

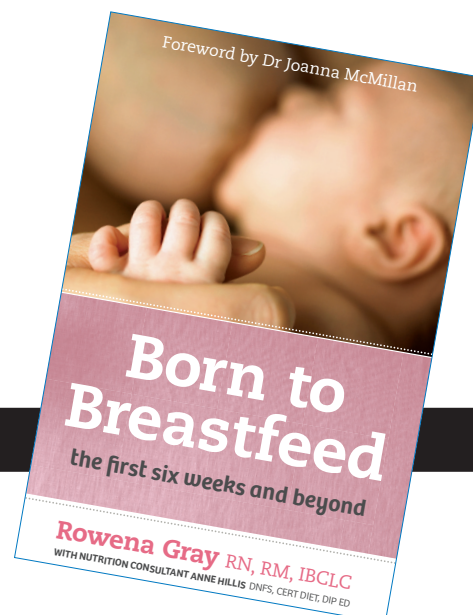


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Born to Breastfeed



What is the breastfeeding rate in Australia?

Australia has one of the lowest breastfeeding rates in the world – and it has continued to decline over recent years.

Most Australian mothers aspire to breastfeed. The latest statistics from the Government's Australian Institute of Health and Welfare (AIHW) show that 96 per cent of Australian mothers initiate breastfeeding.

However, most cease breastfeeding before six months, despite World Health Organization (WHO) and National Health and Medical Research Council (NHMRC) recommendations to exclusively breastfeed for six months – with partial breastfeeding continuing alongside complementary foods for at least one year.

A recent study by the University of Tasmania's Menzies Institute for Medical Research (June 2015) revealed that 50 per cent of mothers in Australia were not exclusively breastfeeding at two months and the AIHW figures show that **only 15 per cent of mothers in Australia exclusively breastfeed to about six months.**

Why do most Australian women stop breastfeeding early?

The reasons why women don't continue to breastfeed long-term are multifaceted and individual, however common reasons include:

- a) The inundation of conflicting advice (exacerbated by the propagation of misleading information on social media) and women's inability to separate the 'good' from the 'bad', which leads to loss of confidence.
- b) Poor accessibility to timely, appropriate breastfeeding support.
- c) The fallacy that mothers should impose a routine, which leads to misinterpretation of normal newborn behaviour and ultimately, feeding problems, because the 'art' of reading baby cues is lost.
- d) Overwhelming acceptance that formula is a good alternative to breastmilk (the nutritional and immunological components of breastmilk cannot be replicated).
- e) Partner attitudes (a partner who is supportive and involved in the decision to breastfeed increases a mother's resilience to cope with breastfeeding challenges).
- f) Return to work (the challenges of expressing and storing milk at work and finding a carer who appreciates the importance of breastfeeding and knows how to handle expressed breast milk (EBM) can be daunting).

Do mothers who cease breastfeeding early want to continue?

The high breastfeeding initiation rate in Australia (96 per cent) is indicative of most mothers' intention to breastfeed their infant for as long as possible.

Based on her professional experience and anecdotal evidence, **Born to Breastfeed** author Rowena Gray is insistent that most mothers reluctantly give up breastfeeding and would like to continue, but believe their individual challenges and circumstances make this option too difficult.



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What are the most common difficulties encountered by breastfeeding mothers?

The most common difficulties encountered by breastfeeding mothers are: attachment difficulties, sore nipples, low milk supply and loss of confidence (words can be powerful!)

Born to Breastfeed author Rowena Gray says that when women understand what is happening and why it is happening, they feel better equipped to work towards a potential solution. Her book addresses each of these issues and provides advice and information for breastfeeding mothers to overcome these difficulties.

Can all women breastfeed?

Babies instinctively know how to breastfeed; a newborn baby left to its own devices will seek out its mother's nipple and initiate breastfeeding. However, breastfeeding is a learned skill for mothers.

Insufficient supply and postnatal depression can make breastfeeding very difficult, and some medical situations make breastfeeding unreasonable or contraindicated. However, most women can breastfeed and most breastfeeding challenges – including attachment difficulties, sore nipples and low milk supply – can be overcome with timely, skilled support and accurate information.

Is there a knowledge gap in Australia?

The high initiation rate suggests there is good support to encourage mothers to **start** breastfeeding in Australia, but more effort needs to be directed to helping mothers to continue to breastfeed.

The 2010 'Breastfeeding in Victoria' report, developed as part of the State's response to the National Breastfeeding Strategy, stated that no interventions tested in Australia had substantially increased breastfeeding duration, and that tactics including breastfeeding education during pregnancy increased initiation rates but had no impact on duration.

The 2005 'Giving Breastfeeding a Boost' review, published by the Victorian Government Department of Human Services, identified the importance of consistent advice and information in extending breastfeeding duration.

The average maternity hospital stay is much shorter today than it was in previous decades and the earlier discharge, which often coincides with a mother's milk "coming in" (changing from colostrum to breastmilk), puts greater emphasis on the need for independent breastfeeding information and support.

Disturbed by the low breastfeeding rate in Australia and the apparent 'knowledge gap', lactation consultant Rowena Gray and nutrition consultant Anne Hillis wrote **Born to Breastfeed** to provide consistent, accurate information and advice that empowers women to make informed decisions and to overcome the challenges.

The authors strongly believe that a loving and attentive relationship with their baby, combined with access to evidence-based, up-to-date information, enables women to make the best choices for their individual circumstances.

Why is it important to improve Australia's breastfeeding rate?

Breastfeeding is very important from a public health perspective. Leading health authorities such as the World Health Organization (WHO) and Australia's National Health and Medical Research Council (NHMRC) recommend exclusive breastfeeding (i.e. no solids or drinks) for the first six months. To maximise health outcomes, the NHMRC recommends that breastfeeding should continue alongside suitable complementary foods for one year, or as long as mother and child desire, and WHO recommends breastfeeding for two years and beyond if mother and baby are happy to do so.



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If fewer babies are breastfed, population health is affected. Breastfeeding is the backbone of early nutrition and a key influence on adult health and longevity.

Breastmilk is a living tissue that is impossible to replicate. Its nutrient structure, digestibility and capacity to change composition according to baby's growth and development needs are reasons to breastfeed for as long as possible. Breastmilk also reduces the risk of allergy, prevents obesity, and contains antibodies that protect babies against infection and disease. The health benefits for mothers include reduced risk of osteoporosis, diabetes and some cancers.

Why do we need to draw attention to Australia's low breastfeeding rate?

Promoting awareness of Australia's low breastfeeding rate is not about shaming women who cannot, or choose not to, breastfeed long-term; women want what is best for their babies, which sometimes means making difficult decisions contrary to what they believe is natural or normal.

The purpose of promoting Australia's low breastfeeding rate is to draw attention to a public health issue that can – with appropriate intervention and accurate information – be addressed to produce positive outcomes for society. Most women who wish to continue to breastfeed their baby can overcome the challenges and achieve this goal.

Born to Breastfeed – the first six weeks and beyond was written to help support mothers on their breastfeeding journey and to improve national breastfeeding rates.

How does Born to Breastfeed help mothers to realise their breastfeeding goals?

Written by lactation consultant Rowena Gray and nutrition consultant Anne Hillis, **Born to Breastfeed** is a compassionate and comprehensive guidebook that explains the science and physiology of breastfeeding and includes all of the practical information a new mum needs to know to overcome most breastfeeding challenges.

Taking the baby's perspective, the book draws on evidence-based research and midwifery practices to explain how mothers can respond to baby's actions and needs. It brings together up-to-date facts and strategies to help solve breastfeeding problems, dispelling misinformation about breastfeeding and infant feeding in general.

Born to Breastfeed – the first six weeks and beyond
By Rowena Gray RN, RM, IBCLC and Anne Hillis DNFS, CERT DIET, DIP ED
Foreword by Dr Joanna McMillan
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To download high-res images of Dr Joanna McMillan, Rowena Gray and Anne Hillis, go to <http://www.borntobreastfeed.com/about-the-book/>
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