

Presentation by Helen Tchong to the Canberra MILK breakfast on 11 August 2018

Helen began by acknowledging the Traditional Owners of the land on which the breakfast was being held, the Ngunnawal people. Helen paid her respects to their Elders, past, present and future, and the Elders from other communities present at the event.

Bondia or good morning everyone. Obrigada to all of you for joining us on this cold Canberra morning for Alola Australia's 2018 Canberra MILK breakfast, and a special thanks to Mana Ana Guterres from the Timor-Leste Embassy, Canberra Friends of Dili and Cooking Circles for helping to organise today.

I know many of you here today are familiar with Alola but for the benefit of any new friends I'll just quickly explain the relationship between Alola Australia, which is an Australian organisation, and its sister organisation Fundasaun Alola, which is based in Timor-Leste.

Fundasaun Alola's mission is to:

- promote women's rights and increase women's leadership capacity
- increase the health status of women and children
- increase access and quality of education for women and children
- and strengthen women's small enterprises at the grassroots level.

To achieve this mission, Fundasaun Alola has four key programs:

- Advocacy
- Education
- Maternal and Child Health
- Economic Empowerment

Alola Australia is committed to enabling Fundasaun Alola to undertake its work effectively and sustainably. We aim to raise at least \$100,000 per year to support FundasaunAlola's development work, while raising awareness of the incredible work they do.

Alola Australia's MILK Campaign (the reason we are here today) was launched in World Breastfeeding Week (WBW) in 2011 by Kirsty Sword Gusmão along with mothers and babies in Melbourne and Timor-Leste.

The MILK launch event took place in Fitzroy in Melbourne, and the highlight of the day was a 'united breastfeeding flashmob'. What is a united breastfeeding flashmob you ask? It's fifty breastfeeding mothers, braving the cold and the media, to feed their babies on the steps of Fitzroy Town Hall, as an act of unity with women in Timor-Leste.

MILK is now an annual event that celebrates breastfeeding and motherhood, and supports improvements in child and maternal health in Timor-Leste during WBW and throughout the month of August each year.

Through MILK, we encourage people to get together for MILK morning teas or anytime-of-the-day events, to get online and join our virtual everyday hero campaign and to follow our campaign activities on FB and twitter. We invite you to go to our website to donate online or we also have donation envelopes here today.

World Breastfeeding Week

World Breastfeeding Week runs from 1-7 August each year and this year's theme is particularly pertinent for Timor-Leste. It is 'Nutrition, Food Security and Poverty Reduction' with the slogan: 'Breastfeeding: Foundation of Life' and it's goals are:

- to prevent malnutrition in all its forms
- to ensure food security even in times of crisis

- to break the cycle of poverty.

This theme focuses on the huge health benefits that exclusive breastfeeding has for all babies, especially for those born in developing countries. I think a special message that MILK spreads is that no matter where in the world a newborn baby takes his or her first breath, **the desire of a mother to give that baby the best start in life is universal**. The first hours and days after birth are one of the riskiest periods of a child's life – but getting an early start to breastfeeding provides babies with a powerful line of defence.

Fundasaun Alola's maternal and child health program

One of Fundasaun Alola's first areas of focus in maternal and child health was on promoting exclusive breastfeeding to help reduce infant mortality. Fundasaun Alola has rolled out programs nationally to encourage immediate and ongoing exclusive breastfeeding in hospitals in Timor-Leste as well as in communities.

This is done through the training of health care workers in infant and young child feeding and through the establishment of Maternal and Child Health community-based groups, such as Mothers Support Groups and Suku Hadomilnan no Oan (Village loves mothers and children) groups. These groups disseminate information to encourage and support mothers to initiate breastfeeding immediately after delivery, to breastfeed exclusively for the first six months of life and to continue breastfeeding for at least two years along with the introduction of appropriate complementary feeding. Testament to the success of Alola's Maternal and Child Health Program is the fact that rates of exclusive breastfeeding in Timor-Leste have continued to rise since 2009/10 from 49 percent to over 62 percent in 2017.

Other areas of Alola's maternal and child health program include:

- the delivery of maternity packs to provide necessary supplies for mothers, and encourage them to attend hospital for delivery – here in Australia we probably couldn't conceive of not having appropriate clothes to take to hospital for ourselves and also for the child, and not wanting to go for that reason
- the safe birthing program which supports pregnant women in communities to develop birth plans, recognise danger signs and gather community support to get to a hospital when labour begins
- provision of important counselling to mothers.

At the heart of Fundasaun Alola's MCH program is the understanding that **community participation and empowerment is critical**. The Program therefore utilizes a range of strategies directed at multiple levels:

- nationally and within districts
- within health facilities including hospitals, community health centres and local health posts
- and importantly, within the broader community.

To give you a better sense of how this works on the ground, the concept of the Village loves mothers and children program is creating villages whose people have the readiness, resources and the ability to resolve health problems independently. The objectives of the program are to:

- raise community awareness about birth preparedness
- recognize danger signs during pregnancy, child birth and postpartum
- and to assist and support women with obstetric complications with transport to a health facility.

The program creates a number of community networks in each village:

- *a notification network* to register pregnant and lactating women, families who are using birth spacing methods, couples of reproductive age, and children aged one-five years
- *a transport network* that assesses and coordinates transport options
- *fundraising networks* help to raise and provide funds for transporting women with difficult births and normal births to a health facility or to give birth at home assisted by skilled provider
- *a health promotion network* to promote maternal nutrition, basic newborn care, infant and young child feeding, family planning, male and female reproductive health and to provide other related maternal and child health information.

At our MILK Morning Tea event in Melbourne last weekend, one of our Alola Australia board members Jacky was sharing her reflections of how lucky she was to have given birth in Australia, with access to prenatal care given by a team of obstetricians and mid-wives, how lucky she was that she gave birth in a maternity hospital with an obstetrician and midwife in attendance, that there were operating theatres and an anaesthetist on hand, and access to a neonatal intensive care unit, should anything happen. And how lucky she was to have access to adequate nutrition to support the pregnancy as well as to produce milk to breastfeed, and a network of family and health professionals to turn to should anything not go to plan.

Infant, maternal and child mortality

Jacky shared some comparative maternal and child health statistics which I'd like to leave you with.

- **Australia's maternal mortality rate** (ie death caused or aggravated by pregnancy, including deaths during childbirth or pregnancy) **is six per 100,000 live births** (2015) – which is one of the lowest rates in the world.
- **Timor-Leste's maternal mortality rate is 215 per 100,000 live births** (2015) – which is **more than 30 times higher** than the rate in Australia. This rate is already hugely improved – less than half of what it was more than ten years ago immediately post conflict – so a big improvement in a short time but there is still a long way to go.
- **Australia's infant mortality rate is 3.2 deaths per 1000 live births, in the first year of life. In Timor-Leste 45 babies out of 1000 fail to reach their first birthday** – about 15 times higher than the rate in Australia. Again, this rate is markedly improved having nearly halved in ten years. But it is still way too high.

The statistics in Timor-Leste are vastly improved, over a period of about ten years – and Alola has played a massive part in achieving these improvements, through the programs directed at maternal and child health that Alola has developed, and supported the Ministry of Health in Timor-Leste to develop and run.

Malnutrition

Timor-Leste has one of the highest rates of under-nutrition in the world – the highest in Asia and higher than in most African countries. Under-nutrition can have devastating effects on children's long-term development. The causes include low incomes, low agricultural productivity, food insecurity, limited access to health services and markets and a lack of understanding around health and nutrition. Malnourishment remains extremely high in Timor-Leste with 37.7 percent of children under five years of age being underweight and 50.2 percent of children under five identified with stunted growth. But most often, the problem isn't lack of food – it's lack of information.

For generations, mothers living in rural areas of the country have treated malnutrition at home. However, many of these mothers do not have access to basic information about child nutrition, including meal frequency and the diversity of a child's diet. In fact, the most recent national food and nutrition survey found that inadequate feeding practices are the leading cause of malnutrition.

Children are particularly vulnerable during the hungry season, where 47 percent under the age of five years suffer from chronic malnutrition. Malnutrition weakens the immune system and can lead to a heightened risk of illness and disease. Research has shown that the effects of chronic malnutrition are irreversible if it left untreated by the time a child reaches two or three years of age.

Mana Kirsty Sword Gusmão, at our MILK morning tea event in Melbourne last week, shared her reflections of when she first established Alola's MCH program. She said teaching Timorese women the nutritional value of colostrum, and that it wasn't 'dirty milk' was an important first step. She also said many Timorese women felt they were too skinny to breastfeed. They were however completely empowered once told that they were able to provide their baby all the nutrients needed just with their own bodies.

Thank you for allowing me the pleasure of sharing with you some of the real and sustainable impacts on the ground of Alola's Maternal and Child Health Program. I encourage you to learn more via the Alola Australia and Fundasaun Alola webpages and social media pages.

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By Helen Tchong, Board Member of Alola Australia.