

Baby ON BOARD

WITH BREASTFEEDING RATES BELOW WORLD HEALTH GUIDELINES, WORK PRESSURES ARE A SIGNIFICANT FACTOR, REPORTS JAMES NICHOLSON, AS HE EXAMINES THE RELUCTANCE OF AUSTRALIAN OFFICES AND BOARDROOMS TO EMBRACE NURSING MOTHERS.

AMANDA Lee remembers well a visit she made to Japan some time ago. She recalls being rebuked in the American Club in Tokyo for breastfeeding her baby. Patrons were not allowed to bring “prepared food” onto the premises, she was told.

This incredible but true story illustrates the kind of obstacles that breastfeeding women have to overcome at the best of times, never mind when they’re contemplating a return to the workforce.

Dr Lee, the manager of Queensland Health’s Nutrition and Physical Health Promotion Unit, was among the myriad witnesses who gave evidence to the House of Representatives Health and Ageing Committee inquiry into the health benefits of breastfeeding.

Apart from highlighting her own monstrous experience of societal resistance to breastfeeding, Dr Lee appeared before the committee in Brisbane to champion the health benefits of breast milk. Breastfeeding was, in her view, “probably the most significant issue of public health benefit to be considered within Australia”.

Not that the scope of the inquiry was confined to scrutinising the long-term health advantages that breastfed babies enjoy. The committee examined the complex issue of breastfeeding from every conceivable angle. At the core of the inquiry were the questions that weigh on the minds of breastfeeding mothers as they contemplate the balance of their baby’s nutritional requirements with the imperatives of returning to work.

The inquiry was set up to report on how the Commonwealth government can improve the health of Australians through across-the-board support for breastfeeding. It looked at the extent of the health benefits of breastfeeding, as well as initiatives to encourage breastfeeding and its impact on the long-term sustainability of Australia’s health system.

The committee chairman, Alex Somlyay (Member for Fairfax, Qld), had expected a “short, sharp inquiry”. What he got instead was an avalanche of public interest: more than 470 written submissions—more than any inquiry he had been involved in, he reckoned, in his 18 years as a parliamentarian.

“It is obviously a topic near and dear to many people’s heart,” he said.



RETURN TO WORK WAS SEEN VERY MUCH AS AN OBSTACLE TO BREASTFEEDING BY MOST WOMEN.

“Given the proven health benefits of breast milk, it is important to look at ways in which society can support women in their choice to breastfeed.”

According to 2003 figures produced by Dr Lee, more than 91 per cent of mothers began breastfeeding, but that figure dropped off to 79 per cent within a month, and to 57 per cent within six months.

Data from a 2001 study provided to the inquiry by Maxine O’Brien, a PhD student and breastfeeding researcher, was even more alarming: while 93 per cent of women initiated breastfeeding, a paltry seven per cent exclusively breastfed at six months. Those figures fall well short of World Health Organisation guidelines which recommend exclusive breastfeeding for babies until six months.

One of the most significant influences on women’s decisions to abandon breastfeeding before that six-month milestone, the inquiry heard, was the need to return to work. Sally Eldridge, from the Australian Breastfeeding Association—a lobby group for working and breastfeeding mothers—said return to work was seen very much as an obstacle to breastfeeding by most women.

“Many of the women we encounter do not initiate breastfeeding,” Ms Eldridge said, “because they know they will be returning to work when their child is

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“At the moment there is no onus upon employers to make a workplace breastfeeding friendly.”

young and others wean their baby prematurely in order to return to work, even though that is not in line with recommendations of the National Health and Medical Research Council or the World Health Organisation on breastfeeding or duration.

“In our positions we also hear lots about the difficulties those women encounter when they do try to combine breastfeeding and work.”

The wretched breastfeeding data for working mothers has much to do with women’s increased participation rate in the labour force since the 1980s. One witness from the breastfeeding association laid the blame squarely on industrial relations policies and legislation which fail to protect mothers’ rights to combine breastfeeding and employment.

Those charges are supported by a Millennium Cohort Study published in the United Kingdom earlier this year, which demonstrated a strong link between the duration of breastfeeding and employment. It showed that women employed

full-time were less likely to initiate breastfeeding than those employed part-time or not employed, and that the earlier a woman returns to work the less likely she is to initiate breastfeeding.

At one of the inquiry’s hearings in Canberra, Natasha Pollock, from the Women’s Electoral Lobby Maternity Services and Breastfeeding Working Group, identified the absence of paid maternity leave among a catalogue of barriers confronting would-be breastfeeders as they prepared to re-enter the workplace.

“Other issues are lack of support and knowledge about breastfeeding



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More than 40 organisations across Australia have been accredited as being officially “breastfeeding friendly”.

management while employed,” she said. “A non-supportive work environment, including a lack of lactation breaks for women to feed their babies, problems with pumping breast milk—some women do not know what to do or what to use, et cetera.

“Healthcare professionals’ lack of knowledge around expressing and returning to work; a perception that infants at work impede mothers’ work and job performance—in those instances where it might be best for the baby to be brought in to the mother—and it’s not considered within the scope of the business; a lack of privacy for breastfeeding or expressing milk; an inability to find childcare centres at or near the workplace, and the high cost of child care and long waiting periods.”

The most effective means of addressing those issues, Ms Pollock argued, was to educate the workforce—employers, breastfeeding mothers and other employees—so that the practice was embraced in the workplace.

“At the moment there is no onus on employers to make a workplace breastfeeding friendly, and women do not know what their rights are with respect to that,” she said. “There needs to be education for the women, for the employers and for the other employees as well, because women need the support of their fellow employees.”

Another argument the Women’s Electoral Lobby presented was for paid maternity leave, which would remove the financial pressure for women to return to work before the six-month milestone, and would encourage breastfeeding by taking the workplace out of the equation completely.

“Paid maternity leave assists women to continue to breastfeed for longer and also to initiate breastfeeding because it provides

women with a continuous source of income and employment security following the birth of their baby,” Ms Pollock said.

The Australian Breastfeeding Association offered some alternative solutions, including childcare initiatives, the removal of tax on breast pumps, and paid lactation breaks mandated by legislation. But it echoed the Women’s Electoral Lobby in identifying education as the cornerstone for change.

According to Sally Eldridge, education is required not just in the workplace, among managers and supervisors, but among the community at large, and among expecting mothers in particular, to convince them that combining breastfeeding and work is a viable choice.

“We need campaigns run in Australia to educate the public that work and breastfeeding can be combined and that there are options, and where to get information,” Ms Eldridge said.

“We recommend that there be education and training for line managers and supervisors who negotiate return to work arrangements from maternity leave to ensure the needs of breastfeeding mothers are being met and that all requests for job flexibility are properly discussed, justified and documented.”

One of the toughest challenges in raising breastfeeding rates, highlighted at the inquiry, was the poor awareness among women that it was even possible to combine work and breastfeeding at all. There was widespread anxiety among mothers returning to work, the committee heard, having to negotiate any breastfeeding provisions. The assumption, whether justified or not, was that they would be arguing from a position of weakness, and that their requests were unlikely to enjoy a sympathetic ear.

Much had to be done, the breastfeeding association argued, to empower breastfeeding mothers and furnish them with some certainty as they negotiated their return to work with employers.

“We get calls saying, ‘There’s no way that they would let me do

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“There is a strong business case for employers to support breastfeeding women.”

that. How could I possibly do that?” Ms Eldridge said. “That is repeated over and over. If they are prepared to go the extra mile and try it, the next step is: ‘What do I do? What law is there? What can I say to them that will tell them what I need and what they should be doing for me?’

“Getting back to work is hard enough, but to then have to negotiate, in perhaps a hostile working environment, what they need, whether they can have certain things and what they need to do is extremely difficult. Negotiating things like when they can do the expressing and where they can do the expressing is hard.”

The Australian Breastfeeding Association’s Breastfeeding Friendly

Workplace Accreditation Program is a progressive initiative that appears to be making a significant impact in shifting attitudes towards work and breastfeeding.

The program’s principles serve as a useful basis for women to navigate their way through those difficult negotiations, in order to promote and encourage breastfeeding in the workplace. Employers are provided with a set of guidelines to enable them to meet the needs of breastfeeding mothers at work.

To secure accreditation, employers must provide lactation breaks, suitable facilities for breastfeeding or expressing breast milk, and offer support to employees by providing them with breastfeeding information and a breastfeeding policy when maternity leave is taken.

Nicole Maruff, the program’s project officer, told the committee accredited employers are provided with a consultancy service to develop

a formal breastfeeding policy and to ensure adequate workplace facilities for breastfeeding. They are also subject to an annual review to ensure standards are maintained.

Beyond the clear benefit for breastfeeding workers, however, employers too have much to gain from accreditation.

“Feedback from employers has been very positive,” Ms Maruff said. “Indeed, accreditation is aligned with business strategies of optimising recruitment and retention, valuing workplace diversity and equal opportunity and building a reputation of being a family friendly employer. We are currently updating our resources and services to deliver more value to accredited workplaces and to encourage more workplaces to gain accreditation.”

Since the program began in 2002, more than 40 organisations across Australia have been accredited as being officially “breastfeeding friendly”.

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They include Westpac, Pfizer, AGL and Allens Arthur Robinson as well as several hospitals, universities and state and Commonwealth agencies.

Indeed, the Australian Breastfeeding Association is eager for the Commonwealth government to show some leadership with regard to the balance of work and breastfeeding, not only by enacting legislation to ensure paid lactation breaks and other appropriate measures and facilities, but also by insisting on accreditation for its departments and other agencies.

When it comes to walking the walk on this issue and showing a bit of leadership, Warren Entsch (Member for Leichhardt, Qld), a member of the committee, appears to have stolen a march on his parliamentary colleagues in quite spectacular fashion. Mr Entsch told the inquiry he had been particularly eager to keep one of his valued staffers in the Torres Strait after

she had given birth. So he knocked a hole in one of his office walls and converted his boardroom into a crèche and a place for the baby to be breastfed.

As Natasha Pollock pointed out, there is much to gain for employers taking a breastfeeding friendly approach.

“There is a strong business case for employers to support breastfeeding women and to support the introduction of breastfeeding friendly workplaces,” she said. “It is a low-cost intervention which supports a family friendly work culture. It improves female retention, with some studies showing over 90 per cent of females returning to the same workplace.

“There is an earlier return to work in some cases, as well as reduced absenteeism and staff turnover—reduced absenteeism because breastfed babies are sicker less often and for shorter periods of time than bottle-fed babies. It can also be an easier work transition and it acknowledges

the needs of employees and so improves the relationship between the employer and the employee, which can boost morale and lead to greater loyalty.

“It can improve employee productivity and some studies have shown a cost saving of \$3 for every \$1 invested in breastfeeding support.”

And therein, perhaps, lies the key to persuading employers to embrace a culture that encourages and supports breastfeeding mothers in the workplace. Maybe if the powerful health arguments for breastfeeding can't make an impression on them, then the economic sense of it will. ■

The breastfeeding inquiry report by the House of Representatives Health and Ageing Committee is available at www.aph.gov.au/house/committee/haal/breastfeeding or for more information email haa.reps@aph.gov.au or phone (02) 6277 4145.

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