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Submission no. 60 AUTHORISED: 41/03/07

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Hi.

I would like to offer the following submission to the Parliamentary Breastfeeding Enquiry:

I am a mother of 2 young children, so my breastfeeding experience is recent and current.

One item I feel needs addressing is the education of health professionals, particularly general practitioners and child health practitioners, about breastfeeding. They need access to up to date information about issues associated with breastfeeding, such as mastitis and thrush, including the best options for treating these, as well as the resources available to support mothers, such as lactation resource consultants and the Australian Breastfeeding Association.

Mothers need to be supported once they leave hospital - maybe a followup visit or two from a trained professional with specific breastfeeding knowledge?

Lactation resource consultants are a good resource as is the Australian Breastfeeding Association (ABA). Although I never needed to ring their helpline (thankfully), it was always wonderful to know that it was available 24 hours/day. It is important to ensure such services continue. The local ABA groups are also a good source of support.

One source of concern is that I understand that for the Queensland Child Health Information Service, Riverton, a significant number of calls go unanswered as the line is engaged, or there are insufficient staff. (This advice was provided by a health worker, and by direct experience of a neighbour who was unable to get through when they desperately wanted advice one night). How many parents in desperation, resort to a bottle (or worse), for lack of sympathetic, expert advice when needed?

Significant research shows the benefits of breastfeeding, both to mother and child (I am assuming the Parliamentary Committee has access to this research). Often the older generation is unaware of these benefits, as it was not known then. This can affect their attitude to seeing/encouraging/supporting the next generation in breastfeeding. Similarly the younger generation may not be aware of these. Maybe a promotional campaign?

Another area to raise is that there seems to be no defined policy re options for breastfeeding/expressing breastmilk in the workplace. Often women returning to work believe that they need to bottle feed as this is the only option. Facilities for expressing breastmilk, or breastfeeding the child (either by having the child brought in, or if the child is close by then breastfeeding there) should be available (and not in the toilets!). It should be possible to grant employees, as a minimum, unpaid time, to express during the work day.

It is also important that baby food is labelled in line with World Health recommendations - specifically in relation to introduction of solids at 6 months. Current food labelling is 4 - 6 months, however, this needs to be changed. It is also important that health professionals are aware of these recommendations in relation to breastfeeding.

Thank you for your consideration, Rosemary Pollock