Infant Feeding Statistics Scotland

Financial Year of Birth 2017/18

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Introduction

The health benefits of breastfeeding
Breastfeeding provides the best nutrition for babies and young children⁴ and supports children’s health in the short(1) and longer term(2). There is strong evidence that breastfeeding reduces children’s risk of gut, chest, and ear infections and leads to a small but significant improvement in brain development and IQ(3). Growing evidence suggests that breastfeeding also protects against Sudden Infant Death Syndrome (‘cot death’), promotes healthy weight in childhood and into adulthood, and reduces the risk of Type 1 and Type 2 diabetes and childhood leukaemia(3). There is evidence that nutrition in early life (when babies are in the womb and through early childhood) influences children’s long term risk of high blood pressure and heart disease(4), however the specific role of breastfeeding in influencing these important outcomes is currently unclear(3).

Breastfeeding also benefits mothers’ health, with strong evidence that it reduces the risk of breast and ovarian cancer, and some evidence that it may also promote maternal healthy weight and reduce the risk of Type 2 diabetes(3). The benefits of breastfeeding for both baby and mother are seen across the world, including in high income countries such as Scotland(5-8).

International and Scottish policy on infant feeding
In recognition of the important health benefits of breastfeeding, the World Health Organisation(9) and Scottish Government(10) recommend that children are exclusively breastfed (that is they receive no fluids or food apart from breast milk) for the first 6 months of life then, after the introduction of solid foods, children continue to be breastfed up to their second birthday or for as long as the mother and baby wish. The recommendation for exclusive breastfeeding for the first 6 months of life is echoed by professional child health organisations in the UK(11) and around the world(12) and the UK Scientific Advisory Committee on Nutrition (13).

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Information used in this publication

This publication reports on breastfeeding rates in Scotland, with the most recent results being for babies born in the year April 2017 to March 2018. The information it contains comes from Health Visitor reviews of children at around 10 to 14 days of age (the ‘Health Visitor first visit’) and 6 to 8 weeks of age (the ‘6-8 week review’). These child health reviews are offered to all children as part of the universal Child Health Programme(14). At each review, the Health Visitor asks the mother:

- Whether the baby has ever been breastfed
- Whether the baby has always been exclusively breastfed
- How the baby is currently feeding (i.e. over the 24 hours leading up to the review)

The questions on whether the baby has ever been breastfed and whether the baby has always been exclusively breastfed were added to the child health reviews in February 2016. Results relating to these questions are therefore provided for babies born in 2016/17 and 2017/18 only. The question on current feeding has been included in the child health reviews for many years, hence results relating to this question are provided for babies born in 2001/02 to 2017/18.

In this report, ‘breastfeeding’ includes being fed at the breast and being fed expressed breast milk. Being ‘always exclusively’ breastfed means that the baby has only ever been breastfed from birth up to the time of their review, and has never received fluids or food (except medicines) apart from breast milk. Current feeding method is recorded as breast only, formula only, mixed (i.e. both breast and formula milk), or other (i.e. the very small number of children on specialist non milk feeding for medical reasons).

Coverage of the Health Visitor first visit is very high. Comparing the number of live births registered to the number of reviews recorded for babies born in that year suggests that 98% of babies born in 2017/18 received their first visit. Coverage of the 6-8 week review is high however it is lower than that of the first visit, and has fallen over recent years. Ninety percent of babies born in 2017/18 received their 6-8 week review, down from 94% in 2013/14. Coverage of the 6-8 week review for babies born in 2017/18 varies from 81% for babies living in NHS Greater Glasgow and Clyde to 98% for those in NHS Borders. Reasons for the decline in recorded coverage of the 6-8 week review, and the geographical variation in coverage, should be investigated, and every effort made to ensure that all children in all parts of Scotland receive their review.

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When a review is provided, the quality of information recorded on infant feeding is high. In 2017/18, over 99% of first visit records and 99% of 6-8 week review records contained valid information on the baby’s current feeding method. The information contained in this report therefore provides an accurate picture of how babies in Scotland are fed.

Other sources of information on infant feeding in Scotland

Other sources of information are available on infant feeding in Scotland. The UK wide Infant Feeding Survey was carried out every 5 years between 1975 and 2010, and provides some results for Scotland specifically\(^4\). As the Infant Feeding Survey has now been discontinued, the Scottish Government commissioned a one off Scottish Maternal and Infant Nutrition Survey: which provides detailed information on the nutrition of pregnant women, infants aged 8-12 weeks, and infants aged 8-12 months and reported in February 2018 (15). The Growing Up in Scotland Survey also includes detailed information on infant feeding\(^5\). Growing Up in Scotland is following up two groups of children born in Scotland in 2004/05 and 2010/11.

The one off Diet and Nutrition Survey of Infants and Young Children provides detailed information on the diet and nutritional status of UK children aged 4 to 18 months (16), with specific results for a ‘boosted’ sample of Scottish children available (17).

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Main Points

- Breastfeeding protects the health of children and mothers. Current guidance recommends that babies should receive just breast milk for the first 6 months of life then, after introduction of solid foods, should continue to breastfeed up to their second birthday or for as long as the mother and baby wish.

- Sixty four percent of babies born in Scotland in 2017/18 were ever breastfed (that is, breastfed for any length of time after their birth).

- Breastfeeding rates in Scotland are increasing. More than half (51%) of babies were breastfed at First Visit in 2017/18, this has increased from 44% of babies born in 2001/02.

- The proportion of babies being breastfed at 6-8 weeks of age has increased from 36% of babies born in 2001/02 to 42% of babies born in 2017/18. However, breastfeeding rates in Scotland remain low compared to those seen in other countries, and fall far short of recommended levels.

- Breastfeeding is much more common among older mothers, and those from less deprived areas of Scotland.

- White Scottish babies are less likely to be breastfed than babies from any other ethnic group.

- In general, breastfeeding rates are higher in the East and North of Scotland, and lower in the West and South.
Results and Commentary

The proportion of babies who were ever breastfed

Information recorded at the Health Visitor first visit shows that 64% of babies born in Scotland in 2017/18 were “ever breastfed”, that is, were breastfed for at least some period of time after their birth.

![Figure 1 – Proportion of babies ever breastfed, 2017/18](source: ISD Scotland, CHSP-PS August 2018)

For comparison, the Infant Feeding Survey found that 74% of babies born in Scotland in 2010 were ever breastfed. The Scottish Maternal and Infant Nutrition Survey found that 75% of the babies surveyed at 8-12 weeks of age (born in 2017) and 76% of those surveyed at 8-12 months (born in 2016) had ever been breastfed. The specialist infant feeding surveys consistently report higher breastfeeding rates than are found using information collected from almost all mothers through the Health Visitor child health reviews. This reflects the fact that older women from less deprived areas (who are more likely to breastfeed) are more likely to respond to the surveys, whereas uptake of child health reviews is more similar across different population groups. This means that it is difficult to directly compare the feeding survey results to the results presented in this publication, and that the results in this publication are likely to give a more accurate picture of the actual level of breastfeeding in the population as a whole.

Having said that, the infant feeding surveys have other strengths, in particular in giving more detailed information on how parents feed their children and the factors that influence their choices. In addition, the Infant Feeding Survey provides information on long term trends in breastfeeding rates, and on how breastfeeding rates vary across the UK. Results show that the proportion of babies born in Scotland that were ever breastfed has increased over recent years, up from around 50% in 1980 to 1990. The survey also shows that the proportion of babies ever breastfed in Scotland has been consistently and substantially lower than that achieved in England. For example, 83% of babies born in England in 2010 who were included in the survey were ever breastfed, compared to 74% in Scotland.
Infant feeding at the Health Visitor first visit
At the time of the Health Visitor first visit at around 10-14 days of age, 51% of babies born in 2017/18 were receiving any breastfeeding. Thirty six percent were being exclusively breastfed (receiving breast milk only) and a further 15% were receiving mixed feeding (receiving both breast and formula milk).

The proportion of babies receiving any breastfeeding at this stage has increased from 44% in 2001/02. The proportion of babies being exclusively breastfed declined marginally over the 2000s but this decline has been more than offset by a substantial increase in the proportion of babies receiving mixed feeding.

Figure 2 – Current feeding at Health Visitor first visit, 2001/02 to 2017/18

Source: ISD Scotland, CHSP-PS August 2018

Infant feeding at the 6-8 Week review
At the time of the 6-8 week review, 42% of babies born in 2017/18 were receiving any breastfeeding. Thirty one percent were being exclusively breastfed and a further 11% were receiving mixed breast and formula feeding.
The proportion of babies receiving any breastfeeding at this stage has increased from 36% in 2001/02. This is due to small increases in the proportion of babies receiving exclusive and mixed breastfeeding, particularly in the most recent years.

**Figure 3 – Current feeding at 6-8 week review, 2001/02 to 2017/18**

The proportion of babies born in 2017/18 reported as always exclusively breastfed from birth to the time of the 6-8 week review was 28%. This is slightly lower than the 31% that were reported as exclusively breastfed over the 24 hours leading up to the review. This is to be expected as a small number of babies may have required temporary supplementary feeding prior to exclusive breastfeeding being established.

For comparison, the Infant Feeding Survey found that 50% of babies born in Scotland in 2010 were receiving any breastfeeding at 6 weeks of age. The Scottish Maternal and Infant Nutrition Survey found that 55% of babies surveyed at 8-12 weeks of age (born in 2017) were receiving any breastfeeding at 6 weeks of age. The Infant Feeding Survey found that the proportion of babies born in Scotland in 2010 who were exclusively breastfed from birth up to 6 months of age (i.e. fed in line with current recommendations) was extremely low at 1%.
Drop off in breastfeeding as babies get older
Among babies born in 2017/18 who were ever breastfed, 81% were still being breastfed at the time of their Health Visitor first visit (57% exclusive and 23% mixed breastfeeding) and the remaining 19% of babies were no longer being breastfed.

By the time of their 6-8 week review, 66% of babies born in 2017/18 who were ever breastfed were still being breastfed (48% exclusive and 17% mixed breastfeeding) and the remaining 34% of babies were no longer being breastfed.

There is some variation in the timing of the 6-8 week review across Scotland, with some Boards delivering the review relatively early in the 6-8 week window and some relatively late. As breastfeeding declines as babies get older, Boards delivering their 6-8 week review relatively late will appear to have a greater decline in breastfeeding rates up to the point of the review than Boards delivering the review relatively early.

Figure 4 – Babies born in 2017/18 who have ever been breastfed:

For comparison, the Infant Feeding Survey found that, among babies born in Scotland in 2010 who were ever breastfed, 78% were still being breastfed (exclusive or mixed) at 2 weeks of age, declining to 68% at 6 weeks, and 43% at 6 months. The Scottish Maternal and Infant Nutrition Survey found that 73% of babies surveyed at 8-12 weeks of age (born in 2017) who were ever breastfed were still receiving any breastfeeding at 6 weeks of age. It is clear from the child health review and survey data that the most rapid drop off in
breastfeeding occurs over the first 2 weeks after birth, with a more gradual decline seen thereafter. Results from successive Infant Feeding Surveys show that, although the proportion of women attempting to breastfeed has increased since 1990, the proportion of mothers who start but then subsequently stop breastfeeding before their baby is 6 weeks old has remained unchanged.

**Relationship between breastfeeding and mothers’ age, deprivation level, and ethnicity and the baby’s ‘looked after’ status**

There are strong associations between mothers’ age, deprivation level, and ethnicity and breastfeeding rates (15, 16).

Breastfeeding is much more common among older compared to younger mothers. Among babies born in 2017/18, 56% of babies born to mothers aged 40 years or over were breastfed (exclusive or mixed) by the time of their 6-8 week review, compared to 13% of babies born to mothers aged less than 20 years.

*Figure 5 – Infant Feeding at 6-8 week review by mother’s age, 2017/18*

Source: ISD Scotland, CHSP-PS August 2018

Note: The figures in the centre of the rings show the number of babies with a valid feeding type
Breastfeeding is much more common among mothers living in less compared to more deprived areas. Among babies born in 2017/18, 60% of babies born to mothers living in the least deprived areas of Scotland (Scottish Index of Multiple Deprivation quintile 5) were breastfed (exclusive or mixed) by the time of their 6-8 week review, compared to 28% of babies born to mothers living in the most deprived areas (quintile 1).

**Figure 6 – Infant Feeding at 6-8 week review by mother’s deprivation level, 2017/18**

Source: ISD Scotland, CHSP-PS August 2018

Note: The figures in the centre of the rings show the number of babies with a valid feeding type

Whilst inequalities in breastfeeding rates by maternal age and deprivation remain high as shown above, there are some indications that these are reducing. The increases in breastfeeding rates seen over recent years have been evident in mothers from all age groups and all levels of deprivation. The increases have been greater in women from more deprived areas, hence the absolute difference in breastfeeding rates by deprivation have reduced over time.
Babies from minority ethnic groups are more likely to be breastfed than White Scottish babies. Among babies born in 2017/18, 88% of babies of Black, Caribbean or African ethnicity were breastfed (exclusive or mixed) by the time of their 6-8 week review, compared to 34% of White Scottish babies.

**Figure 7 – Infant Feeding at 6-8 week review by baby’s ethnicity, 2017/18**

Source: ISD Scotland, CHSP-PS August 2018
Note: The figures in the centre of the rings show the number of babies with a valid feeding type

Babies who are under the care of their Local Authority due to care or protection needs that cannot be met by their parents (known as ‘looked after children’)) are much less likely to be breastfed than non-looked after children. Among babies born in 2017/18, 21% of babies who were looked after at the time of their 6-8 week review were recorded as being breastfed (exclusive or mixed), compared to 42% of non-looked after babies. In early infancy, looked after children may live at home with their parents under social work supervision, with other family members or friends, or with foster carers or prospective adopters. Looked after babies not living with their biological mother will obviously have limited opportunity to be breastfed.

**Figure 8 – Infant Feeding at 6-8 week review by baby’s looked after (LAC) status, 2017/18**

Source: ISD Scotland, CHSP-PS August 2018
Note: The figures in the centre of the rings show the number of babies with a valid feeding type
Variation in breastfeeding rates across Scotland

The population living in different areas of Scotland varies in terms of levels of deprivation, the proportion of mothers in different age groups, and ethnic diversity. These factors therefore influence the breastfeeding rates seen in different areas. In addition, attitudes to breastfeeding in local communities, and the level of breastfeeding support available to mothers, can also vary between areas and influence breastfeeding rates. In general, breastfeeding rates are higher in the East and North of Scotland, and lower in the West and South.

Figure 9 – Proportion of babies breastfeeding at the 6-8 week review by NHS Board, 2017/18

Source: ISD Scotland, CHSP-PS August 2018
Promoting and supporting breastfeeding in Scotland

Breastfeeding rates in Scotland are low compared to those achieved in other countries (3). Although rates have improved to some extent over recent years, the gains have mainly been seen in the proportion of mothers attempting breastfeeding and in early mixed feeding, with little improvement seen in sustained exclusive breastfeeding. There is therefore considerable scope to further improve the health of babies and mothers, and reduce inequalities in health, through increasing sustained exclusive breastfeeding (20).

International policies and initiatives to promote breastfeeding include:

- The World Health Organisation's International Code of Marketing of Breast-milk Substitutes which seeks to protect mothers and babies from inappropriate, commercially driven, promotion of formula feeding (21)
- UNICEF’s Innocenti Declaration (22)
- WHO's Global strategy for infant and young child feeding (23) and implementation plan (24)
- The European Commission's blueprint for action on breastfeeding (25)

There have been a number of policy developments in Scotland to support breastfeeding over recent years (26), including:

- Passing of the Breastfeeding etc. (Scotland) Act 2005 which protects mothers’ right to breastfeed their children in all public places (27)
- Development of information for parents on breastfeeding including the Ready Steady Baby booklet (6), the Off to a Good Start booklet (7), the FeedGood website (8), and the UK wide National Breastfeeding telephone helpline (9)
- Implementation of the UNICEF UK Baby Friendly Initiative (10) in Scotland which seeks to improve breastfeeding support provided through health services by accrediting maternity services, and more recently health visiting, and neonatal services, that meet minimum standards
- Publication of an overarching national strategy on improving maternal and infant nutrition in 2011 (10)

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7 NHS Health Scotland. Off to a Good Start: All you need to know about breastfeeding. [http://www.healthscotland.com/documents/120.aspx](http://www.healthscotland.com/documents/120.aspx)
9 Association of Breastfeeding Mothers. National breastfeeding helpline: 0300 100 0212. [https://www.nationalbreastfeedinghelpline.org.uk/](https://www.nationalbreastfeedinghelpline.org.uk/)
Publication of The Best Start: A Five-Year Forward Plan for Maternity and Neonatal Care in Scotland in 2017 (28)

A commitment to increasing support for breastfeeding in the Scottish Government’s Programme for Scotland 2017-18 (29)

There is good evidence that interventions can work to improve breastfeeding rates. The available evidence has been summarised in numerous literature reviews(30-32) and clinical guidelines(33-35).

Overall, it is likely that comprehensive approaches that consider a wide range of issues will be required to significantly improve sustained breastfeeding rates. Interventions within the health service, such as ensuring the availability and quality of breastfeeding support for new mothers, are important. Equally, wider interventions, such as influencing public attitudes to breastfeeding, restricting the inappropriate promotion of formula milk, and ensuring supportive employment policies that allow women to continue to breastfeed after returning to work(36), will also be required.
References


18. Bansal N, Chalmers JWT, Fischbacher CM, Steiner MFC, Bhopal RS, and on behalf of the Scottish Health and Ethnicity Linkage Study (2014). Ethnicity and first birth: age,


Supporting information accompanying this report

This publication is accompanied by

- An interactive Infant Feeding Dashboard
- Summary data tables in Excel
- Machine readable detailed open data tables available through the NHS Scotland open data platform
- A technical report giving background information on data quality and methods

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Further Information
Further information on the CHSP Pre-School system, including details of other analyses available can be found on the child health pages of the ISD website
The next release of this publication will October 2019.

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