

Health Committee Inquiry into Preventing Child Abuse and Improving Children's Health Outcomes

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Primary argument: There is a high likelihood that a significant reduction in child abuse would be achieved by improving breastfeeding rates.

1. The link between nonbreastfeeding and maternal maltreatment or neglect of children.

1.1. Data from Australia and the US show that most substantiated cases of child maltreatment or neglect are maternally perpetrated, with 80% of substantiated neglect episodes involving the child's biological mother¹.

1.2. The link between breastfeeding and maltreatment or neglect has not been thoroughly studied in New Zealand and is under-researched in other countries.

1.3. The most authoritative recent examination of this connection was a 15-year cohort study of 7,223 Australian mother-infant pairs that was published in 2009².

1.4. That study concluded that nonbreastfed children were 4.8 times more likely to be the victims of maternal maltreatment and, after adjustment for confounding factors, the risk to nonbreastfed babies remained 2.6 times higher.³

1.5. Breastfeeding rates are lowest among those mothers at the highest risk of maltreating their children⁴.

1.6. One of the underlying factors in child abuse is the inability of the perpetrator to form interpersonal relationships, which may explain some of the

¹ US Department of Health and Human Services (2007) *Child Maltreatment 2005*. Washington DC: US Printing Office.

² Strathearn, L, A A Mamun, J K Najman and M J O'Callaghan (2009) "Does breastfeeding protect against substantiated child abuse and neglect? A 15-year cohort study", *Pediatrics*. Volume 123, number 2.

³ *Ibid.*, p.483.

⁴ Centers for Disease Control and Prevention (2007) Breastfeeding Trends and Updated National Health Objectives for Exclusive Breastfeeding: United States, birth years 2000-2004. *MMWR Morb Mortal Wkly Rep*, 2007: 56 (30).

association between child neglect and factors such as teenage pregnancy, unemployment, substance abuse and anxiety symptoms⁵.

1.7. Through breastfeeding, particularly breastfeeding on demand as recommended in the Baby-Friendly Hospital Initiative (BFHI), a new mother can learn to form a secure interpersonal relationship with her baby.

1.8. This is consistent with anecdotal evidence reported by New Zealand midwives who have worked with women who have given birth as prison inmates.

2. Breastfeeding in New Zealand

2.1. Despite high levels of expertise among New Zealand midwives and the growing number of hospitals that are seeking BFHI status, there is a need for a substantial improvement in the promotion of breastfeeding in New Zealand.

2.2. Māori women have the lowest rates of breastfeeding in the country and Māori regularly express alarm at the rates of abuse of Māori children.

2.3. There is a shortage of lactation consultants and an over-reliance on an under-resourced network of volunteers in La Leche League to provide the levels of support women need to establish and sustain breastfeeding.

2.4. There is a low degree of public awareness of the benefits of breastfeeding and the risks of not breastfeeding.

2.5. The New Zealand public has shown a readiness to view the issue of breastfeeding as simply a choice between two comparable options, and to condemn breastfeeding advocates as intolerant of this choice and pushers of 'political correctness'.

3. Recommendations

3.1. The connection between nonbreastfeeding and maltreatment and neglect of children should be examined more closely in the New Zealand context and particularly as it applies to Māori.

3.2. There should be an increase of resourcing made available to support breastfeeding mothers.

3.3. There should be an increase in and improvement of public education around the benefits of breastfeeding and the risks of not breastfeeding.

⁵ Crittenden, P M (1999) Child neglect: causes and contributors. In H Dubowitz ed. *Neglected Children: Research, Practice and Policy*. Thousand Oaks, CA: Sage Publications.