

Infant Feeding Needs Assessment

Executive Summary: August 2024



Working in partnership for a healthier borough

Gateway information

Report Title	Information
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Prepared by:	Dr Larissa Jones and Dr Jasjot Saund
Contributors:	Karol Basta, Larissa Jones, Jasjot Saund, Jessica Engen, Rachel Scantlebury
Approved by:	Project Steering Group, Staying Healthy Board
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Key Messages

- Breastfeeding rates in Lambeth are much **higher than the UK average** (national figures up to 6-8 weeks)
- Lambeth has a **diverse maternal population** and with this comes diversity of support needs.
- Whilst Lambeth has a good support system for infant feeding, this report highlights that **not everyone may be able to access this support** in the same way.
- There is **variation in breastfeeding rates between ethnicity categories** (the 18 ONS Census 2011 categories), which differs from the national picture; a lower percentage of **younger mothers** breastfeed as their first feed; **mothers from more deprived areas are less likely to breastfeed** at all health visiting contact timepoints
- **Further work needs to be done** to ensure all mothers are able to feed their infants in the way that they choose, through **informed and supported choices**. It will be particularly important to explore with mothers in Lambeth what specific support is needed, certain groups may need **targeted or additional support**
- **Recommendations are made** at the end of this report.



Context of Needs Assessment



BREASTFEEDING EVIDENCE

Studies have shown that even small amounts of breast milk can have significant benefits for both the infant and the mother.

Optimal Nutrition

Boosts Immunity

Cognitive Development

Disease Reduction

Reduces Mortality

Economical and convenient

Enhanced bonding and emotional wellbeing



OPPORTUNITY

The Local Maternity and Neonatal System (LMNS) in South East London is co-producing a breastfeeding strategy. This provides Lambeth an opportunity to assess need and align our services.

Timing with SEL LMNS strategy

Changes to commissioning – centralisation of commissioning to Local Authority

10 years since Lambeth's previous infant feeding HNA

Opportunity to align with Best Practice as per NICE Evidence Review 2021



POLICY CONTEXT

International, National and Regional Policies highlight infant feeding as a key priority area for children's start to life.

UNICEF BFI

WHO

Global Breastfeeding Collective

Family Hubs and Start For Life Programme

SEL LMNS Strategy

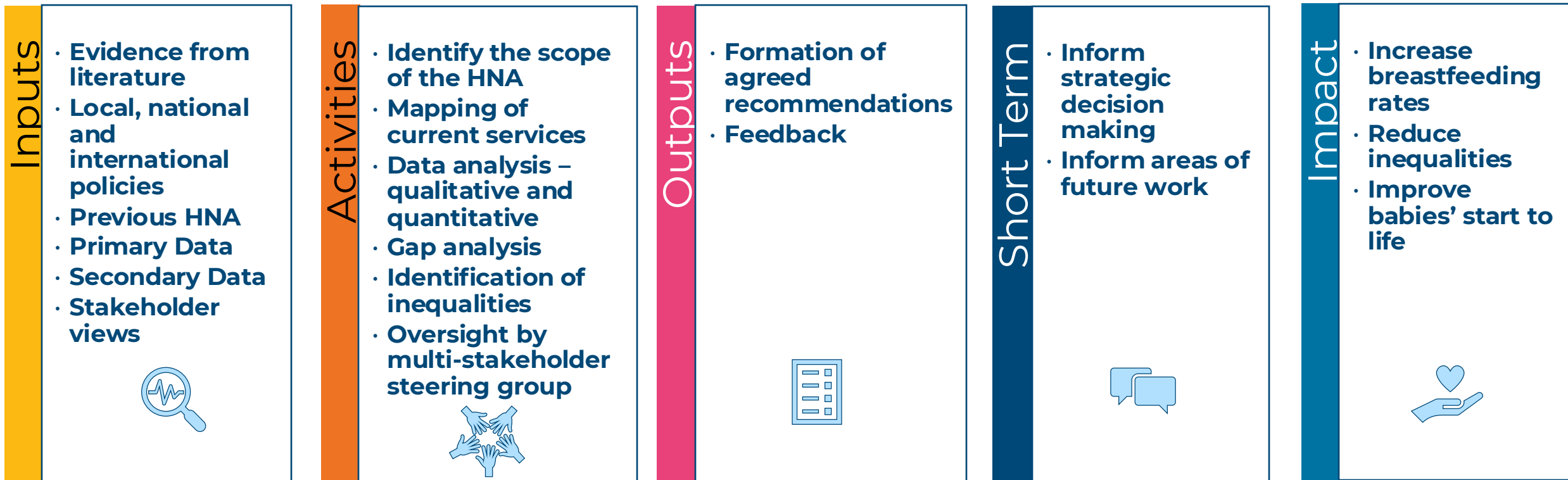
Lambeth's local policies: Borough Plan, Health and Care Plan, Health and wellbeing Strategy





Aims and Objectives Logic Model

The aim of this needs assessment is to **provide an overview of the needs and challenges faced by mothers, families, healthcare providers, and the wider community related to infant feeding**. The logic model below shows the resources and inputs required to achieve this aim as well as the immediate and longer term outcomes.



Mothers in Lambeth



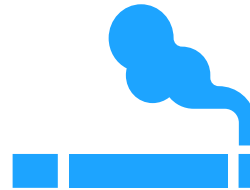
6.6 in 10 mothers are in their 30s, and this number is **rising**



2.4 in 10 mothers are in their 20s, and this number is **declining**



There is a rising number of mothers reporting feeling **down or depressed** at booking, particularly in under 20s



Under 30s and those from Black Caribbean or Mixed ethnic groups were **more likely to be smokers** at booking



4 in 10 mothers were **overweight or obese** at booking. This is higher in those with Black ethnicity



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Data source: KCH and GSTT maternity data, 2017-2023. 52,437 mothers included in analysis

Babies in Lambeth



Number of livebirths** have **fallen since the COVID-19 pandemic** in Lambeth more than nationally



87.5% of babies** were born at full gestation and **10.4% were premature** (denominator is where the gestation was known, prematurity defined by WHO Prematurity categories). This is higher compared to nationally where in 2021, 7.6% of births were preterm



8% of livebirths** in Lambeth had a **low birthweight** compared to 5.1% nationally in 2021



65% of babies*** are living in the **2 most deprived quintiles**, compared to 47% of under 5s in UK population who live in the 2 most deprived quintiles (in 2019)*.



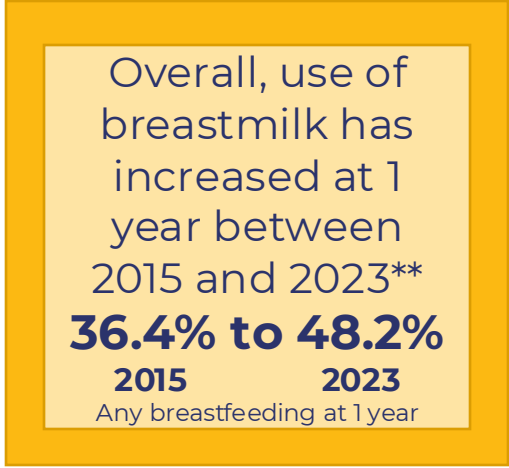
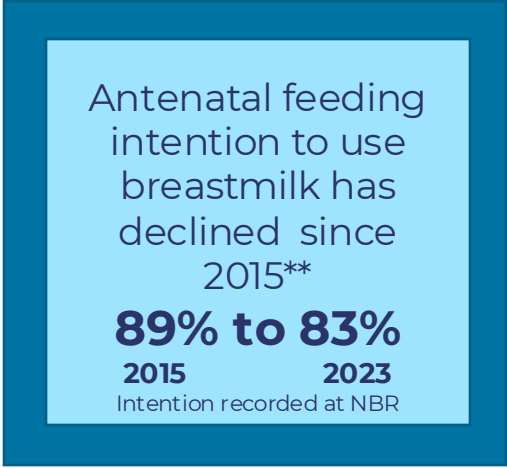
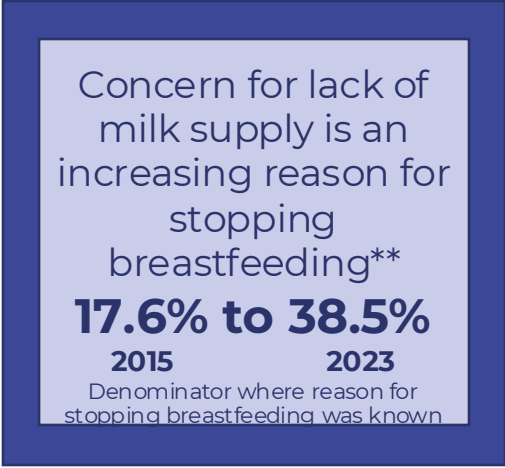
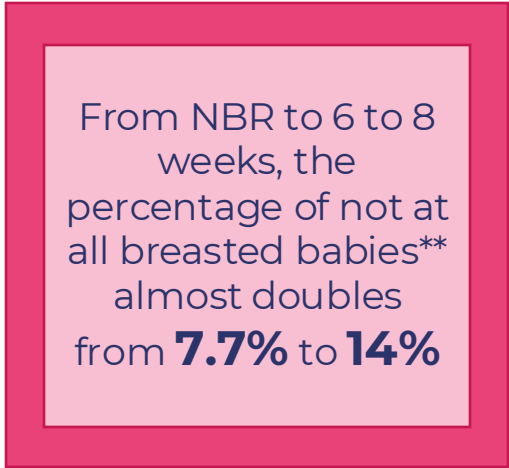
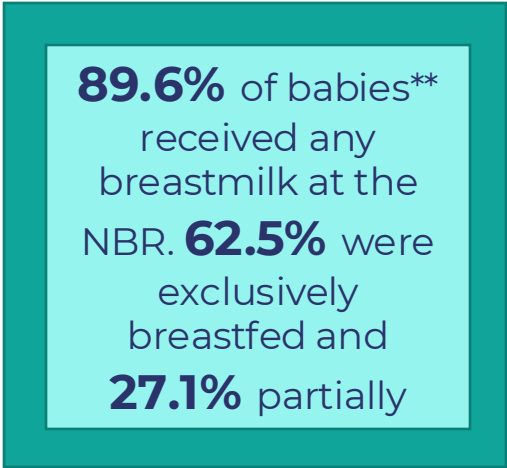
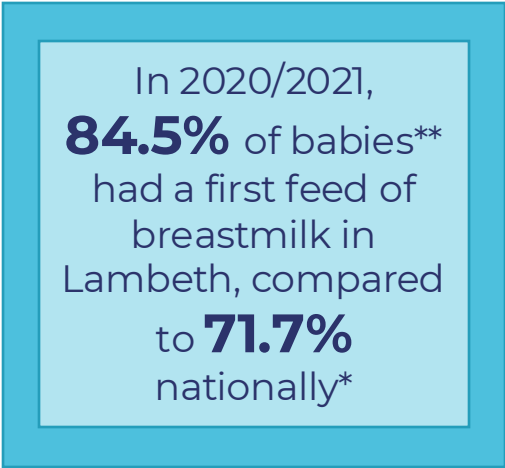
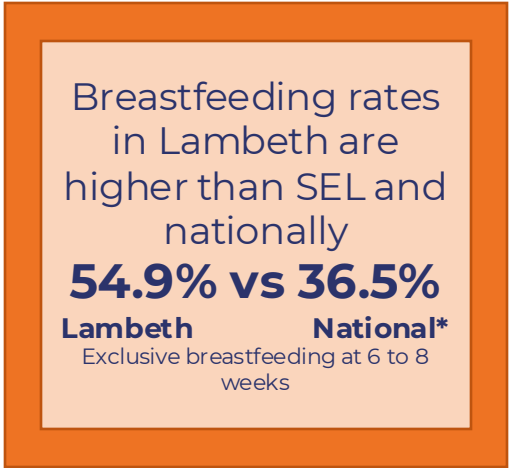
Lambeth's babies*** are **ethnically diverse and representative** of the local population. The largest groups when looking at high level ethnicity categories are 47.5% White, and 20.6% Black. There were a large number of babies where the ethnicity category is Unknown (15.3%).



Data Sources: *ONS 2019, **Maternity Dataset 2017-2023. 52,437 mothers included in analysis ***Health Visiting dataset 2015-2023. 31709 babies included in analysis



Infant Feeding in Lambeth



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Data Sources: *OHID, **Health Visiting dataset 2015-2023. 31709 babies included in analysis

Inequalities in Infant Feeding in Lambeth



Mothers* under 20 are less likely to breastfeed for first feed regardless of ethnicity.

71.8% vs 87.0%

>20yrs 30-34yrs
Exclusive breastfeeding at first feed

4% of Mixed White and Black Caribbean mothers are under 20 years, compared to **1%** of White mothers*.

Babies** in more deprived areas are less likely to be breastfed

79.7% vs 91.6%

most deprived vs least deprived
Any breastfeeding at 6 to 8 weeks
by IMD quintiles.

Mothers* from Pakistani, African, Caribbean, Other Black, Mixed White and Black Caribbean ethnicities are less likely to breastfeed for first feed: even when adjusting for mothers age

Babies** with Caribbean, Chinese, Other Asian or Polish ethnicities are less likely to be breastfed at 6 to 8 weeks

Variation in feeding methods are greatest at 6-8 weeks between ethnic groups and deprivation levels**

Infant feeding rates by ward reveal geographic disparities, particularly in the north and centre of the borough: consistently lower breastfeeding rates in Bishops, Stockwell, and Coldharbour**

Variation in antenatal feeding intention reflects variation in 6 to 8 week feeding method, by ethnicity and deprivation**



Data Sources: *KCH and GSTT maternity data, 2017-2023. 52,437 mothers included in analysis, **Health Visiting dataset 2015-2023. 31,709 babies included in analysis

The Local Services

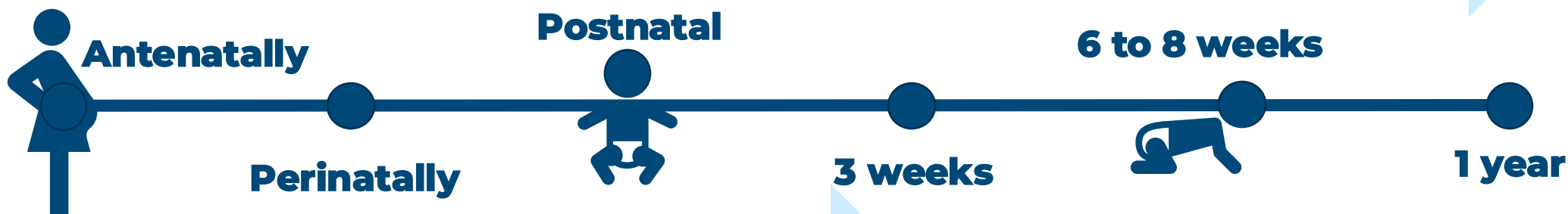


Breastfeeding Network group and one-to-one sessions

5x Childrens Centres (soon to be 6)

Health Visiting Teams

New Baby Review, 6 to 8 week check, 1 Year Health Review



Midwifery Teams

Kings College Hospital Specialist Midwives

Referrals up to 21 days post partum

Guy's and St Thomas' Evelina Specialist Midwives

Referral up to any age

National breastfeeding helpline can be accessed daily 24/7 365 days a year



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Views of mothers



The Breast Feeding Network collected the **views of 150 mothers** who attended their services between 2022 and 2023. Qualitative feedback highlighted **what the service did well and what could be improved**. Furthermore, there were **14,507 responses in the health visiting dataset** where mothers were asked how they would “**rate the breastfeeding support thus far**”.


WHAT WE DO WELL



96.7% of mothers rated the breastfeeding support in Lambeth as “Good or Excellent” – HV dataset



Personalised support and emotional reassurance – BfN survey



Users feel at ease and comfortable seeking help – BfN survey

WHAT COULD BE IMPROVED



A more integrated service with avoidance of contradicting advice – BfN survey



Mothers highlighted the immediate post-birth period as particularly crucial for infant feeding – BfN survey



Mothers felt that services could be more inclusive by improving the comfort of seating – BfN survey



Provider Views Thematic Analysis



Semi-structured interviews were undertaken with four infant feeding support workers, including peer supporters from the Breastfeeding Network, Health Visitors and Community Staff Nurses. A **thematic analysis** was performed on the data collected.

Theme 1

Needs & barriers to support



- Latching, pain, difficulty establishing breastfeeding
- Misinformation from family network
- The name of the Breastfeeding Network may discourage those who are not breastfeeding from seeking infant feeding support, even though the Network supports with formula feeding too

Theme 2

Delivery of support



- Home assessments should restart for those in need, virtual sessions antenatally
- Increase variety of locations for the group sessions
- Access to infant feeding professional when needed
- Recruitment difficulties and lack of time
- Long waiting lists for specialist services, e.g. tongue tie

Theme 3

Under-served groups



- Young mothers not attending group sessions- young peer supporters may help
- Muslim women not attending group sessions- sessions without partners may improve accessibility
- More deprived populations struggle with transport to sessions, and asylum seekers/refugees may miss out on more specialist care
- Currently training peer supporters who speak different languages

Theme 4

Antenatal support



- Antenatal education is important in expectation setting and dispelling familial misinformation
- Relationships built antenatally can encourage postnatal attendance at sessions
- Group antenatal sessions that focus on breastfeeding expectations, benefits and support suggested
- Antenatal face to face health visit suggested





Summary of Recommendations



Increased antenatal and early support



Increased reach of knowledge sharing and education



Improve data collection and outcome reporting



Targeted support for younger mothers



Improve consistency of messaging



Further community engagement through focus groups



Explore specialist referrals and waitlists

