Breastfeeding Statistics
Financial Year 2010/11
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About this Release
Breastfeeding rates in Scotland are published annually. This release provides an update of breastfeeding statistics to include data for babies born in the financial year 2010/11.

Key Points
- The Scottish Government target was to increase the proportion of newborn children exclusively breastfed at 6-8 weeks in Scotland from 26.2% in 2006/07 to 32.7% in 2010/11 (an increase of 25%). The exclusive breastfeeding rate at 6-8 weeks has remained static since 2006/07. In 2010/11, 26.5% of babies were exclusively breastfed at the 6-8 week review.

- Across Scotland, the overall breastfeeding rate at the First Visit review has remained at a broadly similar level over the last decade, with slight increases in the most recent years. Over the same period there has been a slight decrease in the exclusive breastfeeding rate. The prevalence of overall and exclusive breastfeeding at the 6-8 week review has remained static across Scotland over the last decade. The number of Boards included in these statistics has increased from 10 Boards in 2001/02 to all 14 Boards in 2010/11, however these patterns are observed amongst the 10 Boards for which data is available across the entire period presented.

- Overall breastfeeding rates in the most deprived areas of Scotland have increased over the last decade. The overall breastfeeding rate at the First Visit in the most deprived areas (SIMD quintile 1) in 2010/11 was 30.9%; this has increased from 24.3% in 2001/02. At the 6-8 week review, 22.3% of babies in the most deprived areas were breastfed in 2010/11 compared with 18.1% in 2001/02. In the most affluent areas overall breastfeeding rates have remained fairly constant since 2001/02 but exclusive breastfeeding rates have fallen.

Background
Encouraging and supporting breastfeeding is recognised as an important public health activity. There is good evidence that breastfeeding in infancy has a protective effect against
many childhood illnesses. Breastfed infants are likely to have a reduced risk of infection, particularly those affecting the ear, respiratory tract and gastro-intestinal tract. This protective effect is particularly marked in low birth weight infants. Other probable benefits include improved cognitive and psychological development, and a reduced risk of childhood obesity. There is evidence that women who breastfed have lower risks of breast cancer, epithelial ovarian cancer and hip fracture later in life.

Support and encouragement for breastfeeding can be provided at many levels. For example: health promotion campaigns at a national level; policies in maternity hospitals at NHS board level and primary care teams working with individual women and groups within the community. While these can support and encourage mothers to initiate and continue breastfeeding, there are a wide range of other factors that influence mothers. Maternal age and deprivation are known to be strongly associated with the likelihood of breastfeeding.

This release provides an update of breastfeeding statistics in Scotland to include data for babies born in the financial year 2010/11. These statistics are derived from data collected at the child health programme public health nurse/health visitor First Visit review (which takes place at around 10 days) and 6-8 week review, and recorded on the Child Health Systems Programme - Pre-School (CHSP-PS) system. In this publication, a new methodology has been implemented to improve the accuracy of breastfeeding statistics by NHS Board, Council Area, Community Health Partnership and deprivation (SIMD 2009) quintile for all years presented. Previously published breastfeeding statistics for financial years 2001/02 to 2009/10 have been revised. The Scotland level breastfeeding rates are not affected and there is very little impact on figures at NHS Board level. The revision does not affect the overall interpretation or conclusions to be drawn from previously published data.

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Further information can be found in the Full Publication Report or on the ISD website.