TITLE:	2.2 Breastfeeding
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SUBTITLE:

2.02i Breastfeeding Initiation, 2.02ii Breastfeeding prevalence at 6-8 weeks after birth, (2.02iii Breastfeeding prevalence at 10-14 days after birth)

Domain:	Health Improvement
Frequency of Availability:	Quarterly, Annually

Time Period Of	2011/12 – 2013/14 Financial Year OT Figures (Initiation and 6-8 Weeks)
Data Analysis:	2013/14 Quarterly LA/CCG Data at 10-14 Days

AVAILABLE COMPARISONS

TYPE	AVAILABLE
National, Regional or Peer Group	Yes (not at 10-14 Days)
Electoral Ward / NELCCG Practice	Yes
Neighbourhood	Yes (Not included)
Socioeconomic Differences	Yes
Targets, Trends & Projections	Yes

KEY POINTS

- -NEL CCG Breastfeeding initiation increased 5.8% on last year's figure
- -NEL CCG Breastfeeding Initiation has Increased 13.8% since 2006/7
- -NEL CCG Breastfeeding initiation prevalence (63.1%) is significantly lower than National (74%*)
- -There is a 37.2% drop-off rate between those Breastfeeding at Initiation and those Breastfeeding at 6-8 weeks
- -The gap between breastfeeding rates for 10-14 days and 6-8 weeks between the Top 20% (most deprived) and Bottom 80% (least deprived) has widened since last year by 3.7% (10 days) and 4.6% (6-8 weeks)
- *England coverage did not meet target for data validation.

DESCRIPTION

There is a clear case for investing in services to support breastfeeding as part of a local child health strategy. This is particularly important for mothers from low income groups, as it is known that they are less likely to breastfeed. Breastfeeding protects the health of babies and mothers, and reduces the risk of illness. (NICE, 2008)

Breast milk is the best form of nutrition for infants, and exclusive breastfeeding is recommended for the first six months (26 weeks) of an infant's life. Thereafter, breastfeeding should continue for as long as the mother and baby wish, while gradually introducing the baby to a more varied diet.

In recent years, research has shown that infants who are not breastfed are more likely to have infections in the short-term such as gastroenteritis, respiratory and ear infections, and particularly infections requiring hospitalisation. In the longer term, evidence suggests that infants who are not breastfed are more likely to become obese in later childhood, which means they are more likely to develop type 2 diabetes, and tend to have slightly higher levels of blood pressure and blood cholesterol in adulthood. For mothers, breastfeeding is associated with a reduction in the risk of breast and ovarian cancers. A recent study also suggests a positive association between breastfeeding and parenting capability, particularly among single and low-income mothers.

The Data is collected on a quarterly basis and submitted to the Department of Health (DoH) via Unify. Data on 10 day prevalence is not yet collected for national indicator purposes.

NATIONAL, REGIONAL OR PEER GROUP

The calculation for this indicator uses the number of women who initiate breastfeeding in the first 48 hours after delivery and the total number of births (all birth outcomes).

Table 2.02i(a) Breastfeeding Prevalence at initiation for North East Lincolnshire, Yorkshire and the Humber Region and England, 2011/12 – 2013/14 Outturn (OT)

Regional, National, Local BF Initiation				
Area	2011/12 OT	2012/13 OT	2013/14 OT	
England	74.0%	73.9%	74.0%	
Yorkshire and the Humber	68.8%	68.0%	70.5%	
North East Lincolnshire CCG	61.2%	57.3%	63.1%	

2013/14 OT data for England is highlighted in the chart to draw attention to the fact that it did not meet the data validation criteria needed for data to be published. The data did not meet the coverage target of 95%, with only 89.6% coverage.

Breastfeeding Initiation prevalence in North East Lincolnshire showed a rise of 5.8% on 2012/13 data to an 8yr high of 63.1% but was still below national and regional averages, which have stayed consistent at 74% (nationally) and 68-70% regionally over the past three years.

Figure 2.02i(a) Breastfeeding prevalence at initiation for NEL CCG 2006/7 - 2013/14

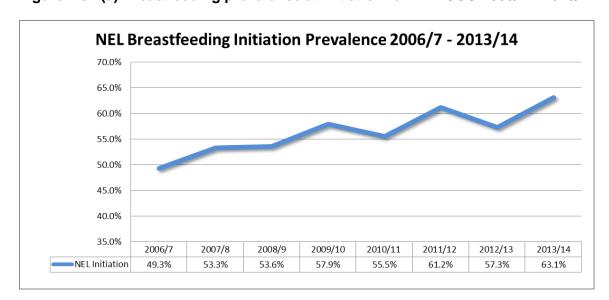
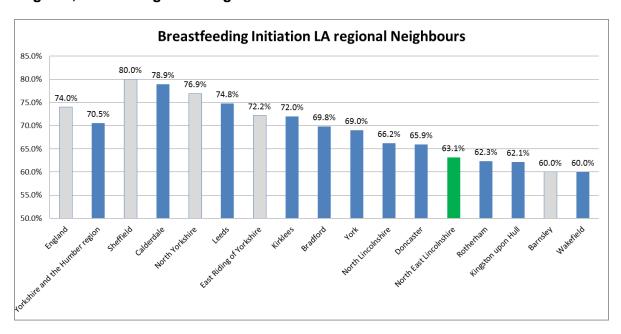
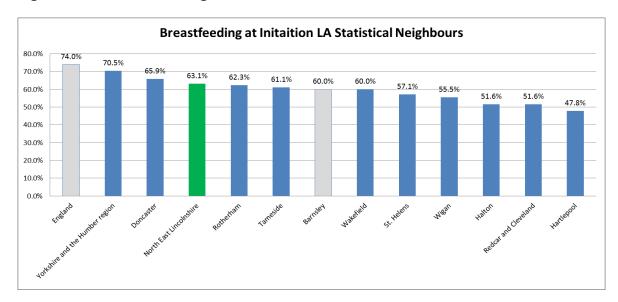


Figure 2.02i(b) Breastfeeding prevalence at initiation for North East Lincolnshire, England, and LA Regional Neighbours 2013/14 OT



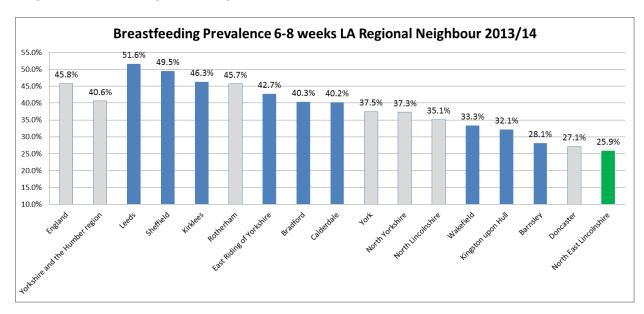
Grey columns represent areas which did not meet the data validation criteria required for accurate representation of the indicators. North East Lincolnshire had 63.1% of infants breastfeeding at initiation. This was below the national average of 74% and regional average of 70.5%. Of the 15 regional LAs, North East Lincolnshire was placed 11th, with similar percentages to Rotherham (62.3%), Hull (62.1%), Barnsley (60.0%), and Wakefield (60.0%). The highest performing LAs in the region were Sheffield (80%) and Calderdale (78.9%).

Figure 2.02i(c) Breastfeeding prevalence at initiation for North East Lincolnshire, England and Statistical Neighbours 2013/14 OT



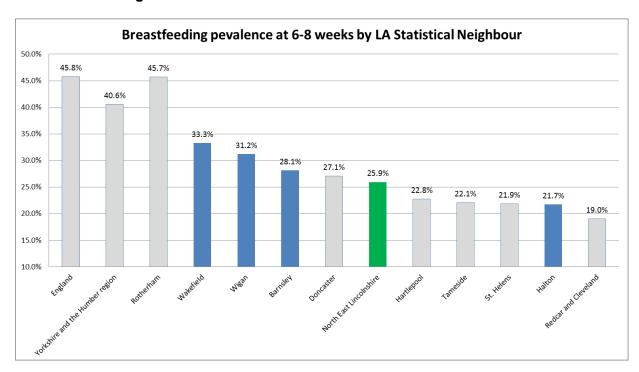
Grey columns represent areas which did not meet the data validation criteria required for accurate representation of the indicators. Compiled from northern towns of a similar size, demographic and economic composition, North East Lincolnshire's percentage of 63.1% of breastfeeding infants at initiation ranked highly amongst our statistical neighbours, placing the authority 2nd of the 11 local authority areas.

Figure 2.02ii(a) Breastfeeding prevalence at 6-8 weeks for North East Lincolnshire, England, and LA Regional Neighbours 2013/14 OT



Grey columns represent CCGs which did not meet the data validation criteria required for accurate representation of required indicators. North East Lincolnshire recorded 25.9% of infants breastfeeding at 6-8 weeks. This was below the national average (45.8%) and regional average (40.6%) and also saw a drop-off rate of 37.2% between initiation and 6-8 week feeding rates in NEL. Of the 15 regional LAs, North East Lincolnshire was placed 15th with only Barnsley (28.1%) and Doncaster (27.1%) recording similar feeding rates at this stage. Leeds (51.6%) and Sheffield (49.5%) were the two highest scoring LAs.

Figure 2.02ii(b) Breastfeeding prevalence at 6-8 weeks for North East Lincolnshire and LA Statistical Neighbours 2013/14 OT



Grey columns represent CCGs which did not meet the data validation criteria required for accurate representation of required indicators. North East Lincolnshire's statistical neighbours are all significantly lower than the national average, with the exception of Rotherham which is only 0.1% lower. North East Lincolnshire ranks 6th with 25.9%, over 4% higher than both St Helens and Halton (21.9% and 21.7% respectively)

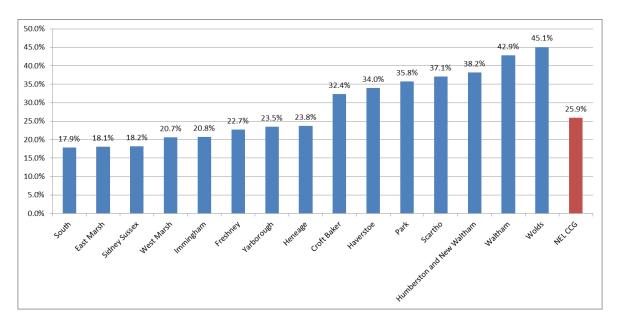
NORTH EAST LINCOLNSHIRE

Electoral Wards / NELCCG Practices

2.02ii(c) Breastfeeding Prevalence at 6-8 weeks after birth

Rates for Breastfeeding prevalence at 6-8 weeks follow a similar trend to the 10 day data at Ward level. With South (17.9%), East Marsh (18.1%) and Sidney Sussex (18.2%) having the lowest prevelence and Wolds (45.1%) and Waltham (42.9%) having the highest.

Figure 2.02ii Breastfeeding prevalence at 6-8 weeks for North East Lincolnshire Wards 2013/14



No single Ward had feeding rates above the national OT average for 6-8 week prevalence. Some wards saw a marked improvement on last year's data. Wolds went from 31% (2012/13) to 45.1% (2013/14), Humberston and New Waltham went from 29% (2012/13) to 38.2% (2013/14) and Waltham went from 37.3% (2013/14) to 42.9% (2013/14). Interestingly, wards in more deprived areas saw little or no rise in performance.

2.02iii Breastfeeding prevalence at 10-14 days after birth

North East Lincolnshire Health Visiting Team collect information on the breastfeeding status of mothers at the 10-14 day check-up in addition to the 6-8 week check-up after birth. Although not nationally reported, the extra check gives a useful insight into the initial 'drop off' rates for mothers between initiation and this check-up, as well as further drop off of figures between 10 days to the 6-8 week check-up. The percentage is calculated from the number of infants due a 10-14 day check and the number of those infants who are recorded as totally or partially breastfed.

70.0% 60.0% 54.9% 55.1% 50.0% 44.6% 43.1% 37.9% 37.1% 40.0% 36.1% 35.3% 32.3% 30.5% 26.6% 27.3% 27.6% 30.0% 20.0% 10.0% 0.0%

Figure 2.02iii(a) Breastfeeding Prevalence at 10-14 days by Ward 2013/14

The performance of breastfeeding prevalence at Ward level shows great variance. The three top scoring Wards are in less deprived areas and score as follows: Wolds (64.3%), Waltham (55.1%) and Haverstoe (54.9%) with more than half of children totally or partially breastfed. However, the bottom three Wards in areas of high deprivation: South (26.6%), East Marsh (27.3%) and Sidney Sussex (27.6%) score less well, with barely more than a quarter of children being breastfed at this point.

Performance has risen from last year with the CCG in 2012/13 OT at 31.4% compared with 37.1% in 2013/14.

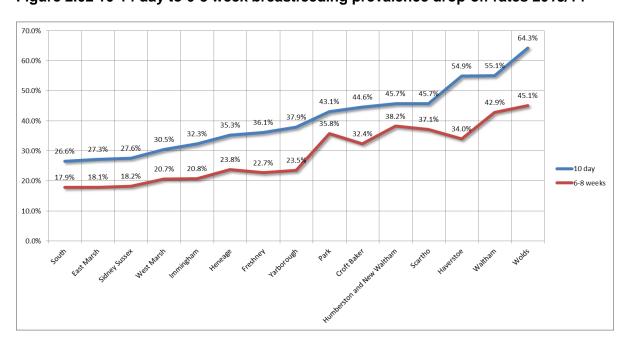


Figure 2.02 10-14 day to 6-8 week breastfeeding prevalence drop-off rates 2013/14

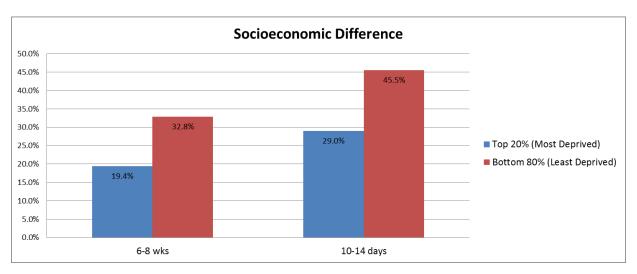
This table shows the drop-off rate between the two indicators. The average drop-off rate for a ward is 11.7%, although two of the top performing wards had much higher drop-off rates of

20.9% (Haverstoe) and 19.2% (Wolds). Unfortunately we cannot do a three tiered drop-off analysis as we have no data for Ward level initiation.

Socioeconomic Differences

As was demonstrated at Ward level and demonstrated by national data, economically deprived areas present lower levels of breastfeeding at initiation and 6-8 weeks. When we present the data against the latest IMD score the picture becomes more pronounced. The areas within the lowest deciles of deprivation (representing the 20% most deprived areas nationally) show significantly lower prevalence rates across all indicators.

Figure 2.2 Breastfeeding prevalence in NEL at 10-14 days and 6-8 weeks (2013/14) by IMD deprivation score



There is a clear difference between areas in the top 20% (most deprived) and the bottom 80% (least deprived). The difference is 16.5% for 10-14 days and 13.4% for 6-8 weeks. This means the gap between those in the top 20% and bottom 80% has widened since last year (2012/13) when the differences were 12.8% for 10-14 days and 8.8% for 6-8 weeks.

TRENDS, TARGETS & PROJECTIONS

Table 2.02ii(b) Breastfeeding prevalence trend at 6-8 weeks, National, Regional and Local with Confidence Interval (CI)

2.02ii Breastfeeding prevelance 6 to 8 weeks							
Year	Significantly worse than England average	Count	NEL Percentage %	Lower CI	Upper Cl	Yorkshire and the Humber	England
2011/12	Yes	522	25	23.1	26.9	36.2	47.2
2012/13	Yes	472	23.4	21.6	25.3	38.3	47.2
2013/14	Yes	506	25.9	24.1	27.9	40.6	45.8

Source: LA, Regional and England data are calculated by NHS England. Public Health England Knowledge and Intelligence Team (East) has calculated Shires and additional geographies.

Highlighted cells in the above table show data that did not meet the data validation criteria required for accurate representation of the indicators. The above table shows that North East Lincolnshire presented results which were significantly worse than the England and Yorkshire and Humber averages for the past three years. In spite of a small rise of 2.5% compared with 2012/13 data, North East Lincolnshire is still 19.9% behind the national average and 14.7% behind the regional average.

Public Data	http://www.england.nhs.uk/statistics/statistical-work-areas/maternity-and-		
	breastfeeding/		
Sources:	http://www.phoutcomes.info/		