
Submission no. 439
AUTHORISED: 20/6/07 *Pz*

Importance: High

Dear Pauline Brown

I am writing in response to the post you placed in the Bub hub Community forum:
(<http://www.bubhub.com.au/community/forums/showthread.php?p=1542755#post1542755>).

I am a mother of a 14 month old boy who I breastfeed for 12 months. The first 3 months of my breastfeeding experience was not at all pleasant, it was horrific. The following months were easier but by no means 'beautiful'. It was not until my son was about 9 months old that I really began to appreciate the bond that it gave to my son and myself. Listed below are some factors that contributed to this negative beginning and any solutions that I feel may benefit other women. 1. Breast problems:- I had terribly cracked nipples. After trying many options I was advised to express and allow them to heal. This was suppose to take 2-4 days, it took 6 weeks! In this time I had no support unless I sourced it myself. Mothers who are sent home from hospital with breastfeeding issues should be followed up DAILY (initially) not handed a card with call anytime you need help. 2. Community ignorance:- My son had reflux and cried a lot especially in the first 3 months. I was constantly told that this was related to me not having enough breastmilk, when I stated that I had more than enough (by showing the huge amounts I could express!!!) I was then told that my milk must not be of good quality. I was even accused of starving my son by persisting to give breastmilk instead of formula, I had to resolve this issue by having my son weighed to show how much weight he was putting on. There needs to be a public education system put in place to educate people about breastfeeding issues, problems in infants NOT ass.with breastfeeding and how to support a breastfeeding mother. Most people told me that formula was 'just as good' as breastmilk, they did not understand the significant health protection that breastmilk offers, this sadly extends to most mothers. I have even heard that formula is 'SUPERIOR' to breastmilk. 3. "All or nothing" mentality:- although I am an advocate of exclusive breastfeeding due to the health protecting benefits I also realize that not all people can or want to breastfeed. What I do think is that if clinic nurses where to encourage ANY breastfeeding that more women might try for longer. When my son was 4 months of age I gave one bottle of formula every night (administered by my husband) so I could rest. This was the best thing I could have done. I was encouraged not to for many reasons but I did my own research and found that 'even some breastmilk was better than none', even if from birth mothers that were hesitant to breastfeed were encouraged to give even a small amount of breastmilk, I feel more people over time would come to exclusively breastfeed their babies. 4. OUT & ABOUT:- due to reflux my son was difficult to breastfeed in public, I could not cover him and myself and be discrete. When there is a baby feeding area it is also the baby change area. These areas were rarely clean, well kept or comfortable. They always smelt as they were changing areas for all aged babies & toddlers. It is a horrible environment especially for a new 1st time breastfeeding mother. Change areas and breastfeeding areas should be separated. Although newborns need to be changed and often in- between feeds (newborn odour is less offensive) a change table in the breastfeeding area is still practical. Women are told that it takes 6 weeks to establish breastfeeding but in truth it can take months. This time could be made less difficult through the implementation of better support services. Most women give up due to lack of support and never get to realize the benefits of breastfeeding. They in turn discourage other women. The best way to get more women to breastfeed in the future is to get more women to tell these future mothers the joys, not horrors of breastfeeding.

Thank you for taking the time to read my submission.
Regards