

<h1>BRIEFING</h1>	TO:	Health and Wellbeing Board
	DATE:	HWBB – 10/6/2026
	LEAD OFFICER:	Sam Longley Public Health Specialist – Best Start and Beyond Adult Care, Housing and Public Health
	TITLE:	RMBC Breastfeeding Friendly Borough Declaration

1. Background

1.1	<p>Rotherham Council formally adopted the Local Authority Declaration on Healthy Weight in January 2020. A key line of action within that document refers to creating supportive environments for all children, young people and parents by:</p> <ul style="list-style-type: none"> • promoting good relationships with food and physical activity from an early age, through childhood and into teenage years • promoting healthy eating and activity during pregnancy • creating supportive environments to help normalise breastfeeding <p>In pursuit of that ambition, in June 2022 a briefing paper was presented to the Health and Wellbeing Board proposing adoption of a Rotherham Metropolitan Borough Council Breastfeeding Friendly Borough Declaration. This was agreed in principle by the Board.</p> <p>A Breastfeeding Friendly Borough Declaration clearly articulates the commitment of the council, the Health and Wellbeing Board and key partner organisations to support ongoing change within a range of contexts towards a common goal, to enable families to make the right choice for them, with appropriate support</p> <p>This briefing aims to provide assurance to the Board by setting out the progress made over the last year.</p>
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2. Key Issues

2.1	<p>Informed and supported choice</p> <p>Eight out of ten women stop breastfeeding before they want to, and most report that this is due to feeling insufficiently supported. This also frequently results in feelings of guilt and failure ¹. Rotherham is promoting a compassionate approach to health behaviour choices.</p> <p>The compassionate approach is <i>‘An approach that promotes health gains for all people, without stigma or judgement, and which takes into account the wider context of their lives.’</i></p>
2.2	<p>In this context the compassionate approach should mean Infant feeding choices are well informed and supported without stigma or blame.</p>

2.3

Health inequalities

Whilst UK breastfeeding rates are comparatively low internationally, within the UK the way rates vary is associated socio-economic status, with economically deprived mothers the least likely to initiate or to continue breastfeeding. Any Rotherham-wide improvement in breastfeeding initiation and continuation rates is therefore likely to have some positive impact on health inequalities and represents one of the key opportunities we have for giving Rotherham children the best start in life.

2.4

Breastfeeding and climate change

As well as offering many direct health benefits to both infant and mother, increases in breastfeeding rates also has the potential for wider indirect planetary benefits. This is due to the potential reduction in environmental costs that arise from infant formula production and administration, such as emissions from dairy farming, product packaging, shipping, disposal, and water consumption ².

Breastfeeding and the cost of living

Breastmilk is effectively a free and safe resource. Bottle feeding has been estimated to cost on average between £50 and £100 per month, meaning that exclusive breastfeeding for the UNICEF recommended six months is likely to offer considerable financial savings. The British Pregnancy Advisory Service has warned that due to the increased costs of living some bottle-feeding families may have resorted to unsafe practices to reduce costs, such as watering down formula or increasing periods between feeds ³.

3. Key Actions and Timelines

Progress since June 2025

3.1

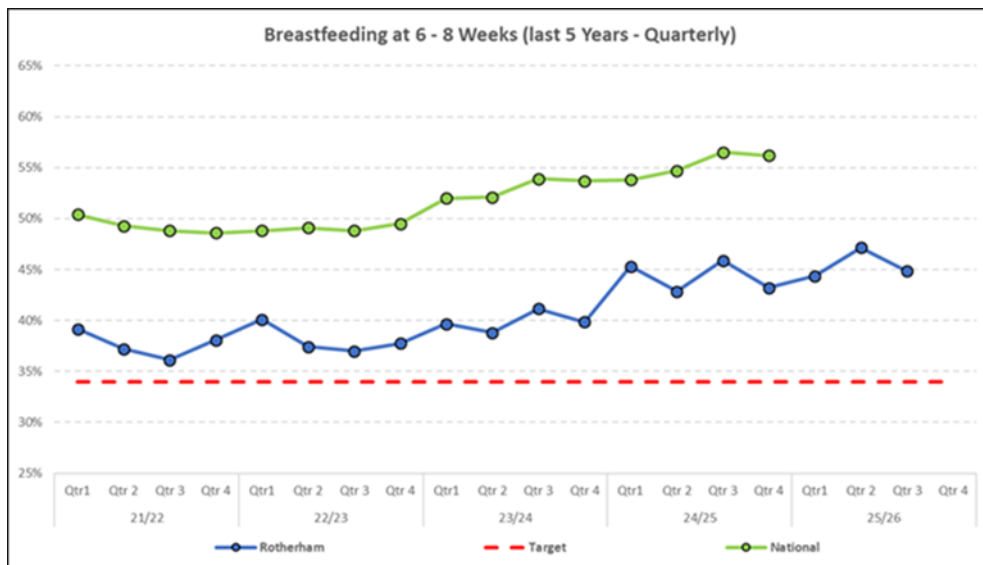
Breastfeeding rates have continued to increase in terms of initiation and continuation.

3.2

Breastfeeding initiation in Rotherham are reported by NHS Midwifery and have continued to increase year on year and for 2025-2026 stand at 60.87% the national average being 75%.

3.3

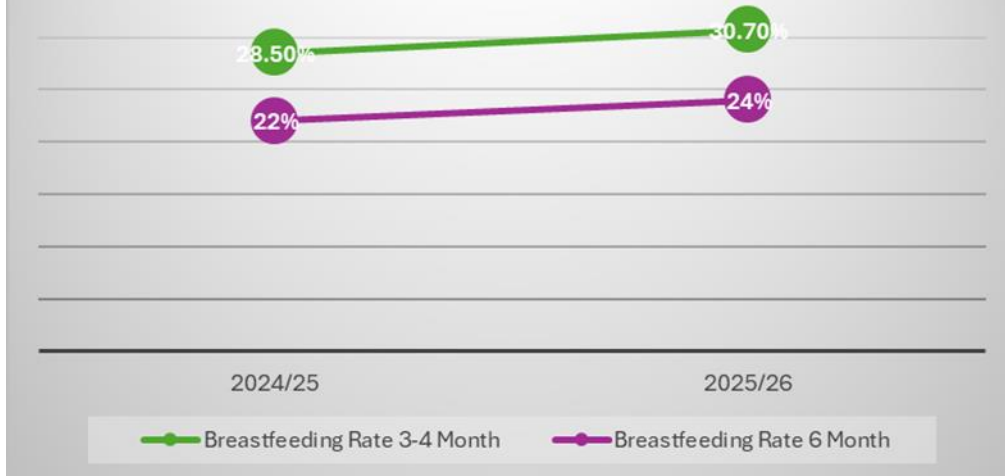
Breastfeeding rates at 6-8 weeks



3.4

Breastfeeding duration

Rotherham Breastfeeding Duration Rates



3.5

3.6

3.7

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3.9.1

3.9.2

3.9.3

3.9.4

3.9.5

Demographic data about the contacts we are having through our Family Hubs to provide breastfeeding support has identified that almost 50% of the people we reach are resident in the 30% most deprived areas of Rotherham. 46.6% of these were with mothers who live in the 30% most deprived areas, with 21.4% living in the 10% most deprived areas. This is very encouraging in terms of reducing health inequalities as we know increasing breastfeeding rates can be a powerful tool for reducing health inequalities, but only when efforts are focused on disadvantaged populations. Without targeted action, improvements may disproportionately benefit already advantaged groups and widen gaps.

The Children's Centre/Family Hubs have achieved Stage 1 Baby Friendly Initiative and are making good progress towards preparation for stage 2 assessment around May 2027. To achieve this there has been an extensive programme of training delivered to all family hub staff, champion roles have been established, and a process of audit has commenced.

An Infant Feeding Strategic group has been created with membership from key stakeholders in Rotherham which includes Rotherham Family Hubs, VCS, 0-19 service, midwifery, RMBC public health team and RMBC Children and Young Peoples Service. The group aim is to plan, formulate and implement an Infant Feeding Framework for the promotion, support and protection of breastfeeding and evaluate its effectiveness by reviewing annually.

Rotherham midwifery service achieved gold UNICEF accreditation in January 2026. Gold is the highest level of accreditation and celebrates excellent and sustained practice in the support of infant feeding and parent-infant relationships.

RMBC premises have been identified to enable us to support staff and/or the public to be supported to breastfeed. The council neighbourhoods' teams are supporting this, and we are focused on identifying and collaborating with the borough's recreation and leisure spaces to become Breastfeeding Friendly. Opportunities in the future may include the ability to influence Town Centre Regeneration plans through relationships being built with the colleagues in Regeneration and Environment and Town Centre Community Co-ordinators.

Work continues to identify and support other Rotherham businesses to be breastfeeding friendly, joint work completed with TRFT Infant feeding team to produce

3.9.6	updated resource packs. The council have a directory of business who have signed up to the Rotherham Backs Breastfeeding campaign.
3.9.7	
3.9.8	Our GP registrar has taken an opportunity to work with the GP surgery she is placed at, and they have established an Infant Feeding space to create a welcoming environment for breastfeeding. She hopes this can be developed wider into the primary care network.
	As part of the Family Hubs and Start for Life funded programme Rotherham's antenatal offer will be strengthened and antenatal Infant feeding advice will be delivered using the Togetherness model (formally the Solihull Approach). Providing families with the information required to enable informed choice.
	Following her recent appointment to the Director of Public Health for Rotherham, Emily Parry-Harries has become a UNICEF Baby Friendly Guardian alongside Cllr Baker-Rogers.
	National and Global Breastfeeding campaigns have been supported in Rotherham with community events arranged for the Big Global Latch On, a celebration event was held in April 2026 at one of our new Breastfeeding venues in Forge Island.
	Infant feeding is included in wider public health agendas such as Rotherham Food Network with inclusion in their action plan.
	Work is planned to make links with Rotherham Chamber of Commerce, Rotherham United and the new Rotherham Health Hub to explore opportunities that may be available to promote breastfeeding in Rotherham.
	Voluntary Action Rotherham are working closely with the Family Hubs and recruiting and facilitating training for Infant Feeding Peer Supporters. We have a strong passionate group of peer support workers, and we are making plans how these numbers can be sustained particularly through provision of high quality mentoring support.
4. Recommendations	
4.1	The Health and Wellbeing Board to reaffirm its support for the ambition for Rotherham to become a breastfeeding friendly borough.
4.2	For the board to agree future updates will be provided within the Best Start Local Plan reporting.

References

1. [Barriers to Breastfeeding Briefing Document \(unicef.org.uk\)](https://www.unicef.org.uk/press-releases/2018/04/2018-04-20-barriers-to-breastfeeding-briefing-document)
2. [How much does it cost to raise a child? - Times Money Mentor \(thetimes.co.uk\)](https://www.thetimes.co.uk/article/how-much-does-it-cost-to-raise-a-child-2018-04-20)
3. [High cost of infant formula putting babies in danger, UK charities warn | Children's health | The Guardian](https://www.theguardian.com/children/2018/apr/20/high-cost-of-infant-formula-putting-babies-in-danger-uk-charities-warn)
4. [Accreditation - Baby Friendly Initiative \(unicef.org.uk\)](https://www.unicef.org.uk/press-releases/2018/04/2018-04-20-accreditation-baby-friendly-initiative)

Appendix A

Supporting a Breastfeeding Borough Declaration (DRAFT v1)

Our commitment

The Health and Wellbeing Board is committed to protecting, promoting and supporting breastfeeding through advocacy to the whole of its population, whether they be a member of the public or a member of staff.

To achieve this, we support the implementation of a Breastfeeding Borough, which includes some of the measures from the Baby Friendly Initiative (BFI) and adapt these to our local authority ethos and services where appropriate.

Stage One: Building a firm foundation

1. We will have a signed breastfeeding statement for the Council that is routinely communicated to all staff. We will share this with all new starters via our electronic induction system and, where appropriate, will have a routine reminder of this policy through our annual training updates.
2. We will continue to show commitment to maintaining an evidence-based level of understanding in relation to infant feeding. This will inform our commissioning and our wider public health agendas.
3. We will work collaboratively with our partners to support a Breastfeeding Borough whilst doing this, we will hold central the well-being of the baby and their mother / parents.

Stage Two: An educated workforce

1. We will maintain a level of education that enables staff within, not only our Public Health department, but also our leadership team across the Local authority, to recognise the health and wellbeing benefits of breastfeeding.
2. We will raise the profile of breastfeeding across all our departments through social media postings and local campaigns.

Stage Three: Parents' infant feeding experience, the local authority and partners will:

1. Support the appropriate wider strategic health and wellbeing agenda including 1001 days, the Rotherham Healthy Weight Declaration, the Inequalities and Prevention Strategy and promote the importance of breastfeeding for the health and well-being of their baby.
2. Advocate that the appropriate wider strategic agendas, where possible, support infrastructure which promotes, and supports breastfeeding for every mother and every baby.
3. Recognise that breastfeeding has multifaceted complex challenges within our population, however we will work with our partners to deliver national and local campaigns to support responsive feeding for all babies.

A Breastfeeding Borough - Places.

Our commitment

- We will participate in efforts to promote and support breastfeeding as the cultural norm.
- We will encourage breastfeeding as the preferred method of infant feeding.
- All frontline staff working in RMBC's premises which are accessible to the public should support breastfeeding by adopting the following:
 - Breastfeeding parents will be given the freedom within public areas to choose where to breastfeed; the presence of a breastfeeding room does not mean that she must choose to use the room.
 - Breastfeeding parents will be welcomed when on the premises and will not be asked to cover up or move to another area when breastfeeding.
 - If a mother wishes to have more privacy to breastfeed, she will be offered an appropriate location as far as practicable. Toilets or restrooms are not appropriate places for feeding babies and will not be offered.
 - We will support breastfeeding parents if they encountered difficulties and show kindness and respect.
 - We will create a positive and supportive environment within our local authority buildings (for example, by displaying breastfeeding positive posters in public areas and, as far as practicable, providing a private space for breastfeeding clients).

A Breastfeeding Friendly Workplace -Policy

Our Commitment

1. We will recognise the need to support employees to continue breastfeeding after returning to work.
2. Employees who plan or need to express breastmilk during working hours should approach their supervisors to work out an appropriate arrangement through supportive discussion whilst completing a risk assessment with their line manager.
3. Line managers should support breastfeeding employees on return to work by providing an enabling environment for those who are breastfeeding. Specific measures include the following:
 - Allowing lactation breaks (an example, one 30 minute break every four hours) for expression of breastmilk for at least one year after childbirth, and to adopt a flexible approach thereafter.
 - Provide somewhere for hand washing which does not involve a public toilet.
 - Provide a private space with a comfortable chair and an electric outlet for operating the breast pump.
 - Provide refrigerating facilities for safe storage of expressed breastmilk. There is an expectation that the employee will ensure that this would be clearly marked and placed in a separate box within the fridge to prevent colleagues from opening it by accident.
 - All other staff members are requested to support their colleagues to breastfeed by adopting a positive and accepting attitude.
 - Consider if needed, flexible approaches to enable the continuation of breastfeeding when a baby will not take milk from a bottle. This might involve the baby's carer attending the offices, at the cost of the mother, for the 30 minute break every four hours, to allow the mother to breastfeed. This would need a separate risk assessment undertaking.

A Breastfeeding Borough. Supporting the International Code of Marketing of Breastmilk Substitutes

Our Commitment

We will also work within the International Code of Marketing of Breastmilk Substitutes and promote healthy infant feeding decision making for all staff and members of the public.

We will support the relevant provisions of the marketing code within our premises:

1. We will not advertise any breastmilk substitutes.
2. We will not give free samples of any product that promotes bottle feeding.
3. We will encourage our partners working within healthcare facilities to adhere to the code of marketing of breastmilk substitutes.
4. We will not support any contact of parents from formula company representatives.
5. We will not accept any gifts or personal samples from any company linked with formula companies.
6. We will not in any of our contact with parents use words or pictures idealising artificial feeding.
7. We will ensure that our information provided to staff and our population is scientific and factual.
8. When discussing formula infant feeding, we will recognise the evidence base regarding the risks of not breastfeeding.
9. Our guidance will support families with robust infant feeding information therefore reducing unsuitable products entering a child's diet.

Signed -