



Australian Government
Department of Health

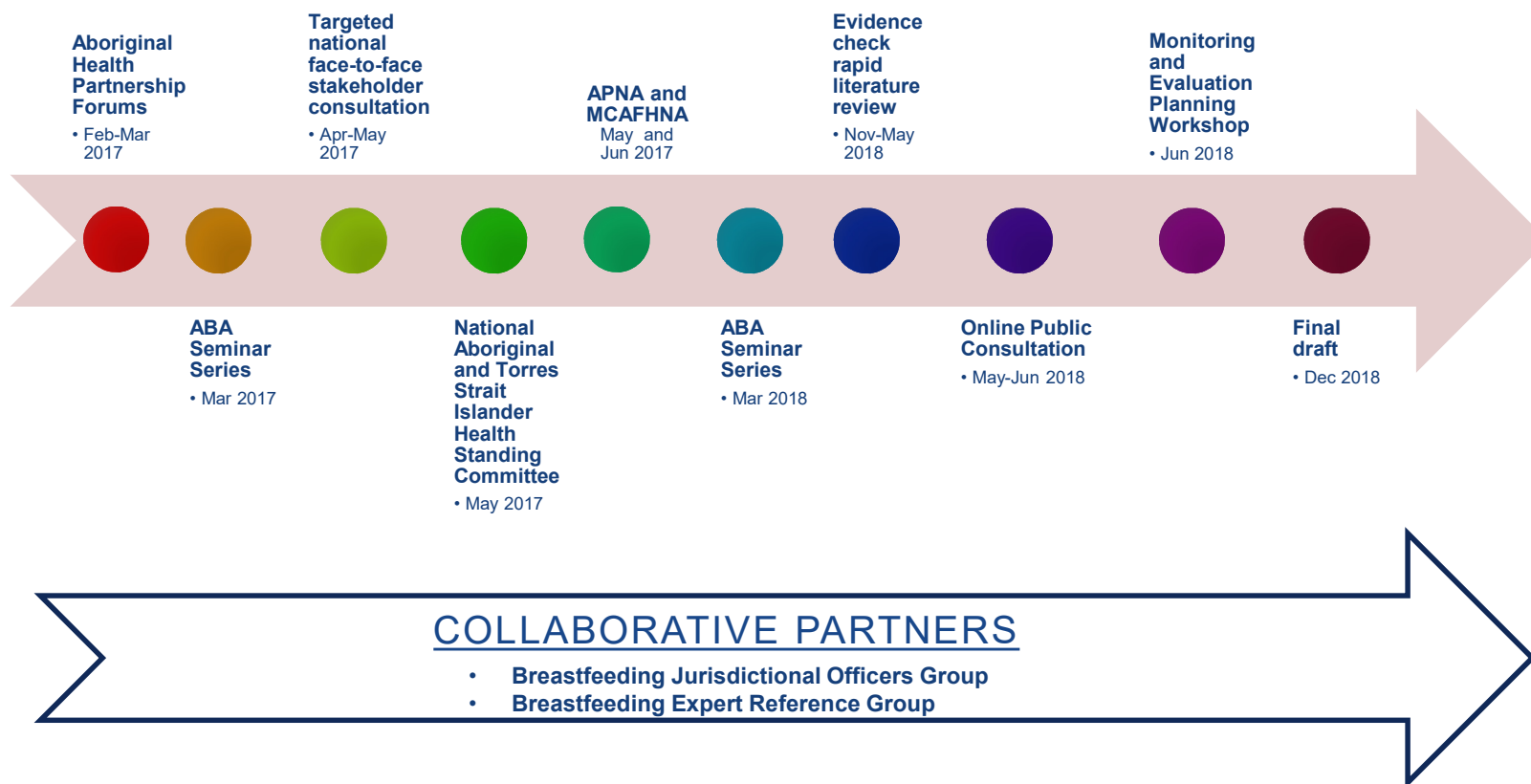


AUSTRALIAN NATIONAL BREASTFEEDING STRATEGY: 2019 AND BEYOND





TIMELINE





VISION



Australia provides an enabling and empowering environment that protects, promotes, supports and values breastfeeding as the biological and social norm for infant and young child feeding



OBJECTIVES

Increase the proportion of babies who:

- → *are exclusively breastfed to around 6 months of age (up to 40% per cent by 2022 and 50% per cent by 2025), particularly in priority populations and vulnerable groups*
- → *continue breastfeeding, with appropriate complementary foods until 12 months of age and beyond, for as long as the mother and child desire.*

Enable mothers, fathers/partners and other caregivers to access evidence-based, culturally safe breastfeeding education, support and clinical care services to make informed decisions on infant and young child feeding.

Increase the number of breastfeeding-friendly settings/environments (baby-friendly health services, workplaces, early childhood education and care services, and public spaces).

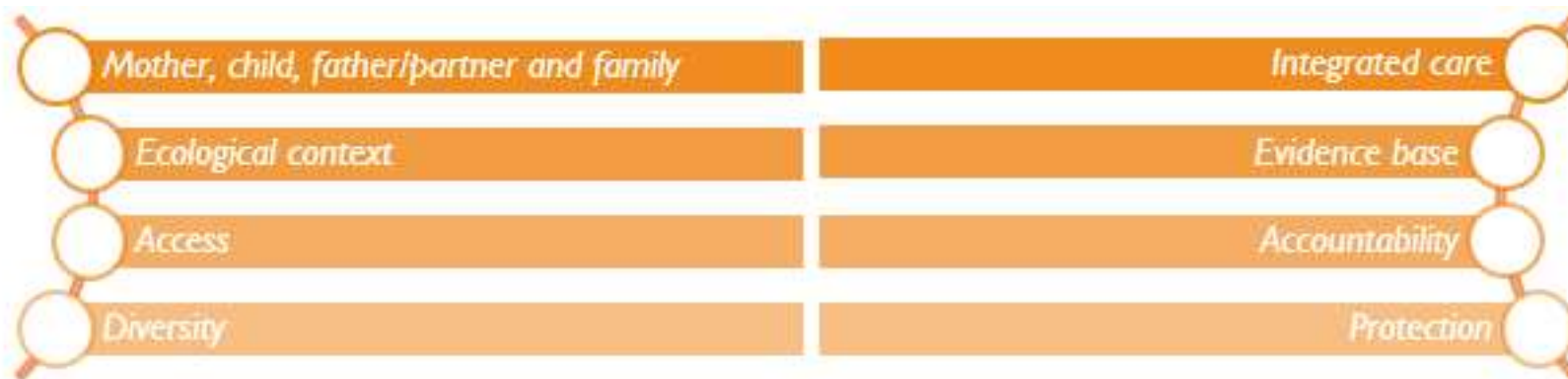
Strengthen the regulatory arrangements for marketing of infant formula and breastmilk substitutes so that inappropriate marketing and distribution ceases.

Increase the proportion of health professionals who receive adequate, evidence-based breastfeeding education and training that is free from commercial influence.

Raise awareness in the broader community of the significance of breastfeeding (and the risks associated with not breastfeeding) in achieving optimal health for both mother and child throughout the life course.



PRINCIPLES





PRIORITY POPULATIONS

Aboriginal and
Torres Strait
Islander peoples

Culturally and
linguistically
diverse

Low socio-
economic
background or low
education level

Mothers of
preterm infants

Young mothers
(<25 years)

Daily smokers

Obese mothers

Caesarean birth
or obstetric or
childbirth
complications



PRIORITY AND ACTION AREAS

1. Structural enablers

- 1.1—Community education and awareness
- 1.2—Prevent inappropriate marketing of breastmilk substitutes
- 1.3—Policy coordination, monitoring, research and evaluation
- 1.4—Dietary guidelines and growth charts

2. Settings that enable breastfeeding

- 2.1—Baby Friendly Health Initiative
- 2.2—Health professionals' education and training
- 2.3—Breastfeeding-friendly environments
- 2.4—Milk banks

3. Individual enablers

- 3.1—Universal access to breastfeeding support services
- 3.2—Breastfeeding support for priority groups



I. Structural enablers

- 1.1—Community education and awareness
- 1.2—Prevent inappropriate marketing of breastmilk substitutes
- 1.3—Policy coordination, monitoring, research and evaluation
- 1.4—Dietary guidelines and growth charts

1.1—Community education and awareness

- Explore the merits of a national social marketing campaign
- Develop and implement a national public health campaign on breastfeeding
- Promote positive breastfeeding media stories
- Support breastfeeding education in schools and communities

1.2—Prevent inappropriate marketing of breastmilk substitutes

- Review regulatory arrangements
- Raise awareness of the MAIF Agreement



1. Structural enablers

- 1.1—Community education and awareness
- 1.2—Prevent inappropriate marketing of breastmilk substitutes
- 1.3—Policy coordination, monitoring, research and evaluation
- 1.4—Dietary guidelines and growth charts

1.3—Policy coordination, monitoring, research and evaluation

- Convene a national breastfeeding advisory committee
- Monitor and report on breastfeeding rates
- Conduct periodic evaluations of the Strategy
- Support high quality research and knowledge translation

1.4—Dietary guidelines and growth charts

- Review and update dietary and infant feeding guidelines
- Raise awareness of the dietary guidelines, infant feeding guidelines and growth charts
- Provide consistent messaging on the introduction of complementary foods



2. Settings that enable
breastfeeding

- 2.1—Baby Friendly Health Initiative
- 2.2—Health professionals' education and training
- 2.3—Breastfeeding-friendly environments
- 2.4—Milk banks

2.1—Baby Friendly Health Initiative (BFHI)

- Implement the BFHI in a higher proportion of hospitals and community health services
- Integrate the BFHI in national accreditation

2.2—Health professionals' education and training

- Provide and support access to education and training in breastfeeding for all health professionals who care for women and children
- Support the development of clinical care tools for primary health care services



2. Settings that enable
breastfeeding

- 2.1—Baby Friendly Health Initiative
- 2.2—Health professionals' education and training
- 2.3—Breastfeeding-friendly environments
- 2.4—Milk banks

2.3—Breastfeeding-friendly environments

- Implement the Breastfeeding Friendly Workplace program in government agencies
- Recognise employers that provide support for women to breastfeed
- Pilot and evaluate a breastfeeding-friendly early childhood education and care program

2.4—Milk banks

- Establish a human milk working group to provide advice to AHMAC on the regulation and importation of human milk.



3. Individual enablers

- 3.1—Universal access to breastfeeding support services
- 3.2—Breastfeeding support for priority groups

3.1—Universal breastfeeding education, support and information services

- Provide mothers with antenatal education about the significance of breastfeeding for their babies and themselves
- Provide breastfeeding education for a mother's primary support network, including fathers/partners, and grandmothers
- Strengthen programs that provide mother-to-mother support and peer counselling
- Enhance postnatal support for breastfeeding
- Support Primary Health Networks to promote breastfeeding



3. Individual enablers

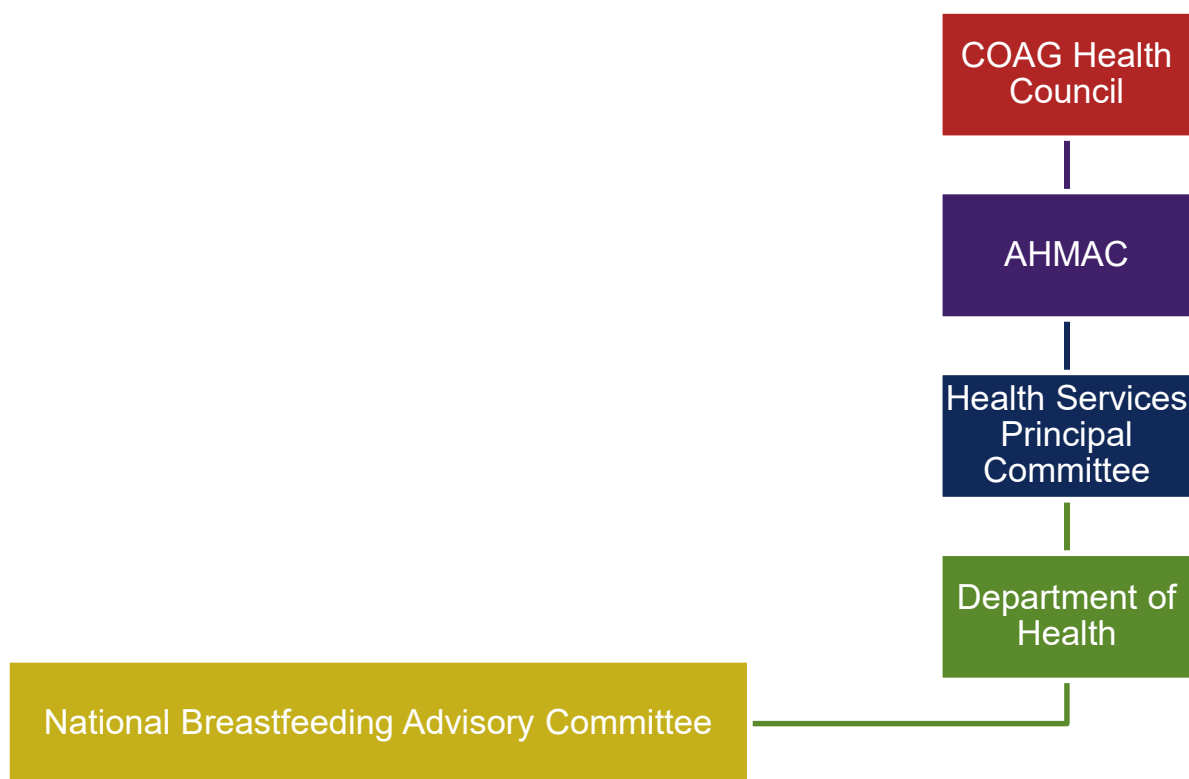
- 3.1—Universal access to breastfeeding support services
- 3.2—Breastfeeding support for priority groups

3.2—Breastfeeding support for priority groups

- Support the development of culturally safe services, programs and resources
- Promote the use of interpreters and language services
- Support the development of initiatives to address the risk factors and behaviours that can affect breastfeeding
- Support the development of strategies to address low breastfeeding rates of young women
- Promote strategies to facilitate breastfeeding for mothers with complicated health issues
- Provide breastfeeding and lactation support and maternal health care to families in exceptionally difficult circumstances



MONITORING AND EVALUATION - Governance





Australian Government
Department of Health

Breastfeeding.policy@health.gov.au
Food and Nutrition Policy Section
Preventive Health Policy Branch
Population Health & Sport Division
Australian Government Department of Health