South Australian Breastfeeding Program
2007-2012

Analysis of 5 years of population health interventions to improve breastfeeding rates

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Executive Summary

According to the National Infant Feeding Survey, South Australia (SA) has the lowest initiation and rates of exclusive breastfeeding at 6 months of all the Australian states and territories (14.6% in South Australia versus a range of 14.8-21.7% nationally) [1]. To address this gap, the South Australian Breastfeeding Program (SABP) developed a Strategic and Action Plan which aimed to increase the percentage of South Australian babies who are fully breastfed at every age from birth to six months and then to twelve months of age. The SABP operates within a national and state policy context which currently supports breastfeeding within an agenda of primary prevention and healthy weight. The National Breastfeeding Strategy [2] together with a national breastfeeding action plan that is currently being developed, provides a significant opportunity for action and research to promote breastfeeding. In SA, the Primary Prevention Plan [3] and the Eat Well Be Active Strategy [4] implicitly and explicitly support the promotion of breastfeeding.

In order to inform future planning for the SABP, a review of current government policy and available literature about protecting, promoting and supporting breastfeeding was conducted and synthesized. This report builds upon a previous evaluation of the SABP [5] which provided information about progress against the key performance indicators outlined in the South Australian Breastfeeding Strategic Action Plan 2007-2012 (SABPSAP) [6] undertaken in 2010. An analysis of SABP current policies, documentation of actions, and available literature about breastfeeding promotion inform the final recommendations of this report. The SABP Reference Group and SA Health (Health Promotion Branch) were consulted regarding the interim findings of this evaluation, the results of which were incorporated into the recommendations of the final report.

Through an extensive analysis of documents provided by the SABP, the major activities undertaken across five years of implementing population health approaches to promote breastfeeding are documented. This report focuses on the mechanisms which underpin the achievement of the SABP derived through thematic analysis of available documents. 10 key themes were identified:

- Governance, Policy, Planning and Procedures
- Consultation, Collaboration and Consensus Building
- National recognition and BFHI Accreditation
- Responsiveness and community feedback
- Cultural respect, consumer Respect, Aboriginal voice
- Equity, access and inclusivity
- Leadership and advocacy
- Education, training and intellectual property
- Marketing and Media
- Research, evaluation, dissemination and evidence based practice
- Resources and Funding

Documentation analysis showed that the SABP had particularly demonstrated strength in the areas of stakeholder consultation and engagement, breastfeeding on-line education, Aboriginal breastfeeding and ongoing capacity to reflect on practices within the program.

Strengths of the South Australian Breastfeeding Program

1. The SABP provided a unique role in the co-ordination, support, facilitation and promotion of breastfeeding activities in SA (SA) which benefited from being co-located
in the Centre of Health Promotion within a child and pregnancy oriented health service structure with broad statewide geographical responsibility and established administrative systems.

2. The program demonstrated a high degree of reflexivity through active engagement in action-reflection cycles and an evident willingness to exploring new ideas and perspectives.

3. There is evidence of strong engagement and sustained supportive relationships with a broad range of sectors including metropolitan and rural hospitals, community health services, Aboriginal support services, country health sites and organizations with an interest in breastfeeding.

4. The Baby-Friendly On-line Education Program has proven to be a cost effective (for participants) and useful evidence based tool for improving staff awareness of breastfeeding and facilitating BFHI accreditation, with increasing uptake both locally and internationally.

5. Implementation of high quality consultation-based activities, actively engaging target populations, was shown to be the basis of selected strategies and directly informed the final structure of SABP initiatives.

6. A strong commitment to culturally respectful practices and provision of resources and interventions to promote breastfeeding for Aboriginal and Torres Strait Islander women and their babies is evident.

**Recommendations**

An extensive range of recommendations regarding future directions for the SABP are listed at the end of this document. Recommendations have been made against the themes identified in the document analysis and against action areas identified within the national and state policy documents. The following represents a selection of the major recommendations as a summary:

- Sustain long term (10 year) strategic investment in the SABP to develop, promote and co-ordinate breastfeeding related policy, promotion, support and research activities, within the context of the current policy environment and evidence of low breastfeeding duration rates in SA.

- Clarify and make explicit governance and roles between the SABP and SA Health, particularly in relation to the development and implementation of breastfeeding policy and statewide data collection systems.

- Investigate the availability of and obtain historical data from existing data sets regarding breastfeeding, especially within the Child and Youth Health support programs in order to identify trends in feeding practices and to provide a baseline for system-wide data collection improvement.

- Support and advocate for existing postnatal support services to: provide accurate and timely advice for breastfeeding women, prioritise women at risk of ceasing breastfeeding and promote and support breastfeeding as the feeding method of choice for at least the first 6 months post birth.

- Invest in supporting a broad range of interventions taking into account individual and community factors which influence breastfeeding, particularly for women who are young, from culturally and linguistically diverse communities and of lower socioeconomic backgrounds.
• Provide leadership and support to facilitate collaboration in the development of breastfeeding friendly policies and welcoming environments in places where breastfeeding women visit such as shopping centres, sporting and recreation venues, Children's Centres, child care, schools, health services, workplaces and prime tourism locations such as the Adelaide Zoo.
• Maintain commitment to BFHI accreditation for hospitals and increase commitment for community based health services.
• Collaborate with the tertiary education sector to improve breastfeeding content in the curriculum for child care, youth, maternity, medicine and allied health professions.
• Facilitate cross-sectoral engagement and policy development through broadening representation on the SABP Reference Group, including local government, child care, university, Department of Families and Communities and general practice.
• Invest in the planning, implementation and dissemination of research and evaluation activities for the SABP, particularly where there are gaps in documented evidence or an initiative is large or innovative. Ensure that adequate resources are provided to facilitate high quality, outcome based research and evaluation.

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