Infant Feeding Survey 2010: Summary

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Infant Feeding Survey 2010

UK Summary

The Infant Feeding Survey (IFS) has been conducted every five years since 1975. The 2010 IFS was the eighth national survey of infant feeding practices to be conducted. The main aim of the survey was to provide estimates on the incidence, prevalence, and duration of breastfeeding and other feeding practices adopted by mothers in the first eight to ten months after their baby was born.

The survey is based on an initial representative sample of mothers who were selected from all births registered during August and October 2010 in the UK. Three stages of data collection were conducted with Stage 1 being carried out when babies were around four to ten weeks old, Stage 2 when they were around four to six months old, and Stage 3 when they were around eight to ten months old. A total of 10,768 mothers completed and returned all three questionnaires.

A number of new questions were added to the survey in 2010, covering a range of topics including the Healthy Start scheme (a means-tested voucher scheme for pregnant women or mothers with children under 4 years old to help with basic food items), how mothers who had multiple births fed their babies, whether babies were full term or premature, as well as further exploration of the types of problems mothers may have experienced while breastfeeding.

In addition to the main findings covered in this summary, the findings of logistic regression analysis to help understand the impact of various demographic characteristics and other factors on breastfeeding initiation and prevalence at two and six weeks (based on full term babies) can be found in the Appendices.

Mothers are continuing to breastfeed for longer with initiation and prevalence rates showing increases over the last twenty years in the UK. Breastfeeding initiation was higher for babies exposed to early skin-to-skin contact and among mothers from certain demographic groups. However, the proportion of mothers following current guidelines on exclusively breastfeeding for the first six months of a baby’s life have remained low since 2005 with only one in a hundred mothers following these guidelines. In terms of formula feeding, there has been a considerable increase in the proportion of mothers following recommended guidelines on making up feeds. Mothers are also introducing solids later.

Incidence, prevalence, and duration of breastfeeding (Chapter 2)

- The initial breastfeeding rate increased from 76% in 2005 to 81% in 2010 in the UK. This includes all babies who were put to the breast at all, even if this was on one occasion only, and also includes giving expressed breastmilk.

- The highest incidences of breastfeeding were found among mothers aged 30 or over (87%), those from minority ethnic groups (97% for Chinese or other ethnic group, 96% for Black and 95% for Asian ethnic group), those who left education aged over 18 (91%), those in managerial and professional occupations (90%) and those living in the least deprived areas (89%).

- The prevalence of breastfeeding fell from 81% at birth to 69% at one week, and to 55% at six weeks. At six months, just over a third of mothers (34%) were still breastfeeding.
Motors continued to breastfeed for longer in 2010 than was the case in 2005. The gap in breastfeeding levels at birth between 2005 and 2010 was five percentage points (76% in 2005 compared with 81% in 2010) and by six months the gap became nine percentage points (25% in 2005 compared to 34% in 2010). This suggests that policy developments to improve support and information provided to mothers to encourage them to continue breastfeeding may have had an impact.

Across the UK, 69% of mothers were exclusively breastfeeding at birth in 2010. At one week, less than half of all mothers (46%) were exclusively breastfeeding, while this had fallen to around a quarter (23%) by six weeks. By six months, levels of exclusive breastfeeding had decreased to one per cent, indicating that very few mothers were following the UK health departments’ recommendation that babies should be exclusively breastfed until around the age of six months.

There has been an increase in the prevalence of exclusive breastfeeding at birth (from 65% in 2005 to 69% in 2010), but there has been little change thereafter up until six weeks. However, the fall-out rate in later months was lower in 2010 than 2005. For example, at three months, 17% of mothers were still breastfeeding exclusively (up from 13% in 2005) and at four months, 12% were still breastfeeding exclusively (up from 7% in 2005).

**Choice of feeding methods (Chapter 3)**

When asked to think back to before they had their baby, three-quarters of mothers (75%) said they intended to breastfeed their baby in some way, an increase from seven in ten (70%) in 2005.

Mothers of second or later babies who had breastfed their previous child for six weeks or more (94%), mothers who said most of their friends only breastfed (92%) and mothers who were only breastfed themselves as infants (89%) were the most likely to intend to breastfeed (either exclusively or with formula).

There was a high correlation between intentions and actual initial feeding behaviour. Almost all mothers who intended to breastfeed actually did so, at least initially: 98% of those intending to breastfeed only and 95% of those intending to give breastmilk and formula. Most mothers who planned to formula feed only actually did so (82%), however, nearly one in five (18%) breastfed initially. This is an increase on 2005, where about one in ten (11%) mothers who planned only to formula feed actually breastfed their baby.

Over four in five mothers said they were aware of the health benefits of breastfeeding (83%) and three-quarters (75%) were able to name a benefit spontaneously. Mothers from managerial and professional occupations (89%) and mothers aged 35 or over (84%) were most likely to be able to name a benefit.

About four in five mothers recalled receiving information during their pregnancy about the health benefits of breastfeeding (82%), with midwives being the most common source of such information (83% of those who recalled receiving information). Mothers who recalled receiving information were more likely than mothers who had not, to intend to breastfeed (77% compared with 66% respectively) and were more likely to actually initiate breastfeeding (83% compared with 73% of those who did not recall receiving information).

About three-quarters (76%) of all mothers had discussed feeding at their antenatal check-ups, while just less than three in ten of all mothers had discussed feeding at antenatal classes (28%).
First-time mothers (64%) and mothers from managerial and professional occupations (50%) were the most likely to attend antenatal classes.

- Two in five mothers (41%) were taught how to position their baby for breastfeeding and how to attach their baby to the breast during their pregnancy.

**Birth, post-natal care, and the early weeks (Chapter 4)**

- Skin-to-skin contact soon after birth is known to help mothers to establish a first successful breastfeeding. The majority of mothers (81%) had skin-to-skin contact with their baby within an hour of the birth, rising to 88% within 24 hours. This was a significant increase since 2005 (when it was 72% within an hour and 81% within 24 hours). Breastfeeding initiation was indeed much higher for babies exposed to skin-to-skin contact (84% for those babies within an hour of contact and those who had contact between one and twelve hours, compared with 61% with no such contact).

- There was a relationship between how mothers were fed themselves as infants and how their peers fed their babies, with how long mothers breastfed their own children. Breastfeeding mothers who were themselves entirely formula fed were more likely to stop breastfeeding in the first two weeks (27%) than mothers who were only breastfed themselves (9%). For breastfeeding mothers where most of their friends only formula fed their babies, these mothers were more likely to stop breastfeeding within two weeks (26%) than mothers where most of their friends breastfed only (6%).

- Three in ten breastfed babies had received additional feeds in the form of formula, water or glucose while in hospital (31%). This practice was particularly associated with those starting life in special care (73%), prematurity (67%) and receiving phototherapy for jaundice (63%). In about 14% of cases, additional feeds had been given on advice and in 10% of cases, it was because the mother wanted to. The remaining seven per cent said that neither of these applied.

- Provision of formula or additional drinks was associated with an increased likelihood of stopping breastfeeding in the early weeks, particularly for those who wanted to do so, as opposed to doing so on advice. By the end of the first week, 42% of those who wanted to give additional feeds and 21% of those advised to do so had stopped breastfeeding, compared with 10% of mothers who exclusively breastfed in hospital.

- Nearly seven in ten mothers breastfeeding in the hospital, birth centre or unit (69%) had been shown how to put their baby to the breast in the first few days (84% of first-time mothers and 50% of mothers of second or later babies).

- Just under half of mothers breastfeeding in the hospital, birth centre or unit (48%) were informed about how to recognise that their baby was getting enough milk

- Around three in ten mothers had experienced some kind of feeding problem either in the hospital, birth centre or unit (29%) or in the early weeks after leaving (30%). The highest levels of problems were experienced by mothers who used a combination of breastmilk and formula (52% in hospital, 42% after leaving).

- Over four in five breastfeeding mothers who experienced problems were offered help or support (84% in the hospital, birth centre or unit, 82% after leaving). Those who did not receive help or support for these problems were more likely to have stopped breastfeeding within the first two
weeks than those who did receive such help or support (27% compared with 15% after leaving the hospital, birth centre or unit).

- Nearly seven in ten mothers (69%) had been given the contact details of a voluntary organisation or community group which helps new mothers with infant feeding.

The use of milk other than breastmilk (Chapter 5)

- Almost three-quarters of mothers (73%) had given their baby milk other than breastmilk by the age of six weeks. This proportion rose to nearly nine in ten (88%) by six months. It is not possible from the information collected in the survey to be sure of the exact type of milk other than breastmilk that mothers first gave to their baby, although in the majority of cases it can be assumed that it was infant formula. Mothers from managerial and professional occupations and older mothers were the most likely to introduce milk other than breastmilk at a later age, which reflects the higher levels of breastfeeding amongst these mothers.

- The proportion of mothers giving their baby milk other than breastmilk was slightly lower in 2010 than in 2005 at all time points up to six months. When babies were four months old, 83% of mothers were giving milk other than breastmilk in 2010, compared with 88% in 2005.

- At Stage 2 of the survey, most mothers who had given their baby milk other than breastmilk in the last seven days were mainly giving infant formula (88%). Use of follow-on milk or liquid cow’s milk was low at this stage (nine and one per cent respectively). By Stage 3 of the survey, mothers were more likely to be using follow-on formula (57%) as their baby’s main source of milk other than breastmilk, rather than infant formula (35%).

- At Stage 3 of the survey, 69% of all mothers had given their baby follow-on formula, an increase from 53% in 2005. Most mothers followed the recommendation of not giving their baby follow-on formula before the age of six months (16% had given follow-on formula when their baby was four months old, increasing to 50% at six months). Mothers from routine and manual occupations and mothers who had never worked were more likely than average to say they had given their baby follow-on formula at an earlier age (18% and 27% respectively at four months).

- Almost half (49%) of all mothers who had prepared powdered infant formula in the last seven days had followed all three recommendations for making up feeds (only making one feed at a time, making feeds within 30 minutes of the water boiling and adding the water to the bottle before the powder). This is a substantial increase since 2005 when 13% did so.

Feeding and health after the early weeks (Chapter 6)

- At Stage 2, 12% of all mothers had experienced problems feeding their baby in the period between Stages 1 and 2. At Stage 3, 8% of all mothers had experienced feeding problems between Stages 2 and 3.

- At Stage 2 the most commonly reported problems were a perception that their baby was not feeding sufficiently well (18% of mothers who reported experiencing problems); the baby being ill (11%); vomiting or reflux (10%) and not having enough breastmilk (10%). At Stage 3, mothers were most likely to report problems relating to the introduction of solids (37% of mothers experiencing problems in this period).
• Three-quarters (75%) of mothers at Stage 2 who had experienced problems had received help or information (a decrease since 2005, when the proportion was 83%) and nearly two-thirds of mothers at Stage 3 (65%) had received help (compared with 71% in 2005).

• Of the mothers who had stopped breastfeeding by Stage 3, over three in five (63%) said that they would have liked to have breastfed for longer. This was a decrease since 2005 (73%), suggesting that more mothers were able to follow their own feeding preferences in 2010.

• The most common reasons for stopping breastfeeding in the first week were problems with the baby rejecting the breast or not latching on properly (27%), having painful breasts or nipples (22%) and feeling that they had ‘insufficient milk’ (22%).

• The proportion of mothers citing ‘insufficient milk’ as a reason for stopping breastfeeding increased to a peak of 39% at six weeks to four months, then fell to 23% at six to nine months. This was also the most frequently mentioned reason for stopping breastfeeding overall (reported by 31% of mothers who had stopped breastfeeding by Stage 3). However, this represents a decrease since 2005 when this reason was cited by 39% of mothers.

• Babies who were exclusively breastfed for a minimum of four months were considerably less likely than babies who were never breastfed to suffer from diarrhoea (25% compared with 45% of those who were never breastfed), constipation (32% compared with 48%) and sickness or vomiting (29% compared with 41%).

Healthy Start (Chapter 7)

• Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. Women who are at least 10 weeks pregnant and families with children under four years old are currently eligible for Healthy Start if the family receives certain benefits. Overall, 14% of mothers were registered on the scheme at Stage 1 and this remained at the same level at Stages 2 and 3. Lack of awareness of the scheme before completing the questionnaire was a key reason why eligible mothers had not registered, mentioned by 59% of these mothers at Stage 1.

• At each stage of the survey, over four in five mothers registered on the scheme said they had used their Healthy Start vouchers (84% at Stages 1 and 2 and 82% at Stage 3). Infant formula was the main item mothers on the scheme bought with their vouchers at Stage 1 (68%), followed by fresh fruit (52%), fresh vegetables (47%) and cow’s milk (43%).

• The proportion of mothers registered on the Healthy Start scheme who breastfed initially was considerably lower than average (59% compared with 81%). The prevalence of breastfeeding at later time points was also lower than average: for example at six weeks, 32% of mothers registered on the scheme were still breastfeeding (compared with 55% on average) and at six months, 18% were still breastfeeding (compared with 34% on average).

Introduction of solid foods (Chapter 8)

• The UK health departments recommend that solid foods should be introduced when babies are around six months old. There has been a marked trend towards mothers introducing solid foods later in 2010 compared with 2005. For example, in 2005, 51% of mothers had introduced solid
foods by four months, but by 2010, it had fallen to 30%. However, while feeding practices are changing, most mothers in 2010 were not following the UK health departments guidelines, since three-quarters of mothers (75%) had introduced solids by the time their baby was five months old.

- Solid foods tended to be introduced to younger babies among younger mothers and mothers from lower socio-economic groups. At four months, 57% of mothers aged under 20 and 38% of mothers in the routine and manual category and those who had never worked had introduced solids by this time.

- When babies were four to six months old, mothers were most likely to have given them fruit or vegetables on the previous day (46%), ready-made baby foods (38%), baby rice (31%) and homemade foods (28%).

- By the time babies were eight to ten months old, fruit and vegetables were still a key feature of babies’ daily diets (77% of mothers gave these on the previous day), but mothers were much more likely to be giving their babies home-made foods (70%) than ready-made baby foods (45%).

- The majority of mothers avoided the use of salt completely in the diets of their eight to ten month old babies (90%), although propensity to use salt rose among mothers from ethnic minority backgrounds (38% of mothers of Chinese or other ethnic origin, 37% of Asian mothers, 26% of Black mothers and 16% of mothers of Mixed ethnic origin, compared with 5% of White mothers).

- Nearly half of mothers mentioned that they avoided giving their baby particular ingredients at Stage 3 (45%). Other than salt, the principle ingredients omitted were nuts (41%), sugar (38%), honey (19%), eggs (12%) and dairy produce (11%). The foods which mothers avoided were consistent with health guidelines (although it is only recommended to avoid eggs and dairy produce before the age of six months).

**Additional drinks and supplementary vitamins (Chapter 9)**

- The advice given to mothers is that babies should be breastfed exclusively for the first six months of life. Thus, there should be no need to give babies additional drinks such as water or juice during this period. Babies who are formula fed in the first six months may need additional cooled, boiled tap water in hot weather. Nearly three in ten mothers were giving drinks in addition to breastmilk or formula by four weeks (27%). This had risen to over half by four months (55%) and just over four in five by six months (81%).

- Fewer mothers had given additional drinks at all ages up to six months than in 2005, but this was most evident at four months, when it had dropped from 64% in 2005 to 55% in 2010.

- Mothers who breastfed initially were less likely to give additional drinks than mothers who formula fed from birth at all ages through until six months (78% compared with 92%).

- Mothers aged under 20 were more likely than mothers aged 35 or over to have first given their baby other drinks at an early age (64% and 24% when babies were six weeks old respectively). Mothers from routine and manual occupation groups and those who had never worked were more likely than mothers from managerial and professional occupation groups to have first given their babies other drinks at an early age (48%, 44% and 25% respectively when babies were six weeks old).

- The UK health departments currently recommend (and also did so at the time of the 2005 and 2010 surveys) that all children from six months to five years old are given a vitamin supplement containing vitamins A, C and D, unless they are receiving more than 500 ml of infant formula per
day. If there is any doubt about the vitamin status of the mother (e.g. if she did not take a vitamin D supplement during her pregnancy), then breastfed babies may also benefit from properly administered vitamin supplements from one month. Just seven per cent of babies at Stage 1 were being given vitamin drops, rising to 14% at Stage 3. This does, however, represent an increase since 2005, when the equivalent proportions were three and seven per cent respectively.

- Women are advised to take vitamin D supplements during pregnancy and while breastfeeding. Women may take other vitamin or iron supplements after birth; for example iron supplements may be taken to counter post-natal iron deficiency. Two in five breastfeeding mothers were taking vitamin or iron supplements at Stage 1 (43%). This proportion fell to 37% by Stage 2 and 33% by Stage 3. This is an increase since 2005, when 33%, 28% and 23% respectively took vitamin or iron supplements.

Feeding outside the home (Chapter 10)

- By Stage 3, nearly three in ten (29%) mothers had returned to work, considerably fewer than the 45% who were back at work by Stage 3 in 2005. Just over three-quarters (76%) of these mothers had waited until their baby was at least six months old before their return to work, compared with 57% in 2005. These findings are likely to be linked to a change in maternity leave entitlements in 2007.

- Most mothers who had returned to work by Stage 3 were working part-time: 13% were working less than 15 hours per week and a further 53% were working between 15 and 30 hours.

- Nearly one in five (19%) working mothers said that they were provided with facilities to either express milk or to breastfeed at work (up from 15% in 2005).

- Nearly one in five mothers who were working at Stage 3 felt that their return to work had affected the way they fed their baby (19%), with over half of these mothers saying it had caused them to stop or cut down breastfeeding (56%).

- At Stage 2, half of mothers (49%) were aware of legislation protecting their right to breastfeed in public. Nearly three-fifths of mothers breastfeeding initially had breastfed in public by Stage 3 (58%), up from around half in 2005 (51%).

- Breastfeeding in public was particularly associated with mothers of second or later babies (63%), mothers who were older (66% aged 30 to 34, 69% aged 35 or over), mothers who lived in the least deprived quintile (66%) or who were classified to the managerial/professional socio-economic group (70%). Breastfeeding mothers from an Asian ethnic background were considerably less likely than other mothers to have breastfed in public (39%).

- Just over one in ten (11%) mothers who had breastfed in public said that they had been stopped or been made to feel uncomfortable doing so. Nearly half of these mothers (47%) had encountered problems finding somewhere suitable to breastfeed.

- Eight per cent of mothers who breastfed initially said that they had not breastfed in public but wanted or tried to do so.
Dietary supplements, smoking and drinking (Chapter 11)

- The UK health departments advise pregnant women to take a daily supplement of 400 micrograms of folic acid prior to conception and during the first 12 weeks of pregnancy to reduce the risk of neural tube defects, such as spina bifida, in unborn babies. Most mothers (94%) reported that they took folic acid either before or during pregnancy. More than a third (37%) said they took folic acid before they were pregnant, increasing to 79% who reported taking it during the first three months of pregnancy, while 23% took it later on in pregnancy.

- Almost two thirds (64%) of all mothers took vitamin or iron supplements (excluding folic acid taken by itself) during pregnancy, which was higher than in 2005 (54%).

- Around a quarter of mothers (26%) in the UK smoked in the 12 months before or during their pregnancy, which was down from a third (33%) in 2005. Of mothers who smoked before or during their pregnancy, over half (54%) gave up at some point before the birth. Twelve per cent of mothers continued to smoke throughout their pregnancy, down from 17% in 2005.

- Recommendations on drinking during pregnancy have tightened since the 2005 survey, when the guidelines were that drinking up to one or two units of alcohol no more than once or twice a week was regarded as safe. The UK health departments now recommend that women should avoid drinking alcohol before and during pregnancy. In 2010, two in five mothers (40%) drank alcohol during pregnancy, which was fewer than in 2005 (54%). Mothers aged 35 or over (52%), mothers from managerial and professional occupations (51%) and mothers from a White ethnic background (46%) were more likely to drink during pregnancy.
Infant Feeding Survey 2010

England Summary

Incidence, prevalence, and duration of breastfeeding (Chapter 2)

- The initial breastfeeding rate in 2010 was highest in England at 83% (compared with 74% in Scotland, 71% in Wales, and 64% in Northern Ireland). The incidence of breastfeeding increased between 2005 and 2010 in England (from 78%, this compares with an increase from 76% in 2005 to 81% in 2010 at a UK level). This includes all babies who were put to the breast at all, even if this was on one occasion only, and also includes giving expressed breastmilk.

- The highest incidences of breastfeeding were found among mothers aged 30 or over (89%), those who left education aged over 18 (92%), and those in managerial and professional occupations (91%).

- The effect of deprivation on incidence of breastfeeding can be seen across all countries, although the difference between mothers living in the most and least deprived areas is smallest in England, where 76% of the mothers living in the most deprived areas initiated breastfeeding compared with 89% in the least deprived areas – a difference of 13 percentage points. Elsewhere in the UK, the differences between mothers living in the most and least deprived areas were between 25 and 30 percentage points. This could be explained by the ethnic profile of each country. Mothers from minority ethnic backgrounds are more likely to live in England than the devolved nations and Black and Asian mothers are more likely to live in the most deprived areas than other ethnic groups. Mothers from minority ethnic backgrounds were also more likely to initiate breastfeeding.

- In England, initial breastfeeding rates were lower than the 83% average in the North East (65%), the North West (76%), Yorkshire and the Humber (77%) and the West Midlands (78%) regions. Breastfeeding rates were in line with average for England in the East of England (85%), the South West (85%) and East Midlands (83%) and were higher than average in London (94%) and the South East (86%). Similar regional patterns were observed for prevalence of breastfeeding and exclusive breastfeeding.

- Between 2005 and 2010, increases in the prevalence of breastfeeding were observed in England for all ages of baby (for example, from 26% to 36% when the baby was aged six months). This compares with an increase from 24% to 32% at six months in Scotland, and an increase from 18% to 23% at six months in Wales over the same period whilst there was no significant difference in Northern Ireland (where the prevalence rate was lowest in 2010 at 16% at six months). At a UK level the corresponding figures were 25% in 2005 and 34% in 2010.

- Prevalence of exclusive breastfeeding was higher in England (and Scotland) than in Northern Ireland and Wales. For example at six weeks, it was 24% in England and 22% in Scotland, compared to 17% in Wales and 13% in Northern Ireland. This was 23% at a UK level.
Choice of feeding methods (Chapter 3)

- When asked to think back to before they had their baby, mothers in England were the most likely to plan to breastfeed their baby in some way (76%) and the least likely to plan to formula feed only (16%). This compares with 70% and 21% respectively for Scotland, 66% and 24% respectively for Wales and 58% and 31% respectively for Northern Ireland. The UK level figures were 75% and 17% respectively.

- Over four in five mothers said they were aware of the health benefits of breastfeeding (82%) and three-quarters (75%) were able to name a benefit spontaneously in England, in line with the UK average (83% and 75% respectively).

- About four in five mothers recalled receiving information during their pregnancy about the health benefits of breastfeeding in England (81%) which was lower than in Scotland (88%) and Northern Ireland (87%). This was similar to Wales (82%) and figures for both countries were in line with the UK (82%). England had a lower proportion of mothers who had discussed feeding at antenatal check-ups (75%), compared with 84% and 85% respectively in Scotland and Northern Ireland and 78% in Wales.

- Two in five mothers (41%) were taught how to position their baby for breastfeeding and how to attach their baby to the breast during their pregnancy. Mothers were more likely to be taught this in England and Scotland (42% and 41% respectively) than in Wales or Northern Ireland (36% and 35% respectively).

Birth, post-natal care, and the early weeks (Chapter 4)

- Nearly seven in ten mothers breastfeeding in the hospital, birth centre or unit (69%) had been shown how to put their baby to the breast in the first few days in the UK. At a country level this was lowest in England (68%) compared with 73% for both Wales and Northern Ireland and 71% for Scotland. Similarly, there are indications that mothers in the devolved nations received more breastfeeding support than English mothers: 44% of mothers receiving help in Northern Ireland and 42% in Wales and Scotland said that someone came back to check on them, compared with 37% in England. Just under half of mothers breastfeeding in this setting in the UK (48%) were informed about how to recognise that their baby was getting enough milk. This was 47% for English mothers which translated into 37% of these mothers feeling confident they could recognise their baby was getting enough milk (in line with the UK).

- Nearly seven in ten mothers in the UK (69%) had been given the contact details of a voluntary organisation or community group which helps new mothers with infant feeding. There was considerable variation by country with mothers in England being the most likely to have been given these contact details (70%), compared with 63% for Scotland, 59% for Northern Ireland and 51% for Wales.

The use of milk other than breastmilk (Chapter 5)

- Mothers can give their babies different types of milk as they get older, either as their only milk feed or to supplement breastfeeding. Thus, while mothers who give their babies milk other than breastmilk at an early age will start by using infant formula, as the baby gets older they may introduce follow-on formula and eventually liquid cow’s milk. Across the UK, 88% of mothers at Stage 2 (when babies were four to six months old) who had given their baby milk other than
breastmilk in the last seven days had mainly used infant formula and nine per cent had mainly used follow-on formula (1% had mainly used liquid cow’s milk). Mothers in England were the least likely to have used infant formula compared to other countries (87%) and conversely the most likely to have used follow-on formula (10%). By Stage 3 (when babies were eight to ten months old) English mothers who had given their baby milk other than breastmilk were still the least likely to have used infant formula (33%) and the most likely to have mainly used follow-on formula (58%).

- Just under half (49%) of all mothers in England who had prepared powdered infant formula in the last seven days had followed all three recommendations for making up feeds (only making one feed at a time, making feeds within 30 minutes of the water boiling and adding the water into the bottle before the powder), this was in line with the UK (49%). Mothers in Scotland were the least likely (45%) to have followed all three recommendations, while mothers in Northern Ireland were the most likely to have done so (58%).

Feeding and health after the early weeks (Chapter 6)

- At Stage 2 (when babies were around four to six months old) 12% of mothers in England had experienced problems feeding their baby in the period between Stages 1 and 2. At Stage 3, eight per cent of mothers in England had experienced feeding problems between Stages 2 and 3. There was no variation between countries.

- Three-quarters (75%) of mothers in England at Stage 2 who had experienced problems had received help or information and nearly two-thirds of mothers in England at Stage 3 (65%) had received help.

- Of the mothers in England who had stopped breastfeeding by Stage 3, nearly two-thirds (63%) said that they would have liked to have breastfed for longer. This is in line with the UK average (63%).

Healthy Start (Chapter 7)

- Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. Women who are at least 10 weeks pregnant and families with children under four years old are currently eligible for Healthy Start if the family receives certain benefits. Overall, 24% of mothers considered themselves eligible for the scheme at Stage 1 in England and 14% had registered (in line with the UK figures).

- At each stage of the survey, over four in five mothers in England registered on the scheme said they had used their Healthy Start vouchers (84% at Stage 1, 83% at Stage 2 and 81% at Stage 3, in line with the UK average). Infant formula was the main item mothers in England on the scheme bought with their vouchers at Stage 1 (68%), followed by fresh fruit (53%), fresh vegetables (48%) and cow’s milk (44%).

- The proportion of mothers in England registered on the Healthy Start scheme who breastfed initially was considerably lower than the English average (62% compared with 83%).
Introduction of solid foods (Chapter 8)

- The UK health departments recommend that solid foods should be introduced when babies are around six months old. However, while feeding practices are changing, most mothers in 2010 were not following the guidelines in England, since nearly three in ten mothers (28%, 30% in the UK) had introduced solid foods by the time their baby was four months old and three-quarters of mothers (75%, similar to the UK) had introduced solids by the time their baby was five months old. This is an improvement from 2005 when 50% of mothers had introduced solids by four months and 81% at five months in England.

- At Stage 3 (when babies were eight to ten months old), mothers who had introduced solid foods were asked whether they had received information relating to either when to start giving solid foods or what types of solid food to give. Mothers in England and in Wales were least likely to report receiving information on either topic (86% in both countries) and mothers in Northern Ireland and Scotland were most likely to report this (93% in both countries). This may relate to different infant feeding communication strategies and publications across the UK.

Additional drinks and supplementary vitamins (Chapter 9)

- The advice given to mothers is that babies should be breastfed exclusively for the first six months of life. Thus, there should be no need to give babies additional drinks such as water or juice during this period. Babies who are formula fed in the first six months may need additional cooled, boiled tap water in hot weather. Mothers in England and Scotland were the least likely to give their babies additional drinks at ages up to six weeks. At six weeks, 36% of mothers in England and 35% of mothers in Scotland had given their babies other drinks compared with 45% in Wales and 55% in Northern Ireland.

- The UK health departments currently recommend (and also did so at the time of the 2005 survey) that all children from six months to five years old are given a vitamin supplement containing vitamins A, C and D, unless they are receiving more than 500 ml of infant formula per day. If there is any doubt about the vitamin status of the mother (e.g. if she did not take a vitamin D supplement during her pregnancy), then breastfed babies may also benefit from properly administered vitamin supplements from one month. At Stage 3, 15% of babies were being given vitamins in England compared with 13% in Scotland, nine per cent in Wales and seven per cent in Northern Ireland.

- Women are advised to take vitamin D supplements during pregnancy and while breastfeeding, to ensure their own needs for vitamin D are met and so that their baby is born with enough stores of vitamin D for the first few months of life. Women may take other vitamin or iron supplements after birth; for example iron supplements may be taken to counter post-natal iron deficiency. At Stage 1 of the survey, 43% of breastfeeding mothers in England were taking supplements, in line with the UK average (43%).

Feeding outside the home (Chapter 10)

- By Stage 3 of the survey, mothers in England (29%) and Scotland (26%) were less likely to have returned to work, whilst mothers in Northern Ireland (36%) and Wales (34%) were more likely to have done so. Mothers in England were most likely not to be working (40% compared with 36% in Wales, 33% in Scotland and 31% in Northern Ireland).
• Mothers who were working at Stage 3 were asked specifically whether their return to work had affected the way they fed their baby. Mothers in England were most likely to say this (20%), compared with 17% of mothers in Scotland, 15% in Wales and 13% in Northern Ireland. This was 19% of mothers for the UK overall.

• The Equality Act 2010 introduced protection from discrimination for women who are breastfeeding across Great Britain, up until babies are 26 weeks old (including breastfeeding in public places). Legislation offering similar protection came into effect earlier in Scotland (in 2005) and Northern Ireland (in 2008).

• Given that legislation protecting mothers’ right to breastfed in public has been in place for a shorter period in England, it is not surprising that awareness of the legislation was lower among mothers in England (47%) (and for similar reasons lower in Wales (44%)), compared with 73% for Scotland and 55% for Northern Ireland.

• Mothers in England (59%) and Scotland (60%) who breastfed initially were more likely to have breastfed in public than mothers in other countries (52% in Wales, and 42% in Northern Ireland).

Dietary supplements, smoking and drinking (Chapter 11)

• The UK health departments advise pregnant women to take a daily supplement of 400 micrograms of folic acid prior to conception and during the first 12 weeks of pregnancy. Increasing the intake of folic acid in early pregnancy helps to reduce the risk of neural tube defects, such as spina bifida, in unborn babies. Mothers in England and Wales (70% for both countries) were less likely than mothers in Scotland (75%) and Northern Ireland (78%) to say that they knew why increasing the intake of folic acid was recommended.

• Most mothers in England (94%) reported that they took folic acid either before or during pregnancy, in line with the UK average (94%).

• Smoking levels before or during pregnancy were 26% in England which were in line with Scotland (27%) and Northern Ireland (28%) and lower than in Wales (33%). A decrease in the proportion of mothers smoking before or during pregnancy since 2005 was seen in all countries (from 32% in 2005 to 26% in 2010 in England).

• Recommendations on drinking during pregnancy have tightened since the 2005 survey, when the guidelines were that drinking up to one or two units of alcohol no more than once or twice a week was regarded as safe. The UK health departments now recommend that women should avoid drinking alcohol before and during pregnancy. In 2010, mothers in England (41%) and Wales (39%) were more likely to have drunk during pregnancy than mothers in Northern Ireland and Scotland (35% for both countries). A decrease in the proportion of mothers drinking during pregnancy since 2005 was seen in all countries (from 55% in 2005 to 41% in 2010 in England).
Infant Feeding Survey 2010

Wales Summary

Incidence, prevalence, and duration of breastfeeding (Chapter 2)

- The initial breastfeeding rate in 2010 in Wales was 71% (compared with 83% in England, 74% in Scotland and 64% in Northern Ireland). The incidence of breastfeeding increased between 2005 and 2010 in Wales (from 67%, this compares with an increase from 76% in 2005 to 81% in 2010 at a UK level). This includes all babies who were put to the breast at all, even if this was on one occasion only, and also includes giving expressed breastmilk.

- The highest incidences of breastfeeding were found among mothers aged 30 or over (81%), those who left education aged over 18 (85%), and those in managerial and professional occupations (85%).

- Between 2005 and 2010, increases in the prevalence of breastfeeding were observed in Wales (for example, from 18% to 23% when the baby was aged six months). This compares with an increase from 26% to 36% at six months in England, an increase from 24% to 32% at six months in Scotland over the same period whilst there was no significant difference in Northern Ireland (where the prevalence rate was lowest in 2010 at 16% at six months). At a UK level the corresponding figures were 25% in 2005 and 34% in 2010.

- Prevalence of exclusive breastfeeding was lower in Wales and Northern Ireland than in England and Scotland. For example at six weeks, it was 17% in Wales and 13% in Northern Ireland, compared to 24% in England and 22% in Scotland. This was 23% at a UK level.

Choice of feeding methods (Chapter 3)

- When asked to think back to before they had their baby, 66% of mothers in Wales said they intended to breastfeed their baby in some way and 24% said they intended to formula feed only. This compares with 76% and 16% respectively for England, 70% and 21% respectively for Scotland and 58% and 31% respectively for Northern Ireland. The UK level figures were 75% and 17% respectively.

- Over four in five mothers said they were aware of the health benefits of breastfeeding (83%) and three-quarters (75%) were able to name a benefit spontaneously in Wales, in line with the UK average.

- About four in five mothers recalled receiving information during their pregnancy about the health benefits of breastfeeding in Wales (82%) which was lower than in Scotland (88%) and Northern Ireland (87%). This was similar to England (81%) and figures for both countries were in line with the UK (82%). Midwives were the most common source of such information in Wales (88% of those who recalled receiving information, compared with 83% for the UK).
• Just under four in five (78%) mothers in Wales discussed feeding at antenatal check-ups. A similar proportion of mothers in England did so (75%), compared with 84% and 85% respectively in Scotland and Northern Ireland.

• Two in five mothers (41%) were taught how to position their baby for breastfeeding and how to attach their baby to the breast during their pregnancy. Mothers were less likely to be taught this in Wales and Northern Ireland (36% and 35% respectively) than in England and Scotland (42% and 41% respectively).

Birth, post-natal care, and the early weeks (Chapter 4)

• Nearly seven in ten mothers breastfeeding in the hospital, birth centre or unit (69%) had been shown how to put their baby to the breast in the first few days in the UK. At a country level this was higher in Wales (73%), Northern Ireland (71%) and Scotland (71%) than in England (68%). Together with mothers in Scotland and Northern Ireland, mothers in Wales received more breastfeeding support as 42% of mothers receiving help reported someone came back to check on them (44% in Northern Ireland, 42% in Scotland and 37% in England).

• Just under half of mothers breastfeeding in this setting (48%) in the UK were informed about how to recognise that their baby was getting enough milk. This was 47% for Welsh mothers which translated into 37% of these mothers feeling confident they could recognise their baby was getting enough milk (in line with the UK).

• Nearly seven in ten mothers in the UK (69%) had been given the contact details of a voluntary organisation or community group which helps new mothers with infant feeding. There was considerable variation by country with mothers in Wales being the least likely to have been given these contact details (51%) compared with 70% for England, 63% for Scotland and 59% for Northern Ireland.

The use of milk other than breastmilk (Chapter 5)

• Mothers can give their babies different types of milk as they get older, either as their only milk feed or to supplement breastfeeding. Thus, while mothers who give their babies milk other than breastmilk at an early age will start by using infant formula, as the baby gets older they may introduce follow-on formula and eventually liquid cow’s milk. In Wales, 90% of mothers at Stage 2 (when babies were four to six months old) who had given their baby milk other than breastmilk in the last seven days had mainly used infant formula and seven per cent had mainly used follow-on formula (these figures were 88% and 9% respectively for the UK). By Stage 3 (when babies were eight to ten months old) 38% of Welsh mothers who had given their baby milk other than breastmilk were using infant formula and 55% were mainly using follow-on formula (compared with 35% and 57% respectively for the UK).

• Over half (52%) of all mothers in Wales who had prepared powdered infant formula in the last seven days had followed all three recommendations for making up feeds (only making one feed at a time, making feeds within 30 minutes of the water boiling and adding the water into the bottle before the powder). Mothers in Scotland were the least likely (45%) to have followed all three recommendations, while mothers in Northern Ireland were the most likely to have done so (58%). The UK figure was 49%.
Feeding and health after the early weeks (Chapter 6)

- At Stage 2 (when babies were around four to six months old) 11% of mothers in Wales had experienced problems feeding their baby in the period between Stages 1 and 2. At Stage 3, seven per cent of mothers in Wales had experienced feeding problems between Stages 2 and 3. There was no variation between countries.

- Over three-quarters (78%) of mothers in Wales at Stage 2 who had experienced problems had received help or information and two-thirds of mothers in Wales at Stage 3 (66%) had received help.

- Of the mothers in Wales who had stopped breastfeeding by Stage 3, seven in ten (70%) said that they would have liked to have breastfed for longer. This was the highest in the UK (68% for Scotland and 63% for both England and Northern Ireland).

Healthy Start (Chapter 7)

- Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. Women who are at least 10 weeks pregnant and families with children under four years old are currently eligible for Healthy Start if the family receives certain benefits. Overall, 28% of mothers considered themselves eligible for the scheme at Stage 1 in Wales and 16% had registered. Mothers in Wales (28%) and Northern Ireland (26%) were more likely to consider themselves to be eligible for the scheme than mothers in England and Scotland (24% for both). There was little variation by country in the proportion of mothers who had registered.

- At each stage of the survey, over four in five mothers in Wales registered on the scheme said they had used their Healthy Start vouchers (84% at Stage 1, 87% at Stage 2 and 83% at Stage 3, in line with the UK average). Infant formula was the main item mothers in Wales on the scheme bought with their vouchers at Stage 1 (74%), followed by fresh fruit (49%), cow’s milk (43%) and fresh vegetables (41%).

- The proportion of mothers in Wales registered on the Healthy Start scheme who breastfed initially was considerably lower than the Welsh average (46% compared with 71%).

Introduction of solid foods (Chapter 8)

- The UK health departments recommend that solid foods should be introduced when babies are around six months old. However, while feeding practices are changing, most mothers in 2010 were not following the guidelines in Wales, over four in ten mothers (44%, 30% in the UK) had introduced solid foods by the time their baby was four months old and over four in five mothers (83%, 75% in the UK) had introduced solids by the time their baby was five months old. Mothers in Wales began feeding their baby solid foods earlier on average than mothers in the other countries. However, this is an improvement from 2005 when 65% of mothers had introduced solids by four months and 88% at five months in Wales.

- At Stage 3 (when babies were eight to ten months old), mothers who had introduced solid foods were asked whether they had received information relating to either when to start giving solid foods or what types of solid food to give. Mothers in Wales and England were least likely to report receiving information on either topic (86% in both countries) and mothers in Northern Ireland and
Scotland were most likely to report this (93% in both countries). This may relate to different infant feeding communication strategies and publications across the UK.

Additional drinks and supplementary vitamins (Chapter 9)

- The advice given to mothers is that babies should be breastfed exclusively for the first six months of life. Thus, there should be no need to give babies additional drinks such as water or juice during this period. Babies who are formula fed in the first six months may need additional cooled, boiled tap water in hot weather. At six weeks, 45% of mothers in Wales had given their babies additional drinks, compared with 55% of mothers in Northern Ireland, 36% of mothers in England and 35% of mothers in Scotland.

- The UK health departments currently recommend (and also did so at the time of the 2005 and 2010 surveys) that all children from six months to five years old are given a vitamin supplement containing vitamins A, C and D, unless they are receiving more than 500 ml of infant formula per day. If there is any doubt about the vitamin status of the mother (e.g. if she did not take a vitamin D supplement during her pregnancy), then breastfed babies may also benefit from properly administered vitamin supplements from one month. At Stage 3 of the survey, nine per cent of babies had been given vitamins in Wales, compared with 15% in England, 13% in Scotland and seven per cent in Northern Ireland.

- Women are advised to take vitamin D supplements during pregnancy and while breastfeeding, to ensure their own needs for vitamin D are met and so that their baby is born with enough stores of vitamin D for the first few months of life. Women may take other vitamin or iron supplements after birth; for example iron supplements may be taken to counter post-natal iron deficiency. At Stage 1 of the survey, breastfeeding mothers in Wales were least likely to be taking supplements (40% of breastfeeding mothers, compared with 52% in Northern Ireland and 43% for both England and Scotland). This difference was not evident at later stages of the survey.

Feeding outside the home (Chapter 10)

- By Stage 3 of survey, mothers in Wales (34%) and Northern Ireland (36%) were more likely to have returned to work, whilst mothers in England (29%) and Scotland (26%) were less likely to have done so.

- Mothers who were working at Stage 3 were asked specifically whether their return to work had affected the way they fed their baby. In Wales, 15% of mothers said this, compared with 19% in the UK overall.

- The Equality Act 2010 introduced protection from discrimination for women who are breastfeeding across Great Britain, up until babies are 26 weeks old (including breastfeeding in public places). Legislation offering similar protection came into effect earlier in Scotland (in 2005) and Northern Ireland (in 2008).

- Given that legislation protecting mothers’ right to breastfeed in public has been in place for a shorter period in Wales, it is not surprising that awareness of the legislation was lowest among mothers in Wales (44%) (and for similar reasons lower in England (47%)), compared with 73% for Scotland and 55% for Northern Ireland.

- Mothers in Wales (52%) who breastfed initially were less likely to have breastfed in public than mothers in Scotland (60%) and England (59%). This was lowest in Northern Ireland (42%).
Dietary supplements, smoking and drinking (Chapter 11)

- The UK health departments advise pregnant women to take a daily supplement of 400 micrograms of folic acid prior to conception and during the first 12 weeks of pregnancy. Increasing the intake of folic acid in early pregnancy helps to reduce the risk of neural tube defects, such as spina bifida, in unborn babies. Mothers in Wales and England (70% for both countries) were less likely than mothers in Scotland (75%) and Northern Ireland (78%) to say that they knew why increasing the intake of folic acid was recommended.

- Furthermore, mothers in Wales were least likely to have taken folic acid before pregnancy (34%), compared with 42% for Northern Ireland, 40% for Scotland and 37% for England. The proportion of mothers taking folic acid before or during pregnancy was in line with the other UK countries.

- Smoking levels before or during pregnancy were highest in Wales (33%) compared with 28% for Northern Ireland, 27% for Scotland and 26% for England. A decrease in the proportion of mothers smoking before or during pregnancy since 2005 was seen in all countries (from 37% in 2005 to 33% in 2010 in Wales).

- Recommendations on drinking during pregnancy have tightened since the 2005 survey, when the guidelines were that drinking up to one or two units of alcohol no more than once or twice a week was regarded as safe. The UK health departments now recommend that women should avoid drinking alcohol before and during pregnancy. In 2010, mothers in Wales and (39%) and England (41%) were more likely to have drunk during pregnancy compared with mothers in Northern Ireland and Scotland (35% for both countries). A decrease in the proportion of mothers drinking during pregnancy since 2005 was seen in all countries (from 55% in 2005 to 39% in 2010 in Wales).
Incidence, prevalence, and duration of breastfeeding (Chapter 2)

- The initial breastfeeding rate in 2010 in Scotland was 74% (compared with 83% in England, 71% in Wales, and 64% in Northern Ireland). The incidence of breastfeeding increased between 2005 and 2010 in Scotland (from 70%, this compares with an increase from 76% in 2005 to 81% in 2010 at a UK level). This includes all babies who were put to the breast at all, even if this was on one occasion only, and also includes giving expressed breastmilk.

- The highest incidences of breastfeeding were found among mothers aged 30 or over (82%), those who left education aged over 18 (87%), and those in managerial and professional occupations (86%).

- Between 2005 and 2010, increases in the prevalence of breastfeeding were observed in Scotland (for example, from 24% to 32% when the baby was aged six months). This compares with an increase from 26% to 36% at six months in England and an increase from 18% to 23% at six months in Wales over the same period whilst there was no significant difference in Northern Ireland (where the prevalence rate was lowest in 2010 at 16% at six months). At a UK level the corresponding figures were 25% in 2005 and 34% in 2010.

- Prevalence of exclusive breastfeeding was higher in Scotland (and England) than in Northern Ireland and Wales. For example at six weeks, it was 22% in Scotland and 24% in England, compared to 17% in Wales and 13% in Northern Ireland. This was 23% at a UK level.

Choice of feeding methods (Chapter 3)

- When asked to think back to before they had their baby, 70% of mothers in Scotland said they intended to breastfeed their baby in some way and 21% said they intended to formula feed only. This compares with 76% and 16% respectively for England, 66% and 24% respectively for Wales and 58% and 31% respectively for Northern Ireland. The UK level figures were 75% and 17% respectively.

- Mothers in Scotland were most likely to be aware of the health benefits of breastfeeding (86%), and able to name a benefit (79%). This compares with 82% and 75% respectively in England, 83% and 75% respectively in Wales and 83% and 72% respectively in Northern Ireland. The corresponding figures for the UK were 83% and 75%.

- Nearly nine out of ten mothers recalled receiving information during their pregnancy about the health benefits of breastfeeding in Scotland (88%) which was higher than in Wales (82%) and England (81%). This was similar to Northern Ireland (87%) and figures for both countries were higher than for the UK (82%). Midwives were the most common source of such information in Scotland (90% of those who recalled receiving information, compared with 83% for the UK).
Over four in five (84%) of mothers in Scotland discussed feeding at antenatal check-ups. A similar proportion of mothers in Northern Ireland did so (85%), compared with 75% and 78% respectively in England and Wales. A third of mothers in Scotland had attended classes where feeding was discussed (33%), the highest in the UK (28% overall).

Two in five mothers (41%) were taught how to position their baby for breastfeeding and how to attach their baby to the breast during their pregnancy. Mothers were more likely to be taught this in Scotland and England (41% and 42% respectively) than in Wales or Northern Ireland (36% and 35% respectively).

Birth, post-natal care, and the early weeks (Chapter 4)

Nearly seven in ten mothers breastfeeding in the hospital, birth centre or unit (69%) had been shown how to put their baby to the breast in the first few days in the UK. At a country level this was 71% for Scotland and a similar proportion (73%) in Wales and Northern Ireland. It was lower in England (68%). Together with mothers in Northern Ireland and Wales, mothers in Scotland received more breastfeeding support as 42% of mothers in Scotland receiving help reported someone came back to check on them (44% in Northern Ireland, 42% in Wales and 37% in England).

Just under half of mothers breastfeeding in this setting in the UK (48%) were informed about how to recognise that their baby was getting enough milk. Mothers in Scotland were most likely to have been given this information (54%) and this translated into a greater proportion feeling confident they could recognise their baby was getting enough milk (42% compared with 37% for the UK). This may relate to relative resources available across the different countries.

Nearly seven in ten mothers in the UK (69%) had been given the contact details of a voluntary organisation or community group which helps new mothers with infant feeding. There was considerable variation by country as this was 63% for mothers in Scotland, compared with 70% for England, 59% for Northern Ireland and 51% for Wales.

The use of milk other than breastmilk (Chapter 5)

Mothers can give their babies different types of milk as they get older, either as their only milk feed or to supplement breastfeeding. Thus, while mothers who give their babies milk other than breastmilk at an early age will start by using infant formula, as the baby gets older they may introduce follow-on formula and eventually liquid cow’s milk. Across the UK, 88% of mothers at Stage 2 (when babies were four to six months old) who had given their baby milk other than breastmilk in the last seven days had mainly used infant formula and nine per cent had mainly used follow-on formula (one per cent had mainly used liquid cow’s milk). Mothers in Scotland were the most likely to have used infant formula compared to other countries (92%) and conversely the least likely to have used follow-on formula (5%). By Stage 3 (when babies were eight to ten months old) Scottish mothers who had given their baby milk other than breastmilk were still the most likely to have used infant formula (52%, compared with 35% for the UK) and the least likely to have mainly used follow-on formula (40%, compared with 57% for the UK).

Mothers in Scotland were less likely than mothers in other countries to have given their baby liquid cow’s milk at Stage 3 of the survey (37% compared with 42% for the UK overall).

Almost half (45%) of all mothers in Scotland who had prepared powdered infant formula in the last seven days had followed all three recommendations for making up feeds (only making one
feed at a time, making feeds within 30 minutes of the water boiling and adding the water to the bottle before the powder). Mothers in Scotland were the least likely to have followed all three recommendations, while mothers in Northern Ireland were the most likely to have done so (58%). The UK figure was 49%.

Feeding and health after the early weeks (Chapter 6)

- At Stage 2 (when babies were around four to six months old) 12% of mothers in Scotland had experienced problems feeding their baby in the period between Stages 1 and 2. At Stage 3, seven per cent of mothers in Scotland had experienced feeding problems between Stages 2 and 3. There was no variation between countries.
- Over three-quarters (78%) of mothers in Scotland at Stage 2 who had experienced problems had received help or information and over two-thirds of mothers in Scotland at Stage 3 (68%) had received help.
- Of the mothers in Scotland who had stopped breastfeeding by Stage 3, over two-thirds (68%) said that they would have liked to have breastfed for longer. This was slightly higher than the UK average (63%).

Healthy Start (Chapter 7)

- Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. Women who are at least 10 weeks pregnant and families with children under four years old are currently eligible for Healthy Start if the family receives certain benefits. Overall, 24% of mothers considered themselves eligible for the scheme at Stage 1 in Scotland and 13% had registered (similar to the UK figures).
- At each stage of the survey, over four in five mothers in Scotland registered on the scheme said they had used their Healthy Start vouchers (81% at Stage 1, 85% at Stage 2 and 82% at Stage 3, in line with the UK average). Infant formula was the main item mothers in Scotland on the scheme bought with their vouchers at Stage 1 (69%), followed by fresh fruit (48%), fresh vegetables (41%) and cow’s milk (39%).
- The proportion of mothers in Scotland registered on the Healthy Start scheme who breastfed initially was considerably lower than the Scottish average (47% compared with 74%).

Introduction of solid foods (Chapter 8)

- The UK health departments recommend that solid foods should be introduced when babies are around six months old. However, while feeding practices are changing, most mothers in 2010 were not following the guidelines in Scotland, since over three in ten mothers (32%, 30% in the UK) had introduced solid foods by the time their baby was four months old and nearly three-quarters of mothers (74%, similar to the UK) had introduced solids by the time their baby was five months old. This is an improvement from 2005 when 60% of mothers had introduced solids by four months and 85% at five months in Scotland.
- At Stage 3 (when babies were eight to ten months old), mothers who had introduced solid foods were asked whether they had received information relating to either when to start giving solid
foods or what types of solid food to give. Mothers in Scotland and Northern Ireland were most likely to report receiving information on either topic (93% in both countries) and mothers in England and in Wales were least likely to report this (86% in both countries). This may relate to different infant feeding communication strategies and publications across the UK.

**Additional drinks and supplementary vitamins (Chapter 9)**

- The advice given to mothers is that babies should be breastfed exclusively for the first six months of life. Thus, there should be no need to give babies additional drinks such as water or juice during this period. Babies who are formula fed in the first six months may need additional cooled, boiled tap water in hot weather. Mothers in Scotland and England were the least likely to give their babies additional drinks at ages up to six weeks. At six weeks, 35% of mothers in Scotland and 36% of mothers in England had given their babies other drinks compared with 45% in Wales and 55% in Northern Ireland.

- It is recommended that from six months, infants should be introduced to drinking from cups and beakers. This helps to reduce bottle use and improve dental health. In the UK, there has been an increase since 2005 in the proportion saying their baby had started to use a cup/beaker by the age of six months (up from 48% in 2005 to 54% in 2010). At a country level, the increase has been sharpest in Scotland, where 62% of mothers reported their babies being introduced to a cup/beaker by six months, compared with 50% in 2005. As a result, the introduction of a cup/beaker by six months was more common in Scotland than in the other three countries (56% in Northern Ireland, 53% in England and 54% in Wales).

- The UK health departments currently recommend (and also did so at the time of the 2005 and 2010 surveys) that all children from six months to five years old are given a vitamin supplement containing vitamins A, C and D, unless they are receiving more than 500 ml of infant formula per day. If there is any doubt about the vitamin status of the mother (e.g. if she did not take a vitamin D supplement during her pregnancy), then breastfed babies may also benefit from properly administered vitamin supplements from one month. At Stage 3 of the survey, 13% of babies were given vitamins in Scotland, in line with the UK average (14%).

- Women are advised to take vitamin D supplements during pregnancy and while breastfeeding, to ensure their own needs for vitamin D are met and so that their baby is born with enough stores of vitamin D for the first few months of life. Women may take other vitamin or iron supplements after birth; for example iron supplements may be taken to counter post-natal iron deficiency. At Stage 1 of the survey, 43% of breastfeeding mothers in Scotland were taking supplements, in line with the UK average.

**Feeding outside the home (Chapter 10)**

- By Stage 3 of the survey, mothers in Scotland (26%) and England (29%) were less likely to have returned to work, whilst mothers in Northern Ireland (36%) and Wales (34%) were more likely to have done so. Mothers in Scotland were most likely to be on paid maternity leave (30%, compared with 24% in Northern Ireland, 21% in Wales and 20% in England).

- The Breastfeeding etc. (Scotland) Act was passed in Scotland in March 2005, making it an offence to stop mothers from breastfeeding their children under the age of two in public places such as restaurants, bars, buses and shopping centres. In Scotland, therefore, the law had been in place for about five years before the babies included in the 2010 IFS were born. Legislation offering similar protection came into effect later in the rest of the UK (2008 in Northern Ireland and 2010 in England and Wales).
- Working mothers in Scotland were most likely to report that they had facilities at work to breastfeed or express milk (24%, compared with 20% in Wales, 19% in England and 14% in Northern Ireland). This finding may well be linked with the legislation to protect the right of mothers in Scotland to feed in public places. While it did not cover breastfeeding in the workplace as such, it may have helped to create a more supportive environment for breastfeeding.

- Mothers who were working at Stage 3 were asked specifically whether their return to work had affected the way they fed their baby. In Scotland, 17% of mothers said this, similar to the UK average (19%).

- Given that legislation protecting mothers’ right to breastfeed in public has been in place for longer in Scotland, it is not surprising that awareness of the legislation was highest among mothers in Scotland (73%), compared with 55% for Northern Ireland, 47% for England and 44% for Wales.

- Mothers in Scotland (60%) and England (59%) who breastfed initially were more likely to have breastfed in public than mothers in other countries (52% in Wales, 42% in Northern Ireland). Mothers in Scotland also tended to have more positive experiences when breastfeeding in public. They were more comfortable about feeding in public without going to a special place (12% compared with 8% overall), were less likely to report problems finding a suitable venue (36% compared with 47% overall) and were also less likely to report being stopped or made to feel uncomfortable (8% compared with 11% overall).

Dietary supplements, smoking and drinking (Chapter 11)

- The UK health departments advise pregnant women to take a daily supplement of 400 micrograms of folic acid prior to conception and during the first 12 weeks of pregnancy. Increasing the intake of folic acid in early pregnancy helps to reduce the risk of neural tube defects, such as spina bifida, in unborn babies. Mothers in Scotland (75%) and Northern Ireland (78%) were more likely than mothers in England and Wales (70% for both countries) to say that they knew why increasing the intake of folic acid was recommended.

- Most mothers in Scotland (95%) reported that they took folic acid either before or during pregnancy, in line with the UK average (94%).

- Smoking levels before or during pregnancy were 27% for Scotland, which was in line with Northern Ireland (28%) and England (26%) and and lower than in Wales (33%). A decrease in the proportion of mothers smoking before or during pregnancy since 2005 was seen in all countries (from 35% in 2005 to 27% in 2010 in Scotland).

- Recommendations on drinking during pregnancy have tightened since the 2005 survey, when the guidelines were that drinking up to one or two units of alcohol no more than once or twice a week was regarded as safe. The UK health departments now recommend that women should avoid drinking alcohol before and during pregnancy. In 2010, mothers in Scotland and Northern Ireland (35% for both countries) were less likely than mothers in England (41%) and Wales (39%) to have drunk during pregnancy. A decrease in the proportion of mothers drinking during pregnancy since 2005 was seen in all countries (from 50% in 2005 to 35% in 2010 in Scotland).
Incidence, prevalence, and duration of breastfeeding (Chapter 2)

- The initial breastfeeding rate in 2010 was lowest in Northern Ireland at 64% (compared with 83% in England, 74% in Scotland and 71% in Wales). The incidence of breastfeeding remained stable between 2005 and 2010 in Northern Ireland (63% in 2005, this compares with an increase from 76% in 2005 to 81% in 2010 at a UK level). This includes all babies who were put to the breast at all, even if this was on one occasion only, and also includes giving expressed breastmilk.

- The highest incidences of breastfeeding were found among mothers aged 30 or over (74%), those who left education aged over 18 (77%), and those in managerial and professional occupations (81%).

- Between 2005 and 2010, breastfeeding prevalence remained stable in Northern Ireland for all ages of baby (for example, 14% in 2005 and 16% in 2010, when the baby was aged six months). This compares with an increase from 26% to 36% at six months in England, an increase from 24% to 32% at six months in Scotland, and an increase from 18% to 23% at six months in Wales over the same period. At a UK level the corresponding figures were 25% in 2005 and 34% in 2010.

- Prevalence of exclusive breastfeeding was lowest in Northern Ireland compared with England, Scotland and Wales. For example at six weeks, it was 13% in Northern Ireland, 24% in England, 22% in Scotland and 17% in Wales. This was 23% at a UK level.

- In terms of first time mothers and mothers of second or later babies, Northern Ireland had the most noticeable difference between these two groups in incidence of breastfeeding, where 70% of first time mothers had initially breastfed, compared to 60% of mothers of second or later babies. In England, 85% of first time mothers had initially breastfed compared to 80% of mothers of second or later babies. In Wales the figures were 74% of first time mothers compared to 67% of mothers of second or later babies, and in Scotland 77% and 72% respectively.

- Previous breastfeeding behaviour influenced how likely mothers were to initiate breastfeeding with their current child and this pattern was broadly consistent across all countries. However, whilst there was little difference between countries in how likely mothers who had previously breastfed for six weeks or more were to initiate breastfeeding (from 98% in England to 95% in Northern Ireland), the difference in incidence between countries among mothers who had not previously breastfed was much greater (from 38% in England to 20% in Northern Ireland). This may help to explain the greater disparity between mothers of first and second or later babies in Northern Ireland than elsewhere in the UK. It suggests that policy developments to support women to breastfeed may have had more impact in Northern Ireland among first time mothers than mothers of second or later babies.
Choice of feeding methods (Chapter 3)

- When asked to think back to before they had their baby, mothers in Northern Ireland were the least likely to plan to breastfeed their baby in some way (58%) and the most likely to plan to formula feed only (31%). This compares with 76% and 16% respectively for England, 70% and 21% respectively for Scotland and 66% and 24% respectively for Wales. The UK level figures were 75% and 17% respectively.

- Over four in five mothers said they were aware of the health benefits of breastfeeding (83%) and just under three-quarters (72%) were able to name a benefit spontaneously in Northern Ireland (in line and just below the UK average respectively (the UK figures were 83% and 75%).

- Nearly nine out of ten mothers recalled receiving information during their pregnancy about the health benefits of breastfeeding in Northern Ireland (87%) which was higher than in Wales (82%) and England (81%). This was similar to Scotland (88%) and figures for both countries were higher than for the UK (82%). Midwives were the most common source of such information in Northern Ireland (90% of those who recalled receiving information, compared with 83% for the UK).

- Over four in five (85%) of mothers in Northern Ireland discussed feeding at antenatal check-ups. A similar proportion of mothers in Scotland did so (84%), compared with 75% and 78% respectively in England and Wales.

- Two in five mothers (41%) were taught how to position their baby for breastfeeding and how to attach their baby to the breast during their pregnancy. Mothers were less likely to be taught this in Northern Ireland and Wales (35% and 36% respectively) than in England and Scotland (42% and 41% respectively).

Birth, post-natal care, and the early weeks (Chapter 4)

- Nearly seven in ten mothers breastfeeding in the hospital, birth centre or unit (69%) had been shown how to put their baby to the breast in the first few days in the UK. At a country level this was higher in the devolved nations (73% for Northern Ireland and Wales and 71% for Scotland) than in England (68%). Together with mothers in Wales and Scotland, mothers in Northern Ireland received more breastfeeding support as 44% of mothers receiving help reported someone came back to check on them, (42% in both Wales and Scotland and 37% in England). Just under half of mothers breastfeeding in this setting in the UK (48%) were informed about how to recognise that their baby was getting enough milk. This was 48% for mothers in Northern Ireland which translated into 37% of these mothers feeling confident they could recognise their baby was getting enough milk (similar to 37% for the UK).

- Nearly seven in ten mothers in the UK (69%) had been given the contact details of a voluntary organisation or community group which helps new mothers with infant feeding. There was considerable variation by country as this was 59% for mothers in Northern Ireland compared with 70% for England, 63% for Scotland and 51% for Wales.

The use of milk other than breastmilk (Chapter 5)

- Mothers can give their babies different types of milk as they get older, either as their only milk feed or to supplement breastfeeding. Thus, while mothers who give their babies milk other than breastmilk at an early age will start by using infant formula, as the baby gets older they may introduce follow-on formula and eventually liquid cow’s milk. In Northern Ireland, 90% of mothers
at Stage 2 (when babies were four to six months old) who had given their baby milk other than breastmilk in the last seven days had mainly used infant formula and seven per cent had mainly used follow-on formula (these figures were 88% and 9% respectively for the UK). By Stage 3 (when babies were eight to ten months old) 42% of mothers in Northern Ireland who had given their baby milk other than breastmilk were using infant formula and 50% were mainly using follow-on formula (compared with 35% and 57% respectively for the UK).

- Nearly three in five (58%) of all mothers in Northern Ireland who had prepared powdered infant formula in the last seven days had followed all three recommendations for making up feeds (only making one feed at a time, making feeds within 30 minutes of the water boiling and adding the water to the bottle before the powder). Mothers in Northern Ireland were the most likely to have followed all three recommendations, while mothers in Scotland were the least likely to have done so (45%). The UK figure was 49%.

- Across the UK, four in five mothers (80%) said that they had used a bottle to feed their baby. Usage was highest in Northern Ireland (87%), which is likely to be linked with the lower incidence of breastfeeding in that country (as discussed in Chapter 2).

Feeding and health after the early weeks (Chapter 6)

- At Stage 2 (when babies were around four to six months old) 13% of mothers in Northern Ireland had experienced problems feeding their baby in the period between Stages 1 and 2. At Stage 3, seven per cent of mothers in Northern Ireland had experienced feeding problems between Stages 2 and 3. There was no variation between countries.

- Over three-quarters (78%) of mothers in Northern Ireland at Stage 2 who had experienced problems had received help or information and nearly three in five mothers in Northern Ireland at Stage 3 (58%) had received help.

- Of the mothers in Northern Ireland who had stopped breastfeeding by Stage 3, nearly two-thirds (63%) said that they would have liked to have breastfed for longer. This was in line with the UK average (63%).

Healthy Start (Chapter 7)

- Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. Women who are at least 10 weeks pregnant and families with children under four years old are currently eligible for Healthy Start if the family receives certain benefits. Overall, 26% of mothers considered themselves eligible for the scheme at Stage 1 in Northern Ireland and 15% had registered. Mothers in Wales (28%) and Northern Ireland (26%) were more likely to consider themselves to be eligible for the scheme than mothers in England and Scotland (24% for both). There was little variation by country in the proportion of mothers who had registered.

- At each stage of the survey, over four in five mothers in Northern Ireland registered on the scheme said they had used their Healthy Start vouchers (82% at Stage 1, 88% at Stage 2 and 86% at Stage 3, in line with the UK average). Infant formula was the main item mothers in Northern Ireland on the scheme bought with their vouchers at Stage 1 (75%), followed by fresh fruit (44%), fresh vegetables (38%) and cow’s milk (36%).
The proportion of mothers in Northern Ireland registered on the Healthy Start scheme who breastfed initially was considerably lower than the Northern Ireland average (38% compared with 64%).

Introduction of solid foods (Chapter 8)

- The UK health departments recommend that solid foods should be introduced when babies are around six months old. However, while feeding practices are changing, most mothers in 2010 were not following the guidelines in Northern Ireland, since 35% of mothers (30% in the UK) had introduced solid foods by the time their baby was four months old and three-quarters of mothers (75%, similar to the UK) had introduced solids by the time their baby was five months old.

- At Stage 3 (when babies were eight to ten months old), mothers who had introduced solid foods were asked whether they had received information relating to either when to start giving solid foods or what types of solid food to give. Mothers in Northern Ireland and Scotland were most likely to report receiving information on either topic (93% in both countries) and mothers in England and in Wales were least likely to report this (86% in both countries). This may relate to different infant feeding communication strategies and publications across the UK.

Additional drinks and supplementary vitamins (Chapter 9)

- The advice given to mothers is that babies should be breastfed exclusively for the first six months of life. Thus, there should be no need to give babies additional drinks such as water or juice during this period. Babies who are formula fed in the first six months may need additional cooled, boiled tap water in hot weather. Mothers in Northern Ireland were more likely than mothers in other countries to have given their babies additional drinks up to when babies were four months old. For example, at two weeks, 27% of mothers in Northern Ireland had given their babies other drinks compared with only 16% in Wales, 14% in England and 12% in Scotland.

- The UK health departments currently recommend (and also did so at the time of the 2005 and 2010 surveys) that all children from six months to five years old are given a vitamin supplement containing vitamins A, C and D, unless they are receiving more than 500 ml of infant formula per day. If there is any doubt about the vitamin status of the mother (e.g. if she did not take a vitamin D supplement during her pregnancy), then breastfed babies may also benefit from properly administered vitamin supplements from one month. At all three stages of the survey, babies in Northern Ireland were least likely to have been given vitamin drops. At Stage 3, seven per cent of babies were given vitamins in Northern Ireland, compared with 15% in England, 13% in Scotland and nine per cent in Wales.

- Women are advised to take vitamin D supplements during pregnancy and while breastfeeding, to ensure their own needs for vitamin D are met and so that their baby is born with enough stores of vitamin D for the first few months of life. Women may take other vitamin or iron supplements after birth; for example iron supplements may be taken to counter post-natal iron deficiency. At Stage 1 of the survey, breastfeeding mothers in Northern Ireland were most likely to be taking supplements (52% of breastfeeding mothers, compared with 43% for both England and Scotland and 40% in Wales). This difference was not evident at later stages of the survey.
Feeding outside the home (Chapter 10)

- By Stage 3 of survey (when babies were eight to ten months old), mothers in Northern Ireland (36%) and Wales (34%) were more likely to have returned to work, whilst mothers in England (29%) and Scotland (26%) were less likely to have done so.

- Working mothers in Northern Ireland were least likely to report that they had facilities at work to breastfeed or express milk (14%, compared 24% in Scotland, 20% in Wales and 19% in England).

- Mothers who were working at Stage 3 were asked specifically whether their return to work had affected the way they fed their baby. Mothers in Northern Ireland were least likely to say this (13%), compared with 20% of mothers in England, 17% in Scotland and 15% in Wales. This was 19% of mothers for the UK overall.

- In Northern Ireland, since April 2008, the Sex Discrimination (Northern Ireland) Order 1976, as amended, has banned discrimination against women on the grounds that they have recently (i.e. within the last 26 weeks) given birth. This protection applies in relation to the provision of goods, facilities and services to the public and includes protection for mothers breastfeeding in public. Similar protection came into effect later in England and Wales (in 2010) and earlier in Scotland (in 2005).

- Given that legislation protecting mothers’ right to breastfeed in public was in place a couple of years before the survey, it is not surprising that awareness of the legislation was higher (55%) among mothers in Northern Ireland compared with England (47%) and Wales (44%). It was highest for Scotland (73%).

- Fifty-three per cent of mothers in Northern Ireland said they had seen stickers or leaflets promoting locations where breastfeeding is welcome, compared with 41% in Scotland, 35% in Wales and 32% in England. Despite relatively high awareness levels of the legislation and the highest awareness of stickers or leaflets promoting locations where breastfeeding is welcome, mothers in Northern Ireland who breastfed initially were less likely to have breastfed in public (42%) than mothers in Scotland (60%), England (59%) and Wales (52%). Half of mothers in Northern Ireland who breastfed in public reported that there was a lack of suitable places to breastfeed in public (51%).

Dietary supplements, smoking and drinking (Chapter 11)

- The UK health departments advise pregnant women to take a daily supplement of 400 micrograms of folic acid prior to conception and during the first 12 weeks of pregnancy. Increasing the intake of folic acid in early pregnancy helps to reduce the risk of neural tube defects, such as spina bifida, in unborn babies. Mothers in Northern Ireland (78%) and Scotland (75%) were more likely than mothers in England and Wales (70% for both countries) to say that they knew why increasing the intake of folic acid was recommended.

- Mothers in Northern Ireland were most likely to have taken folic before pregnancy (42%), compared with 40% for Scotland, 37% for England and 34% for Wales. They were also more likely to take these during the first three months of pregnancy (82%) compared with 80% for Wales and 79% for both England and Scotland.
Smoking levels before or during pregnancy were 28% for Northern Ireland, which were in line with Scotland (27%) and England (26%) and lower than in Wales (33%). A decrease in the proportion of mothers smoking before or during pregnancy since 2005 was seen in all countries (from 32% in 2005 to 28% in 2010 in Northern Ireland).

Recommendations on drinking during pregnancy have tightened since the 2005 survey, when the guidelines were that drinking up to one or two units of alcohol no more than once or twice a week was regarded as safe. The UK health departments now recommend that women should avoid drinking alcohol before and during pregnancy. In 2010, mothers in Northern Ireland and Scotland (35% for both countries) were less likely than mothers in England (41%) and Wales (39%) to have drunk during pregnancy. A decrease in the proportion of mothers drinking during pregnancy since 2005 was seen in all countries (from 46% in 2005 to 35% in 2010 in Northern Ireland).