

I am writing to you to relay to you my experience of the public health system since I gave birth to my daughter 18 months ago. I feel that many things could be changed to encourage and support mothers in breastfeeding. Before I start, I will tell you that the hospital in which I gave birth is a Baby Friendly Hospital.

Due to my daughter being breech and in distress, she was born by emergency c-section. After her birth, she was briefly shown to me before she was whisked away up to the ward to be checked, weighed and measured. I did not get to see my daughter for the first hour of her life as I was stuck in recovery. Since it was just after 8pm, I was the only person in recovery and so spent the hour chatting to the two nurses who were looking after me. This is a time that my baby should have been with me. Step 4 of the Ten Steps to Successful Breastfeeding states that mothers should be helped to initiate breastfeeding within a half-hour of birth. While I understand that at times this may be impractical, hospitals should be encouraged to enable mothers to breastfeed even when they have had a c-section when it is possible as in my case.

During the first day, I struggled to try to get my daughter to attach and breastfeed from me. At the end of 24 hours, one of the midwives noticed that my daughter was tongue-tied and so could not attach or suck properly. This is something that should be checked for at birth. The midwife requested that a pediatrician check it before I left the hospital, she also referred me to a Lactation Consultant. The Lactation Consultant was able to assist me with attachment and also in hand expressing. Over the next day, I got more and more stressed at the fact that my daughter was not feeding from me and I could not express much colostrum for her. By the end of the 3<sup>rd</sup> day, the midwives encouraged me to feed my daughter ABM as she was not getting anything else. On day 4, we were booted out of the hospital even though my daughter had lost nearly 10% of her birth weight and was still not feeding from me. At this point my milk had not even come in. When talking to the nurses who discharged me, I told her about these difficulties and that I wished to be stay in hospital for longer. However since the other midwives had not noted these difficulties in my chart, I was told that I could not be kept in. I was also told that the hospital is not funded to keep patients in due to breastfeeding difficulties.

Upon leaving the hospital, we went straight to a GP who the lactation consultant had recommended as being able to assess tongue-tie. He assessed my daughter and felt it was bad enough to affect breastfeeding. He snipped the tongue-tie and it was immediately obvious that she was sucking better afterwards. This procedure should have been done by a pediatrician in the hospital. Unfortunately many pediatricians do not seem to either know about or recognize the affect tongue-tie has on breastfeeding and so will not snip the tongue-tie on babies this young. All pediatricians should be properly trained in breastfeeding matters.

Unfortunately, this still did not solve all our breastfeeding problems. We continued to struggle with attachment for the next month. During this month, I went to the Breastfeeding Clinic at the hospital several times – this was a fantastic place for me to go for help and the lactation consultants helped me a lot. The main problem was getting an appointment. When I first enquired, when my daughter was 3 days old, I could not get an

appointment until my daughter was 11 days old. That was a whole week in which we mainly cup fed my daughter and both myself and my husband were extremely stressed. Each time I booked an appointment, I had to wait a whole week for a spot. I was also told that the Breastfeeding Clinic is only funded for 3 appointments per baby. Luckily, my daughter and I got the hang of it and started breastfeeding successfully.

I recommend that the following actions be taken to encourage and support women to breastfeed.

- All hospitals should be given the funding to become Baby Friendly Hospitals and the Ten steps to Successful Breastfeeding be followed.
- Pediatricians and midwives should be properly trained in breastfeeding and medical conditions which may affect breastfeeding.
- GP's should be properly trained in breastfeeding matters and encouraged to refer mothers on to Breastfeeding Clinics if they are having difficulties.
- Hospitals be funded to allow breastfeeding mothers longer stays in hospitals if required – All mothers wishing to breastfeed should be allowed to remain in hospital until their milk comes in and hopefully until they are successfully breastfeeding.
- Breastfeeding Clinics to have better funding to allow mothers better access – many mothers would give up breastfeeding rather than wait a week for an appointment at a breastfeeding clinic.