

Policies and Programmes: Indicators 1–10

Total score: 69.5/100

Key gaps		Key recommendations		Score	
Indicator 1: National policy, governance and funding				2016	2024
The national strategy was extended to 2024 and recently reviewed. From 2022 to 2024 no designated National Infant Feeding Lead.		Northern Ireland (N.I.) government to ensure that the national action plan is implemented and is sustainable, and that the post of Regional Infant Feeding Lead continues to be filled.		10	10
Indicator 2: UNICEF UK Baby Friendly Initiative (BFI)*				9.5	9.5
Baby Friendly standards are not incorporated in pre-registration nursing and medical training standards.		N.I. Department of Health to encourage nursing and medical schools to include BFI in the curriculum.			
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.		a. UK government to increase maternity, paternity and shared parental pay to at least the National Minimum Wage. b. N.I. government to enact a statutory right to 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*				10	10
Birthwise survey (2019) reflects a mixed picture on experiences of breastfeeding support from health professionals.		N.I. government to review existing feedback on mothers' experiences of services, gather further information and address any gaps identified.			
Indicator 7: Accurate and Unbiased Information support				9	10
No gaps.					
Indicator 8: Infant feeding and HIV				7.5	8
a. Not all government/NHS resources are consistent with current BHIVA guidelines. b. New mothers living with HIV do not always receive consistent skilled support with feeding their infants.		a. N.I. government/NHS to ensure all guidance and resources follow current BHIVA guidelines. b. Boards 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.		N.I. government to develop and implement policies for IYCFE preparedness planning, aligned with global guidance, building on work in response to COVID-19.			
Indicator 10: Monitoring and evaluation*				10	5
No data currently collected on: i. complementary feeding ii. breastfeeding beyond 12 months iii. routine qualitative data on women's experiences of support.		i. Health departments to arrange collection of data on complementary feeding. ii. N.I. government to collect breastfeeding data beyond 12 months. iii. N.I. government to collect qualitative data on women's experiences of breastfeeding support nationally and use the data to improve services.			
* Some criteria changed since 2016 report.		Scores are out of 10: 0–3.5 4–6.5 7–9 >9		TOTAL	74 69.5

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%	56%
Indicator 12: Mean % of exclusive breastfeeding for first 6 months	10%	25%
Indicator 13: Median duration of breastfeeding	5 days	5 days
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>