As a new mum who has found it quite difficult to breast feed my baby, I am hoping that this inquiry will result in significant changes to make it easier for more new mums to have the education, confidence and support that are an ongoing necessity to continue to breastfeed your child. It is widely accepted in modern medical literature that the health benefits of breast milk are vast and probably as yet not even completely understood. Breast milk has been shown to benefit the baby as it grows into a child and then into adulthood by a number of ways including immunological means (allergy prevention, reduction of childhood illness), promotes infant jaw development, psychological (maternal infant bonding and attachment) but also probably long-term benefits including protection from diabetes and obesity. There are also reported benefits of breast feeding for the mother such as reduced risk of heart attack. breast cancer, ovarian cancer and improved weight loss in the postpartum period, not to mention improved infant bonding and convenience! Such benefits are obvious for the individual but will also have significant effects on minimising the health budget by reducing paediatric hospital admissions and creating a healthier adult population in Australia.

The difficult side to breast feeding in my view, is that there can be little 'natural' about this process and new mums need plentiful education, support in terms of ongoing advice, in-person care and breast assistance with attachment and technique and further assistance in the home in those busy first few months. Such assistance could come in the form of a phone call, regular daily visits from trained lactation consultants (preferably the same person for continuity of care!), extended paid partner/carer leave from work, easier access to respite childcare for other children at home, subsidised home cleaning/cooking help and the like.

The Government needs to recognise the negative impact that breast milk substitute companies are having on the general population (but in particular those that are disadvantaged, uneducated, remote, Indigenous, of non-English speaking background) in terms of attracting women to breast feed in the first place but also being supported to continue breast feeding for longer than a few weeks. Multinational companies are very good at marketing their products and especially breast milk substitutes and at present there are no real counterarguments or information campaigns in place to promote breast feeding in a format that is easy to understand for the general population (a campaign similar to SIDS prevention or QUIT smoking would be so helpful). The biggest problem I see is that largely, our previous generation of mothers were falsely led to believe the breast milk substitute was best (and easiest!) and unfortunately the benefits of breast feeding are not accepted by them, primarily due to lack of education. This in turn means that for new mums today, they are often battling to convince their parents (and often the community) that breast feeding is definitely worth the extra effort and is necessary to pursue.

My personal experience is that with a history of anaphylactic allergies, at least I understood the importance of breastfeeding in particular for allergy prevention, but that was only the first step. Early discharge from hospital, lack of continuity of care in the community and numerous people pushing formula as a 'better option' meant it was an uphill struggle to breast feed my baby. With valuable partner and family support, a self funded private lactation consultant and the peer support from mothers' groups I am about to celebrate breastfeeding my daughter for at least six months with a party to raise funds for breast cancer research. I would love to go on to train as a lactation consultant and government initiatives could definitely make this easier for me to do so and help women in the future with breast feeding.

In my view, initiatives to promote breast feeding in Australia should definitely work to prevent breast milk substitute companies from being able to misguide vulnerable mothers, but then also positively assist women to make the right choice and be able to continue breast feeding. Like most health campaigns, funding for education via the media is crucial to widely educate the Australian public about the benefits of breast milk, the risk of even one single bottle of breast milk substitute and the ways in which the Government will assist women who choose to breast feed. It is the latter area, however, which will be fundamental in terms of increasing the rates of women who breast feed their children beyond a few weeks/months.

Government subsidy/provision of home visits from lactation consultants, breast pump availability, home support and the like are needed. I am certain that once the benefits of breast feeding are widely known and understood, that feeding in public will no longer be an issue and that there will be more clean, well lit and well ventilated areas available for mothers to breast feed their children. Unfortunately, like most incentives that have economical implications for the Government, it may well be that women may need a cash incentive (or perhaps be entitled to more paid maternitypaternity leave) to encourage them to breast feed - as has been the case with the baby bonus, childhood immunisation schedule and even the new home owner's grant. The community would be horrified if new mums decided to take up smoking cigarettes, but widely accept the use of breast milk substitutes – it is time for the Government to put a stop to this and promote breast feeding as being healthy, nutritious, convenient and put simply – the 'perfect drop' to feed the future generation of Australians!

## Mrs Pooja Newman