

TASMANIAN BUSINESSES
AND WORKPLACES
SUPPORTING
BREASTFEEDING
REPORT

PROJECT OFFICER

20/11/98

*Prepared for
Tasmanian
Breastfeeding
Support Coalition*

*By Helen
McDonald*

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 - The Pharmaceutical Society of Australia (Tasmanian Branch)
 - The Australian Lactation Consultants Association (ALCA)
 - Midwives from Maternity Units and private hospitals in Southern Tasmania
 - Calvary Hospital,
 - St. Johns Hospital,
 - Queen Alexandra hospital
 - The International Board of Lactation Consultant Examiners
 - The Childbirth Information Service
 - The Australian College of Paediatrics
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2. DESCRIPTION OF PROJECT

This breastfeeding promotion project will seek to increase the number of supportive physical and social environments for breastfeeding amongst Tasmanian community facilities such as businesses and workplaces. The project was coordinated and implemented by the Tasmanian Breastfeeding Support Coalition using its Statewide network of members. It worked with businesses to provide new mothers with a guide to public facilities and promoted businesses that actively supports breastfeeding mothers. It also worked with workplaces Statewide to provide breastfeeding staff with the support to continue breastfeeding after their return to work.

2.1 HEALTH GOAL

The promotion of breastfeeding is a primary recommendation of the Tasmanian Government's *Food & Nutrition Policy* and is consistent with national mandates for infant and family health (eg. Federal Governments *Health throughout Life Policy*, and *Work and Family Resource* package). Infants have been recognised in the at risk population group with regard to nutritional status and related health outcomes.

2.2 PROJECT GOAL

To increase breastfeeding initiation and duration by creating a social and built environment that is more supportive of breastfeeding mothers.

Currently 76-78% of women in Tasmania are breastfeeding their babies on discharge from their maternity services and by 6 months that has dropped to 45%, which is the lowest in Australia.

The proposed National goal (Department of Community & Health Services) is that by the year 2,000 the breastfeeding targets are:

- 90% of women will be breastfeeding their babies on discharge from their maternity services.
- 80% will be fully breastfeeding their babies when they are 3 months of age and
- 50% will be fully breastfeeding their baby at six months of age
- with 80% of the remainder partially breastfeeding at six months of age.

2.3 TARGET GROUP

This project reached out to the whole community by involving public goods and service provider facilities (restaurants, other retail outlets, pharmacies, hairdressers, shopping centres post offices etc) to create more supportive (interpersonal, policy and physical) environments for breastfeeding mothers. **Primary beneficiaries are mothers and the infants.**

This project was designed to provide a tangible participation incentive for these goods and service providers (hereafter referred to as businesses)- as such they were secondary targets. The following businesses were included in this secondary target group:

- Workplaces
- Restaurants
- Cafes
- Supermarkets
- Other food outlets eg. takeaways
- Shopping centres
- Pharmacies
- Government utilities shopfronts eg Post office, Hydro, Local government
- General practitioner clinics/surgeries
- Other Professional offices eg accountants, solicitors, etc.

The **need** for greater social and environmental supports for breastfeeding mothers (ie. Mother Friendly Environments) has been identified at a national, state and local level¹²³⁴⁵ Breastfeeding is a practice that requires the support of everyone in society. It requires a commitment on the part of health care institutions, decision makers, governments and individuals in the community to ensure a totally baby friendly environment. Problems mothers face range from: lack of social support; limited environmental planning and lack of knowledge regarding health outcomes with other feeding practices. Being inadequately prepared for the challenges of breastfeeding; a desire to return to paid employment (with no workplace mother-friendly policy continuing to breastfeed can be difficult); inconsistent advice and attitudinal indifference contribute to this.

A recent community based study of public attitudes to breastfeeding in public in Hobart confirmed this need for greater social and environmental supports for breastfeeding mothers (17% of people rated breastfeeding in public as inappropriate to very inappropriate).⁵At present there are only 5 Tasmanian workplaces accredited as being *Mother Friendly Workplaces* by the Nursing Mothers' Association of Australia(NMAA).

2.4 GEOGRAPHICAL LOCATION AND REACH

This was a Statewide project which drew on the community, professional infrastructure and established networks provided by the various member groups of the *Tasmanian Breastfeeding Support Coalition*. The Tasmanian Branch of the Nursing Mothers Association is a key member of this coalition and the networks included NMAA membership, Tasmanian Lactation College members, Dietitians Association of Australia members etc.

The reach of this project extended to the whole community. Businesses have the potential to reach a large proportion of the Tasmanian adult population and a significant proportion of children. As such, this project represents an opportunity for a mass reach project using a cost effective and innovative strategy .

The Project Officer was based in Hobart and two other project workers were based in the North and the North West of the State. Each project worker approached businesses in her area and the project officer approached workplaces Statewide for accreditation.

3. OBJECTIVES

- 1) To accredit at least 100 Tasmanian businesses as *Businesses Supporting Breastfeeding*.
- 2) To accredit at least 20 Tasmanian workplaces as *being Mother Friendly* using established NMAA criteria.
- 3) To develop, promote and distribute a *Breastfeeding Supporting Business Directory* to all new Tasmanian mothers.
- 4) To increase the awareness of the community (Business staff, consumers) about the social and environmental support needs of breastfeeding women.

3.1 RATIONALE

This project's objectives and strategy mix acknowledge that community facilities and policies which support breastfeeding may have a large impact on a mother's perception of her potential to breastfeed, and her experience of breastfeeding. This approach is widely recommended in the international literature relating to breastfeeding promotion.¹

3.2 STRATEGIES

(Note: Strategies follow highlighted project objectives)

OBJ 1: To accredit at least 100 Tasmanian community goods and service provider outlets as *Businesses who Support Breastfeeding*.

OBJ 2: To accredit at least 20 Tasmanian workplaces as *being Mother Friendly* using established NMAA criteria.

3.2.1 Establish accreditation criteria

Accreditation programs have been successfully used interstate and overseas to increase social and environmental support for breastfeeding.¹ A very simple accreditation survey/system was developed to include accreditation against:

- 3.2.1.1 Social environment; assessment of attitudes of staff toward breastfeeding in public (and at work) and knowledge of breastfeeding support issues. For businesses, this was the only essential criterion to be met prior to accreditation.

- 3.2.1.2 Physical environment; eg. baby change rooms available, (essential for workplaces and a bonus for businesses)
- 3.2.1.2 Policy environment; willingness to visibly promote a breastfeeding support policy for consumers and staff, (essential for workplaces and suggested for businesses)

This accreditation system complemented the Nursing Mothers Association of Australia's existing schemes for accrediting baby care facilities and of Mother Friendly Workplace Awards. Accreditation criteria were developed collaboratively between the *Tasmanian Breastfeeding Support Coalition* in consultation with businesses.

The survey was piloted by 10 businesses and altered accordingly.

3.2.2 Promote the benefits of accreditation widely amongst businesses

Accreditation as a Business Supporting Breastfeeding provided a number of benefits for participating businesses, including:

- 3.2.2.1 High level exposure to all new mothers in Tasmania (via the Directory), at no cost to the business
- 3.2.2.2 An opportunity to establish consumer loyalty amongst a Significant community consumer group
- 3.2.2.3 Access to point of sale marketing materials
- 3.2.2.4 Support and information regarding an important consumer and community issue.

These benefits (at no or little cost) were promoted as incentives to business participation.

188 businesses were invited to participate via personal invitation initially (over the phone) and those interested (116) were then sent a survey (application form)(See Appendix A p. 17). A stamped addressed envelope was supplied for the return of the survey with information marketing the process, which included the virtues of their business participation (See Appendix B p. 21).

53 Workplaces Statewide (all who employed more than 100 employees) were approached by letter, by phone call and then by follow-up letter. The first approach focused on the Health Goal. The second approach focused on the project goal and a third approach focused on how supporting this project could help with staff motivation, reduced need for employing/ training new staff to cover for women on maternity leave, reduced one day leave for family illness and increased public standing. (See Appendices C p. 24, D p. 28, E p. 32, for application packages).

3.2.3 Consult with, assess and facilitate accreditation of businesses. To include assistance with how to reach accreditation standards.

The essential criteria for accreditation for businesses were a friendly attitude to breastfeeding customers; facilities to assist the breastfeeding customer such as privacy and a change table were considered a bonus. Businesses participating in the project were assessed by project workers against this criterion and assessment feedback was provided. Changing the attitude of staff to breastfeeding customers involved training, information and support. This is on going. Businesses were actively consulted and involved at all stages of the assessment/ accreditation process.

Of the 104 businesses that applied for accreditation 104 were accredited. 12 businesses requested information and decided not to apply for accreditation. Comments varied:

“Most of my staff have breastfeed their children & I am a NMAA counsellor & member – we offer every support necessary.”

As we are all women staff of 5, 3 having children, breastfeeding is not really an issue. However a little discretion helps put other customers at ease.”

“Although we support breastfeeding it would be very hard for any mother to breastfeed in our Centre. We are a busy information centre with very limited seating and a lot of ‘thru’ traffic. But we thank you for thinking of us.”

“We are a pharmacy with a resident mothercraft nurse who is currently completing a lactation consultancy course, so yes, we are very interested.”

“Facilities and amenities not appropriate for electrical & furniture stores”.

We had:

15 requests for a project worker to discuss the businesses facilities;

13 requests for NMAA booklets;

10 for information on baby change stations;

7 on the Sexual Discrimination Act;

4 for staff training to enable them to be more supportive of the breastfeeding customer;

4 for general help and,

1 for information on breast pumps.

Each business after completing their application (survey) was checked by a project worker and accredited. (See Appendices F p. 33, G p. 34, H p.35)

Objective 1 has been achieved.

3.2.4 Consult with, assess and facilitate accreditation of workplaces. To include assistance with how to reach accreditation standards.

53 workplaces were invited to seek accreditation. Of these 21 requested further information. Of the 21, 2 have gained accreditation and 3 are working on it. Comments/ reasons for lack of interest are varied:

“We are sympathetic but are an industrial site so we allow no children here”

“We are not in a position to be able to look after our employees in that manner”

“Not interested as general policy, we look at staff case by case”

“Not an issue and never will be”

“We acknowledge the importance of encouraging women to breastfeed but do not seek accreditation for the reasons outlined below. (We have)... very few female employees...

Our customers are generally overseas and we visit them, there are very few female visitors to the shipyard, perhaps the occasional visiting Member of Parliament or journalist covering a story.

Our shipyard workers cannot have adult visitors on site. Any authorised visitors must have insurance coverage certificates, wear ear and eye protection and hard hats, the noise level means it is really not an appropriate environment for babies.

For several years the ships have been fitted out with baby change facilities...Some also have nursery and creche facilities installed, depending on the requirements of the purchaser....”

Discussion

For change to happen successfully the targets (workplaces) must feel the need to change. The vision and the process for the project was in place but the employers did not have any incentive (that they could see) to change.

The restraining forces that needed to be addressed were:

- Lack of need/ incentive
- Lack of resources
- Lack of expertise
- Lack of managerial understanding in the areas of staff motivation, attrition of staff due to family issues etc.

Once these issues were identified and remedied then the change itself should be achievable. The lack of incentive, expertise and managerial understanding was addressed by two means:

- Producing the ‘policy information guide’ which was adapted from the Work & Family Resource package⁶ (See Appendix I p. 36)
- Provision of information regarding the impact of implementation of mother friendly policy etc. in the form of an eye-catching flyer, an information pack and application form.

Objective 2 has not yet been achieved.

3.2.5 Develop shop front marketing aids to promote as breastfeeding supporters at the point of sales/service.

In order to help identify businesses participating in the project as Businesses Supporting Breastfeeding, external and internal point of sale/service stickers were developed. This visual marketing tool will serve two main functions,

- To promote participating businesses, and
- To increase consumer awareness of breastfeeding.

Requests for ideas for a logo to go on the sticker were called for from the Tasmanian Breastfeeding Support Coalition. An UNICEF logo was chosen and trialed by inviting 5 different types of business to comment on whether they would be happy to display the sticker or not. All were positive and the prototype was accepted. UNICEF agreed to the use of their symbol. (See Appendix J p. 45)

OBJ 3: To develop, promote and distribute a *Breastfeeding Supporting Business Directory* to all new Tasmanian mothers.

3.2.6 Collate business details for directory during consultation / accreditation.

Businesses details were collated during the accreditation assessment for inclusion in the *Businesses Supporting Breastfeeding Directory*. These details were collated regarding the goods and services relative to breastfeeding support they provide and other relevant comments to aid new mothers.

When each completed survey was returned to the Project Officer the business was personally checked by the local project worker. The anecdotal response from this was positive as it made the project more personal. However comparison of the checklist that the project worker filled out and the survey that the owner of the business filled out showed marked differences in the facilities provided by the business for breastfeeding customers. It can only be surmised to the reason for this. As the owner of the business knew what s/he was happy to offer for breastfeeding customer's use we included his/her list of facilities in the directory and not the project worker's one.

3.2.7 Publish 'Businesses supporting breastfeeding' directory

5,000 business directories were published. 3,000 for the maternity units and 2,000 for the Family, Child & Youth Health Centres. An update of the directory is planned for six months time when more businesses have been accredited. (See Appendix K p. 46, for 3 pages of the Directory)

3.2.8 Distribute directory via maternity unit's infant package.

Maternity units currently provide a baby information and sample kit to mothers of all new Tasmanian babies. This kit provides an ideal vehicle for distribution of this directory, providing mothers with a reference to Tasmanian

businesses and facilities that actively support breastfeeding. All units were approached and have agreed to disseminate the directories. The numbers of births for each unit per year (as at November 1998) is as follows:

The North West Private Hospital	800
The Queen Victoria Maternity Unit	1,750
The Launceston Birth Centre	70
Calvary Hospital – Hobart	1,000
The Queen Alexandra Hospital	2,100
The Childbirth Information Service	40

Each unit has been furnished with sufficient directories to cover half the annual births and the 2nd edition of the Directory will be disseminated after it has been published in six months time.

3.2.9 Mobilise ongoing business support for the directory to ensure post project sustainability

The first edition of the directory (1997/8) was piloted in this project. Future editions will be produced with funding from participating businesses, (e.g. Advertising or sponsorship). Sustainability will be addressed in consultation with participating businesses. A copy of the directory was sent out to each business accredited to the project with an offer to continue their free listing or buy advertising space in the next directory (See Appendix L p. 51). Health related businesses were also approached for sponsorship of the new directory.

Objective 3 has been achieved.

OBJ 4: To increase the awareness of the community (Business staff, consumers) about the social and environmental support needs of breastfeeding women.

3.2.10 In consultation with participating businesses develop staff education materials and facilitate staff training re: breastfeeding awareness support and accreditation responsibilities/benefits.

Community attitudes to breastfeeding in public can have a major effect on breastfeeding duration.³ Consequently, staff in community facilities can assist with the promotion of breastfeeding by being aware of the needs of breastfeeding mothers, and the impact that their attitudes and behaviors may have on the level of support felt by the mother. Education material dissemination (e.g. NMAA Lactfact sheets) and staff discussions were part of the accreditation process. Each business who applied for accreditation were also asked via the accreditation survey whether they required additional information, support and education. 36 businesses took advantage of this. Information provided included: training for restaurant staff (4 businesses), baby change stations (4), discussion on the Sexual Discrimination Act by the Sexual Discrimination Commissioner (7), NMAA booklets (13), NMAA hire

service of breast pumps (1), NMAA posters and advice regarding the business' facilities (15).

3.2.11 Utilise opportunistic media coverage to promote the project, the directory and the Businesses supporting breastfeeding.

Opportunistic media utilisation strategies (eg. Media releases, launches, letters to the editor) were used to increase community awareness of the project, promote business participation and raise awareness of new parents to the businesses that openly support breastfeeding. There were 28 articles published through various media during the project (see appendix M p. 52, for some examples.)

Objective 4 is yet to be evaluated.

4. EVALUATION

The evaluation of this project will determine whether it has been successful in making the environment (physical and social) supportive for breastfeeding amongst Tasmanian community facilities such as businesses and workplaces.

4.1 Process Evaluation:

4.1.1 Project reach:

The distribution of *Businesses Supporting Breastfeeding Directories* is to all Tasmanian mothers having new babies over a 12 month period, which is to over 6000 mothers (the majority `80% initiate breastfeeding) and their families. The distribution strategy directly targeted this primary target group and mothers of older babies as well via the Family, Child & Youth Health Clinics.

4.1.2 Project implementation:

The 11 set strategies for this project were achieved.

- 4.1.2.1 Accreditation criteria were established and included in the information packs and application forms (surveys)
- 4.1.2.2 104 businesses applied for accreditation.
- 4.1.2.3 2 workplaces applied for accreditation
- 4.1.2.4 Stickers were developed.
- 4.1.2.5 150 stickers were distributed to 104 businesses Statewide.
- 4.1.2.6 104 certificates of accreditation were awarded.(Appendix L)
- 4.1.2.7 Approx. 3,000 Directories were distributed to 6 maternity units (6500 over 12 months)
- 4.1.2.8 36 businesses requested and were given information and support. 21 workplaces requested and received information & support.
- 4.1.2.9 There were at least 28 media contributions aired/printed.
- 4.1.2.10 Attendance at the award ceremony and the launch of the Directory in Hobart was 35 and included; businesses and workplaces accepting the awards, the Hon. Judy Jackson MHA (Minister for Health, Ms E Little, Sexual Discrimination Commissioner, a representative of the Health Promotion

Council, Members of the NMAA, members of the Tasmanian Breastfeeding Support Coalition, a member of Health strategy, and a project worker.

4.2 Impact evaluation

Impact evaluation will measure the effect the project has had on the physical, social and work environmental support in participating Tasmanian businesses. A survey will be sent to all businesses accredited after one year of the project. The evaluation will include measurement of:

- 4.2.1 Changes in staff attitudes, knowledge and support for breastfeeding (using the attitudinal check in the application for accreditation and post project questionnaire)
- 4.2.2 Business participant's subjective observations of the effect of the Business Directory on business patronage (via 12 month Business participant survey).
- 4.2.3 The number of workplaces reaching Mother Friendly standards
- 4.2.4 Usability of the Directory by new mothers. A feedback form and incentive (prize for 5 respondents) was included in the back of the directory. The community Nutrition Unit will monitor these throughout the year.

Objective 1 was achieved.

Objective 2 has not been achieved yet for reasons previously outlined.

Objective 3 was achieved.

Objective 4 is yet to be evaluated.

4.3 Outcome evaluation

The Tasmanian Breastfeeding Support Coalition has been actively involved in the recent development of a minimum data set for breastfeeding monitoring and surveillance in Tasmania. This monitoring system (using existing perinatal and Family and Child Health Service (FACHS) data collections) provides a basis for measurement of project outcomes (ie. Increases in breastfeeding initiation and duration) on an annual basis and will be utilised in the evaluation of this project.

5. BUDGET

Item	Detail	Cost prediction	Actual Cost
<u>Wages</u>			
*Project Officer	S&W + oncost x 400 hours @ \$20/hr	\$8,800	\$8,815.30 net \$1884.70 \$601.60 \$416
*Project workers (2)	Contract 40 hours @ \$15 /hr	\$0	
*NMAA project support	1 hour / week		
Tax	1884.70		
Superannuation TGIO			
<u>Printing costs</u>		\$7,000	
Artwork & design	200 printed, 1,000 budgeted 5,000 printed		\$0
Stickers			\$577.50
Ink cartridges			\$167.00
Directories			\$2,146.00
<u>Travel costs</u>	Project Officer used CNU's vehicle. Private vehicles were used by project workers	\$500	\$131.00
<u>Administration costs</u>	CNU absorbed most of the costs of this program Claims by project workers for admin costs	\$500	\$212.41
-telephone			\$184.45
-postage			\$57.65
-stationary		\$0	
Other	Additional amounts claimed to 5/11/'98		\$90
Award ceremony	Hobart		100
Petty cash			\$56
Total		\$16,800	\$15,439.61
Money left for:	Printing of second edition of Directory and project worker	\$1,360.39	
Estimated cost to continue project.	S&W of project workers for 64 hours x 2 pa @ \$20/hr	\$2,500	
	Stickers	\$500	
	Directories	\$3,500	
	Administration	\$500	
	Travel	\$0	
Total estimate		\$7,000 pa	
Money donated from other sources	Community Nutrition Unit		\$1,000

6. RECOMMENDATIONS

- 6.1 Grass roots change is necessary for the achievement of 'Mother friendly workplaces'. There is opportunity for the members of the NMAA Australia wide to bring about this change, at this level, for their members and their families. They could do this by requesting breastfeeding friendly policy and provisions at their workplaces. This could also include supporting the valuable contribution of partners to the breastfeeding woman by introducing flexibility in their employment.
- 6.2 Project coverage via NMAA's newsletters asking members to;
 - 6.2.1 Be proactive with regard to their workplaces becoming mother friendly (as above),
 - 6.2.2 Visit accredited businesses and give positive feedback about the display of the sticker and the listing in the Directory.
- 6.3 Continued support for the 'Health promoting schools' project with regard to inclusion of breastfeeding on the curriculum in Tasmanian schools.
- 6.4 The continuation of this project by the Community Nutrition Unit in its simplest form which includes:
 - 6.4.1 Scrutiny of the completed survey (application) forms by staff of the Community Nutrition Unit and provision of support to businesses as necessary for accreditation.
 - 6.4.2 No personal inspection of the businesses by a project worker as the survey form and subsequent phone follow-up, (as necessary) suffices.
 - 6.4.3 Database kept up-to-date.
 - 6.4.4 Updating the Directory and re-printing it every six months instead of annually as planned.
 - 6.4.5 Dissemination of the Directory to Family, Child & Youth Health Centres for purchase by mothers of older children
 - 6.4.6 Evaluation of the Project to be done in twelve months time. This includes evaluation of:
 - 6.4.6.1 Accredited businesses regarding the success or otherwise of the project, from their perspective. To be done via the post project survey.
 - 6.4.6.2 New mothers who use the Directory. A nursing student via a focus group to determine the dissemination of the Directory and its useability could do this.
- 6.5 Sponsorship to be gathered from breastfeeding friendly organisations.
- 6.6 Advertising offered in the Directory for accredited businesses as an extra to their free listing.
- 6.6 Coalition members to be proactive re the project in their member organisations.

7. END NOTES

¹ Stickney B, Webb K. Strategies to promote breastfeeding: A review. 1995. NSW Health.

² Rae C. Breastfeeding policy and strategic plan, 1994-2000. 1994. Northern Territory Department of Community and Health Services.

³ Scott J, Binns C, Aroni R. Infant feeding practices in Perth and Melbourne. Report 2: Factors associated with the duration of breastfeeding and women's breastfeeding experiences. 1997. Curtin University of Technology.

⁴ Hughes R. et al. Priorities for breastfeeding promotion in Tasmania: background paper for the development of a breastfeeding promotion strategy for Tasmania. *Draft*. 1997. Department of Health and Community Services .

⁵ Hughes R et al. Evaluation of the Tasmanian Breastfeeding Support Coalition's Breastfeeding Awareness Campaign. In print 1997. Community Nutrition Unit.

⁶ Work and Family Unit, Workplace Guide to Work and Family. Department of Industrial Relations, Canberra. undated