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A new name

Since 1991 the Centre has built a strong program of research addressing issues of major public health importance for mothers and infants. Originally called the Centre for the Study of Mothers' and Children's Health, later called Mother & Child Health Research, we have recently re-named the Centre to pay tribute to Professor Emerita Judith Lumley, our founding Director.



Top right: John Dewar, Natasha Stott Despoja, Roberta Holmes, Rhonda Small and Angela Taft; bottom right: Roberta Holmes; Photos of the launch courtesy of La Trobe University Photography

The **Judith Lumley Centre** was officially launched on November 15, together with the new research program made possible by a generous donation by **Roberta Holmes** (see below). The keynote speech was given by **Natasha Stott Despoja**, Deputy Chair, *beyondblue*, Chair of the Foundation to Prevent Violence Against Women and Children, and Australia's newly appointed Ambassador for Women and Girls.

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formerly known as
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NEWS IN BRIEF

Seeking research participants – alcohol and relationships

Have you ever felt afraid when your current or former partner has been drinking? Or do you know someone in this situation?

A new PhD project at the Judith Lumley Centre is looking at the effects of alcohol on relationships. The sad reality for many women is that they feel afraid when their partner drinks. While alcohol does not cause someone to be violent, research shows that women are more severely harmed by a violent male partner when he has been drinking.

This study is inviting women aged 18–50 years living in Victoria to share their experience in a confidential interview. This research is important – for us to hear women’s perspectives, and to help us learn from the strategies they use to keep themselves safe.

To find out more about the study, please visit www.latrobe.edu.au/mchr/research/social-context/wings or call/text the confidential recruitment line on 0474 159 118 or email wings.study@latrobe.edu.au. If you know anyone affected by this issue, and feel it is appropriate to sensitively share this request for research participants, please do so.



A new look for the Newsletter



With the change of name comes a new look for the Newsletter.

Publishing the Centre’s news is in its 20th year: we have published newsletters since 1993, twice yearly, with just two two exceptions. Copies of our newsletters are available on our website. Looking through them provides a rich sense of our history and the continuity of the Centre’s research efforts and research culture.

The Newsletter is now published online at www.latrobe.edu.au/mchr/publications/newsletters. Please contact us if you would like to receive a printed copy.

A new program

We are now in the process of expanding our successful research program to include research on the transition to contemporary parenthood, led by the Inaugural Roberta Holmes Professorial Chair – Transition to Contemporary Parenthood and made possible by the generous philanthropic donation from Roberta Holmes.

Specific goals of the research program will be to develop:

- knowledge and interventions to prepare and support parents to improve experiences and outcomes for their children and themselves
- policy and briefing papers to facilitate public debates and policy development
- interdisciplinary and cross-institutional research related to the challenges of parenting in the 21st Century
- strategic direction for robust partnerships with politicians, industry stakeholders and government departments
- a cohort of higher degree students to ensure that future research in this field is robust and ongoing
- La Trobe’s research expertise around the transition to parenthood to place La Trobe in a leading position within this field.

The following research questions could be addressed through this program:

Lunchtime Seminars

Open lunchtime research seminars are held at the Judith Lumley Centre on the first Wednesday of every month from February to December, from 12.30 – 1.30 pm, and showcase the work of national and international academics/ researchers.

Other seminars will be announced as they come up. For the program, please see the upcoming events listing at www.latrobe.edu.au/mchr. If you would like to be added to our mailing list or update your details, please email us at mchr@latrobe.edu.au.

Publications in 2013

Please refer to the listing of our publications on our website at www.latrobe.edu.au/mchr/publications

Graduations

Jane Morrow graduated with her PhD in October 2013. Jane's PhD thesis was entitled *Time to focus on postnatal care: a before and after evaluation of changes to improve in-hospital postnatal care*. She was supervised by Helen McLachlan and Della Forster.

Stefanie Zugna was awarded Master of Midwifery. Her thesis was entitled *Caller profile, demand for, and referral pathways of callers to the post and antenatal depression association (PANDA) helpline: a descriptive study*.

- What is the contemporary Australian policy context surrounding the early years of life and how does this support or hinder positive transitions to parenthood?
- How can more pregnancies be planned and wanted?
- What is the contemporary experience of women and men as they make the transition to parenthood?
- How are couples prepared for the transition to parenthood and can this be improved?
- How can the very first steps in the transition to parenthood be enhanced for women and men?
- What does social media offer new parents?
- What are the goals of "good enough" parenting?

Judith Lumley



"I have a large file of correspondence with Judith, going back to 1978. Her handwritten letters to me provide repeated illustrations of the longstanding and exceptional breadth and rigour of her thinking and research. Academia would serve the public more effectively if it had more role models as exemplary as Judith has been to me and others. Thank you, Judith!"

Sir Iain Chalmers, Editor, James Lind Library and Former Director, UK Cochrane Centre (MCHR News #30, December 2008)

Professor Emerita Judith Lumley AM had a distinguished career in public health, with a major focus on perinatal epidemiology and maternity services research.

Following medical studies begun in Cambridge and completed at Monash University, Judith undertook her PhD in fetal physiology in the Department of Obstetrics and Gynaecology at Monash.

In 1982 Judith established and directed the Victorian Perinatal Data Collection Unit in the Department of Health, which to this day collects high quality data on all births in Victoria – in no small part a legacy of Judith's commitment to the importance of accurate and reliable routine data in public health surveillance and research.

Judith chaired the Victorian Ministerial Review of Birthing Services in 1988, conducting a landmark review which included the first ever survey in Australia of women's views of their maternity care.

In 1991 Judith established the Centre for the Study of Mothers' and Children's

Judith Lumley Centre

Grants

Angela Taft has been awarded a **Fulbright grant** to bring Associate Professor **Diana Greene Foster**, an expert in prevention and reduction of unwanted pregnancy, to La Trobe for a month in November. Diana has undertaken many important studies but the most recent *Global Turnaway Study* follows women with unwanted pregnancies who either get or do not get an abortion, and compares their outcomes.

Kristina Edvardsson has been granted a three-year **Marie Curie International Postdoc Fellowship** from the Swedish Research Council for Health, Working Life and Welfare (FORTE) (SEK 3,435,000/AUD \$ 570,000 over three years). Kristina coordinates the international *Cross country ultrasound study (CROCUS)*, which investigates midwives' and obstetricians' experiences and views on the use of ultrasound and maternal/fetal role and rights. Kristina will also participate in the Centre's new parenting research program.

Awards

Lisa Amir was awarded a Fellow of the International Lactation Consultants Association (FILCA) at the 2013 ILCA Conference in Melbourne. The award recognises significant professional achievements of leaders and mentors in the field of lactation consultancy and proven commitment to ILCA.

Maggie Flood was awarded an Australian College of Midwives (ACM) Victorian Branch Scholarship (Higher Degree Research) of \$2000 to support her Master of Research studies investigating postpartum haemorrhage in the birthing women of Victoria 2003–2011.

Health, later called Mother & Child Health Research, with a program grant from the Victorian Health Promotion Foundation.

Approached to head the prestigious National Perinatal Epidemiology Unit in Oxford, she held that post in 1994 and 1995, returning to the Centre in 1996, where she remained Director, and a wonderful mentor to many staff and students, until her retirement in December 2008.

Judith's research on the aetiology of preterm birth is world renowned, as is her work reviewing the evidence for interventions to reduce smoking in pregnancy. Involved in the Cochrane Collaboration since its establishment, Judith was a longstanding advocate not only for evidence-based clinical care, but also for evidence-based public health policy and practice. She served as an advisor to the Canadian Perinatal Surveillance System from 1995 to 2008, served on the International Advisory Board for the *Lancet* for many years, and contributed tirelessly to the work of the National Health and Medical Research Council, reviewing grants and fellowships and participating on Council committees.

Judith co-edited the *Australian and New Zealand Journal of Public Health* with Associate Professor Jeanne Daly from 2000 to 2008. Her work with the Journal was characterised by a clear focus on the quality of the evidence in articles, resting on the appropriate use of the right research method. She believed firmly that one of the tasks of a journal is educational and argued that all manuscripts should be reviewed to give guidance to authors.

Judith was awarded life membership of the Public Health Association of Australia in 1994 and the Association's Sidney Sax Medal in 2002. She was a Fellow of both the UK and the Australian Faculties of Public Health Medicine. In 2006, Judith was also made an honorary Member of the Order of Australia for her many contributions to public health and to maternity care.

A new Director



After five years as Director of the Judith Lumley Centre, Rhonda Small is passing on the leadership of the Centre to Angela Taft, who has been the Deputy Director since 2010.

Angela has been at the Centre since 2000. She is a social scientist and over the last ten years she has led a major competitively funded program of research on intimate partner / gender-based violence, primary care responses to IPV and women's sexual and reproductive health.

Rhonda will be staying on part-time in her role as a Research Professor and looks forward to seeing the Centre continue to prosper and grow under Angela's capable leadership.

Staff news

Dr **Nayana Samaraweera** joined the Judith Lumley Centre in September to undertake one year of overseas training with Associate Professor Angela Taft. He is a Medical Doctor (MBBS, MSc) from Sri Lanka specialising in public health. His specialist area is maternal and child health.

Visits

In October, Professor **Nancy E. Glass**, Associate Director, Johns Hopkins Center for Global Health, Department of Community-Public Health was a guest at the Judith Lumley Centre. She is collaborating with the Centre and the Department of General Practice at Melbourne University on the Australian arm of the IRIS project. At a Lunchtime Seminar she introduced us to the IRIS project, a research study to check the usefulness of the first interactive internet-based safety decision aid for abused women.

Professor **Barbara Dennison**, Director Health Policy and Research Translation Unit, Division of Chronic Disease Prevention, New York State Department of Health visited us in November 2013. She gave a Lunchtime Seminar with the title *A systems approach to increasing breastfeeding*, in which she described a systems-based intervention, which used the Model for Improvement and Learning Collaboratives to improve breastfeeding support in maternity hospitals. Hospitals implemented evidence-based strategies to change hospital systems that affected maternity care policies, practices, and procedures. These system changes became the new norm which routinely affected all pregnant women and new mothers who delivered at the intervention hospitals.

Improving the health of Aboriginal children through breastfeeding

Helen McLachlan, Catherine Lavoie-Mongrain



Images courtesy of H McLachlan

In Australia, Aboriginal and Torres Strait Islander (ATSI) women have lower breastfeeding rates than non-Aboriginal and Torres Strait Islander women, with the exception of those living in remote settings. The 2004–2005 National Aboriginal and Torres Strait Islander Health Survey reported that 76% of Indigenous children aged less than four years living in non-remote areas had ever been breastfed compared with 88% of non-Indigenous children. These rates are well below Australian targets of 90%. Increasing breastfeeding is one way of improving the short- and long-term health of Aboriginal and Torres Strait Islander children. Indigenous Australians have significantly poorer health than the general Australian population; a life expectancy 12 years shorter for males and 10 years shorter for females, and avoidable mortality rates four times that of the non-Indigenous population. Indigenous Australians also have higher rates of acute and chronic illnesses, for many of which breastfeeding is protective, such as diabetes, heart and circulatory disease, renal disease, asthma, and hearing loss/ear disease. For example, recurrent otitis media in Aboriginal and Torres Strait Islander children is much higher than in the general population, and recurrent ear infections can lead to hearing loss, which can lead to learning difficulties and impaired social and emotional development. The Australian Government inquiry into the benefits of breastfeeding concluded that given the very strong evidence of the protection breastfeeding provides against otitis media, 'for this reason alone, breastfeeding should be encouraged in Indigenous populations'.

The Australian Parliamentary inquiry into breastfeeding recommended that leadership is needed in the area of monitoring, surveillance and evaluation of breastfeeding rates and practices in Aboriginal and Torres Strait Islander populations in both remote and other areas. In the recent Victorian Government report on strategic directions for Aboriginal health 2012–2022, a key priority was to increase breastfeeding rates for mothers of Aboriginal babies. The Australian Government's Office for Aboriginal and Torres Strait Islander Health and Healthy Public Policy Unit commissioned two reports as part of a strategy to encourage longer breastfeeding. Identified gaps in research and evaluation included

Professor **Ingrid Mogren** from Obstetrics and Gynaecology at the University of Umeå in northern Sweden visited the Centre recently. Ingrid is a collaborator on the Cross country ultrasound study (CROCUS), which is an international study aimed at investigating midwives' and obstetricians' experiences and views on the use of ultrasound and maternal/fetal role and rights.

International presentations

At the ILCA (International Lactation Consultant Association) Annual Conference in July 2013 several Centre staff and students presented:

Anita Moorhead *Breastfeeding education for NICU staff: Strategy for breastfeeding promotion*

Helene Johns *MILC: Exploring the prevalence and outcomes associated with breastmilk expressing*

Lisa Amir *Is Candida associated with nipple and breast pain? Results of the CASTLE study*

Zaharah Sulaiman *Maintaining breast milk feeding for employed women in urban Malaysia: The role of the workplace*

Lisa Amir presented at the 18th Annual International Meeting of the Academy of Breastfeeding Medicine in Philadelphia in November 2013

Rhonda Small was an invited plenary speaker at the Annual Congress of the Swedish Obstetrics and Gynaecology Society in August 2013

determinants of infant feeding and social/economic barriers to breastfeeding in Aboriginal and Torres Strait Islander communities; and the need for better epidemiological data on breastfeeding via routine health information systems.

In partnership with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), we will:

- explore strategies that may increase breastfeeding rates among Aboriginal women in Victoria
- collect and report on breastfeeding outcome data for Aboriginal women in Victoria
- explore the feasibility of implementing models of maternity care that provide continuity of midwife care to Aboriginal women in Victoria (known as caseload midwifery – these models show promise in terms of increasing breastfeeding in some populations).

Funding: Building Healthy Communities, La Trobe University

Research team members: Helen McLachlan, Della Forster, Karen Adams, Michelle Newton, Helena Maher, Kate Dawson, Touran Shafiei, Catherine Lavoie-Mongrain; Teagan Cornelissens

Sources of information used by women during pregnancy

Heather Grimes

Having a baby is a major life event, and for many women, particularly those having a first baby, it is a time they seek information to help them during the transition to parenthood. Currently, women may have access to significant volumes of information about pregnancy, birth and parenting from a number of sources. Although the 20th century saw an increase in the availability of written health information, over the past two decades the internet has emerged as an increasingly important information source. The extent to which the use of the internet has influenced women's health seeking behaviour is unclear.

We used data collected in 2010 as a component of a larger postal survey titled 'Exploring the care we provide to new mothers' which explored the views, experiences and health outcomes of women who gave birth at the Royal Women's Hospital before and after implementation of changes to postnatal care.

The key findings of this sub-study indicated that women use a number of different sources of information, and, when given the option, the majority preferred a variety of formats. Use of the internet was less than expected given the growth in access to services over the past decade, whereas books were a useful and frequently used information source for almost half of the women.

The study has also highlighted issues regarding the accessibility of information sources for women from non-English speaking backgrounds. Although many

Research Translation

From 2011 to 2012 the Centre conducted an **evaluation of the Victorian homebirthing pilot program** on behalf of the Victorian Department of Health, led by Associate Professor Helen McLachlan. The findings were released in part by the State Government in March 2013. In November this year, the findings of the report were used to inform a **motion passed in the Victorian State Parliament to expand public hospital homebirth services**, including committing to fund start-up costs of homebirth programs to hospitals providing maternity services in the next State budget; developing State-wide guidelines and information for health services implementing homebirth services; developing systems to prospectively collect costing data; and supporting further research into the safety of homebirth programs and research to compare clinical outcome data associated with low risk births in different birth settings.

Economic aspects of breastfeeding

Call for papers

The *International Breastfeeding Journal* invites you to submit a manuscript to this new thematic series by 1 March 2014.

For more information, please refer to www.latrobe.edu.au/mchr/publications/ibj

sources of information are available to women, one-third of the women who participated felt that some of their information needs during pregnancy were unmet. Breastfeeding information and advice on the mother's postnatal recovery were the most common topics mothers felt uninformed about. It is unclear how unmet learning needs during pregnancy may add to a woman's stress and anxiety during pregnancy and post-partum. Further research is required in relation to the most effective ways for health professionals to provide information to women and how women can be better supported in relation to their information needs.

We presented this data at the PSANZ conference in Adelaide in April 2013 and our article has been published in the journal *Midwifery*.

Grimes HA, Forster DA, Newton MS. Sources of information used by women during pregnancy to meet their information needs. *Midwifery* 2013 (in press). Epub 2013 Oct 17

MILC: It really is better at the breast

Helene Johns



Image courtesy of S Hosking

Many breastfed infants receive expressed breast milk as well as feeding from the breast. The Mothers' and Infants' Lactation Cohort (MILC) study explored the prevalence and outcomes of breast milk expression, and whether feeding other than directly from the breast prior to hospital discharge decreased the proportion of infants receiving any breast milk at six months.

Women who had a healthy singleton term infant, intended to breastfeed and spoke English were recruited from three Melbourne hospitals. The MILC team interviewed 1003 mothers face-to-face in hospital between 24–48 hours postpartum and followed up with telephone interviews three and six months later.

At recruitment, half of the group were first-time mothers. Of these, 45% already had a breast pump and only 36% had been fully feeding at the breast. Of the whole group, 48% of infants had been fully breastfeeding at the breast, 47% had received at least some expressed breast milk and 23% some formula. At six months, infants who had fed only at the breast by the time of recruitment were

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more likely to be continuing to have any breast milk than those who had received any expressed breast milk and/or infant formula.

Johns HM, Forster DA, Amir LH, Moorhead AM, McEgan KM, McLachlan HL: Infant feeding practices in the first 24-48h of life in healthy term infants. *Acta Paediatr* 2013, 102(7):315-320

Johns HM, Forster DA, Amir LH, McLachlan HL: Prevalence and outcomes of breast milk expressing in women with healthy term infants: a systematic review. *BMC Pregnancy Childbirth* 2013, 13:212

A report from Norway

Moni Rani Saha



I am an international PhD student at the Judith Lumley Centre. I had the unique opportunity to come to Oslo for a research stay at the School of Pharmacy, University of Oslo Norway under the supervision of Professor Hedvig Nordeng from 21 October to 15 December, 2013. The purpose of this research stay is to prepare data for three to four publications from the *Norwegian Mother and Child Cohort Study* (MoBa, conducted by the Norwegian Institute of Public Health) for one of my PhD projects titled *Postnatal use of maternal medications and breastfeeding outcomes*. The Chief investigator of this project is Associate Professor Lisa Amir. My co-supervisor is Associate Professor Kath Ryan. MoBa is an ongoing long-term prospective cohort study of more than 100,000 Norwegian women recruited in pregnancy, and their children, and a unique data source to investigate the impact of women's use of medicines on breastfeeding outcomes. MoBa is a very complex data set with several thousands of variables and also linked to the Medical Birth Registry of Norway. Cleaning, preparing and analysing data requires initial supervision by the experienced researchers of MoBa in Norway. That is why I am here to work with Professor Nordeng who is a Pharmacoepidemiologist and an experienced researcher with MoBa data.

It is winter in Oslo now. The weather is very chilly and the days are short. A very new experience for me. I am missing Melbourne, my family and our research Centre. However, I am happy to be here in direct contact with some experienced researchers and getting directions and guidelines to solve the problems in preparing my own dataset.

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