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THE EXPERIENCE OF THE NURSING MOTHERS' ASSOCIATION OF AUSTRALIA (NMAA)—QUEENSLAND BRANCH WITH FUNDING AND ACCOUNTABILITY

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ABSTRACT

This article describes how a self-help organization for nursing mothers' went through the process of seeking external financial support. The strategies the organization undertook and the impacts of funding on the organization are described.

HISTORY OF NMAA

The Nursing Mothers' Association of Australia (NMAA) is a self-help group in the health area. It was founded in 1964 in Melbourne, Australia, by a group of young mothers who wanted to breastfeed their babies, but found that, as in most western countries at that time, there was a lack of knowledge in the community about how to breastfeed successfully. Nursing Mothers' started as a single group, but has since grown to become a national organisation with 500 local groups found throughout Australia. NMAA's aims are very similar to those of La Leche League and it advocates and supports breastfeeding in a similar way.

In Queensland, Nursing Mothers' has approximately 350 counselors and eighty-eight groups spread over the state's very large geographical area. The work of these counselors and groups is overseen and supported by a team consisting of the Queensland Branch President and three Assistant Branch Presidents (the Branch Team). Because of the size of the Branch (state), much of the contact between Queensland counselors and the Branch Team is by telephone, fax, letters, and, increasingly, e-mail. I have been a counselor with NMAA for thirteen years and was a Queensland Assistant Branch President in 1994 and 1995.

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THE NEED FOR FUNDING

Before setting up the Branch Office, the Branch Team, in common with the voluntary office-bearers of many other self-help groups, met in each other's homes, where rumpus rooms and corners of living rooms were used as storage and work areas. Without a consistent address and telephone number, there was no way for the public to contact Nursing Mothers' except through the Breastfeeding Helpline. The need for a modern office system as a workplace became increasingly obvious, not only to facilitate communication between the Branch Team and Queensland counselors, but also as a way of presenting a professional image to the wider community. The question was how to finance such a venture.

ACCESSING FUNDING SOURCES

In 1992, grants for community groups became available under the Women's Health Policy Unit and a decision was made in principle to apply for this grant. However, before undertaking the task of applying for funding, it was necessary to look at the issues involved. Concerns were raised about the huge workload needed to prepare a submission, whether the terms of a grant would threaten the autonomy of the Association, and whether the necessity for accountability would significantly interfere with the work of the Association. There was also the problem of continued funding and self-funding if necessary and the question of whether there were enough counselors with the necessary business skills to set up and run an office.

Once the decision was made to apply for the grant, the first step was to identify what information was needed to justify the funding of an office for Nursing Mothers. As many other community groups were applying for grants, it was necessary to show valid cause as to why an office was needed. Several areas were regarded as being important to the successful outcome of the submission. These were current statistical data, letters of support from sympathetic members of State Parliament, and evidence of the value to the community that an office would bring. It was essential to gather statistics on the volume of calls to the Breastfeeding Helpline, calls from the general public and health professionals, and numbers who accessed services such as breast pump hire and Breastfeeding Education Classes.

One of the then Assistant Branch Presidents spent many hours contacting individuals and groups that she thought would be able to help them with the submission. These included government departments, other self-help groups, and local politicians. At one of her many meetings with interested parties, she met a lobbyist who was willing to give his time and expertise to help prepare the submission and lobby the Health Minister. Under his direction, the Branch Team put together the necessary information and answers to questions that the Health Minister was likely to ask. There is no doubt that the success of this original submission was largely due to the time and effort given by the lobbyist to this project. The initial grant provided funds for the fitting out of a modern office and the employment of a part-time office assistant.

ACCOUNTABILITY

With success in obtaining the grant came a requirement for accountability. Because the Branch Team was so used to conducting Branch business from their homes without the need to be business-like, change was initially a bit daunting. At the same time, there was a general feeling of thankfulness for no longer having to rely on volunteers' time and little money; so, the idea of having to be accountable seemed a fair tradeoff. Reporting was to be quarterly and although the actual paperwork was fairly straightforward, the report had to break down details of phone calls and visitors to the office as well as details of NMAA activities for which the office was used.

RE-APPLICATIONS

Under the terms of the original grant, it was necessary to re-apply for funding every year. For the first re-application, a Strategic Plan had to be drawn up, which involved many hours of hard work. Fortunately, much of the information needed had already been gathered, which saved time. As well, there was an understanding of how the system worked and whom to see; therefore, less time was wasted. It was still necessary, however, to continue proving the benefits of funding an office for NMAA, as well as keeping a business-like attitude.

SELF-SUSTAINABILITY

The issue of self-funding is an important one, as it was expected by the Health Department that efforts toward self-sufficiency would be made. Grant money was only allocated on a yearly basis, so there was a certain amount of pressure for the incoming Branch Team to demonstrate self-funding, after the original Team had worked so hard to secure the grant. The Health Department did not provide any guidelines as to how to go about this, aside from workshops they conducted for all self-help groups funded under the same grant. The workshops were a useful opportunity to ask each other for ideas and for information on how other groups had begun to generate income outside of the grants system.

Nationally, NMAA has had moderate success with a national art union and sponsorship. At the state level, many Queensland NMAA groups and regions have been successful at obtaining grants from the Community Benefit Gaming Fund. These grants are generally given for capital equipment such as photocopiers and filing cabinets, not for wages or conference fees. Several groups and regions have been given grants to purchase electric breast pumps, which are then hired out, thus generating further income.

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Applying for these grants has become more competitive as more community groups have started submitting applications. Counselors with expertise at writing submissions have indicated a willingness to help with the writing of individual submissions and are often asked for their help and ideas. When writing the submissions for these grants it is necessary to provide information about how resourcing NMAA will benefit the members of the community that look to NMAA for help and support and not just how the grant will benefit the individual counselors or Regions applying for funding.

In 1994, a grant from the Charles and Sylvia Viertel Foundation was successfully tendered for, enabling Queensland Branch to set up a library consisting of books and videos on breastfeeding as well as related topics such as parenting, counseling, drugs in breastmilk, and community publications. This library is housed in the Branch Office and is available to NMAA Members or others at the discretion of the office staff. New material is purchased for the library as funds become available.

In 1994 a grant from the Golden Casket (the State lottery) allowed NMAA to pay for telephone divertors to be used to direct calls to the counselors on the Breastfeeding Helpline, who work on a daily roster basis. Previously, an answering machine message was used to ask callers to ring the counselors direct, thus necessitating an extra phone call. The use of the divertors has also practically eliminated the possibility of crank callers, as the counselors' home phone numbers are not advertised. As local phone calls are not free in Australia, the use of divertors was considered too expensive before the grant became available. Due to the success of this system, there is a reluctance to return to the answering machine method and a decision will need to be made on how to fund the divertors if future grant money is not available.

There has been a marked increase in confidence and expertise regarding the writing of grant applications and the reporting procedure. With the success of grant applications, NMAA counselors are better resourced to carry on the real work of NMAA, which is to support and encourage mothers who wish to breastfeed.

FUND RAISING

Fundraising is an important aspect of self-sustainability. Since 1994, Queensland Branch has acted as the promotion manager for several Queensland tours of popular children's entertainment acts. A Nursing Mothers' Special Events Coordinator, a volunteer, has liaised with their management on one hand and with interested local Nursing Mothers' Groups on the other. The coordinator is responsible for negotiating the terms and conditions of the tours, while the local Nursing Mothers' Members are responsible for finding the venue, selling tickets, and overseeing the running of the actual concert. Generally, a percentage of each ticket sold is given to Nursing Mothers', with part of this percentage going to the Branch and part to the groups running the shows. The sale of merchandise and balloons provides additional income on a percentage basis.

Due to the increasing popularity of the first of these entertainment groups, the percentage available to Nursing Mothers' has decreased. However, other children's entertainers have approached Nursing Mothers' and the Special Events Coordinator has devoted considerable time to assessing the potential profitability of promoting these entertainers versus continuing with the original ones. Caution also had to be exercised so as not to saturate the market and burn-out NMAA Members.

CURRENT SITUATION—1999

In 1999, the terms of government funding have changed. Funding for NMAA Queensland Branch now comes from the Statewide Health and Non-Government Services Unit (SHANGU). The Queensland Health Department believes that by funding NMAA, they are buying a service with measurable outcomes. Funding is allocated for three years and according to the service agreement signed with SHANGU, certain specified aims must be met. NMAA is to report twice yearly detailing how these aims are being met. For the first year, 100 percent funding will be allocated, whereas in the second and third years, only 80 percent will be guaranteed. The other 20 percent is dependent on whether the aims specified in the service agreement have been reached.

When drafting the service agreement, it was suggested by SHANGU that one of the aims should be to increase the breastfeeding rates in Queensland. It was pointed out that with the current amount of money given, this aim was impossible to achieve and that it will probably only be possible to maintain the current breastfeeding rates. With the current level of funding, the gathering of statistics on breastfeeding is beyond the scope of NMAA's activities. It is possible to demonstrate the commitment to maintaining or trying to increase the breastfeeding rates, by stating in the service agreement that certain measures will be taken to further this aim. NMAA and the Health Department ultimately agreed regarding the terms of the contract.

Accountability is to be much stricter, although reporting has been reduced from quarterly to half-yearly. The report forms have been simplified, but it will be necessary to prove that what was included in the service agreement has been done. For example, if the agreement says that a certain number of breastfeeding education classes will be held, this must be adhered to. Holding a lesser number will jeopardize the extra funding, while holding more will increase the chances of receiving it. Self-funding, although not included in the terms of the grant, is implied. Workshops are to be regularly held for the self-help groups funded by SHANGU and a project officer is available for consultation at any time.

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Initial concerns that funding and accountability would compromise the autonomy of the Association have not eventuated. With respect to the grants obtained for capital equipment, providing the money is spent on items mentioned in the applications (or with permission, items of a similar nature), how these items are used is up to the discretion of the group or region that purchases them.

While the funding for the Queensland Branch Office is categorized into wages, postage, telephone, etc., a budget is prepared by the Branch Team and Branch Treasurer and is submitted with each funding application. So far, the funding received has closely approximated the actual amounts outlined in the various budgets. Although the current funding guidelines are stricter, the service agreement with the Health Department was agreed to by both parties before being signed.

ADVANTAGES OF HAVING AN OFFICE

The NMAA Branch Office has in some ways meant less workload for the Branch Team, as many calls formerly taken by them at home now go to the office and are dealt with by the office staff, who are also NMAA counselors and therefore conversant with the organization. Telephone calls from the public have increased, as the office number is in the phone book, whereas previously the home phone numbers would not have been identified by the general public as being a NMAA number. This has also helped to increase the public profile of the association.

As Branch Team members are not necessarily experienced in office duties such as word-processing, filing, and photocopying, the employment of professional office staff has meant they have time for other activities such as lobbying and attending meetings as representatives from NMAA. Currently, the office is open five days a week from 9 am to 2 pm, with two office assistants working in a job-sharing arrangement.

Counselors, too, have benefited from being able to photocopy material needed for the successful running of their groups as well as handouts for hospital visits and tertiary and school talks. Requests for Group Bulletins and dates for activities such as breastfeeding education classes are also directed to the office. Routine enquiries that formerly would have been handled by the Counselors on the Breastfeeding Helpline are now primarily dealt with by the Branch Office, thus allowing more time for calls from mothers with breastfeeding queries or problems.

However, funding arrangements for the office have meant that the Branch Team has needed to be more "business-like" than in the past, and future Branch Team members must be aware of this change. Having an office means that the Association has a more visible presence in the community and may be considered by some to be more professional. At the same time, the Association's volunteer counselors are freed of some of the administrative load, enabling them to focus on

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mother-support activities, which are the real purpose of NMAA. Despite being perceived as professional in office administration, the Association remains at grassroots, a self-help group providing small group support and one-on-one counseling to mothers needing this support.

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