

Improving Maternity Services in Australia: A Discussion Paper from the Australian Government

Submission from

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COMMENTS ON QUESTIONS

What, if any, are the key support services, including peer support which warrant national coverage?

What is required to ensure the quality and consistency of key support services?

Improved National Breastfeeding Data

The lack of a nationally coordinated system to monitor breastfeeding rates is a key gap to understanding breastfeeding patterns in Australia. Breastfeeding influences the health of both mother and child and is therefore a crucial component of maternity services.

Monitoring trends in breastfeeding in Australia is compromised, as there is no routine system for the national collection of breastfeeding data. For epidemiological and research purposes it is imperative that the monitoring of infant and young child feeding practices be consistent with the WHO/UNICEF definitions and indicators for assessing feeding practises. It would make sense to integrate breastfeeding data collection into routine maternal services data collection systems. For example:

1. Breastfeeding initiation rate, exclusive breastfeeding from birth to hospital discharge, and (any) breastfeeding at hospital discharge could be collected as part of the national minimum data set on perinatal statistics with the data collected on discharge from maternal services.
2. Breastfeeding duration rates could be integrated into a nationally consistent approach through multidisciplinary action including the maternal and child health services, immunisation, GP practices, Breastfeeding Support Services, Nurse practitioners, etc in each jurisdiction.

Protection of Breastfeeding

Mothers make initial and ongoing decisions about infant feeding against a background of marketing practices by companies and retailers. Full implementation of the International Code of Marketing of Breast-milk Substitutes and subsequent WHA resolutions is needed in Australia and it would be timely to revisit the conclusion of the 2001 Knowles Report ¹.

The Australian Government has the opportunity and responsibility to promote, protect and support breastfeeding through implementation of the Global Strategy for Infant and Young Child Feeding².

Supportive Environments for Breastfeeding

Mandated accreditation of all hospitals in the Baby Friendly Health Initiative (BFHI) would increase the likelihood of every baby being delivered into an environment where breastfeeding is the norm and practices known to promote the health and wellbeing of all babies and their mothers are followed. New Zealand has implemented mandatory accreditation and has achieved improved breastfeeding rates, even at 6 months. Worldwide experience has shown that support from above, especially mandatory accreditation, is a key element of successful implementation of BFHI.

Greater access to midwives and lactation consultants and consistency of care providers through antenatal and postnatal care will increase the likelihood of improved breastfeeding initiation and continuation rates.

¹ The "Composition and Modus Operandi of APMAIF and the Scope of the MAIF Agreement", Knowles 2001. Conclusion: *"If there is not a commitment by Industry to cooperatively work with Government on issues that are outside the current MAIF Agreement, then it is recommended that serious consideration be given to legislative reform to achieve the required public health outcomes, and ensure Australia's commitment and integrity to the WHO Code remains strong."*

² Global strategy for infant and young child feeding, World Health Organization 2003.

Medicare provider/registration numbers should be issued to International Board Certified Lactation Consultants (IBCLC) as allied health professionals working in integrated care settings and community super clinics.

Medicare provider/registration numbers should be issued to midwives.

All lactation aids such as breast-pumps, nipple shields and supply lines should be exempted from the Goods and Services Tax. Additionally, private health insurers should be advised that these items, plus lactation consultant services, be fully rebated.

A feasibility study is needed into the setting up of a network of milk banks in Australia including the development of a national regulatory and quality framework within which a network of milk banks in Australia could operate.

Strong commitment to the Baby Friendly Community Initiative (BFCI) would ensure that support for breastfeeding continues during the critical first six weeks after birth and beyond.

National Breastfeeding Education and Awareness

A national social marketing campaign is needed to create a culture of breastfeeding. This will complement educational measures within the antenatal setting and increase the chances that women will decide to breastfeed and continue to breastfeed for longer.

In recognition of the poorer health of Aboriginal babies education and awareness campaigns should ensure that Aboriginal women are also targeted, particularly those in metropolitan areas where most Aboriginal women live. This can be done by use of appropriate images and symbols, but in ways which do not stereotype Aboriginal women.

Funding should be provided to indigenous communities in both remote and other areas in order to provide culturally appropriate breastfeeding education and awareness campaigns.

Breastfeeding education should be a mandatory part of school curricula, included in both sexual health and nutrition components, with focus on the hazards of artificial infant milk and biological normality of breastfeeding.

^aThe Tasmanian Breastfeeding Coalition is made up of a number of groups and organisations, which work together to improve breastfeeding rates in Tasmania. Initially formed in 1996 the Coalition now extends across the state of Tasmania.

Currently the following are members of our Coalition:

- Australian Breastfeeding Association
- Australian College of Midwives Inc. Tas Branch
- Baby Friendly Hospital Initiative, Tas Committee
- Calvary HealthCare Hospitals
 - St Lukes Campus
 - Lenah Valley Campus
- Child Health Association Tasmania Inc
- Department of Health and Human Services
 - Beaconsfield District Health Service
 - Community Nutrition Unit, Population Health
 - Child, Health and Parenting Service
 - Maternity Services, Royal Hobart Hospital
 - Maternity Services Launceston General Hospital
 - Oral Health Services
 - Nutrition and Dietetics, Royal Hobart Hospital
- Healthscope
 - Hobart Private Hospital, Maternity Services
 - St Helens Private Hospital
- Birth Centre, Launceston

- National Association of Childbirth Educators
- Pharmaceutical Society of Australia (Tasmanian Branch)
- Tasmanian Lactation College Inc.
- Tasmanian Aboriginal Centre Inc.
- The Menzies Research Institute
- Diabetes Australia – Tasmania
- Glenorchy City Council
- Eat Well Tasmania
- Good Beginnings Australia
- Women Tasmania
- Tasmanian Early Years Foundation
- HealtheCare
 - North West Private Hospital