

To whom it may concern

I am a trainee (Australian Breastfeeding Assoc) breastfeeding counsellor in rural Victoria; I am also treasurer of the Playgroup, secretary of the Toy library and outgoing vice president of the kinder parents committee so I interact with a lot of women and young children. Also I live in a very pro-breastfeeding area, with a Lactation Consultant as the local Child Health nurse, so you would expect a high rate of Breastfeeding in my area. Not so. In my circle, I am the only breast feeder. And many of the stories I hear from women about their breastfeeding experiences make me very frustrated because the problems encountered are not ones that cannot be solved. I hear from mothers who wean because of low supply that could have been easily fixed with correct advice and support. Also there is a strong belief in formula making babies sleep longer at night which is disproved by their children still waking three to four times at night (totally normal behaviour but incorrectly interpreted as misbehaviour). Also I have encountered mothers being pressured to wean their child because their friends and family believe the mother's milk has lost it's goodness, or the child isn't getting any benefit from feeding past a certain age (which differs from age to age). And these are mother who enjoy breastfeeding immensely, with children who enjoy this special time with their mothers. Some days I feel irritated and ostracised as the only visible breastfeeder. I actually call myself the local "Breastfeeding Looney" in order to deal with my feelings of abnormalisation. It is only when I attend Australian Breastfeeding Association meetings that I feel normal and can relax.

Unfortunately the common perception amongst mothers is "bottle's just as good". This is prevalent across the country, as I have recently attended a new mothers group in Brisbane and mothers were actually recommending different types of formula to each other even though all the mothers were successfully breastfeeding. No one had told them about the risks of breastfeeding, and I feel this is due to many people being degradedly labelled "breastfeeding Nazis" when they have raised reservations about the safety of formula feeding. This is a huge insult to many caring people. This perception is reinforced with the blatant advertising in the majority of parenting magazines. Only a few Health professionals seem aware that there are any risks associated with the introduction of Infant formula or premature weaning from breastfeeding.

The underhanded methods of advertising used by Artificial Infant Milk Manufacturers are also frustrating. Health Professionals are given samples of formula to give out to mothers. I know this because my Maternal and Child Health Nurse had a boxful that was nearly out of date to give away "to farmers to feed poddy lambs" as well as hydrolysed formula. While they may have been out of date because she doesn't feel the need to hand them out to mothers, I've heard there are Nurses out there who do hand them out as tokens and freebies. This is unacceptable practice and a breach of both the WHO code and the MAIF agreement. As well as this, you can find formula manufacturers advertising on mothering websites, directing them to their own website where they will happily send you toddler formula samples, and direct parents to ask their health provider for samples, no question asked, as well as supplying pamphlets galore with incorrect or at the least in accurate information about breastfeeding and normal infant behaviour.

I sincerely believe that the World Health Organization & United Nations Children's fund (2003), Global Strategy for Infant and Young Child Feeding, needs to be implemented fully if we are to combat the rising rates of allergies, obesity, and general illness created from premature weaning onto Artificial Milk. 4.1 of the WHO code states "Governments should have the responsibility to ensure that objective and consistent information is provided on infant and young child feeding for use by families and those involved in the field of infant and young child nutrition. This responsibility should cover either the planning, provision, design and dissemination of information, or their control."

If you aren't aware of the ramifications of feeding any breastmilk substitutes, a recent publication in Pediatrics found that children who were never breastfed were nearly 5 times more likely to be hospitalised in their first year than babies who had been full breastfed for 4 months (Talayero, Lizán-García et al. 2006). They estimated that the number of children under

1 year needing hospitalisation could be more than halved if all children were fully breastfed for 4 months (Talayero, Lizán-García et al. 2006). A US study that looked at just three illnesses (lower respiratory tract illness, middle ear infection and gastrointestinal illness) found that for every 1000 babies never breastfed as compared to 1000 babies exclusively breastfed for 3 months there were 2033 extra visits to the doctor, 212 extra days of hospitalisation and 609 extra prescriptions in the first year of life (Ball and Bennett 2001). In addition, the increased illness in non-breastfed babies result in decreased productivity and increased absenteeism amongst parents in the paid workforce. Thus, a large employer in the US who instigated a lactation program that supported employees continuing to breastfeed once they have returned to work found that over a one year period 93% of bottle fed babies of employees were sick enough to require a doctors visit compared with 50% of breastfed babies (Geisel 1994). Since bottle fed babies were not only sicker but sicker for longer the parents of bottle bed babies had an absenteeism rate that was 7 times higher than parents of breastfed babies (Geisel 1994). Research has shown that children who are not breastfed (or who are weaned prematurely from breastfeeding) may be or are at risk of a whole host of illnesses including: respiratory illness, obesity, asthma, allergies, Type 1 diabetes, necrotising enterocolitis, bacterial meningitis, bacteremia, middle ear infections, gastroenteritis, urinary tract infection, late onset sepsis, type 2 diabetes, lymphoma, Hodgkin's disease, hypercholesterolemia, SIDS, eczema, coeliacs disease, Crohn's disease ulcerative colitis, impaired cognitive development. Women who breastfeed their babies are at a much decreased risk of hip fracture, breast cancer, rheumatoid arthritis, ovarian cancer and type 2 diabetes. The impact of breastfeeding is large and for example with breast cancer it has been concluded that "the lack of or short lifetime duration of breastfeeding typical of women in developed countries makes a major contribution to the high incidence of breast cancer in these countries" (Collaborative Group on Hormonal Factors in Breast 2002).

I would like to ask the Government to get serious about the health of infants and place resources into not only the set up of human milk banks but supports for mothers to continue to breastfeed their babies and young children. At the moment the most up to date information and most help given to Breastfeeding mothers comes from a volunteer

organisation that is minimally supported. Currently the Federal government allocates \$85,000 to the Australian Breastfeeding Association. For an organisation which deals with more than 250,000 contacts a year and does so with only 300 groups Australia wide and more than 1800 volunteer counsellors and community educators, you can see it doesn't go very far. How many other organisations can run a 24hr helpline in every state of Australia, including Norfolk Island (Australian Breastfeeding Association has a counsellor available there), as well as running email counselling for all of Australia and many ex pats overseas. The Australian Breastfeeding Association also runs the Lactation Resource centre, which is aimed at Health Professionals. It is a sad fact that many GP's have had no training in recognising abnormal or indeed normal Lactation, and infact the only knowledge about infant feeding comes from those well funded conferences by infant formula companies. see the Victorian Maternal and Child Health conference having been sponsored by Wyeth for 15 years. This again is an unacceptable situation and thankfully is under review. For the sake of our future generations, more money needs to be allocated to organisations such as ours in order to continue to educate our communities and support the mothers in them.

And our support is vital to mothers who are still expected to breastfeed their child in confinement. Even my own mother prefers that I don't feed in public. It would be nice if it were highlighted that it is discriminatory to prevent a mother from feeding her baby in public. The most wonderful thing about breastfeeding is that all you need is a seat and you can feed anywhere. I have fed in the middle of a paddock, on an aeroplane, at an engagement party, but most commonly at a café having coffee with my friends.

Breastfeeding is normal and this should be promoted at all times. At the least new and prospective mothers, as well as health professionals, should be informed with the latest research and organisations who do their best to support and encourage normality should be supported.

Submitted by
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