

2020-21 Pre-Budget Submission

Infant and Young Child Feeding in Emergencies (IYCF-E) – Budget for a Priority area of the Australian National Breastfeeding Strategy

To whom it may concern,

The [World Breastfeeding Trends Australia](#) (WBTi Australia) welcomes the opportunity to make a submission for this [Budget consultation process](#).

We would like to offer a short submission on the importance of including appropriate resourcing to advance this Priority Action area of the [Australian National Breastfeeding Strategy](#). WBTi Australia is recognised in that document as providing the international benchmark for the Strategy.

Australia frequently experiences natural emergencies. However, despite infants and young children being particularly vulnerable in disasters, research has indicated that Australia lacks planning and guidance for their needs at all levels of government. This places infants and young children at risk. WBTi Australia led a [Call for Action on the issue of Infant and Young Child Feeding in Emergencies](#) in November last year, that is now supported by more than 40 health, women's children's, and emergency organisations.

In 2019, Australian Federal and State and Territory governments endorsed the Australian National Breastfeeding Strategy, and agreed it was a national priority that a policy on infant and young child feeding in emergencies be developed and that skilled breastfeeding and lactation support be available during emergencies.

In 2018, Australia as a member of the World Health Assembly also agreed that all countries should:

'Take all necessary measures to ensure evidence-based and appropriate infant and young child feeding during emergencies, including through preparedness plans, capacity-building of personnel working in emergency situations, and coordination of intersectoral operations'.

National, State, Territory, and Local Governments, logistics and evacuation centre managers, health workers, nutrition experts, and child protection workers should support caregivers of infants to mitigate the adverse impacts of emergencies on their feeding, health, and wellbeing. However, they cannot do so without planning and guidance identifying and addressing their needs. World Health Assembly-endorsed guidance on IYCF-E exists to guide governments and non-government organisations on how to ensure appropriate aid delivery. However, this guidance has not been adapted to the Australian context.¹

¹ Gribble K, Peterson M, Brown D. Emergency preparedness for infant and young child feeding in emergencies (IYCF-E): an Australian audit of emergency plans and guidance. BMC Public Health. 2019;19(1):1278.

Our Call for Action urged the Australian Government to protect the health and wellbeing of infants in future emergencies by taking the following actions:

1. Urgently designate the Australian Government Department of Health as the national agency responsible for providing advice and support to the states and territories on IYCF-E in the Commonwealth Disaster Response Plan.
2. Establish and appropriately fund a national advisory committee on IYCF-E, composed of stakeholders from governments, academe, emergency and health-related non-government organisations, and excluding commercial interests, to adapt international IYCF-E guidance to the Australian context and develop national planning principles for IYCF-E .
3. Commission the Australian Institute for Disaster Resilience to develop an Emergency Handbook on children including IYCF-E.
4. Include detailed advice for health workers on how to support mothers and other caregivers of infants in emergency preparedness, and in the feeding and care of infants and young children during emergencies in the updated National Health and Medical Research Council's Infant Feeding Guidelines for Health Workers

An [internationally recognised tool](#) exists for costing the implementation of the policies recommended in the [WHO Global Strategy on Infant and Young Child Feeding](#). Using this tool, we estimate an indicative budgetary cost of \$1.8 million over 3 years to implement this policy. This comprises the total costs associated with the measures above, and includes establishment and ongoing costs. These costs are for all Australian government agencies. See Attachment for details.

The NHMRC Dietary Guidelines acknowledge evidence of the substantial financial and economic cost savings to the Australian health system which arise from supporting improved breastfeeding practices including in Australia.²

We urge the Australian Government in its leadership role to follow through the stated commitments in the ANBS by committing resources to the implementation and support of this Priority area in the 2021-22 Budget. Further delay in budgeting means more than half a million mothers and their infants and young children a year miss out on the protection they are entitled to.

Yours Sincerely

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² Smith JP, Harvey PJ. Chronic disease and infant nutrition: is it significant to public health? *Public Health Nutr.* 2011;14(2):279-89, and Smith JP, Thompson JF, Ellwood DA. Hospital system costs of artificial infant feeding: estimates for the Australian Capital Territory. *Australian and New Zealand Journal of Public Health.* 2002;26(6):543-51.

Attachment: Indicative costings
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Attachment

IYCF-E Call to action and Position Paper		
Component Cost	Total Cost (Australian Dollar)	Cost distribution analysis (%)
Research, studies, surveys for policy development	-	0.0%
Conferences, seminars, workshops for policy review and development (IYCF in the context of HIV and Emergencies) [IYCF-E multistakeholder conference]	67,640	3.8%
Development of a Nutrition/IYCF Emergency Preparedness Plan (Conference/ Workshop to Develop the Plan) [Infant Feeding Guidelines updating with key workshops and engagement]	75,720	4.2%
Advocacy- dialogues/meetings with policymakers and stakeholders [National Committee regular meetings/1 monthly]	60,860	3.4%
Public Dissemination Forum	-	0.0%
Social Mobilizations & Other Advocacy Events [orientation and engagement with organizations]	41,890	2.3%
Mobilization of Breastfeeding Support Groups During Emergencies [orientation and support of grassroots groups]	136,864	7.7%
Training [training on IYCFE of responders and staff, 6 per years/3 years]	1,371,552	76.9%
Monitoring and Evaluation	-	0.0%
Other Activities [Childbook on IYCFE]	30,000	1.7%
Total	1,784,526	100.0%