

2019

**THE LEGISLATIVE ASSEMBLY FOR
THE AUSTRALIAN CAPITAL TERRITORY**

TABLING STATEMENT

**RESPONSE TO ASSEMBLY RESOLUTION OF 31 OCTOBER 2018
MILK BANK FEASIBILITY**

**Presented by
Rachel Stephen-Smith MLA
Minister for Health
November 2019**

Madam Speaker,

I am pleased to report to the Assembly on the findings from the investigation into the feasibility of establishing an official milk bank in the ACT. I acknowledge the personal stories that were shared in October 2018 by my colleague, Ms Cheyne, on behalf of many local women, and thank the Assembly for supporting the ACT Health Directorate to engage in this work, which is clearly a matter of community interest.

The benefits of breast milk are numerous. The World Health Organisation recommends exclusive breastfeeding for the first six months of life, recognising the unique properties of breast milk. The evidence is clear – the promotion and protection of breastfeeding is an important public health priority, with significant and lasting health benefits for both mother and baby.

The October 2018 Assembly Resolution called attention to the intrinsic value of breast milk and asked the Government to investigate the feasibility of a local service, which would allow parents to safely obtain breast milk for their child when there is insufficient mother's own milk, as well as provide the opportunity for mothers to donate their own milk.

The Resolution suggested that the establishment of a local 'milk bank' might address these requirements, by providing a service facilitating the donation, processing and supply of breast milk.

The ACT Health Directorate has completed the investigation on the feasibility of a local milk bank. This work included consultation with key subject matter experts across the areas of milk bank management, nutrition, neonatology, lactation support, milk sharing practices and community perceptions.

Madame Speaker, I would like to extend my appreciation to all those who participated in the consultations for their time and expertise. The issues of infant feeding practices and breastfeeding are personal and often emotive topics, and the ACT community benefits from a wealth of passion, knowledge and advocacy for maternal and child health.

The findings of the investigation are set out in *Feasibility of establishing a milk bank in the ACT* (the Report). This Report will be publicly available on the ACT Health website.

The Report found that most of Australia's milk banks are housed within hospitals. These milk banks provide pasteurised breast milk to a limited number of premature and under-weight babies who meet the eligibility criteria for use of pasteurised donated breast milk.

Madam Speaker, while there is clear evidence regarding the benefits of giving pasteurised breast milk to vulnerable premature babies, there is not enough evidence at this time to suggest that the use of pasteurised breast milk should be expanded to wider population groups.

Fresh unprocessed breast milk is not the same product as donor breast milk provided by a milk bank, which is why every effort is made to provide mother's own milk to vulnerable babies, where possible. This is because the pasteurisation process, while reducing the risk of infection, damages key immunological and nutritional components of the milk. In fact, as the nutritional properties of breastmilk change based on the age of the infant, and the pasteurisation process changes milk composition, best practice recommends that donor milk is fortified with extra nutrients before being provided to premature babies.

While there are enough benefits retained in pasteurised breast milk to protect against severe gut complications in vulnerable infants, we don't know the impacts of pasteurised breast milk in other babies, and until more is known, the ACT Government will only supply pasteurised donor milk to babies who are born premature and meet the specific eligibility criteria.

As the number of eligible babies is very small, the ACT does not need many litres of donor milk per year to be able to meet demand. This means that establishing a local milk bank service is not a financially viable option, given the low volumes of pasteurised donor milk that the ACT uses annually.

Through exploring the available options, the ACT Health Directorate has determined the most feasible solution is to maintain current arrangements by sourcing pasteurised donor milk from an interstate milk bank. This will ensure that our very premature and vulnerable babies continue to receive the best possible care.

A significant driver of community demand for a milk bank has been not only about receiving breast milk, but to also provide local women the opportunity to donate their excess breast milk to babies in need.

The ACT Health Directorate's report shows that establishing a breast milk collection process for local women may be a feasible option, on top of maintaining current supply arrangements.

To this end, I have asked the ACT Health Directorate and Canberra Health Services to continue to discuss opportunities for eligible women in the ACT region to donate their excess breast milk, through an established process that gives donors the peace of mind that the appropriate screening and processing will be undertaken. This may involve building a relationship with the Red Cross Milk Bank, which facilitates breast milk collection in South Australia and New South Wales.

To address the gap in the medical literature, the ACT will aim to participate in research that examines the benefits of pasteurised breast milk in wider groups. If medical eligibility criteria expands, the ACT Health Directorate will reassess the potential demand for, and financial implications of, a local service.

I also recognise that informal milk sharing will continue to occur in the ACT.

The Government and health services will develop educational materials that are accessible and work with Canberran families to ensure they are informed about the evidence available when making their choices.

Finally, the Report emphasises the value of strong breastfeeding and lactation supports. This aligns with the *Australian National Breastfeeding Strategy: 2019 and beyond*, which was endorsed by all Australian Health Ministers on 8 March 2019.

The National Strategy seeks to achieve an enabling environment for breastfeeding through policies, education and support services. Implementing this strategy at a local level will be a key foundation for child health in the ACT, and the ACT Health Directorate is currently developing an implementation plan to progress important action in this space.

I thank the Assembly for the opportunity to deliver the outcomes of this work.

ENDS