

Policies and Programmes: Indicators 1–10

Key gaps	Key recommendations	Score	
Indicator 1: National policy, governance and funding		2016	2024
a. No national infant feeding strategy to implement WHO recommendations, and no time-bound action plan. b. No national employed sustainable leadership as no multi-sectoral infant feeding committee or overall national coordinator.	a. UK government to: a. establish an overall infant feeding strategy for England to implement WHO recommendations, with a time-bound action plan. b. Set up a national, sustainable, strategic multi-sectoral infant feeding committee, to implement the breastfeeding/IYCF action plan, coordinated by a high-level specialist lead.	1	3
Indicator 2: UNICEF UK Baby Friendly Initiative (BFI)*		7.5	6.5
There is a commitment in the NHS England three year delivery plan for all trusts with maternity and neonatal services to achieve BFI-accreditation (or an equivalent standard), but no explicit requirement for community services.	Government to mandate and fully fund time-bound implementation and maintenance of BFI accreditation in all healthcare settings; this requires working with the DHSC and NHS England for the Baby Friendly programme to be a service requirement.		
Indicator 3: International Code of Marketing of Breastmilk Substitutes		6	5
a. The scope of UK legislation is too narrow as it does not include all formulas, bottles and teats, or digital marketing. b. Inadequate monitoring and enforcement of the existing regulations.	UK government to: a. Widen the scope of the legislation to include the marketing of all formula milks up to age 36 months, equipment (primarily bottles and teats) and digital marketing. b. Strengthen monitoring and enforcement of regulations.		
Indicator 4: Maternity Protection		6.5	6
a. Statutory maternity, paternity and parental leave payments are worth less than half the National Minimum Wage. b. No right exists to paid breastfeeding breaks and suitable facilities on return to work.	UK government to: a. Increase maternity, paternity and shared parental pay to at least the National Minimum Wage. b. Enact a statutory right for paid flexible breastfeeding breaks and suitable facilities to breastfeed, express and store milk.		
Indicator 5: Health Care Systems in support of breastfeeding & Infant and Young Child Feeding (IYCF)		5.5	6
Little/no mention of infant feeding in some high level pre-registration standards set by registering bodies for health professionals working with mothers, babies/ young children; no mention in nursing standards.	The institutions responsible for professional standards to ensure that infant feeding is a mandatory element in pre-registration training for health professionals who work with mothers, babies and young children; the NMC to ensure that infant feeding is explicitly included in nursing standards.		
Indicator 6: Counselling Services for Pregnant and Breastfeeding Mothers*		7	5
a. Staffing pressures on midwives and health visitors. b. Integrated services: universal care from BFI-trained health professionals, additional skilled peer supporter care and specialist services not always commissioned. c. No national standards for infant feeding roles.	a. UK government to maintain adequate maternity and health visiting staffing levels. b. All local authorities to commission integrated services meeting BFI standards: universal care from BFI-trained health professionals, additional skilled peer supporter programmes and specialist services. c. Government/ health departments to establish national standards for infant feeding roles.		
Indicator 7: Accurate and Unbiased Information support		4.5	5
No national information, education and communications (IEC) strategy for infant and young child feeding.	DHSC to set up a national breastfeeding IEC strategy, with aims, objectives and timescales.		
Indicator 8: Infant feeding and HIV		6.5	3
a. No government guidelines. b. Not all NHS resources are consistent with current BHIVA guidelines. c. New mothers living with HIV do not always receive consistent skilled support with feeding their infants.	a. Government to develop guidelines. b. DHSC/NHS to ensure guidance and resources follow current BHIVA guidelines. c. Trusts and local authorities to ensure tailored and specialist lactation support (informed by current evidence) is available for women living with HIV, and avoids stigma.		
Indicator 9: Infant and Young Child Feeding during Emergencies (IYCFE)*		0	0
No coordinated strategy, national planning, or preparedness for IYCFE.	UK government to develop and implement policies for IYCFE preparedness planning, aligned with global guidance, building on work in response to COVID-19 and supply chain issues.		
Indicator 10: Monitoring and evaluation*		5	5
a. No regular data collection beyond 6-8 weeks. b. Local processes for data collection in the community are not robust, leading to data gaps.	a. DHSC to invest in the health visiting workforce, to enable collection at the existing data point (6-8 weeks) and at 10-14 days, 6 months, 12 months and 2 years. b. National and local health systems to develop more robust local processes for routine data collection.		
* Some criteria changed since 2016 report.		Scores are out of 10: 0–3.5 4–6.5 7–9 >9	
TOTAL		49.5	44.5

What is the WBTi?

The World Breastfeeding Trends Initiative (WBTi) is a collaborative national assessment of implementation of key policies and programmes from WHO's *Global Strategy for Infant and Young Child Feeding* (IYCF) and the Innocenti Declaration. WBTi is distinctive in having a strong conflicts of interest policy. It brings together the main agencies and organisations involved in aspects of IYCF in a particular country to work together to collect information, identify gaps and generate recommendations for action. The UK assessment combines the scores, weighted by population, for the individual four nations – England, Northern Ireland, Scotland and Wales. This is the second UK assessment; the first was carried out in 2016.

WBTi UK Core Group members

- Association of Breastfeeding Mothers (ABM)
- Baby Milk Action
- Breastfeeding Network (BfN)
- First Steps Nutrition Trust (FSNT)
- GP Infant Feeding Network (GPIFN)
- Hospital Infant Feeding Network (HIFN)
- Institute of Health Visiting (iHV)
- Lactation Consultants of Great Britain (LCGB)
- La Leche League GB (LLLGB)
- Leicester Mammars
- Maternity Action
- NCT
- Royal College of Midwives (RCM)*
- UNICEF UK Baby Friendly Initiative (BFI)
- University of Central Lancashire (UCLAN)

* The RCM declared itself free of conflicts of interest from May 2023 until October 2024.

Infant Feeding Practices* Indicators 11-15

	2016	2024
Indicator 11: Early initiation of breastfeeding within 1 hour of birth	UK 60%	46-61%
Indicator 12: Mean % of exclusive breastfeeding for first 6 months	18%	UK 25-29%
Indicator 13: Median duration of breastfeeding	~3 months	6-8 weeks
Indicator 14: Bottle feeding: % of babies 0-12 months fed with bottles	UK 88%	UK 80%+
Indicator 15: Complementary feeding: % babies receiving solids at 6-8 months	UK 98%	UK 94-99%

* Indicators are based on WHO public health indicators, enabling global comparisons. Data collection methods have changed across the UK since 2016.

Advisory Group

- **England:** Family Hubs and Start for Life Programme, Early Years, Children and Families Directorate, Department of Health and Social Care
- **England:** Child and Maternal Health Intelligence, Population Health Analysis, Chief Analyst Directorate, Department of Health and Social Care, England
- **Northern Ireland:** Health Improvement Policy Branch, Department of Health
- **Scotland:** Improving Health and Wellbeing Division, Children and Families Directorate
- **Wales:** Public Health Wales

Breastfeeding is a human rights issue for both the child and the mother.

UN Human Rights joint statement, 2016¹

UN Committee on the Rights of the Child recommendations for the UK (2023):²

41(f) Continue its efforts to promote breastfeeding, including by:

- strengthening support for mothers, including through flexible working arrangements;
- fully implementing the International Code of Marketing of Breast-milk Substitutes and strengthening relevant legislation;
- raising awareness of the importance of breastfeeding among families and the general public.

1. <https://www.ohchr.org/en/statements/2016/11/joint-statement-un-special-rapporteurs-right-food-right-health-working-group>

2. <https://documents.un.org/doc/undoc/gen/g23/112/77/pdf/g2311277.pdf>