Subject: Parliamentary enquiry into breastfeeding.

To Whom It May Concern:

I understand that a report is being prepared by the Commonwealth Parliamentary Committee for Health and Ageing into the ways that Australian mothers can be helped with breastfeeding. As a mother of one, I would like to put forward my feedback to be considered as part of the report.

Submission no. 437

I feel that there are two reasons why women fail at breastfeeding. One is pressure, and the other is bad/conflicting advice (lack of education) from midwives about attachment, feeding etc. In the quest to get the message that 'breast is best' out there, advocates have forgotten that breastfeeding mothers are fallible human beings, whose basic needs of rest, sleep and food still need to be met.

My personal breastfeeding experience was quite traumatic. My son was a large baby at birth (over 9 pound). In the ante-natal classes, they tell you that because their little tummies are so small, all they need for the first few days after birth is colostrum. Well, someone forgot to tell my son that! He screamed for hours after he was born. We tried and tried and tried to attach him to the breast, but he couldn't/wouldn't latch on. Eventually the paediatrician came to visit, and diagnosed him with dangerously low blood sugar levels, and advised us to comp feed him with some formula after each 'breast feed'. Despite the medical advice to do so, that did not stop the various midwives and lactation consultant from offering their disapproval at that plan (which ranged from voicing their opinion, to passive resistance techniques such as taking up to a hour and a half to bring the comp feed after it was requested), which is devastating to a new, first time mother who is in the grip of raging post-natal hormone fluctuations. I struggled and struggled with attachment, and it seemed as soon as I started to get the hang of it one way, the shift change would happen and I would inevitably get a midwife come in and say "Why on EARTH are you doing it THAT way!" and so we would start all over again.

Our situation continued to deteriorate at home. My son hardly ever slept, and either cried or screamed most of the time, and was dismissed as a 'colicky' baby. It seems that once you are farewelled from the hospital, then you are very much on your own. I have never felt so lonely or desperate as I did in those long hours in the first weeks of my son's life. Sleep deprived, completely exhausted and running on pure adrenalin, I do not know to this day how I coped.

As it turned out, my son was eventually (after 6 weeks of NO sleep) diagnosed with a milk protein and lactose intolerance. He was put onto a prescription

formula, and we never looked back. There are a couple of distressing things about this situation: we spoke to the doctors, midwives and lactation consultant in the hospital about the family history of this (my husband has adult milk protein and lactose intolerance), yet no one seemed concerned, or in some cases even acknowledged that information; the other thing is that the formula the hospital provided was milk based, and was the only one available, which I am sure made my son feel absolutely dreadful.

I believe that there needs to be a HUGE increase in the education of midwives and lactation consultants; not only to help them present consistent breastfeeding information (which just doesn't happen now), but they also need to learn about some of the conditions that may be a barrier to breastfeeding, or indeed the conditions in which formula feeding may be more suitable (as in my son's case). They also need to learn some factual information about formula, rather than simply portraying it as a poor substitute (it isn't as good as breastmilk, but it is preferable to a starving baby), or as something evil or poisonous. Formula IS a lifesaver for many babies.

There also needs to be a massive increase in the availability of help in the home for mothers who are trying to establish breastfeeding. Getting the hang of the technique in the hospital is completely different to making it work at home, and mothers need people to come into their homes and help them with getting it right there, so they can start to get some sort of routine going.

Above all, the absolute last thing a woman struggling with breastfeeding needs, is to be told repeatedly that 'breast is best'. That is the singularly most unhelpful thing a health professional can say to a struggling, exhausted and sleep-deprived new mum.