West Australian Country Health Service South West Dietitian's Submission to the breastfeeding inquiry of the Standing Committee on Health and Ageing, House of Representatives, Parliament of Australia.

## February 2007

The South West Dietitian's welcome the opportunity to contribute to the current parliamentary inquiry into the health benefits of breastfeeding.

The health advantages for both infants and mothers and the social and economic benefits of breastfeeding have been extensively researched and documented<sup>1</sup>, therefore the objective of this submission is to highlight specific issues related to rural mothers and families.

## Response to the Terms of Reference (d)

d. Initiatives to encourage breastfeeding:

Provision of breastfeeding support services in the local community. This is crucial for several reasons:

- Many women do not have the option of giving birth in their local community hospital as obstetric services are centralised for safety and economic factors. This results in some clients being discharged back in to their local community, away from the health service staff with whom they may have developed rapport with (through their involvement with the birth and in the initial stages of feeding), and often before breastfeeding is established.
- Parents may have limited support from family and friends if they have recently moved to a rural area for work or lifestyle reasons.
- Parents are likely to have to travel further for both specialist and essential health services (especially those that reside on outlying agricultural properties).
- Additional demands may be present including lack of financial security (for example the impact of drought and industry deregulation on some primary producers) and commitments to livestock (i.e. poses problems for travelling where others are not available to monitor stock).

## Recommendations

1. Commitment to and resourcing of the provision of services that support the initiation & adequate duration of breastfeeding in both the clinical and community setting. The Baby Friendly Hospital Initiative<sup>2</sup> including the Ten Steps to Successful Breastfeeding<sup>3</sup> combined with the Seven Point Plan for Community Health Services<sup>4</sup> address the key factors influencing breastfeeding rates and the length of duration and further, provides consistency and integration of services.

- 2. Ensure services (as recommended in 1.) are culturally appropriate & accessible to clients.
- 3. Establish formal links with local agencies external to health (such as Women's Health Centres and the Australian Breast Feeding Association) that have the capacity to extend the reach of breastfeeding services.
- 4. Investigate opportunities to utilise local businesses that are frequented by mothers from all walks of life (for example pharmacies) as a place to promote locally available services.

## References

- Dietary Guidelines for Children and Adolescents in Australia incorporating the Infant Feeding Guidelines for Health Workers. National Health and Medical Research Council (NHMRC), 2003. Available from: <a href="http://www.nhmrc.gov.au/publications/files/n34.pdf">http://www.nhmrc.gov.au/publications/files/n34.pdf</a>
- World Health Organization (WHO). Baby Friendly Hospital Initiative (BFHI), WHO Regional Office for Europe [online] 2004 [cited 2006 April 20]. Available from URL: <a href="http://www.euro.who.int/nutrition/Infant/20020730\_2">http://www.euro.who.int/nutrition/Infant/20020730\_2</a>
- 3. WHO: World Health Organization. Ten steps to successful breastfeeding, WHO [online] 2004 [cited 2006 April 20]. Available from URL: <a href="http://www.euro.who.int/nutrition/Infant/20020730">http://www.euro.who.int/nutrition/Infant/20020730</a> 1.
- 4. Seven point plan for the protection, promotion and support of breastfeeding in community health care settings. In: A brief guide for health professionals, UNICEF, UK [cited 2007 February 26] <a href="http://www.babyfriendly.org.uk/page.asp?page=71">http://www.babyfriendly.org.uk/page.asp?page=71</a>