

Improving Infant and Young Child (IYC) Feeding Practices in the Royal Borough of Greenwich (RBG)

New research shows that advice given to mothers should be consistent and timely and changes should be made to training and workload of health professionals and community workers supporting these women.

Key Findings:

- All women included intended to breastfeed, and all made the choice before the birth of the baby;
- Lack of timely support, poor support seeking behaviour, conflicting messages from health professionals and marketing of breastmilk substitutes were the major barriers to breastfeeding;
- Antenatal support was limited, and information was mainly from reading materials provided by health professionals;
- First time mums needed more postnatal support at hospital with breastfeeding and felt that there was too much pressure on the midwives, who had other roles to play, rather than providing feeding support;
- At home, there was not enough timely professional support with poorly timed visits by Midwives and Health Visitors. Referrals were often made to the Children's Centres;
- Workshops and drop-in sessions at the children's centres were found to be helpful and appropriate, allowing essential interaction with other families;
- A quarter (5 out of 20) of women visited the children's centres, for Infant and Young Child (IYC) feeding support, within a week of birth;
- There was collaboration between the Borough and children's centres, but no clear collaborations between the hospital, home and community support teams;
- Breastfeeding advocates did not feel supported enough in their work, in terms of hours allocated and training;

Importance of the problem

The UK breastfeeding rates are among the lowest in Europe, with only 55% of women still breastfeeding at six weeks in 2010ⁱ. Low breastfeeding rates lead to increased numbers of mothers using artificial feeding, which is associated with childhood obesity, allergies and other negative health outcomesⁱⁱ. Peer support and counselling programmes have been shown to increase exclusive breastfeeding practices in boroughs like Tower Hamletsⁱⁱⁱ and globally^{iv}. However, despite positive outcomes from IYC programmes, council budget cuts in the UK have resulted in reduced funding for them. In 2012/2013, the breastfeeding rates in the borough were 64.6% at 6-8 weeks^v. In boroughs prioritising IYC programmes, such as Tower Hamlets, over 80% of mothers were still breastfeeding at 6-8 weeks in 2017^{vi}. In RBG childhood obesity in reception class is at 12% increasing to over 21% in year 6^{vii}.

Policy recommendations

Improving collaboration between points of care: Hospital, home, and community support is essential if IYC feeding programmes are to be successful and sustainable. Bridging the gap between points of care from antenatal to delivery, including the postnatal period needs more integrated support to strengthen collaborations between hospitals, GPs, community midwives, health visitors and staff in children's centres. **Infant feeding policy targeted training** is necessary for all people involved in IYC feeding support, and for the families. Ensuring that the policy is well known and understood by its implementers is essential.

Despite awareness of IYC feeding practices, knowledge of optimal practices was not explored by this study, it would be helpful to explore if these are known and supported by IYC support staff, health care workers and mothers. Training in IYC feeding should, therefore be extended to include, where possible, all persons involved in IYC feeding. The influence of the media and of aggressive marketing of breastmilk substitutes on IYCF decisions needs to be explored among families. **Timely and consistent advice should be promoted.**

Increasing the human resources of skilled breastfeeding support as well as setting up more breastfeeding groups will help the borough to maintain their baby friendly accreditation and improve breastfeeding rates. Accurate documentation of data needs to be put in place to provide the basis for monitoring and evaluation of programmes. Especially regarding causal factors affecting IYC practices.

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Research

Context: The Royal Borough of Greenwich

The projected 2017 population is 277,137 with 0-2 year olds accounting for about 5%^{viii}.

In response to low breastfeeding rates and increasing childhood obesity rates, the Borough increased investments in children's services, supported by the Greenwich Breastfeeding Strategy, which aims to improve rates of breastfeeding and well-being of all mothers and children in the process^{ix}.

One of the key implementers of this strategy are the Children's Centres. These are establishments, located across the Borough to increase families' access to various services in one location, including ante and postnatal advice, information and guidance on breastfeeding and nutrition. This strategy has been further supported by the Children's Centres Infant Feeding Policy which aims to *"ensure consistency amongst Royal Greenwich Children's Centre staff*

Research aim

This research aimed to explore Infant and Young Child Feeding (IYCF) practices in the Royal Borough of Greenwich, London, to improve health and nutrition outcomes of children under 2 years of age.

Objectives:

- To identify and review existing evidence on the effective implementation of interventions to improve Infant and Young Child Feeding in the borough;
- To assess the impact of Infant and Young Child Feeding interventions throughout the Borough's breastfeeding policy and strategy; and
- To feed into policy and practice for improving young child nutrition support services in the Borough.

Data collection

A mixed methods study. Quantitative data included a systematic literature review on breastfeeding support available in the borough and a brief socio-demographic survey. Qualitative data was collected using focus group discussions, semi-structured interviews and key informant interviews. Target population consisted of mothers and fathers of children aged 6 weeks to 23 months and workers involved with IYC Feeding support programmes. In total 35 participants were recruited, through 4 focus group discussions comprising 15 mothers in total; 9 semi-structured interviews (6 with mothers and 3 with fathers), with at least one child in the target age group and 11 key informants.

(employees and volunteers) when providing support and information for parents and families on infant feeding" and that "all staff should work to ensure that this policy is implemented within centres and in everyday practice".

All these developments were a result of the development of the Healthy Early Years (HEY) award in 2013, which outlined expected outcomes including UNICEF Baby Friendly Initiative accreditation for all the Children's Centres, to increase breastfeeding rates and the number of mothers who breastfeed. In 2017, the Borough became the first London Borough to achieve the accreditation for all its children's centres^x. Although implementation is in early stages, the Borough believes that the national breastfeeding targets of 85%, will be met. Without published data to track progress of the HEY expected outcomes, opportunities still exist to study Infant feeding perceptions and practices in the Borough.

Strengths

- Data were collected by a mother, resident of the borough who was registered at a children's centre, which created trust with staff and participants.
- The tools used for data collection were appropriate for the research purpose.

Limitations

- Due to time constraint homogenous focus groups were only achieved for gender but not for age group and parity, which could have given more meaningful responses, especially on influences and barriers to breastfeeding.
- The small sample size restricted the extent of analysis regarding age, parity and ethnicity.

Literature Review

A literature review was conducted to identify evidence of effective implementation of interventions to improve Infant and Young Child Feeding (IYCF) in the Borough. Due to limited data it was difficult to state how effective the UNICEF Baby Friendly Accreditation and the Breastfeeding groups at children's centres has been. In relation to the findings on effective implementation of IYCF programmes, the Borough meets some of the indicators of effective implementation as stated in the box below:

Indicators of IYCF implementation

- There is a policy that favours breastfeeding;
- The programmes give families' access to qualified professionals and breastfeeding specialists;
- At the Children's centres, mothers are given one on one support, thus individual needs are often met;
- The message on breastfeeding and weaning is in line with the World Health Organisation and UNICEF guidelines;
- Every children's centre adheres to the International Code of Marketing of Breast Milk Substitutes according to the World Health Organisation.

ⁱ McAndrew, F., Thompson, J., Fellows, L., Large, A., Speed, M., Renfrew, M.J. (2012). *The Infant Feeding Survey 2010*. A survey carried out on behalf of Health and Social Care Information Centre by IFF Research in partnership with Professor Mary Renfrew, Professor of Mother and Infant Health, College of Medicine, Dentistry and Nursing, University of Dundee. Available from <http://content.digital.nhs.uk/catalogue/PUB08694/Infant-Feeding-Survey-2010-Consolidated-Report.pdf>

ⁱⁱ Wallby, T., Lagerberg, D., Magnusson, M. (2017). Relationship between breastfeeding and early childhood obesity: Results of a prospective longitudinal study from birth to 4 years. *Breastfeeding Medicine*, 12(1), 48-53

ⁱⁱⁱ Keith R, Mondkar A, Draper A, Adegboye A, Li X, Nyako J, Mba E, Senior L, Rahman N, Mohammed S, Shariff F and Baker C (2017) Understanding Infant and Young Child Feeding and oral health practices and perceptions in Tower Hamlets: from knowledge to practice and impact University of Westminster, Tower Hamlets Council and Tower Hamlets Together UK

^{iv} Bhutta, Z.A., Ahmed, T., Black, R.E., Cousens, S., Dewey, K., Giugliani, E., Haider, B.A., Kirkwood, B., Morris, S.S., Sachdev, H.P.S. and Shekar, M.

(2008). What works? Interventions for maternal and child undernutrition and survival. *The lancet*, 371(9610), 417-440.

^v Public Health England. (2016). Breastfeeding statistics.

<https://www.gov.uk/government/collections/breastfeeding-statistics>

^{vi} Public Health England. (2017). Breastfeeding statistics

^{vii} Royal Borough of Greenwich. (2016). Profile of Children and Young Children. <http://www.greenwichhey.com/framework/infant-feeding/examples-of-hey-outcomes/>

^{viii} Greater London Authority (2015). *Population projections – Interim 2015 based BPO projections*. Available from <https://data.london.gov.uk>

^{ix} Royal Borough of Greenwich. (2014). *Greenwich Breastfeeding Policy Statement*. Guidance and Checklist for Managers. Available from <http://greenwichbreastfeeding.com>

^x Royal Borough of Greenwich. (2017). *Royal Borough of Greenwich Children's Centres Achieve UNICEF Baby Friendly Award*. Available from http://www.royalgreenwich.gov.uk/press/article/940/royal_borough_of_greenwich_childrens_centres_achieve_unicef_baby_friendly_award