

**AUSTRALIAN
NATIONAL
BREASTFEEDING
STRATEGY
2010-2015:**

FINAL PROGRESS REPORT

Table of Contents

1	INTRODUCTION	4
1.1	Background.....	4
1.2	Key Achievements.....	4
2	SUMMARY OF NATIONAL INITIATIVES.....	5
2.1	Action area 1 - Monitoring and surveillance:.....	5
2.2	Action area 2 - Health professionals' education and training:.....	6
2.3	Action area 3 - Dietary guidelines and growth charts:.....	7
2.4	Action area 4 - Breastfeeding friendly environments (including workplaces and child care settings):.....	8
2.5	Action area 5 - Support for breastfeeding in health care settings/Baby Friendly Health Initiative (BFHI):.....	9
2.6	Action area 6 - Revisiting Australia's response to the World Health Organization's <i>International Code of Marketing of Breast-milk Substitutes</i> (WHO Code) and related World Health Assembly resolutions:.....	9
2.7	Action area 7 - Exploring the evidence, quality assurance, cost-effectiveness and regulatory issues associated with the establishment and operation of milk banks:.....	10
2.8	Action area 8 - Breastfeeding support for priority groups:.....	11
2.9	Action area 9 - Continuity of care, referral pathways and support networks:.....	13
2.10	Action area 10 - Education and awareness, including antenatal education:.....	14
3	AREAS FOR FUTURE CONSIDERATION.....	14
4	STATE AND TERRITORY BREASTFEEDING POLICIES AND INITIATIVES.....	14
4.1	Australian Capital Territory.....	15
4.2	Victoria.....	17
4.3	South Australia.....	18
4.4	Northern Territory.....	19
4.5	Western Australia.....	19
4.6	Queensland.....	21
4.7	New South Wales.....	22
4.8	Tasmania.....	24

1 INTRODUCTION

1.1 Background

The *Australian National Breastfeeding Strategy 2010-2015* (the Strategy) has provided a framework for priorities and action for governments at all levels working in partnership with the community to protect, promote, support and monitor breastfeeding throughout Australia.

The Strategy was endorsed by the Australian Health Ministers Council (AHMC) on 13 November 2009 and the implementation plan on 22 April 2010. The implementation plan identifies ten action areas based on the goals and objectives of the Strategy. There are strong linkages apparent between many of the action areas and these are drawn out in the discussion that follows.

1.2 Key Achievements

This report details the substantial progress that has been made across all ten action areas over the period of the Strategy. However Australia does not have a sustainable data set on breastfeeding that can be used to report on the Strategy's objective. This is addressed further under Action Area 1 – Monitoring and surveillance.

Key achievements at the national level since the third progress report in 2013 include:

- releasing Module 2 of the Clinical Practice Guidelines - Antenatal Care which recognises the importance of discussing breastfeeding during antenatal visits and provides guidance on preparation for breastfeeding as part of antenatal care;
- publication of the updated education resource *Breastfeeding and You: A Handbook for Antenatal Educators* on the Department of Health website; and
- continuing Australian Government support for the national toll-free 24 hour Breastfeeding Helpline 1800 mum 2 mum (1800 686 268) which receives over 84,000 calls each year.

These achievements are discussed in further detail in the earlier sections of this progress report which focuses on national initiatives across the ten action areas. The latter part provides an overview of breastfeeding policies and initiatives in each state and territory that support the Strategy and action areas. The final part provides web links to further information.

2 SUMMARY OF NATIONAL INITIATIVES

2.1 Action area 1 - Monitoring and surveillance:

This action area recognised the importance of collecting and reporting on breastfeeding data to track progress and identify areas for improvement.

Data that is collected by each of the states and territories is covered in the jurisdictional updates in part 4, however it is noted that there are discrepancies between the data that each state and territory collects.

While the two surveys on infant feeding detailed below have been conducted within the period of the Strategy, these surveys only provide snapshot data which make it difficult to ascertain whether the overarching objective of the Strategy has been met. There is currently no ongoing national data collection on infant feeding which would address this issue.

Surveys on infant feeding

Two surveys which collected data on infant feeding were undertaken during the period 2010-2015. The earlier one, the [2010 Australian National Infant Feeding Survey](#) (ANIFS), was the first large-scale, Australian national survey of infant feeding practices and related attitudes and behaviours.

Results from this survey showed most babies (96%) were initially breastfed, with 39% exclusively breastfed (meaning breastmilk had been the infant's exclusive source of fluid) for less than 4 months and dropping to 15% for less than 6 months. However, 69% of babies were receiving any breastmilk at 4 months of age and 60% at 6 months.

There were clear gradients seen by carer's age, level of education and income.

The second survey, the 2011-12 [Australian Health Survey](#) (AHS), included infant feeding data and was released by the Australian Bureau of Statistics (ABS) in March 2013.

Results were broadly consistent, showing consistent rates for exclusive breastfeeding and for infants receiving any breastmilk.

However any comparisons between the two surveys should be made with caution. There is greater statistical uncertainty for the ABS figures, due to the smaller sample size for the 0-3 age group, even though the response rate was higher for the ABS survey. For this reason, the ABS has also presented their data using broader age categories than the one month age intervals included in the ANIFS report.

Further data and summaries from the ANIFS were published during 2012 in:

- [Aboriginal and Torres Strait Islander Health Performance Framework 2012 Report](#) (DoHA);
- [Australia's Health 2012](#) (pp. 192-195) (AIHW); and
- [A picture of Australia's Children 2012](#) (pp. 30-32) (AIHW).

Breastfeeding indicators

The reporting of breastfeeding results from both the ANIFS and AHS was based on a draft set of national breastfeeding indicators published by [the Australian Institute of Health and Welfare](#) (AIHW) in 2011.

The Breastfeeding Jurisdictional Senior Official Group (BJOG) has discussed the need for further work on the draft indicators, to ensure they are practical and feasible for:

- guiding clinical breastfeeding data collection (for example at hospital discharge and immunisation visits);
- designing national or local surveys; and
- reporting aggregated data at both state/territory and national levels.

BJOG prepared a paper on *Monitoring Key Breastfeeding Indicators in Australia* which was circulated to the then Child Health and Wellbeing Subcommittee (CHWS), now the Standing Committee on Child and Youth Health (SCCYH), and the Maternity Services Inter Jurisdictional Committee (MSIJC) members in May 2013.

Jurisdictions agreed to prepare further advice for the Community Care and Population Health Principal Committee (CCPHPC), including a proposal seeking Australian Health Ministers Advisory Council (AHMAC) cost-sharing funding to:

- consult with jurisdictions on existing data collections,
- refine the draft breastfeeding indicators, and
- recommend processes for routine local collection of breastfeeding data for use in both national and state/territory level reporting.

A funding bid for SCCYH was prepared for their consideration on 20 November 2013 and the bid was considered by CCPHPC in 2013, however the project did not receive funding.

2.2 Action area 2 - Health professionals' education and training:

This action area intersects with several other action areas including work on dietary guidelines and growth charts, antenatal education and baby friendly health services.

Australian Breastfeeding Association

At the national level, the Department of Health has funded the Australian Breastfeeding Association (ABA) since 2008 to deliver workforce education and training to support the operation of the national toll-free Breastfeeding Helpline. This included the development of the nationally recognised training courses Certificate IV in Breastfeeding Education (for volunteer counsellors) and Diploma of Breastfeeding Management (for health professionals) and delivery of seminars and training workshops for volunteers and health professionals. The current funding is in place until 30 June 2016.

In 2013, the Department of Health sponsored the ABA's annual health professionals' seminar series Breastfeeding: from science to skills. The seminars targeted health professionals including lactation consultants, midwives, child and family health

nurses, general practitioners, dietitians, and registered nurses, as well as volunteer breastfeeding counsellors. One-day seminars were held in all capital cities (apart from Darwin) in March 2013 and were available on webcast until May 2013.

Lactation Consultants of Australia and New Zealand Ltd and the International Lactation Consultant Association

The Department of Health also provided funding to Lactation Consultants of Australia and New Zealand Ltd (LCANZ) in 2012 and 2013. This included funding for bursaries or scholarships for those from rural, remote, Aboriginal and Torres Strait Islander and culturally diverse backgrounds to attend the International Lactation Consultant Association (ILCA) 2013 Conference *Born to Breastfeed: A Global Public Health Imperative* held in Melbourne in July 2013.

In September 2012 the Department of Health sponsored the LCANZ conference.

Australian Dietary Guidelines and Infant Feeding Guidelines

As outlined in more detail in Action area 3, health professionals have also been provided with education on the *Eat for Health: Australian Dietary Guidelines* and *Infant Feeding Guidelines: Information for Health Workers* through seminars, conference workshops, and Rural Health Education Foundation satellite and digital television episodes.

2.3 Action area 3 - Dietary guidelines and growth charts:

Infant Feeding Guidelines: Information for Health Workers

In February 2013, the National Health and Medical Research Council (NHMRC) released the *Infant Feeding Guidelines: Information for Health Workers* which provide updated advice for both health professionals and parents on breastfeeding and infant feeding. The Guidelines summarise the evidence on the health benefits of breastfeeding and effective practices to support breastfeeding. The advice covers preventing or minimising common problems, the transition to solid foods, food allergies, infant formula, and interpreting the World Health Organization's *International Code of Marketing of Breast-milk Substitutes* for health workers in Australia.

Eat for Health: Australian Dietary Guidelines

The 2013 NHMRC *Australian Dietary Guidelines* provide healthy eating advice specific to pregnant and breastfeeding women (guidelines 4). The Guidelines, the Australian Guide to Healthy Eating (AGTHE) and associated resources targeted at consumers and health professionals, were released as part of the [Eat for Health](#) program.

In 2015 the AGTHE was adapted for Aboriginal and Torres Strait Islander audiences.

Growth Charts

Children's growth is an important marker of their health and development. Growth assessment is one of the easiest ways to confirm the health and nutrition of children, because changes in health and nutrition almost always affect growth. The WHO

2006 growth charts are based on the growth patterns of healthy, breastfed babies. National agreement was reached in 2012 on adopting the World Health Organisation (WHO) 2006 infant growth charts as the single growth standard for Australian children aged 0-2 years. This decision is reflected in the new edition of the *Infant Feeding Guidelines: Information for Health Workers*.

To assist jurisdictions in implementing the new growth charts, the Department of Health funded the development of online education and training materials to help health workers to use the WHO infant growth charts effectively. These materials were developed by the Murdoch Childrens Research Institute, following targeted consultation with health professionals. The national training materials have been available since May 2013 on the [Royal Children's Hospital Melbourne website](#).

Personally Controlled Electronic Health (eHealth) Record

The new personally controlled electronic health (eHealth) record system now includes a Child Development function to track child growth and development. Parents are able to add their babies' measurements i.e. weight, length/height and head circumference, taken by a trained healthcare professional, as well as their own personal notes (including length/height, weight and feeding issues) to their child's eHealth record. The parent and authorised health professionals are able to view the child's growth chart information, plotted on the WHO 2006 growth charts. Access to the Child Development component of a child's personally controlled eHealth record is also available through free mobile applications (apps) called My Child's eHealth Record. The apps enable parents to enter and view growth and development information about their child on a smartphone.

Since its inception on 1 July 2012, over 2.3 million Australians now have a personally controlled electronic health record (PCEHR). Nearly 40% of PCEHR holders are aged 20 years or less. Since its launch in July 2013, almost 15,000 people have downloaded the My Child's eHealth Record app enabling parents to enter and view growth and development information about their child on a smartphone. From August 2015, the My Child's eHealth Record mobile app will also be enhanced for Apple iPads and Android tablets. Further information is available [at the Australian Digital Health Agency's ehealth website](#).

2.4 Action area 4 - Breastfeeding friendly environments (including workplaces and child care settings):

National Paid Parental Leave

Initiatives that promote breastfeeding friendly environments include the National Paid Parental Leave program which commenced on 1 January 2011, and provides financial support for up to 18 weeks to help eligible parents take time off work to care for a newborn or recently adopted child. From 1 January 2013, the scheme was extended to include two weeks of Dad and Partner Pay (research shows that partner support is important to maintaining breastfeeding).

Get Up and Grow: Healthy eating and physical activity for early childhood

Guidance for child care settings provided through the *Get Up and Grow: Healthy eating and physical activity for early childhood* resources covers both supporting

breastfeeding and appropriate use of infant formula in child care. Brochures for parents are also included. Complementary resources adapted for Aboriginal and Torres Strait Islander peoples were released in June 2013. Translated versions are available in Traditional Chinese, Vietnamese, Filipino, Korean, Indonesian, Malaysian, Arabic, Turkish and Spanish. All sets of the resources are available [from the Department of Health's Get Up and Grow webpage](#).

National Quality Standard 2.2 - Healthy Eating and Physical Activity

The National Quality Framework for Early Childhood Education and Care, [National Quality Standard 2.2 - Healthy Eating and Physical Activity](#) includes references to the Get Up & Grow resources, the Dietary Guidelines and support for breastfeeding.

Legislative protection of rights of breastfeeding women

All Australian states and territories have legislative provisions protecting the rights of breastfeeding women, including in relation to employment and breastfeeding in public. Amendments to the Commonwealth *Sex Discrimination Act 1984* were passed in 2011, establishing breastfeeding as separate grounds of discrimination (in addition to State and Territory anti-discrimination laws).

2.5 Action area 5 - Support for breastfeeding in health care settings/Baby Friendly Health Initiative (BFHI):

Ten Steps to Successful Breastfeeding

In November 2012, the Australian Health Ministers Council meeting affirmed that all Australian jurisdictions support the effective, practical guidance provided by the WHO/UNICEF Baby Friendly Health Initiative (BFHI) and its *ten steps to successful breastfeeding* for health services. The Australian Health Ministers encouraged all public and private hospitals to implement the *ten steps to successful breastfeeding* and to work towards or to maintain their BFHI accreditation. A copy of the communiqué is available at [the AHMAC website](#).

2.6 Action area 6 - Revisiting Australia's response to the World Health Organization's *International Code of Marketing of Breast-milk Substitutes* (WHO Code) and related World Health Assembly resolutions:

Infant Feeding Guidelines: Information for Health Workers

The revised NHMRC *Infant Feeding Guidelines: Information for Health Workers* provides guidance for Australian health workers on interpreting the World Health Organization's *International Code of Marketing of Breast-milk Substitutes*. This includes advice that Australian health workers should:

- promote optimal infant feeding by promoting breastfeeding;
- provide information about infant formula when required and support families who are using infant formula; and
- understand the intent of the Marketing in Australia of Infant Formulas: Manufacturers and Importers Agreement (MAIF Agreement) in limiting the marketing of infant formula, particularly in regard to gifts and samples from infant

formula companies.

Food Standards Australia New Zealand's (FSANZ) Standard 2.9.1 – Infant Formula Products

Food Standards Australia New Zealand (FSANZ) is currently reviewing *Standard 2.9.1 – Infant Formula Products* and other standards relating to infant formula. This includes composition, labelling and advertising. FSANZ is in the process of releasing a series of consultation and assessment reports for public comment. The next consultation paper is scheduled for release in the second half of 2015. Further information is available at [the FSANZ website](#).

Commissioned reviews on the World Health Organization's International Code of Marketing of Breast-milk Substitutes

On 8 December 2013, the Prime Minister announced the abolition of several non-statutory bodies, including the Advisory Panel on the Marketing in Australia of Infant Formula (APMAIF). The Commonwealth Department of Health has worked with Industry to develop new arrangements to ensure the continued adherence of the MAIF Agreement. Industry approached St James Ethics Centre, an independent not-for-profit organisation, to develop and oversee an independent complaints model. The Centre prepared Terms of Reference to govern a new complaints model in consultation with industry and the Department. The Centre consulted with key stakeholders on the proposed model to ensure the assessment process is transparent and accountable. The new complaints process is now operational and a MAIF Tribunal panel is fully operational.

The Australian Government also continues to contribute to international development work on maternal, infant and child nutrition; non-communicable disease prevention and the Millennium Development Goals through fora such as the World Health Assembly and as an international aid donor.

2.7 Action area 7 - Exploring the evidence, quality assurance, cost-effectiveness and regulatory issues associated with the establishment and operation of milk banks:

Milk banks in Australia

There is growing evidence and expert opinion supporting the use of pasteurised donor human milk for hospitalised preterm or sick infants. This is reflected in the growth of Australian milk banks. There is currently one community run milk bank. In addition there are four hospital based milk banks operating across Australia in WA, NSW, VIC, and QLD.

Discussion paper on Donor Human Milk Banking in Australia

A paper titled 'Donor Human Milk Banking in Australia – Issues and Background Paper', which outlines background and key issues relating to milk banks was prepared by the Australian Government Department of Health. The paper draws on issues about milk banking raised by the Breastfeeding Jurisdictional Senior Officials Group (BJOG), milk banking experts, the Therapeutic Goods Administration (TGA) and Food Standards Australia New Zealand (FSANZ). It is publically available on [the Department of Health's breastfeeding webpage](#).

The milk banks paper explores these issues, including regulatory considerations and the role of governments, and concludes that:

- there is evidence to support use of pasteurised donor human milk for hospitalised preterm or sick infants;
- while existing laws do not explicitly address milk banks, there is guidance available from current food safety standards and other laws and published voluntary guidelines from both Australia and overseas;
- while there are arguments both for and against further regulation of milk banks than currently exists, the case for additional regulation is not sufficiently strong to be further pursued at this time;
- decisions about establishing, managing and resourcing milk banks are a matter for consideration by local hospital networks, subject to local priorities; and
- those health organisations considering establishing milk banks are encouraged to consult with the existing milk banks, and be guided by existing Australian legal frameworks and the risk management and operating principles already in use.

2.8 Action area 8 - Breastfeeding support for priority groups:

Priority groups in this context are groups of women who may experience more barriers to breastfeeding and/or have less access to support networks than the rest of the population (which includes Aboriginal and Torres Strait Islander peoples).

2010 Australian National Infant Feeding Survey

Results of the *2010 Australian National Infant Feeding Survey* confirmed that lower rates of breastfeeding initiation, earlier than recommended introduction of other milk and foods, and earlier cessation of breastfeeding were associated with mothers/carers being:

- younger (particularly those aged 24 or younger);
- with year 11 or lower education level;
- lower income;
- daily smokers; and
- obese.

Infants of Aboriginal or Torres Strait Islander mothers/carers were consistently less likely than infants of non-Indigenous mothers/carers to be either exclusively or predominantly breastfed, or currently receiving breast milk.

COAG Indigenous Early Childhood Development National Partnership

Relevant initiatives include activities through the COAG Indigenous Early Childhood Development National Partnership, including the Commonwealth's *New Directions Mothers and Babies Services* program which provides Aboriginal and Torres Strait Islander children and their mothers with access to antenatal care, standard

information about baby care, practical advice and assistance with breastfeeding, nutrition and parenting.

The New Directions: Mothers and Babies Services program and the Australian Nurse Family Partnership Program

Relevant initiatives through the Commonwealth's *Better Start to Life* approach include the *New Directions: Mothers and Babies Services* program which provides Aboriginal and Torres Strait Islander children and their mothers with access to antenatal care, standard information about baby care, practical advice and assistance with breastfeeding, nutrition and parenting; and the Australian Nurse Family Partnership Program (ANFPP), a nurse led home visiting programme targeting mothers who are pregnant with an Aboriginal and/or Torres Strait Islander child. The ANFPP aims to improve:

- pregnancy outcomes by helping women improve their prenatal health;
- child health and development by helping parents provide more sensitive and competent care; and
- parental life-course by helping parents develop a vision for their future and fulfil that vision by planning future pregnancies, completing their education, and finding work.

Nationally, 95% of babies born to clients of the ANFPP were initially breastfed, and at one of the three sites delivering services in 2013-14, 68% of infants for clients of the programme were still being breastfed at 6 months of age.

Further information is at [the ANFPP website](#).

The 2014 Commonwealth Budget provided funding of \$94 million from July 2015 for the Better Start to Life approach to expand efforts in child and maternal health to support Indigenous children to be healthy and ready for school.

Get Up and Grow: Healthy eating and physical activity for early childhood

Guidance for child care settings provided through the *Get Up and Grow: Healthy eating and physical activity for early childhood* resources has now been adapted for Aboriginal and Torres Strait Islander peoples. Translated versions are available in Traditional Chinese, Vietnamese, Filipino, Korean, Indonesian, Malaysian, Arabic, Turkish and Spanish. All sets of the resources are available from [the Department of Health's Get Up & Grow webpage](#).

Infant Feeding Guidelines

A one hour program showcasing the *Infant Feeding Guidelines* with a focus on rural and Aboriginal and Torres Strait Islander populations was broadcast on the Rural Health Education Foundation (RHEF) and National Indigenous Television channels in June 2013. Further information is provided under Action area 3.

Clinical Practice Guidelines - Antenatal Care

The *Clinical Practice Guidelines - Antenatal Care* encourage health professionals to take a woman-centred and culturally safe approach, ensuring that each woman's social, emotional, physical, psychological, spiritual and cultural needs and

expectations are considered and respected. The guidelines recognise the importance of discussing breastfeeding during antenatal visits and providing information and support so that women can make informed decisions. These guidelines are comprised of two modules with each module covering a specific period of pregnancy.

Evaluation Toolkit for Breastfeeding Programs and Projects

The Department of Health has developed a toolkit to assist jurisdictions and local health services in evaluating breastfeeding programs, including programs intended to provide support for priority groups. The resource is available on [the Department of Health's Evaluation Toolkit for Breastfeeding Programs and Projects webpage](#).

2.9 Action area 9 - Continuity of care, referral pathways and support networks:

This action area intersects with action area five in that step ten of the BFHI is to *foster the establishment of breastfeeding support and refer mothers on discharge from the facility*.

National Framework for Universal Child and Family Health Services

The *National Framework for Universal Child and Family Health Services* outlines the core services that all Australian children (from birth to eight years) and families should receive at no financial cost to themselves, regardless of where they live, and how and where they access their health care. The Framework was developed through a strong partnership between the Commonwealth, State and Territory governments and the non-government sector. It is available at [the Department of Health's National Framework for Universal Child and Family Health Services webpage](#).

Pregnancy, Birth & Baby Helpline

The Department of Health continues to fund the Australia-wide 24-hour *Pregnancy, Birth & Baby Helpline 1800 88 24 36* which provides a coordinated entry point to information and support from pregnancy through to preschool. The helpline also provides direction to maternity related services including specialist and support services.

Australian Breastfeeding Association Breastfeeding Helpline

Since 2008 the Department of Health has funded the Australian Breastfeeding Association to deliver the national toll-free 24 hour *Breastfeeding Helpline 1800 mum 2 mum (1800 686 268)* which provides breastfeeding information and peer support for mothers and their families. The *Breastfeeding Helpline* has received over 87,000 calls in each of the last two financial years including 2014-15. The total number of calls received from the start of the service in October 2008 to 30 June 2015 is 552,989. An evaluation of the *Breastfeeding Helpline* was completed in 2012 and can be accessed from [the Department of Health's breastfeeding webpage](#).

2.10 Action area 10 - Education and awareness, including antenatal education:

Clinical Practice Guidelines - Antenatal Care

Clinical Practice Guidelines - Antenatal Care have been developed by the Department of Health on behalf of all Australian Governments. The AHMAC funded guidelines are a priority action under the *National Maternity Services Plan*.

Module 1 of the antenatal care guidelines, which covers the first trimester of pregnancy, received final endorsement on 17 December 2012.

Module 2 of the antenatal care guidelines, which covers the second and third trimesters of pregnancy, was endorsed on 20 October 2014. The second module includes a topic on preparation for breastfeeding as part of antenatal care and recognises the importance of discussing breastfeeding during antenatal visits. The guidelines focus on meeting the needs of all pregnant women including the provision of culturally safe and woman-centred care. Both modules are available from [the Department of Health's antenatal webpage](#).

Breastfeeding and you: A handbook for antenatal educators

The Royal Hospital for Women, Sydney was contracted by the Department of Health to update and review [Breastfeeding and you: A handbook for antenatal educators](#), a resource originally funded under the 1996-2001 breastfeeding strategy. The revised resources support both the Strategy and the *Clinical Practice Guidelines - Antenatal Care* and is available online.

Commonwealth funded websites

Commonwealth funded websites with trusted information on parenting topics including breastfeeding include [Pregnancy, Birth and Baby](#) and the [Raising Children Network](#).

3 AREAS FOR FUTURE CONSIDERATION

As anticipated in the Strategy's Implementation Plan, areas for future consideration by BJOG could include:

- the establishment of a national system to monitor breastfeeding in Australia; and
- consideration of outcomes of previous SA, QLD and New Zealand breastfeeding social marketing campaigns, and the recommendations of the Woolcott (2009) research report Exploratory Research Regarding Infant Feeding Attitudes and Behaviours commissioned by the Department of Health.

The merits of a national education campaign on breastfeeding have not yet been explored, as to date they have not been a priority for the Australian Government.

4 STATE AND TERRITORY BREASTFEEDING POLICIES AND INITIATIVES

State and territory governments are independently progressing work that aligns with most of the Plan's action areas. Jurisdictions that are developing or updating their

breastfeeding policies have reported that the *Australian National Breastfeeding Strategy 2010-2015* has provided valuable national level guidance for alignment. The Strategy provides a framework which can assist jurisdictions to assess the merits of proposals for allocating their own resources to breastfeeding activities. Updates from each state and territory against the Plan are as follows:

4.1 Australian Capital Territory

The *ACT Breastfeeding Strategic Framework 2010–2015* (the Framework) sets the context for the protection, promotion and support of breastfeeding in the ACT. The ACT Framework is consistent with, and supports the implementation of the action areas in the *Australian National Breastfeeding Strategy 2010-2015*. While ACT Health is the lead agency to guide implementation, there is a whole of ACT Government commitment to this project, including identifying strategies to support Breastfeeding Friendly Workplace accreditation in ACT Government Directorates.

ACT Health engaged a project officer from 2009-2013 to support the development and implementation of the ACT Framework.

Breastfeeding Friendly Workplace accreditation has been achieved for four ACT Government Directorates including the ACT Chief Minister & Treasury Directorate, Economic Development Directorate, Environment and Planning Directorate, and ACT Health. The ACT Legislative Assembly, QEII Family Centre and West Belconnen Child and Family Centre have also achieved Breastfeeding Workplace accreditation.

Employees of ACT Health and Calvary Health Care ACT returning to work following maternity leave are supported to continue breastfeeding through a range of practical and policy mechanisms. This includes for example the provision of information about the benefits of breastfeeding, the provision of paid lactation breaks and facilities for women to continue breastfeeding their infant or to express milk, and flexible return to work options.

Both public hospitals, the Centenary Hospital for Women and Children and Calvary Health Care ACT are currently Breastfeeding Friendly Hospital Initiative (BFHI) accredited.

There has been substantial support for health professional education, with many Maternal and Child Health (MACH) nurses having completed the ACT Health Lactation Course, and supported to sit the International Board of Lactation Consultants exam to become lactation consultants. All new MACH nurses are offered an e-learning package.

MACH nurses are encouraged to attend a number of breastfeeding conferences throughout the year, including an annual presentation specifically provided to MACH by the Australian Breastfeeding Association to update their breastfeeding knowledge and service provision.

Calvary Health Care ACT midwifery staff have a minimum of twenty hours of breastfeeding education over a three year period to comply with BFHI requirements. Breastfeeding education is delivered in a range of formats, including face to face workshops and in-services, and via an on-line education package. Calvary Health Care ACT have supported midwives to gain qualifications through the International

Board of Lactation Consultants. Calvary Health Care ACT midwifery staff participate in regular education sessions regarding priority referrals to MACH.

An important component of education for health professionals has been the development of policy and awareness raising of the *WHO's International Code of Marketing of Breast-milk Substitutes*, and the *Marketing in Australia of Infant Formula Agreement*.

ACT Health launched an [electronic breastfeeding resource](#) in 2013. This contains information for women and families in the ACT relating to breastfeeding throughout the stages from pregnancy through to weaning. A specific webpage dedicated to breastfeeding links and information can be accessed online through the [ACT Health website](#); this includes a new downloadable resource outlining available support services for breastfeeding women and their families in the ACT. Parents of new babies are given a bookmark with the web address inserted into their child's *Child Personal Health Record* (The Blue Book).

Calvary Health Care ACT facilitates bi-monthly antenatal breastfeeding workshops for women and has recently introduced a Saturday breastfeeding workshop in response to consumer feedback.

The ACT Maternity Services Advisory Network (ACT MSAN) was established to provide strategic advice to all relevant stakeholders concerned with the delivery of maternity services in the ACT region. With representation from across the sector, the ACT MSAN facilitates collaborative approaches to maternity related policy and service development and review.

There has been considerable collaboration with non-government organisations, including the Australian Breastfeeding Association (ABA), particularly with the provision of education.

The *Child Personal Health Record* underwent a major review in 2014 which resulted in the introduction of standardised feeding questions in line with the NHMRC infant feeding guidelines, and the introduction of the WHO Growth charts 0-2 years.

Enhanced breastfeeding data has been collected since July 2011 with an ability to report against the nationally agreed indicators 'exclusive', 'predominant' and 'any' breastfeeding. Rates of exclusive breastfeeding, as captured when infants attend MACH services for immunisation have shown a significant increase from the 2011-2012 period to the 2012-2013 period.

ACT Health MACH Nursing Services continue to offer Early Days feeding and settling groups every day of the week at various locations across the ACT. MACH nurses also offer one on one booked appointments and drop in clinics to address (among other issues) breastfeeding concerns.

ACT Health Walk-in-Centres recently developed a protocol to treat women at the Walk-in Centres who present with symptoms of lactational mastitis. As of December 2014, women have been able to self refer, or be referred by MACH nurses for this service.

Calvary Health Care ACT commissioned a new Birth Centre in February 2014 with a continuity of midwifery care service. The service is fully subscribed with a waiting list of women who have been unable to access the service.

Data collection

In 2009, ACT Health implemented a simple data collection for babies presented for immunisation at Child Health Immunisation Clinics at 2, 4, 6 and 12 months of age. During the immunisation encounter, the carers were asked to indicate whether they were still breastfeeding through a simple 'yes' or 'no' response. The purpose of this collection was to create a picture of the proportion of infants being breastfed in the ACT and to identify opportunities to improve the breastfeeding rate amongst women and infants in the ACT.

Due to the success of this trial, in 2011 the data collection was refined and carers were asked at the Child Health Immunisation Clinics about *exclusive breastfeeding*, if the infant was receiving *any* breast milk and *introduction* of solids to their infant's diet. This data is published annually in *A Picture of ACT's Children and Young People*.

The following definitions are used:

Exclusive breastfeeding definition: Infants receive only breast milk, including expressed breast milk and, where required, medicines, but no infant formula or non-human milk.

Any breastfeeding definition: Includes exclusive, predominantly and any breastfeeding. Infants receive any breast milk including colostrum, expressed breast milk, donor milk; allows any other liquid or food.

This data relates to clients who attend the Maternal and Child Health Nurse (MACH) clinics for their immunisations. This does not include clients who visit their GP or other health service for immunisations and therefore is only representative of a proportion of ACT infants.

In 2016 the MACH service will introduce electronic health records. It is expected this will facilitate an increase in the number of clients from whom breastfeeding status is obtained.

ACT Health has considered a range of strategies to improve the proportion of carers from whom breastfeeding data is collected. The gap in current data collection however, is for those infants who do not attend MACH services, estimated to be approximately 50%. The absence of a common electronic record/tool among health providers means that this data is not available.

4.2 Victoria

The Victorian Government released a Breastfeeding Action Plan focusing on implementing the *National Breastfeeding Strategy 2010-2015* in the Victorian context, to increase breastfeeding rates in Victoria. It was developed by the Department of Education and training, in consultation with the Department of Health and Human Services and an external stakeholder group. Due to a recent change of government, a new approach to breastfeeding will be developed.

A three-arm cluster-randomised control trial called Supporting Breastfeeding in Local Communities (SILC) was completed by Latrobe University. Ten Local Government Areas below the State average for breastfeeding at discharge from maternity services participated in the trial.

A nine month intervention ran until April 2013, to test two community interventions and their effect on breastfeeding rates. LGAs were randomly allocated to one of three trial arms; standard (usual) care, i.e. these LGAs were the comparison communities, early home-based breastfeeding support by a SILC-Maternal and Child Health nurse (MCHN), or access to a community-based breastfeeding drop-in centre in addition to home-based breastfeeding support by a SILC-MCHN. The results showed no difference in before and after rates across the LGAs in the trial. The Victorian Government is now looking at how the findings can be used to facilitate changes to identification and early referral mechanisms for women with breastfeeding problems.

Updated Victorian Breastfeeding guidelines were released on 6 August 2014, as part of World Breastfeeding Week. The guidelines were developed by the Royal Women's Hospital in partnership with the Judith Lumley Centre at Latrobe University and the Department of Education and Training. They are a readily accessible, concise guide for health professionals who work with pregnant and breastfeeding women. They are available at the [Victorian Department of Education and Early Childhood Development website](#).

The Royal Women's Hospital released a state-wide parenting kit to provide evidence based and consistent information and advice on pregnancy, parenting and early child development in order to improve the health literacy of parents and the health outcomes of children. This was funded by the Department of Health and Human Services and is currently being piloted across the State.

The *Victorian perinatal services performance indicators* reports on the rate of breastfeeding in Victorian public hospitals that provide maternity and neonatal services.

4.3 South Australia

SA Health continues to support the provision of an e-learning program to enable health services to achieve and maintain BFHI accreditation and is in the process of reviewing the content to ensure it continues to reflect best practice.

The WHO growth charts for ages 0-2 years have been incorporated into the Child Health Record received by families of all babies and these charts are well utilised.

Posters and an accompanying fact sheet to promote 'Breastfeeding Welcome Here', developed by SA Health with the Australian Breastfeeding Association, have been widely disseminated across relevant health and education settings.

SA's three major birthing hospitals, accounting for around 63% of SA births are BFHI accredited. Child and Family Services of the Women's and Children's Health Network was BFHI accredited in March 2013 and is the first BFHI accredited community health service in Australia. This accreditation is due for review in 2016.

Data Collection

In SA some breastfeeding data is collected via the SA Monitoring and Surveillance System. However, the questions in this survey were developed based on previous monitoring recommendations from the 2001 report - [Towards a national system for](#)

[monitoring breastfeeding in Australia: recommendations for population indicators, definitions and next steps.](#)

Information on feeding at discharge is recorded in the [child health record](#).

4.4 Northern Territory

Northern Territory Department of Health (NTDOH) has developed a policy to provide a consistent approach to support for, and promotion of, breastfeeding across health services in the Northern Territory (NT). This has been adopted by both Area Health Services. Information, practices and procedures can now progressively be aligned across hospitals and primary health care services to provide consistent evidence-based information to support breastfeeding across the NT. In addition, consistency will be provided through encouragement of staff training, and provision of access to on-line training, on breastfeeding.

All four NT public maternity hospitals remain WHO Baby Friendly Health Initiative (BFHI) accredited, with very high rates of breastfeeding on discharge. BFHI data is being collated electronically for all public hospitals for the first time from 2015 which will facilitate annual reporting of breastfeeding initiation rates. In addition, standardised breastfeeding questions will be incorporated into the NT well child health program (Healthy Under 5 Kids (HU5K) program) which will reach the majority of children under 5 in the NT from mid 2016. Data extraction for these questions will enable annual reporting on duration of exclusive breastfeeding and timing of introduction of solids for the first time. The HU5K program includes anticipatory guidance on breastfeeding at each scheduled child health visit from birth to 18 months of age. The Strong Women Strong Babies Strong Culture program provides antenatal and post-natal support for Aboriginal and Torres Strait Island women and families and the Midwifery Group Practice (MGP) initiative has improved health care service to pregnant women from many remote NT communities, and provides a strong focus on breastfeeding support by the dedicated midwives in this program.

NTDOH electronic patient information systems have used the WHO Growth Charts for all children from birth to 18 years of age, for measuring growth of children, since 2009.

4.5 Western Australia

Maternity service provision in Western Australia is directed by the Women's and Newborn's Health Network Baby Friendly Health Initiative (BFHI) – hospital breastfeeding policy. The Policy articulates the 'Ten Steps to Successful Breastfeeding' in order to promote, support and encourage breastfeeding as the optimal way for a woman to feed her baby.

This is further supported by the Community Health Breastfeeding Policy which adopts the Australian BFHI ten point plan for the protection and support of breastfeeding in community health settings. Community health staff support and promote breastfeeding through home visits, community centre contacts and parenting groups as part of the Universal and Enhanced Aboriginal Child Health Schedules.

The Breastfeeding Centre of WA provides a consistent approach to breastfeeding for consumers and service providers across WA. The centre offers a state-wide telephone counselling service for health professionals and women experiencing breastfeeding problems and also provides a website with extensive breastfeeding information.

Breastfeeding information is collected via the Department of Health's Child Health and Wellbeing Surveillance Survey (HWSS). The survey questions have recently been revised to better align with the National Breastfeeding Strategy.

The WA Health Personal Health Record (PHR) which is provided to all families at the birth of a child was updated in 2014. The current version incorporates the WHO Growth Charts for children 0-5 years of age.

WA has an active Breastfeeding Stakeholders group of community, non-government, government and private sector members that advocate for increased breastfeeding rates in WA. On 10th December, 2014, stakeholders from around WA attended the WA Breastfeeding Stakeholders Continuum of Care forum. The purpose of this forum was for stakeholders to identify current gaps and barriers, discuss existing strategies, and develop potential improvements for each sector along the continuum of care. Key areas identified for future considerations included the:

- development of breastfeeding plans antenatally with women with identified breast feeding barriers;
- promotion and support of expressing when neonates require tertiary care and breastfeeding is not possible; and
- consideration for the use of Telehealth for Lactation Consultant contacts.

The Breastfeeding Matters course is available for all nurses working in the Community Health setting that provides health promotion and lactation education to lactating mothers and infants. The course consists of 6 hours e-Learning, two half days in a group sessions and 3 hours with a lactation consultant in clinical application sessions.

Data Collection

WA Health currently collects breastfeeding status at key points of contact in the Birth to School Entry Schedule of contacts, including hospital discharge and 3-4 months. This information is obtained during child health reviews and is reported by parents. With appropriate lead in time, acknowledging the numerous data systems involved, this data could be extracted and collated for reporting purposes, articulating the rate of breastfeeding within WA at 3-4 months.

Data is also collected within the WA Health Child Health and Wellbeing Surveillance Survey, this is however a small sample survey reported for 0-4 year old children and as such is subject to recall bias for the older children. To make this a more robust source of reporting breastfeeding would require funding for an increased sample size.

4.6 Queensland

Children's Health Queensland Hospital & Health Service leads the Promoting Optimal Maternal and Infant Nutrition (POMIN) project in Queensland. Launched in November 2014 the state-wide project aims to promote healthy behaviours by providing access to accurate information while also influencing the support which families receive through their interaction with healthcare professionals and the community.

A Workforce Needs Analysis of Health Professionals who work with families during pre-pregnancy, pregnancy and parenting (newborns/infants) is currently underway to inform future work and recommendations.

The Australian Dietary Guidelines and Infant Feeding Guidelines have been incorporated into the review of Queensland's Child Health Information booklet, provided to all babies born in Queensland.

The World Health Organisation's 2006 infant growth charts for children aged 0-2 years have been incorporated into Queensland's Personal Health Record (PHR). The PHR is provided to parents to record details of their child's health, growth, development and vaccination history.

The Queensland Government's Breastfeeding and Work Policy remain effective and issued by the Public Service Commission. The policy applies to all people employed in Queensland Government departments and offices and supports female employees to breastfeed and/or express breast milk while at work.

Queensland's Health Contact Centre (13HEALTH) continues to provide a child health advice service which provides support and advice to parents, carers and service providers of children 0 to 5 years. Parents can text BREASTFEEDING to 13HEALTH at any time of day or night and receive a call back from a member of the clinical team.

The Pathways to Rural and Remote Orientation and Training online platform continues to make available the *Growing Strong and Well* self-paced course for health service providers. The course includes a module on breastfeeding.

The Queensland Maternity and Neonatal Clinical Guideline on Breastfeeding initiation aims to support health professionals to provide consistent, evidence-based breastfeeding advice regarding the initiation of breastfeeding to well postnatal women with term babies. This guideline is due for review in October 2015.

A pictorial Feeding Cues hand held resource for parents will be made available to all hospitals to support breastfeeding establishment by Children's Health Queensland Hospital & Health Service.

Breastfeeding promotion and support was integrated into the trial of the Connecting2U project – a health promotion text messaging service for new parents. Children's Health Queensland Hospital & Health Service is planning to trial the program with selected hospitals across Queensland.

Growing Strong hand held resources targeting Aboriginal and Torres Strait Islander families continue to be available in hard copy.

The Queensland Health Breastfeeding website continues to provide a portal of information for both consumers and health professionals. The Queensland Government website has been extended to include breastfeeding with other pregnancy and parenting information. These websites are currently being reviewed.

Breastfeeding information continues to be collected via the Queensland Perinatal Data Collection and published in the Chief Health Officers Report, the most recent being 2014.

Data Collection

Queensland's Infant Nutrition Survey was implemented in 2003, 2008 and 2014. This includes % ever breastfed, % exclusively breastfed to 6 months and breastfeeding to 12 months. The 2014 report will be available within the next 3 months.

4.7 New South Wales

New South Wales' [revised breastfeeding policy](#) was released in June 2011, with a clear focus on the Australian National Breastfeeding Strategy as the underpinning document. The policy implementation timeframe continues to June 2016, but there have been significant achievements to date.

New South Wales remains committed to supporting the National Breastfeeding Strategy by the ongoing implementation of the breastfeeding policy Breastfeeding in NSW: Promotion, Protection and Support. The strategies and actions of the policy are organised under seven Priority Areas:

Priority Area 1 - Monitoring and surveillance;

Priority Area 2 - Health professionals' education and training;

Priority Area 3 - Breastfeeding friendly environments;

Priority Area 4 - Support for breastfeeding in health care settings;

Priority Area 5 - Breastfeeding support for priority groups;

Priority Area 6 - Continuity of care, referral pathways and support networks; and

Priority Area 7 - Australia's response to the World Health Organization's International Code of Marketing of Breast-milk Substitutes and related World Health Assembly resolutions.

NSW Health chairs a stakeholder reference group which includes external stakeholders such as the Australian Breastfeeding Association. This group oversees, coordinates and monitors policy implementation activities, and has recently undertaken an audit of training activities and resources used across NSW Health entities, and an audit of consumer resources produced across NSW Health organisations to promote, protect and support breastfeeding. NSW Health has continued to fund the Australian Breastfeeding Association to provide a range of services to health professionals and communities in NSW, and works closely with the Australian Breastfeeding Association.

Health professionals' education and training has been a key area of activity. Along with the purchase of 5,200 registrations to support midwives and child & family health staff to complete the South Australian Breastfeeding Friendly Hospitals

Initiative (BFHI) e-Learning Program, in May 2015 the NSW Health e-learning module *Breastfeeding Promotion, Protection and Support* was published on the NSW Health Education and Training Institute website, accessible to NSW Health staff. This module aims to inspire and educate health care professionals to incorporate the guiding principles from the NSW Health Breastfeeding policy into clinical practice to promote, protect and support breastfeeding within NSW Health hospitals and the community. The efforts to educate the workforce demonstrate the commitment in New South Wales to ensure that women are provided with consistent, evidence based information related to breastfeeding and infant nutrition by all staff as they move through services.

To support breastfeeding in health care settings, a link was published on the New South Wales website related to BFHI education for Group 2 & 3 health service staff. This further promotes the support of breastfeeding within New South Wales health facilities.

Breastfeeding support for priority groups has been a particular focus over the last twelve months, with a number of projects focussed on supporting breastfeeding in Aboriginal communities. The Office of Kids and Families, in partnership with the Australian Breastfeeding Association, has funded community mentoring workshops in collaboration with Aboriginal consultants and communities in a number of sites across New South Wales, and this work will extend into 2015/16. As a result of this partnership, three Aboriginal women will be funded to be trained as ABA Breastfeeding Counsellors in 2015/16. A separate project funded by NSW Kids and Families in partnership with the Australian Breastfeeding Association and an Aboriginal consultancy has developed an approach to empowering Aboriginal fathers to support breastfeeding, with promising results from pilot programs in two sites to date. A video of Aboriginal fathers talking about breastfeeding has been developed by South Western Sydney Local Health District, and will be published in early 2015/16.

As part of the NSW Healthy Children Initiative, the Munch & Move program provides healthy eating support to early childhood education and care services. One of the program key messages is to Encourage and support breastfeeding. In 2015, 89% of early childhood services had staff trained in the Munch & Move program.

In 2014 NSW Health reviewed the *Caring for Children – Birth to 5 years (Food, Nutrition and Learning Experiences)*. This resource includes information on breastfeeding, safe bottle feeding and introducing solid foods and supports the implementation of the Infant Feeding Guidelines in

early childhood education and care services

(<http://www.health.nsw.gov.au/heal/Publications/caring-for-children-manual.pdf>).

New South Wales' personal health record provided to each child at birth has been updated during the period covered by the National Strategy. The Personal Health Record has a recommended minimum schedule of checks at birth/newborn, 1-4 weeks, 6-8 weeks, 6 months, 12 months, 18 months, 2 years, 3 years and 4 years. Breastfeeding questions are asked during newborn check, 1-4 week check, the 6-8 week check, 6 months check, 12 months, 18 months and 2 year check. However, although this information is included in the checks, the information is not held centrally. It is anticipated this information will be available in the future as the

Community Health ICT project is completed. The Personal Health Record also includes the revised WHO growth charts to two years of age.

In 2014 NSW Health also updated the [Starting Family Foods: Introducing your baby to solid foods](#)- For Parents of 0 to 12 Month Old Babies brochure which is used by child and family health staff to discuss the Infant Feeding Guidelines with families. NSW Health has also worked with the NSW Food Authority, with breastfeeding support and information featured in recent updates to the [Food Authority website](#).

Over the next twelve months, work will continue on implementing the current NSW Health breastfeeding policy alongside a review process that will lead into a new policy for New South Wales.

4.8 Tasmania

Tasmania has endorsed the *Australian National Breastfeeding Strategy 2010-2015* and has had a whole-of-government Tasmanian Food and Nutrition Policy which includes breastfeeding as one of the 12 key focus areas. Work on redeveloping a discussion and options paper on safe and healthy food (including breastfeeding) is currently being undertaken as preliminary work for the consideration of the revision of the Tasmanian Food and Nutrition Policy

All Tasmanian maternity services, public and private, are accredited with the WHO BFHI, an initiative that aims for hospitals to adopt practices that protect, promote and support breastfeeding.

Breastfeeding is regularly monitored and supported through the Child Health and Parenting Service. The system for collecting this data is currently being revised and it is anticipated it will transition to an online data collection system during 2015/16. In addition breastfeeding data on discharge from Maternity Services is routinely collected and reported on through the Tasmanian Council of Obstetric and Paediatric Morbidity and Mortality reports. Of concern are the low rates (24%) of exclusive breastfeeding at 4 months among the lowest quintile of socio-economic status and an apparent gradual decline in breastfeeding at maternity services discharge from 82% in 2005 to 75% in 2011. These data suggest there is much more work to be done to support and promote breastfeeding.

Tasmania has an active Breastfeeding Coalition across the community, non-government, government and private sectors that support a collaborative effort to advocate for increased breastfeeding rates in Tasmania. More information can be found at the [Coalition website](#).

Tasmania promotes the National Health and Medical Research Council's revised infant feeding guidelines as clear evidence-based recommendations for health workers on infant feeding practices.

Further information on jurisdictional breastfeeding policies and initiatives

[Australian Government breastfeeding webpage](#)

[ACT Health breastfeeding webpage](#)

[Queensland Health Maternal and infant nutrition webpage](#)

[Breastfeeding Centre of Western Australia](#)

[Tasmania Department of Human Services website](#) (type “breastfeeding” in the search facility)

[Tasmanian Breastfeeding Coalition](#)

[Victoria Department of Education and Training breastfeeding webpage](#)

[NSW Health Policy Directive on Breastfeeding in NSW: Promotion, Protection and Support](#)

[Women’s and Children’s Health Network breastfeeding support webpage](#)