



**HOUSE STANDING COMMITTEE ON HEALTH AND AGEING**

**INQUIRY INTO BREASTFEEDING**

I have worked as a midwife for over 15 years and have worked hard to try to improve breastfeeding rates. My colleagues and I have tried numerous options to assist women to establish breastfeeding. Here are 3 suggestions which I believe could assist women with breastfeeding. I would be happy to supply more information if required.

Regards

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**INITIATIVES TO ENCOURAGE BREASTFEEDING**

The World Health Organization initiative "Baby Friendly Hospital Initiative" (BFHI) has been shown to have increased breastfeeding rates in hospitals who are accredited with the program. Reaccreditation occurs every 3 years and data on breastfeeding is part of the assessment process.

In Australia there is no consistent collection of breastfeeding data on

- Definitions of breastfeeding
- Data to be collected
- Collation and dissemination of the results.

A Swiss project collects and records data from all Swiss Hospitals so that Best Practice can be identified and other hospitals can improve their breastfeeding rates.

Merten, S & Ackermann-Liebrich, U. (2004) **Exclusive Breastfeeding Rates and Associated Factors in Swiss Baby-Friendly Hospitals.** J Hum Lact. 20(1) pp9-17.

I would suggest that a group of Lactation Consultants in conjunction with Baby Friendly Hospital Initiative and Australian College of Midwives, meet together to define terms and clearly identify data to be collected.

Breastfeeding rates in Australia are higher than in Switzerland so it would be good to be able to publish our results. As the midwife who collects these results at the Angliss Hospital in Melbourne I find it quite frustrating at times to try and collect the same results as other hospitals and to meet the criteria in BFHI.

## INQUIRY INTO BREASTFEEDING

### INITIATIVE TO ENCOURAGE BREASTFEEDING

At the hospital where I work as a midwife the breastfeeding rates on discharge are around 90%. After discharge many women cease to breastfeed and the reasons why this occurs are many and varied.

In 2006 the World Health Organization conducted the Multicentre Growth Reference Study (MGRS) looking at the normal growth and development of breastfed infants from birth to 2 years. One component of the program was a willingness of women to breastfeed their babies and for their babies to be exclusively or predominantly breastfed for 4 months.

In order to achieve these breastfeeding rates women were visited at home on weeks 1, 2, 4 and 6 and monthly from 2 -12 months. If a breastfeeding problem was identified a Lactation Consultant visited the women to help solve the problem.

I would like to replicate this study for women who birth at the hospital where I work. The inclusion criteria would follow the MGRS.

- Non smoking mothers
- A desire to breastfeed
- Willing to participate in the study and receive home visits at designated periods and as required.
- Access to phone counseling

The program would run over a 12 month period.

- Need ethics approval
- Employ lactation consultants to provide this follow up service
- Report on outcomes.

Business plan to be determined if funding is available.

**Breastfeeding in the WHO Multicentre Growth Reference Study.** Acta Paediatrica, 2006, Suppl 450: 16-26

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## **INQUIRY INTO BREASTFEEDING**

### **INITIATIVES TO ENCOURAGE BREASTFEEDING**

#### LACTATION SUPPORT SERVICES

All women desire the right to be supported in the establishment of breastfeeding. It is a learned process and the first few weeks are the time when new mothers require extra support.

I believe all maternity hospitals should be funded to run a Lactation Support Service so that women can return to their birth hospital, in familiar surroundings and receive help with any breastfeeding problems they are encountering.

Many women only stay in hospital for 48 hours after the birth of their baby. For some women they are unable to get their baby to attach to the breast and go home expressing breastmilk which they give to the baby by bottle. If follow up support by a health professional is not available many women find it too difficult or do not have the necessary information to get the baby on to the breast to feed. Breastfeeding Support Services are able to identify women are having difficulties when they are discharge from hospital and book them in to a clinic for follow up.