
Submission on The Early Years Strategy Discussion Paper

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Early Years Strategy
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About Breastfeeding Coalition Tasmania

[Breastfeeding Coalition Tasmania \(breastfeedingtas.org\)](http://breastfeedingtas.org) brings together many groups interested in creating a more supportive environment for breastfeeding. We do this by advocating for better facilities, support, and protection for breastfeeding.

Introduction

Breastfeeding Coalition Tasmania welcomes the opportunity to provide input to the Australian Government Early Years Strategy. It is pleasing to see leadership focusing on the importance of the Early Years and a commitment to better integration and coordination of policies, programs and funding.

An investment in breastfeeding is one of the earliest and most impactful ways to support and optimise child health, development and wellbeing. As stated in the *Australian National Breastfeeding Strategy: 2019 and Beyond* (p9):

Positive early experiences provide a foundation for sturdy brain architecture and a broad range of skills and learning capacities. Health in the earliest years—beginning with the future mother’s health before she becomes pregnant—lays the groundwork for a lifetime of wellbeing and the development of a skilled workforce and a more productive society.

The first 1000 days (the period from conception to the end of the child’s second year) is the period with the greatest potential to affect health and wellbeing over the life course. The Developmental Origins of Health and Disease hypothesis maintains that environmental exposures such as stress or under-nutrition during critical periods of development can have long-term effects on health and wellbeing by ‘programming’ organs, tissues, or body system structures or functions.

Nutrition in the first 1000 days is one of the most significant factors that influence child health and development. The nutritional status of the mother and/or child is a critical factor in ‘programming’ the child for healthy development and positive long-term health and wellbeing outcomes. Excessive and rapid weight gain in infancy has been linked to obesity in later life as well as a number of risk factors for cardiovascular disease.

‘Human breastmilk is therefore not only a perfectly adapted nutritional supply for the infant, but probably the most specific personalised medicine that he or she is likely to receive, given at a time when gene expression is being fine-tuned for life. This is an opportunity for health imprinting that should not be missed.’

One of the most highly effective preventive measures a mother can take to protect the health of her infant and herself is to breastfeed. Exclusive breastfeeding has been shown to at least modestly protect against excessive early infant gain and later obesity—an effect that may result from differences in composition of weight gain between breastfed and formula-fed infants.

Reference – COAG Health Council (2019) *Australian National Breastfeeding Strategy: 2019 and Beyond*. COAG Health Council, Canberra.

Breastfeeding Coalition Tasmania Response to the Discussion Paper

1. Do you have any comments on the proposed structure of the Strategy?

Breastfeeding Coalition Tasmania supports the proposed structure of the Strategy.

2. What vision should our nation have for Australia's youngest children?

Breastfeeding Coalition Tasmania supports a vision that all children are supported to meet their full potential. The vision should be aligned with the intention of the UN Convention on the Rights of the Child.

3. What mix of outcomes are the most important to include in the Strategy?

The Strategy should bring together what is already known about good outcomes in the Early Years. The six domains of the Nest (Valued, loved and safe, Material basics, Healthy, Learning, Participating, and Positive sense of identity and culture) provide a holistic summary of the conditions children need to thrive.

Reference - Goodhue, R., Dakin, P., Noble, K. (2021) *What's in the Nest? Exploring Australia's Wellbeing Framework for Children and Young People*. ARACY, Canberra.

To improve early childhood development, the World Health Organisation recommends:

- Responsive Caregiving – All infants and children should receive responsive care during the first 3 years of life; parents and other caregivers should be supported to provide responsive care.
- Promote Early Learning – All infants and children should have early learning activities with their parents and other caregivers during the first 3 years of life; parents and other caregivers should be supported to engage in early learning with their infants and children.
- Integrate Caregiving and Nutrition Interventions – Support for responsive care and early learning should be included as part of interventions for optimal nutrition of infants and young children.
- Support Maternal Mental Health – Psychological interventions to support maternal mental health should be integrated into early childhood health and development services.

References – *Improving early childhood development: WHO guideline*. Geneva: World Health Organization; 2020. Licence: CC BY-NC-SA 3.0 IGO.

Breastfeeding is an important indicator of child health and wellbeing. Breastfeeding rates should be considered an important outcome measure of the Strategy. The *Australian National Breastfeeding Strategy: 2019 and beyond* includes an action to monitor and report on breastfeeding rates. Linking this Strategy and data will support monitoring and evaluation of the Early Years Strategy.

4. What specific areas/policy priorities should be included in the Strategy and why?

Positive health and nutrition during the antenatal period is recognised as an important protective factor for child health and wellbeing. The antenatal period is a key time for intervention where the focus includes high-quality antenatal care and breastfeeding preparation. A mother's nutritional status can affect their child's

epigenetic state and have lifelong effects. Good nutritional status of the mother is critical for programming the child for healthy development and positive health and wellbeing outcomes.

Looking after parents is an important part of looking after children. Paid parental leave schemes support parents to be with their infant at a critical time for child development. Paid parental leave supports bonding between the parent/s and child and increases the initiation and duration of breastfeeding. Maternal mental health during the postpartum period is an important consideration impacting caregiving and child development outcomes.

Responsive caregiving involves parents/carers observing and responding to a child's requests. It sets the foundations for protecting children, enriched learning and secure relationships. Responsive feeding is an important part of responsive caregiving and is essential for adequate nutrition. Parents and carers need to be supported to provide responsive care.

Return to work after the birth of a child is an important transition for all family members. Access to quality Early Childhood Education and Care Services and supportive and flexible workplaces are important factors to help parents manage work and family life. These environments must provide family-friendly policies and programs such as being breastfeeding-friendly.

References - Fox, S., Southwell, A., Stafford, N., Goodhue, R., Jackson, D. and Smith, C. (2015). *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*. Canberra: Australian Research Alliance for Children and Youth (ARACY).

Moore, T.G., Arefadib, N., Deery, A., Keyes, M. & West, S. (2017). *The First Thousand Days: An Evidence Paper – Summary*. Parkville, Victoria: Centre for Community Child Health, Murdoch Children's Research Institute.

Improving early childhood development: WHO guideline. Geneva: World Health Organization; 2020. Licence: CC BY-NC-SA 3.0 IGO.

World Health Organization, United Nations Children's Fund, World Bank Group. *Nurturing care for early childhood development: a framework for helping children survive and thrive to transform health and human potential*. Geneva: World Health Organization; 2018. Licence: CC BY-NC-SA 3.0 IGO

5. What could the Commonwealth do to improve outcomes for children – particularly those who are born or raised in more vulnerable and/or disadvantaged circumstances?

Continue and enhance paid parental leave schemes to support parents to spend time with their infants.

Improve access to and provide more intensive, additional and specialised support for families in more vulnerable or disadvantaged circumstances.

Implement and adequately resource policies/strategies that build protective factors for child health and wellbeing such as the *Australian National Breastfeeding Strategy: 2019 and Beyond*. Breastfeeding provides food security for infants.

Breastfeeding is a natural 'safety net' against the worst effects of poverty ... Exclusive breastfeeding goes a long way toward cancelling out the health difference between being born into poverty and being born into affluence ... It is almost as if breastfeeding takes the infant out of poverty for those first few months in order to give the child a fairer start in life and compensate for the injustice of the world into which it was born.
James P. Grant, Executive Director of UNICEF (1980-1995)

6. What area do you think the Commonwealth could focus on to improve coordination and collaboration in developing policies for children and families?

Facilitate the coming together of all stakeholders involved in the Early Years. The ARACY *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention* report outlines how we can create a better system to support the best outcomes for children in the Early Years.

Reference - Fox, S., Southwell, A., Stafford, N., Goodhue, R., Jackson, D. and Smith, C. (2015). *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*. Canberra: Australian Research Alliance for Children and Youth (ARACY).

7. What principles should be included in the Strategy?

The Strategy should bring together principles from guiding Early Years evidence and frameworks. Principles of the *Australian National Breastfeeding Strategy: 2019 and Beyond* (p29) are:

1. Mother, child, father/partner and family
2. Ecological context
3. Access
4. Diversity
5. Integrated care
6. Evidence base
7. Accountability
8. Protection

Principles	
1. Mother, child, father/partner and family	<ul style="list-style-type: none"> • Focus on the mother and child as the centre of all breastfeeding activities. • Recognise that the father/partner and other family members support women to achieve their breastfeeding goals.
2. Ecological context	<ul style="list-style-type: none"> • Acknowledge that breastfeeding is influenced by a range of family, social, cultural, economic and environmental factors and is a public health issue, not an individual woman's issue. • Invest in integrated, multi-level strategies to protect, promote and support breastfeeding.
3. Access	<ul style="list-style-type: none"> • Invest in universal services provided by skilled health professionals and peer support counsellors throughout the maternity continuum and early childhood.
4. Diversity	<ul style="list-style-type: none"> • Recognise the diversity of Australian families through targeted breastfeeding protection, promotion and support activities that are sensitive and responsive to health literacy, individual circumstances and culture.
5. Integrated care	<ul style="list-style-type: none"> • Ensure that services and health professionals work in partnership with women and their families to provide holistic and evidence-based care. • Ensure that continuity of care at key transition points is seamless from the perspective of mothers and their families and referring services.
6. Evidence base	<ul style="list-style-type: none"> • Invest in research on lactation, breastfeeding and human milk that is free from bias and conflicts of interest. • Provide evidence-based information, education and support to mothers, fathers/partners and families.
7. Accountability	<ul style="list-style-type: none"> • Establish a national breastfeeding advisory committee to oversee implementation, monitoring and evaluation of the Strategy. • Ensure that the national breastfeeding advisory committee consults and engages with key government and non-government stakeholders to track progress and optimise outcomes.
8. Protection	<ul style="list-style-type: none"> • Ensure that governments and health care and education institutions protect the community from false and misleading marketing and advertising of breastmilk substitutes that fall within the WHO Code and subsequent WHA resolutions. • Prevent health institutions (including health professionals and health workers) from accepting sponsorship of health professional education, conferences and travel by infant formula and baby food manufacturers.

Reference – COAG Health Council (2019) *Australian National Breastfeeding Strategy: 2019 and Beyond*. COAG Health Council, Canberra.

9. Are there gaps in existing frameworks or other research or evidence that need to be considered for the development of the Strategy?

The *Australian National Breastfeeding Strategy: 2019 and beyond* should be included in the list of relevant Commonwealth Government initiatives that interact with the early years (p15 - Attachment A of The Early Years Strategy Discussion Paper).

[Australian National Breastfeeding Strategy: 2019 and beyond | Australian Government Department of Health and Aged Care](#)