothers, and where their children can meet and play. (See chapter 7).

If day care centre buildings are to serve future needs they should be flexibly designed to facilitate such uses. Some of the centres built for long day care, and some of their trained staff, may in future be used for open pre-schools and child places. As part of a new deal for children and their parents, Leach (1994, pp.250-258) described the need for "child-places" centrally located in each community, with day-care organised to better meet the needs of all age groups. These would expand the functions of day care centres to include the functions of "open pre-schools" and also to include after-school care for older children and provision of various community services and meeting places. She gave examples of how they can facilitate supportive friendships, and reduce later social pathology which can be costly and difficult to remedy.

Economic support

1. There should be some mechanism to bring equity to single-income families with a pre-school child. Splitting the income between the parents for tax purposes, perhaps subject to a means test, is one possibility.

2. Whatever total subsidy and funding is available for children in nonparental child care should also be available to parents caring for their own children, means-tested if necessary.

3. Provisions for supporting parents in caring for their infants and very young children, with paid or unpaid leave from their employment, should be implemented. The goal should be at least two or three years' leave, on reduced pay or unpaid, followed by the option of a reduced working day for reduced pay, as offered by right in Sweden until the youngest child is 8.

In Sweden parents receive 12 months leave at 80% pay, but one year of leave from work is not adequate from the point of view of the child's development. It was planned to extend it to three years, but unfortunately this has been deferred. While such support may not be immediately affordable in some countries, it should be a national priority, to be extended in stages.

Mortgage ceilings

A government could bring in a ceiling on home mortgage interest rates for home-caring parents with children under 3, or 5, at least for the first two or three births, means-tested if necessary.

This would assist parents of infants in financial and family planning, and reduce anxiety and pressure about temporarily leaving the work-force. A precedent for this occurred in Australia in the 1980s when the Government for political reasons froze all existing mortgages at a ceiling of 13%. A rise in home mortgage interest rates of, say, "4%" - up from 8% to 12% - is actually an increase of 50% in the regular interest payments. This is enough to force some people out of their homes.

There appears to be a vicious circle between the cost of homes and the demand for child care. Double-income families can out-bid single-income families in the market for homes. As more and more women with young children and babies take paid employment outside the home, it follows that this increased spending power tends to drive up prices, inflating the cost of houses, especially in areas where employment is available. This further increases economic pressures on single income families, tending to force more mothers to seek work and demand child care. This is a mechanism for a vicious circle.

Assistance in returning to work outside the home, and superannuation

There should be assistance for parents who have been at home caring for children, to help them when they wish to return to the work force, as their options have often been diminished by the period at home.

1. Parents should be offered suitable assistance to secure employment when they are ready, for example, by offering training and subsidies such as those sometimes available to the long-term unemployed.

2. Childrearing should be affirmed and given accreditation for career advancement. For example in the Australian Teachers' Award, three years spent childrearing is equivalent in career standing to one year of full-time work. This is recognition that parenting counts as life experience that can contribute to personal maturity and interpersonal skills.

3. Superannuation cover should be possible for homecaring parents. At present mothers in many Western societies have no superannuation - unless the partner has taken superannuation that covers his wife. In Germany a full-time parent keeps her pension rights and cannot be dismissed from her job for three years (The Economist 1995).

An examination of cost-effectiveness

There could be an examination of the most cost-effective ways to help meet the needs of infants and their parents. It is likely that the present early child care policies would not stand up to a fair economic analysis, and that in economic terms alone they are misconceived, as compared with policies designed to assist parents who wish to care for their children at home for at least the first two and a half to three years. Calculations should take into account the effects of releasing a job to employ someone otherwise out of work, and the direct and indirect benefits which homecaring parents bring to society (see chapter 2). The long-term costs of incurring the emotional risks of early child care are not easy to estimate, but the costs of dysfunction and breakdown in family relationships, and the related social pathologies are very great.

If the endeavour and resources put into seeking high quality nonparental childcare were expended in supporting high quality parenting there would be a much greater prospect of benefit for all concerned. Conditions which promote sensitive, empathic parenting in early childhood and the breast-feeding and carrying of infants should be studied and supported.

A child care research literature resource

It would be valuable to have a regular update service and perhaps a clearing-house of the literature relevant to early child care, where interested researchers and members of the general public can access this material without undue difficulty and expense.

Child care is a multi-billion dollar industry. Though the main topic of this book is fairly specific and of considerable public interest and concern, the relevant scientific literature is scattered through many disciplines in scientific journals, other periodicals, books by single authors, or multiple authors indexed only under the name(s) of the editor(s). References and abstracts appear in databases which are also scattered through many disciplines, including child development, (child) psychology, child or adult psychiatry, education, sociology, anthropology, marriage and family life, crime and delinquency.

To keep aware of the scientific literature is no small task, and to actually obtain the material requires considerable resources. Perhaps the reprint collections accumulated by academic researchers at public expense could be available as reference documents in a university library.

As this book went to press, another book, raising similar concerns from a different perspective, was published by a British sociologist, Dr Patricia Morgan. It is *Who Needs Parents? The Effects of Childcare and Early Education on Children in Britain and the USA*, published by the Institute of Economic Affairs, 2 Lord North Street, London, SW1P 3LB.

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Appendix 5. Some "givens" of being human - your pedigree for success

From Cook PS. 2005. **Simplified parenting for mental health - a framework.** On website of The Natural Child Project, USA. http://www.naturalchild.org/peter_cook/simplified_parenting.html

Some "givens" of being human - your pedigree for success

From your baby's birth you are building a love relationship with a unique new person. You have a chance to be creative, and to cooperate with Nature in nurturing this relationship, which, in some form, will last for the rest of your joint lives. One day this baby may love and care for you in your old age! An essential quality of healthy love is that it promotes the wellbeing of *both* people in the relationship.

As a mother, you may find it helpful to realise that, whatever your personal experiences of being mothered, you are likely, genetically, to be well-equipped to mother your baby. We can be sure of this because, so far as genes influence mothering, all women (like all female mammals) have a *very long pedigree in which each woman was selected specifically for success in mothering.*

If you bring to mind your mother and your grandmother, and now imagine each woman before them in the line of your maternal ancestors (whether as a woman or as a baby girl), you know that over thousands of years each of them, without fail, was successful in bearing a healthy baby girl, and that each little girl grew up and did likewise. In this, every one of your maternal ancestors succeeded! Sometimes the going was hard, and if a little girl's mother died, there must have been another caring woman to adopt her.

Throughout earlier ages, with rare exceptions, mothers traditionally carried their babies, slept, worked and played with them, breastfeeding them frequently, and usually well beyond the first year of life – a "nursing couple".

By the same long process, breast milk has been exquisitely and specifically matched to the varying needs of human babies. Infant feeding with milk from other mammals is very recent in our species and significantly less healthy. Your maternal ancestors did all this under conditions that were in some ways less favorable than those we have today. Yet they all succeeded, mostly within a supportive family or tribal group, and in a natural environment such as continued in many pre-industrial societies well into the 20th Century.

This long process of selection (with a different emphasis for males) refined every detail of our basic biology to best fit the kind of environment in which they lived. It follows that unless they have some disorder, women today are all generally equipped by Nature to give healthy nurture to their infants, *given a facilitating environment* that includes the support and companionship of others.

If we follow the same logic, we can see that babies, too, are descended from an unbroken line of ancestors who, as babies and young children, all survived because *each one of them was successful in appealing to their mothers to meet their needs.* As infants they did this by "rewarding" them with pleasure, joy and many satisfactions to compensate them and their fathers for the burdens of caring for them. The genes of all infants who were not successful in doing this dropped out of the human race (and the human genome). This doesn't mean that our behavior is just determined by our genes, but it does imply that healthy babies are generally well-equipped to encourage good mothering, and that this can normally be natural and satisfying, if the mother's health and her environmental conditions are supportive.

A note on maladjustment. The downside of this is that humans, like all living things, have been selected for healthy survival within a certain range of environmental conditions. If the environment changes in any way beyond what an organism can adapt to, then a *mismatch* results. The organism becomes stressed, or maladjusted or unhealthy. If the mismatch is too great in areas of biological importance then the organism can become extinct. Humans vary in their resilience, but this process accounts for many physical, emotional and psychological disorders. Parenting can be adversely affected by the same process, contributing to much "maladjustment" in children and young people. For babies, the outcome depends on *how much the environmental changes cut across the basic biological maternal-infant mechanisms.*

Appendix 6 . On Maternal Feminism and the pedigree for successful mothering.

"Maternal Feminism" is to be recognised and preferred to "Equality feminism".

Equality feminism, as it has developed in "Western" countries in the second half of the 20th Century, has been misconceived. (See **Feminism, childcare, and family mental health: have women been misled by equality feminism?** http://www.naturalchild.org/peter_cook/feminism.html). While legitimately seeking to redress the shamefully unequal treatment of women in some situations, it has been misconceived, and disadvantageous to women (and baby girls) insofar as it has been grounded on a denial of most male/female biologically-based differences, particularly in relation to early mothering and fathering.

During the second half of the twentieth century, this denial has been based on the misconceived ideology of cultural determinism, promoted throughout the social sciences and among the intelligentsia on the basis of scientific misinformation arising out of "the Fateful Hoaxing of Margaret Mead" in 1926 (qv), documented by Professor Derek Freeman. Aiming to counter racist ideas deriving from a misapplication of Darwinian thought, cultural determinism taught it as fact that biological factors are of little importance in human differences, and "we are socially constructed beings". This is a part-truth concealing serious error. It was promulgated by Margaret Mead and her colleagues on the basis of the scientific misinformation in her "classic" best-selling work (of mostly fiction) *Coming of Age in Samoa*. Purporting to be scientific fact, it was accepted and promulgated by Simone de Beauvoir in her *The Second Sex* and later influential feminist writers. (See my summary-review of "**The Fateful Hoaxing of Margaret Mead**" by Derek Freeman, Westfield Press. This summary was checked for accuracy by Professor Freeman, and it includes an outline of its far-reaching effects) <http://northernlife.senet.com.au/22sept99.htm> Note that only the definitive paperback 2nd edition includes the final verification of Freeman's evidence.)

Friedan and, much later Greer, recanted, but their earlier work helped to set in train a vicious circle, which has led to increasing pressure on families, as young couples compete for homes, and two-income couples bid the price beyond the reach of most couples unless they both go to paid work after having babies. The solution offered has been early long day childcare, even for the babies. The mantra of "affordable, readily available, high quality childcare", with pressure for ever-increasing government subsidies, allowing or obliging young mothers to early return to work, has led to a burgeoning "childcare industry" in childcare and academia, which promotes an ever-increasing demand for its services and the "need" for ever-increasing government subsidies. This is a fictive goal. (See Cook PS. **Rethinking the early child care agenda.** *Medical Journal of Australia* 1999, 170: 29-31. <http://www.mja.com.au/public/issues/jan4/cook/cook.html> which can also be accessed via http://www.naturalchild.org/peter_cook/index.html , and **Feminism, childcare, and family mental health: have women been misled by equality feminism?** *ByronChild*, Sept. 2004, 28-31. on http://www.naturalchild.org/peter_cook/feminism.html)

Maternal Feminism has recently been presented by Anne Manne in her Sept 2005 book *Motherhood: How should we care for our children?*, but I have not yet finished reading it.

See Cook PS. **Feminism, childcare, and family mental health: have women been mis-led by equality feminism?** *ByronChild*, Sept. 2004, 28-31, and on http://www.naturalchild.org/peter_cook/feminism.html

See also Cook PS.1999. **Margaret Mead, Samoa and the sexual revolution.**

This is a summary-review of "The Fateful Hoaxing of Margaret Mead" (which includes an outline of its far-reaching effects) by Derek Freeman. See definitive paperback 2nd edition, which includes the final verification of Freeman's evidence. Westfield Press. On <http://northernlife.senet.com.au/22sept99.htm>

Appendix 7 Creativity, Women and Parenting, by Jenny Cullen

As in frontispiece of *Early Child Care – Infants and Nations at Risk* of Cook, P.S. (1997).

Creativity, Women and Parenting

For most of the 20th Century, concepts of intelligence have been dominated by the attributes which psychologists identify and measure in tests. However this view ignored the very different and crucial qualities involved in the "personal intelligences" (Gardner 1983) or "emotional intelligence" (Goleman 1995). These are important in parenting and can be actively developed by the parenting experience.

The dormant creativity of many adults is awakened through imaginative interaction with their children. Many characteristics typical of creative people are readily evoked in parenting - for example, humour, playfulness, curiosity, flexibility, high intrinsic motivation, sensitivity, spontaneity, tolerance of incongruity, and experiencing deep emotion. Life with young children provides continuous opportunities for identifying problems and solving them creatively. Since young children are often unable to indicate their purposes or problems clearly, the parent's challenge is to clarify the problems experienced by the child and negotiate solutions.

The value of love and dedication in parenting is universally recognised. If we also placed a high value on the emotional intelligence and creativity involved in sensitive parenting, the social status accorded this role would rise. The insight and skills required for managing emotions and relationships are increasingly valued in the workplace. Men and women who use their interpersonal skills in the public arena are applauded. Yet those who use such skills in the private world of parenting are so lacking in status that they may wonder how to explain this period of their lives in their CV's.

Parenting is currently in a state of flux in which, more than ever before, each individual chooses whether to become a parent, and then what sort of parent to become. It is a special opportunity for personal development where you can become a creative artist, choreographing your own dance in partnership with your child.

Jenny Cullen

Abstracted from *Creativity, Women and Parenting*, by Jenny M. Cullen (1994).
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Appendix 8. About the author and his writings relating to child and family health

After qualifying in medicine in 1950, I trained in adult and child psychiatry at the Institute of Psychiatry and elsewhere in the UK from 1952 to 1957. Then I was in clinical practice in NZ, and from 1965 to 1973 I was in charge of the Department of Psychiatry at the Royal Alexandra Hospital for Children in Sydney. From 1974 I was a senior specialist in child psychiatry with the Sydney Northern Metropolitan Health Region. Then I was in private practice until I retired through ill-health in 1987. I am a Foundation Fellow of the Royal Australian and New Zealand College of Psychiatrists, and have Membership of the Royal College of Psychiatrists in London.

I have been a clinician not an academic, but I have also been concerned with achievable gains in primary prevention, seeking "to build a fence at the top of the cliff, not just service an ambulance at the bottom". So I have, with colleagues, initiated reform in a number of situations (including the reform of the care of children in hospitals throughout Australia) as opportunity presented. This has usually included writings, as evident in my list of publications (appended). Many have been reproduced elsewhere, and some are now available on the net, though I have no website. They have all have sought to present in a generally understandable form material that is supported by good scientific evidence.

A theoretical basis for some of this work is in my 1978 paper - a Special Supplement in *The Medical Journal of Australia*: "Childrearing, culture and Mental Health..." It may be seen on the website of The Natural Child Project in the USA: http://www.naturalchild.org/peter_cook/childrearing.html

I have written extensively on early childcare and my 1996-7 book, *Early Child Care – Infants and Nations at Risk*, has a foreword of commendation by Professor Jay Belsky - one of the world's foremost authorities on early child development and research into the long-term effects of early childcare. Its first chapter, "The Species-normal experience for human infants – a biological and cross-cultural perspective", is on http://www.naturalchild.org/peter_cook/ecc_ch1.html

Some of its main points were outlined in my 1999 article "Rethinking the early child care agenda" in the *Medical Journal of Australia*. My MP sent a reprint to all Federal Members of Parliament in 1999. It is on the MJA website: Cook PS. **Rethinking the early child care agenda.** *Medical Journal of Australia* 1999, 170: 29-31. <http://www.mja.com.au/public/issues/jan4/cook/cook.html> It can be accessed via http://www.naturalchild.org/peter_cook/index.html

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Cook 2005 051013 Articles PSCook child-family mental health etc

PUBLICATIONS etc. relating to child and family mental health and related topics

by PETER S. COOK , 1958 - Sept 2005

These articles were all written to be understandable by the general reader. Some articles may be seen website of The Natural Child in USA, at <http://www.naturalchild.org/home/> then to Articles / Peter Cook. Also on <http://www.humanfamily.net.au/default.htm>. Most of the others, including the book, are available in digital format from pcook@midcoast.com.au.

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