

TRANSCRIPT

FAMILY AND COMMUNITY DEVELOPMENT COMMITTEE

Inquiry into perinatal services

Warrnambool — 11 October 2017

Members

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Ms Cindy McLeish — Deputy Chair

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Mr Bernie Finn

Witness

Ms Jane Perry.

The CHAIR — Thanks for coming, Jane.

Ms PERRY — Thank you. My name is Jane. I am making this statement as a mother who has used local services, and I also volunteer as a breastfeeding counsellor. However, the statement I make today is entirely my personal opinions and views. I just want to discuss a few quick things; these seem to be recurring themes from talking to other mothers across Victoria.

The first thing I want to talk about is lactation consultants and access. I have talked to mothers in counselling situations who have said that they are just unable to afford lactation consultants visiting them and have difficulty accessing them through a hospital. We are very fortunate in Warrnambool that we have a lactation consultant who gives so generously of her time to provide services for free for local mothers, which is almost entirely unheard of. But other mothers, unless they can get access through their hospitals in other areas of regional Victoria, they just say, 'I can't afford someone; I'll just have to try and work it out'. And I think for people of a low socio-economic background, this is just entirely unfair — that they miss out on vital services to achieve their breastfeeding goals based on not being able to afford them. I think some of this might tie into a lack of Medicare rebate that is available for lactation consultants. Therefore lactation consultants do need to charge an appropriate amount for their fees — their professional services. Given that international board certified lactation consultants are breastfeeding experts, it should be that they are remunerated appropriately.

The next thing I wanted to discuss is the wide range of GP education that they have been provided with. It seems to be — this is anecdotally from talking to other Victorian mothers — that some mothers come across GPs who really will not encourage them to breastfeed and do not have a good knowledge and understanding of breastfeeding and how it works. I have talked to one mother, for example, whose GP told her that she did not have enough milk, based on the background of her baby being fussy and crying at two weeks old and the GP observing her baby falling asleep at the breast. This is at age two weeks old, which is biologically normal behaviour. So it is a bit worrying that the education does not seem to be there and that to get proper breastfeeding education and understanding it almost relies on a GP's own interest in breastfeeding and what continual professional development they undertake.

The last item that I wanted to address is the perinatal emotional health support program that is here in Warrnambool. This seems to be a really important program. I have also had personal experience with this when my youngest daughter was five months old. I recognised that I was not coping. I was not being my normal self, and my behaviour had changed. I was extremely lucky to have already heard of this program when the nurse came and talked at an Australian Breastfeeding Association discussion meeting. Without that, I was not aware of the program. So I was in a position where I finally gathered the confidence to make a self-referral. The empathy that was provided by this nurse was incredible. The strategies that she provided got me back on the right track, and after a follow-up visit I was feeling better and better all the time.

I think that this early intervention prevents the deterioration of many mothers' mental health. From an economic viewpoint, it prevents further strains on the healthcare system and more cost to the healthcare system, because mothers' mental health can be possibly improved with this early intervention, instead of deteriorating to a point where it requires much more intensive strategies. The perinatal emotional health program is one that I think should be continued, if possible, with funding. These nurses and counsellors have a good understanding of the particular situations that mothers face with their families.

Although GPs and other health professionals can be a good support and service, this is really targeted at mothers, and they really get it. When I said to the nurse — she suggested a strategy, and I said, 'That won't work because blah blah blah'. She was, like, 'Yeah, you've got a toddler; that isn't going to work', and she could put it into perspective. I just wanted to emphasise the importance of this service, how it really is there for mothers when they need it. It is just such a vital service. Thank you for your time.

The CHAIR — Thank you, Jane — very informative. Thank you so much.

Witness withdrew.