

# Public Perception Survey on Breastfeeding 2015

- Survey Report -

Prepared by



**Department of Health**

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## **EXECUTIVE SUMMARY**

### **OBJECTIVES**

In order to collect information on the general public's experiences and acceptance on breastfeeding in the community, and to steer the future planning, the Family Health Service of the Department of Health has commissioned a telephone survey.

The objectives of the study are:

- (a) To examine the general public's experience and attitude on breastfeeding in public place, including their acceptance on breastfeeding in public places and their views on measures to support breastfeeding in public places;
- (b) To examine the general public's experience and attitude on breastfeeding in workplace, including their acceptance on breastfeeding in workplace and their views on measures to support working mothers to sustain breastfeeding;
- (c) To examine the general public's experience on formula milk advertisement and promotion for infants and young children; and
- (d) To examine the general public's experience on breastfeeding and its promotion in the community.

### **METHODOLOGY**

The survey was conducted in the form of telephone interviews between 12<sup>th</sup> June and 24<sup>th</sup> July 2015. Target respondents were individuals aged 18 years and above who spoke Cantonese, Putonghua or English. A random sample of residential telephone numbers was drawn. "Last birthday" random selection method was employed to select one qualified household member for interview. 2007 target respondents were successfully interviewed, with a response rate of 30.4%.

### **KEY FINDINGS**

#### ***Respondent Profile***

Overall 54.8% were female, and the age group 60 or above constituted 25.2%. 69.1% of the respondents attained upper secondary education level or above, and 37.8% attained tertiary education level or above. 11.1% of the respondents reported that they had children in the household who were breastfed. 53.0% of the respondents were employed persons. 28.6% of the respondents had no monthly personal income while 6.8% had income of \$40,000 or above. 3.1% reported no monthly household income while 26.4% with monthly household income of \$40,000 or above.

### ***Knowledge on Breastfeeding***

The majority (80.6%) of the respondents indicated that breast milk is more beneficial to the health of baby. 2.0% indicated that formula milk is more beneficial, and 13.9% indicated that both are equally beneficial. The World Health Organization (WHO) recommends that babies should be exclusively breastfed for the first 6 months of life and should continue breastfeeding up to 2 years of age or beyond. Only 27.9% and 23.5% of the respondents knew the recommended duration of exclusive breastfeeding and the continuation of breastfeeding respectively.

### ***Advertisement & Promotion on Breastfeeding***

Of all the respondents, 15.0% had encountered promotional messages about breastfeeding or infant and young child feeding from DH frequently / sometimes in the past 3 months before enumeration. Among them, the commonest channel was electronic media (including TV, radio) (71.2%), followed by poster / leaflet (e.g. in clinic, hospital, etc.) (19.2%) and print media (including newspapers and magazines) (14.7%). The key promotional message that respondents could recall was “breastfeeding benefits the health of mothers and babies”. Some mentioned the messages of “promoting employers and public venue to provide places for breastfeeding / expressing breast milk” and “breastfeeding enhances mother-baby bonding”.

### ***Advertisement & Promotion of Formula Milk***

61.5% of the respondents had encountered promotional messages about formula milk for infants and young children frequently / sometimes in the past 3 months before enumeration. Among them, the vast majority (94.9%) encountered the messages through electronic media. Of those who had encountered promotional messages, 12.3% perceived that the messages were promoting formula milk for babies from birth to 6 months old (infant formula) only, 12.6% perceived that they were promoting formula milk for babies above 6 months old (follow-up formula) only, and 60.9% perceived that the messages were promoting both infant and follow-up formulae. Another 14.1% were not sure about the target age range of formula milk that was being promoted / advertised.

### ***Breastfeeding in Public Place***

13.7% of the respondents had encountered breastfeeding mothers in public places such as shopping malls, restaurants, parks/children’s playgrounds etc. in the past 3 months before enumeration. More respondents (56.7%) reported that they had encountered babies being fed with bottles in public places in the past 3 months before enumeration. 78.7% of the respondents expressed that it was definitely acceptable / acceptable to have women

breastfeeding near them in public places. Conversely, 19.7% expressed that it was definitely unacceptable / unacceptable.

Respondents were asked whether they agreed if a public venue should implement the following breastfeeding friendly measures:

- A notice which states that mothers are welcome to breastfeed anytime and anywhere in the venue;
- Staff would not disturb a breastfeeding mother; and
- Staff are happy to help breastfeeding mothers in need (such as explaining to other customers when necessary).

It was found that the majority (86.1%) of respondents strongly agreed / agreed on implementing these measures and 10.6% strongly disagreed / disagreed.

### ***Breastfeeding in Workplace***

Among the 1 063 employed persons, 18.6% reported that their employers had implemented one or more breastfeeding friendly measures in the workplace. These measures included lactation breaks for mothers to express milk during working hours (15.4%), place for milk expression (12.6%) and facilities for storing the expressed milk (14.2%). Only 9% reported that all three measures had been implemented in their workplace. Commonest places for milk expression included a specific lactation room (26.9%), and conference room (26.3%), and store room (16.2%). The employed persons were also asked whether they considered it was acceptable for their colleagues to express breast milk during working hours. The majority of employed persons (87.0%) expressed that it was definitely acceptable / acceptable. Conversely, only a small proportion (8.0%) expressed that it was definitely unacceptable / unacceptable.

All 2 007 respondents were asked whether they agreed if an organisation should implement measures for working mothers to sustain breastfeeding. The vast majority of respondents (89.0%) strongly agreed / agreed on implementing these measures in workplace. Common reasons included “these measures support working mothers to sustain breastfeeding after returning from their maternity leave”, “employers should respect the working mothers’ needs of breastfeeding” and “those who want to sustain breastfeeding can stay in the work force”. 5.4% strongly disagreed / disagreed and stated the reasons being “personal matters should not be done within working hours” and “it affects the mother work”.

### **CONCLUSION**

Although most respondents were aware of the superiority of breast milk over formula, there were 13.9% of the respondents who still perceived formula to be just as beneficial as breast milk. Awareness on the exclusivity and duration of breastfeeding as recommended by

WHO was generally poor. Public education on the optimal infant and young child feeding practices should be strengthened further.

Despite the major manufacturers of formula milk had previously expressed that formula milk for babies from birth to 6 months old was not advertised or promoted to the general public in accordance with the International Code of marketing of breast-milk substitutes, most respondents who had encountered promotion or advertising perceived that the infant formula was still being marketed. The marketing practices used to promote formula milk are of concern as they are considered to be contributory to exerting a negative influence on breastfeeding initiation, duration and exclusivity. There is a need to ensure parents and expectant parents receive unbiased information in order to make fully informed decisions on infant and young child feeding.

The survey found that most respondents considered breastfeeding in public places to be socially acceptable and supported the implementation of breastfeeding friendly measures. Addressing the needs and concerns of different stakeholders, for example, the management of shopping malls, restaurants and other public premises etc., and providing guidelines for them to implement breastfeeding friendly measures, would help towards fostering a community that is conducive to breastfeeding.

A breastfeeding friendly workplace benefits the family, the employer and the society. Working mothers who breastfeed require the support of co-workers, supervisors and employers. Although the Government has taken the lead in adopting the breastfeeding friendly workplace policy in the majority of bureaux and departments and promoting it to the non-governmental organisations, the survey showed that breastfeeding friendly measures were not in place in the majority of the workplaces. Effort should be stepped up to promulgate the breastfeeding friendly workplace policy to different types of employers. As well as promoting and educating employers and employees on the benefits and ways of supporting breastfeeding, informing mothers to readily communicate their needs to their employers is also necessary.

Multiple factors influence the mothers' decision to breastfeed. Whilst the Government plays a leading role in protecting, promoting and supporting breastfeeding, joint efforts by various sectors are crucial in creating a supportive environment in the community.

# 1 BACKGROUND & OBJECTIVES

## BACKGROUND

Breastfeeding is the unequalled way of providing infants with the nutrients they need for healthy growth and development. Research has revealed that the benefits of breastfeeding are proportional to its exclusivity and duration. Breastfeeding confers the immunity of the infants, with a decreased risk of infections, hospital admissions and deaths.<sup>1,2,3</sup> It also extends the lifelong benefits by preventing obesity and chronic non-communicable diseases such as cardiovascular diseases and diabetes.<sup>4</sup> Lactating mothers also benefit from decreased risk of breast and ovarian cancers.<sup>1,5,6</sup>

The World Health Organization (WHO) recommends exclusive breastfeeding babies up to six months of age, with continued breastfeeding along with appropriate complementary foods up to two years old or beyond.<sup>7</sup> In Hong Kong, the breastfeeding initiation rate has been increasing in the past two decades and reaches 86% in 2014, but the exclusive breastfeeding rate at age of 4 – 6 months remains low at 27%.<sup>8</sup>

Local research identified mothers returning to work was one of the main reasons for stopping breastfeeding prematurely.<sup>9</sup> Another study examined the experiences of local breastfeeding mothers revealed that almost 60% of mothers had directly breastfed in public places, but 1 in 3 mothers encountered unpleasant experience that might reduce their intention to breastfeed in public.<sup>10</sup>

The Government attaches great importance in providing support to breastfeeding mothers. In April 2014, the Government set up the Committee on Promotion of Breastfeeding (the Committee) to provide advice on strategies and action plans to protect, promote and support breastfeeding in different sectors of Hong Kong and to oversee the planning and implementation of programmes and initiatives .

## **OBJECTIVES**

In order to collect information on the general public's experiences and acceptance on breastfeeding in the community, and to steer the future planning, the Family Health Service of Department of Health commissioned a telephone survey with the following objectives:

- (a) To examine the general public's experience and attitude on breastfeeding in public place, including their views on implementing breastfeeding friendly measures in public places;
- (b) To examine the general public's experience and attitude on breastfeeding in workplace, including their views on implementing breastfeeding friendly measures in workplace;
- (c) To examine the general public's experience on formula milk advertisement and promotion for infants and young children; and
- (d) To examine the general public's experience on breastfeeding and its promotion in the community.

The findings of the survey will be useful for facilitating the planning, implementation and evaluation of breastfeeding programmes.



## **2 METHODOLOGY**

### **2.1 TARGET POPULATION**

The survey covered all land-based non-institutional Hong Kong residents aged 18 years and above who spoke Cantonese, Putonghua or English. Foreign domestic helpers were excluded.

### **2.2 SAMPLING METHOD**

A random sample of household telephone numbers was drawn from the telephone database maintained by the contractor, which consisted of about 2.0 million residential telephone numbers.

When contacting the sampled households, if there was more than one eligible respondent, the target respondent was randomly selected by means of the “last birthday” random selection method (i.e., the household member who had his/her birthday the soonest was selected). Only one eligible member was interviewed per selected household, no replacement sample was allowed.

### **2.3 QUESTIONNAIRE DESIGN**

The questionnaire covered the following areas:

- knowledge on breastfeeding;
- experience on advertisement and promotion of breastfeeding;
- experience on advertisement and promotion of formula milk for infant and young children;
- experience and view on breastfeeding in public place;
- experience and view on breastfeeding in workplace;
- view on implementing breastfeeding friendly measures in public place and workplace; and
- demographic information of respondents.

The questionnaire is appended in Appendix for reference

## 2.4 PILOT SURVEY

A pilot survey of 50 successful interviews was conducted during 29 May to 3 June 2015 before the actual execution of the fieldwork. The pilot survey tested the logistics and the applicability, and no major difficulty was encountered. The average interview time was 11 minutes and some questions were fine-tuned. The enumerated respondents in the pilot test were not counted in the main survey.

## 2.5 SAMPLE SIZE

2 007 persons were successfully interviewed for the survey. Based on the sample size achieved for the survey, the margin of error for the sample estimates and the true values is about  $\pm 2.19\%$  at 95% confidence level. For example, 78.7% of the respondents reported that they accepted women breastfeeding near the respondents in public places, and then the conservative 95% confidence interval for the true percentage of the population falls between  $78.7\% \pm 1.79\%$ , i.e. 76.9% and 80.5%.

The desired degree of precision is calculated by the following formula:

$$d = t \times \text{Sqrt} \left[ \frac{N - n}{N - 1} \right] \times \text{Sqrt} \left[ \frac{PQ}{n} \right]$$

where

N = population size

n = sample size

P = population proportion

Q = (1 – P)

t = abscissa of the normal curve (= 1.96 for 95% confidence level)

## 2.6 FIELDWORK

Prior to the start of the survey, all interviewers were trained in a standardised approach and a detailed briefing about the survey was given by the project coordinator. The interviews were conducted by well-trained and experienced interviewers who are fluent in Cantonese, Putonghua and English. Before each interview, respondents were informed about the purpose of the survey. They were reassured that all the information provided would be kept anonymous and in strict confidence.

The survey was conducted through Computer Assisted Telephone Interview (CATI). The fieldwork was conducted between 12<sup>th</sup> June and 24<sup>th</sup> July 2015 (during 6:00pm – 10:00pm on Monday to Friday; and 2:00pm – 10:00pm on Saturdays / Sundays). The interviewers

made at least 6 calls at different times of the day (at least twice in the evening) and on different days of the week to contact the sampled household before classifying it as a non-contact case.

## 2.7 RESPONSE RATE

A total of 9 000 household telephone numbers were initially drawn from the database and 1 931 ineligible cases were found. After excluding the ineligible cases, 2 007 persons aged 18 or above were successfully interviewed, constituting a response rate of 30.4%. The record of the telephone numbers dialled is summarised below:

**Table 2.7: Status of the telephone numbers attempted**

	No. of case
Total number of telephone calls attempted	<b>9 000</b>
(A) Ineligible cases	<b>1 931</b>
(a) Valid working telephone numbers:	<b>314</b>
(i) Claimed wrong number	71
(ii) Language problem	46
(iii) Non-residential line	197
(iv) No target respondent in the sampled household	0
(b) Invalid telephone numbers:	<b>1 617</b>
(i) Fax / data line	178
(ii) Non-working / out of service number	1 439
(B) Eligible cases	<b>2 628</b>
(a) Successfully completed interview	<b>2 007</b>
(b) Unsuccessful cases:	<b>621</b>
(i) Mid-way termination case	49
(ii) Eligible person non-contact case	24
(iii) Refusal case	548
(C) Cases with unknown eligibility status	<b>4 441</b>
(a) Answering machine	197
(b) Busy line	974
(c) Call blocking / password needed	43
(d) Immediate disconnection	22
(e) No answer	3 205
Response rate {B(a) / [B + C*B / (A(a)+B)] * 100%}	30.4%

## 2.8 WEIGHTING

There are some differences in the proportions of gender and age when compared with the Hong Kong population data from the Census and Statistics Department (C&SD) for end-2014. The proportion of respondents among the age group of 30 – 39 was slightly lower

than the population, while the proportion of respondents among the age group of 50 – 59 was slightly higher.

(Ref.: Table 2.8a)

In view of the demographic differences between this sample and the population, data collected from the survey were adjusted to align with the gender-age distribution of population (based on the population data in end-2014 issued by the C&SD) so that findings of the survey were representative of the opinions / views of the whole population aged 18 or above in Hong Kong.

(Ref.: Table 2.8b)

**Table 2.8a: Comparison of the gender and age profile of the respondents in this survey and the Hong Kong population**

	Respondents in this survey			Hong Kong population in end-2014		
	Male (% of total)	Female (% of total)	Total (% of total)	Male (% of total)	Female (% of total)	Total (% of total)
<b>Age (Years)</b>						
18 – 29	8.2	8.0	16.1	8.2	9.3	17.5
30 – 39	6.4	9.3	15.7	7.4	11.0	18.3
40 – 49	6.5	12.1	18.6	7.9	10.8	18.7
50 – 59	10.4	12.2	22.6	9.7	10.6	20.3
60 or above	13.5	13.4	26.9	12.0	13.2	25.2
<b>Total</b>	<b>45.0</b>	<b>55.0</b>	<b>100.0</b>	<b>45.2</b>	<b>54.8</b>	<b>100.0</b>

**Table 2.8b: Weighting factors of the respective gender and age profile of the respondents in this survey**

	Male	Female
<b>Age (Years)</b>		
18 – 29	1.008502	1.165858
30 – 39	1.148950	1.176037
40 – 49	1.220503	0.889618
50 – 59	0.933870	0.864582
60 or above	0.886137	0.984936

## **2.9 QUALITY CONTROL**

All fieldwork supervisors and interviewers were thoroughly trained. They were briefed with the key objectives of the survey and the details of each question prior to the commencement of the fieldwork, and mock interviews were conducted during the training. All telephone interviews were conducted under the supervision of 2 fieldwork supervisors in the call centre. At least 15% of the completed interviews of each interviewer were randomly selected and checked for their quality by re-contacting the respondents. No quality issues were found.

## **2.10 STATISTICAL ANALYSIS**

Pearson Chi-Square Test and Kruskal-Wallis Test (KW test) were used for analysis. Chi-Square Test was used when both variables were nominal. KW test was employed when one variable was nominal and the other was ordinal. When conducting Chi-Square Test, only those where no more than 20% of the cells have expected values of less than 5 were included. Those who declared “don’t know”, “don’t remember”, “not applicable” and “refused to answer” were excluded from statistical testings. All statistical analysis were performed on weighted data (as mentioned in section 2.8) using SPSS for Windows version 13.0 and a p-value < 0.05 was taken to indicate a level of statistical significance.

### **3 FINDINGS OF THE SURVEY**

#### **3.1 RESPONDENT PROFILE**

##### Gender and age

Overall, 54.8% were female, and the age group 60 or above constituted 25.2%.

##### Educational attainment

69.1% of the respondents attained upper secondary or above, and 37.8% attained tertiary or above.

##### Presence of a child in the household who was breastfed

11.1% of the respondents reported that they had children in the household who were breastfed.

##### Employment status

53.0% of the respondents were employed persons. Relatively more were working as clerk / clerical worker (15.5%) and sales service worker (11.2%).

##### Income

28.6% of the respondents had no monthly personal income while 6.8% had income of \$40,000 or above. 3.1% reported no monthly household income while 26.4% reported monthly household income of \$40,000 or above.

*(Ref.: Table 3.1)*

**Table 3.1: Demographic Information**

	n	%
<b>Gender</b>		
Male	908	45.2
Female	1 099	54.8
<b>Age (Years)</b>		
18 – 29	352	17.5
30 – 39	368	18.3
40 – 49	375	18.7
50 – 59	407	20.3
60 or above	505	25.2
<b>Educational attainment</b>		
Primary or below	286	14.3
Lower secondary	320	16.0
Upper secondary / matriculation	627	31.3
Tertiary or above	758	37.8
Refused to answer	15	0.8
<b>Presence of a child in the household who was breastfed</b>		
Yes	222	11.1
No	1 785	88.9
<b>Employment status</b>		
Employed person	1 063	53.0
Management level	162	8.1
Professional	158	7.9
Clerk / clerical worker	311	15.5
Sales service worker	225	11.2
Skilled / manual labour	189	9.4
Refused to answer	18	0.9
Not employed person	943	47.0
Student	134	6.7
Home-maker	285	14.2
Retired person	468	23.3
Unemployed person	52	2.6
Others	5	0.2
Refused to answer	1	**
Base: All respondents [Ref.: X1, X2, X3, X4a & b, X5a & b]	2007	100.0

\*\* Less than 0.05%.

**Table 3.1: Demographic Information (cont')**

	n	%
<b>Monthly personal income</b>		
No income	574	28.6
\$9,999 or below	405	20.2
\$10,000 - \$19,999	409	20.4
\$20,000 - \$39,999	362	18.1
\$40,000 or above	136	6.8
Refused to answer	121	6.0
<b>Monthly household income</b>		
No income	62	3.1
\$9,999 or below	174	8.7
\$10,000 - \$19,999	242	12.1
\$20,000 - \$39,999	563	28.0
\$40,000 or above	530	26.4
Don't know / refused to answer	436	21.7
Base: All respondents [Ref.: X6 & X7]	2007	100.0



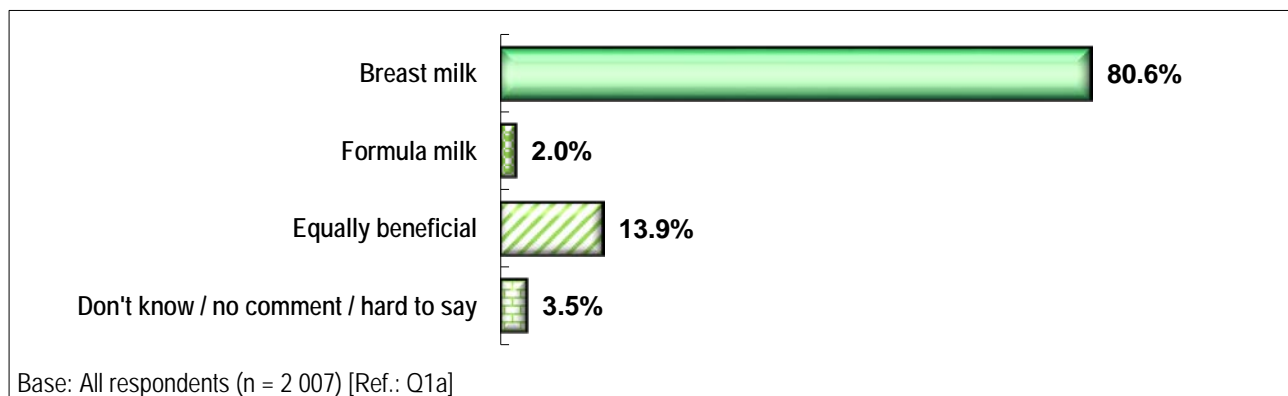
### 3.2 KNOWLEDGE ON BREASTFEEDING

#### 3.2.1 Breast milk or formula milk is more beneficial to the health of baby

Of all the respondents, the majority (80.6%) indicated that breast milk is more beneficial to the health of baby. 2.0% indicated that formula milk is more beneficial, and 13.9% indicated that both are equally beneficial.

(Ref.: Figure 3.2.1)

**Figure 3.2.1: Breast milk or formula milk is more beneficial to the health of baby**

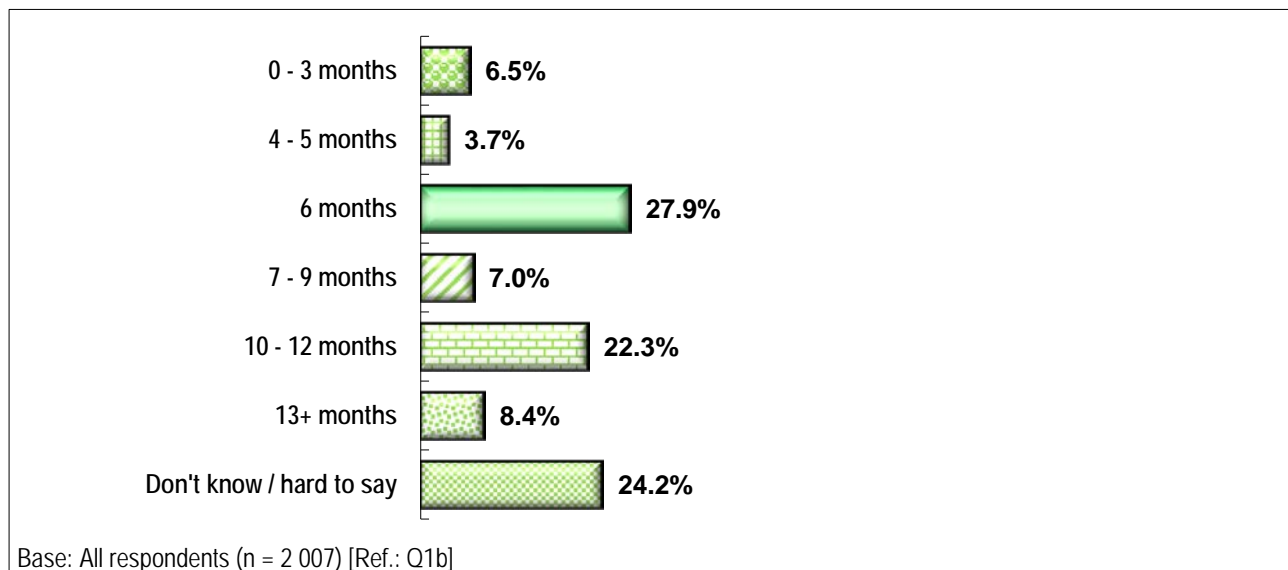


### 3.2.2 Duration of exclusive breastfeeding

WHO recommends that babies should be exclusively breastfed for the first 6 months of life and should continue breastfeeding up to 2 years of age or beyond. Only 27.9% of the respondents knew that baby should be exclusively breastfed for 6 months.

(Ref.: Figure 3.2.2)

**Figure 3.2.2: Duration of exclusive breastfeeding**

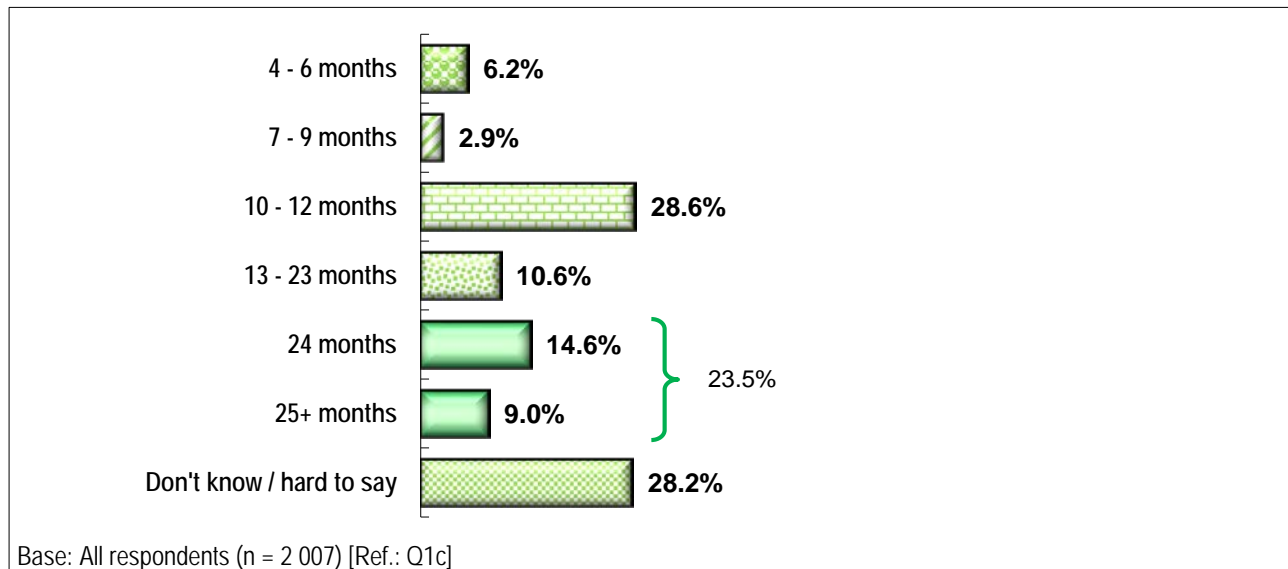


### 3.2.3 Continuation of breastfeeding after the introduction of solid food

Only 23.5% of the respondents knew that after the introduction of solid food, breastfeeding should be continued for 24 months or older.

(Ref.: Figure 3.2.3)

Figure 3.2.3: Continuation of breastfeeding after the introduction of solid food

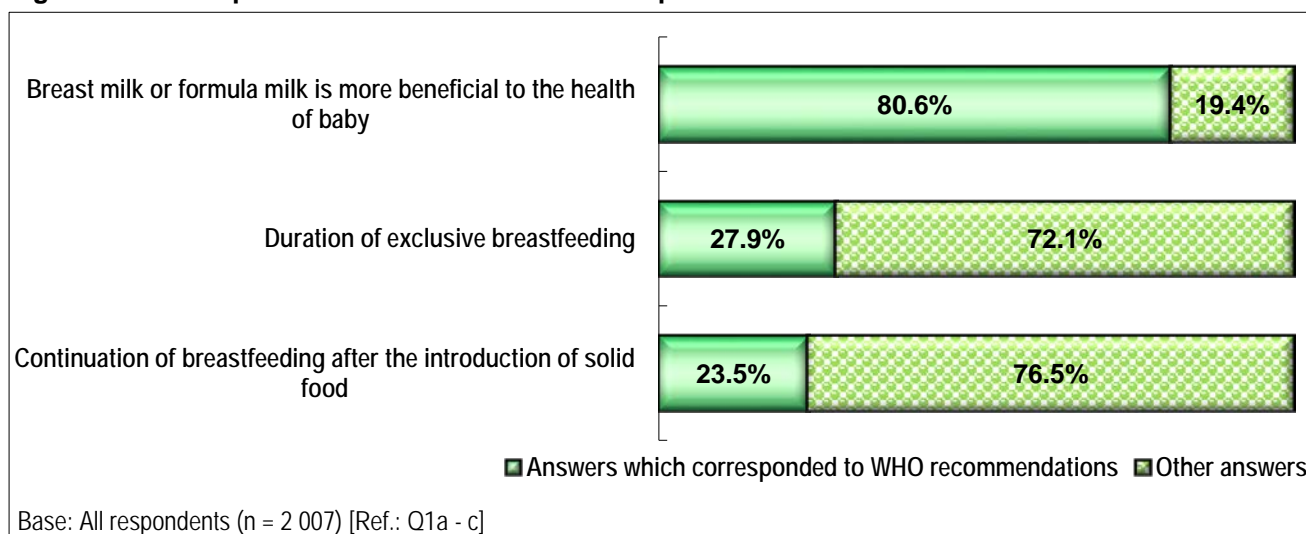


### 3.2.4 Overall breastfeeding knowledge

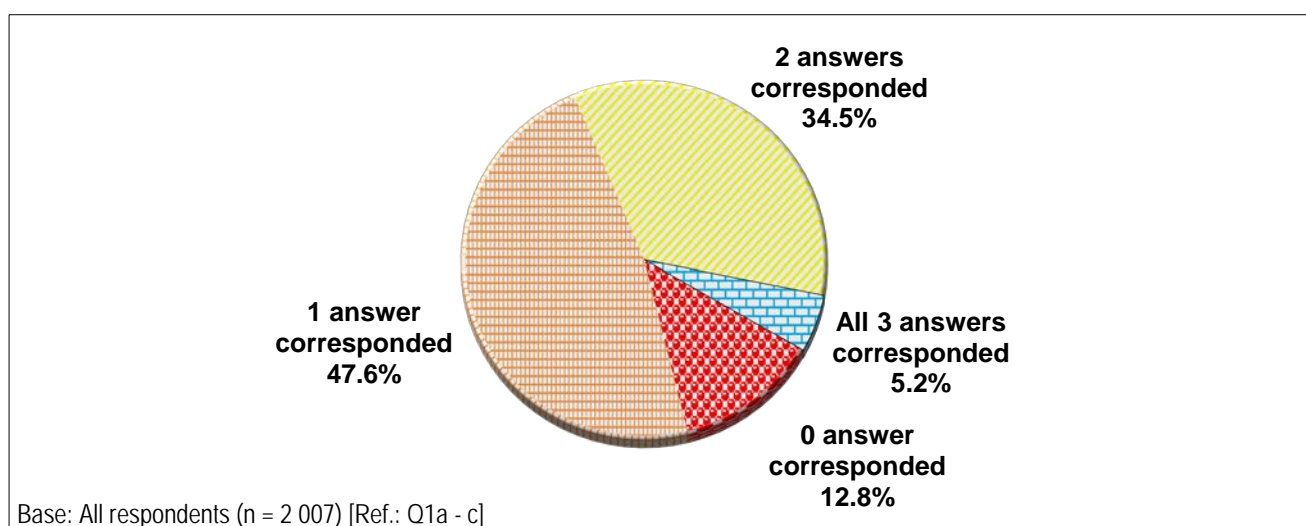
Although the majority of respondents (80.6%) indicated that breast milk is more beneficial to the health of baby, most of the respondents did not know the recommended duration of exclusively breastfeeding and the duration for continuing breastfeeding after the introduction of solid food. Only 5.2% were able to give all three answers which corresponded to the WHO’s recommendations on breastfeeding.

(Ref.: Figures 3.2.4a & b)

**Figure 3.2.4a: Proportions of answers which corresponded to WHO’s recommendations**



**Figure 3.2.4b: Overall breastfeeding knowledge – number of answers which corresponded to WHO’s recommendations**

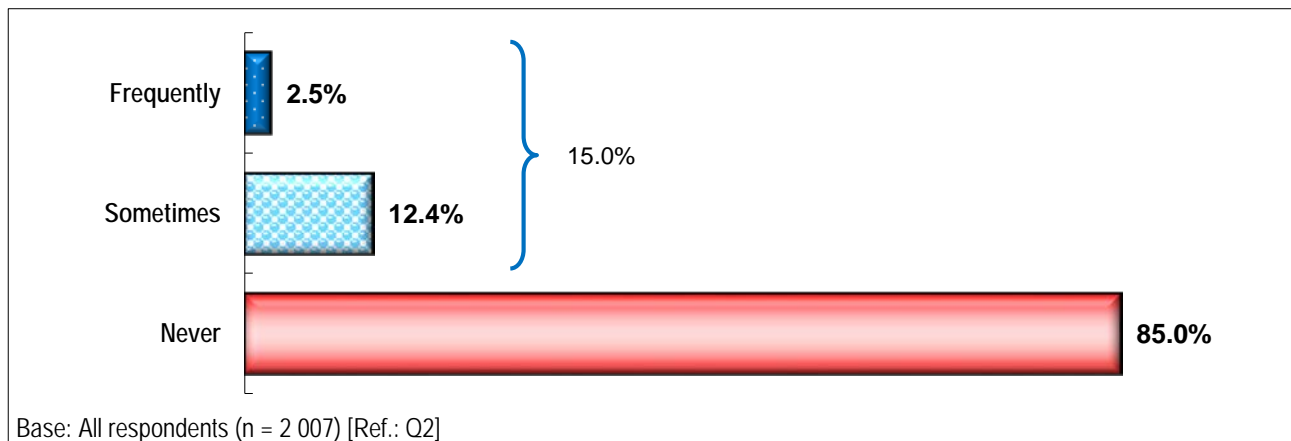


### 3.3 ADVERTISEMENT & PROMOTION ON BREASTFEEDING

Of all the respondents, 15.0% had frequently / sometimes encountered promotional messages about breastfeeding or infant and young child feeding from DH in the past 3 months before enumeration.

(Ref.: Figure 3.3)

**Figure 3.3: Frequency of encountering promotional messages about breastfeeding or infant and young child feeding from DH in the past 3 months**



Among those who had encountered promotional messages from DH, the commonest channel was electronic media (including TV, radio) (71.2%), followed by poster / leaflet (e.g. in clinic, hospital, etc.) (19.2%) and print media (including newspapers and magazines) (14.7%).

The key promotional message that respondents could recall was “breastfeeding benefits the health of mothers and babies” (77.3%). Some mentioned the messages of “promoting employers and public venue to provide places for breastfeeding / expressing breast milk” (9.9%) and “breastfeeding enhances mother-baby bonding” (8.8%).

(Ref.: Tables 3.3a & b)

**Table 3.3a: Channels of encountering promotional messages about breastfeeding or infant and young child feeding from DH**

	%
Electronic media (incl. TV, radio)	71.2
Poster / leaflet (e.g. in clinic, hospital, etc.)	19.2
Print media (incl. newspapers, magazines)	14.7
Medical institutions / medical staff	9.1
Internet (incl. YouTube, websites)	6.6
Public transport	4.5
Others	1.2
Can't remember	0.3 <sup>^</sup>

Base: Those who had encountered promotional messages about breastfeeding or infant and young child feeding from DH in the past 3 months (n = 300) [Ref.: Q3]

Note: Multiple answers were allowed.

<sup>^</sup>Answer(s) given by 3 respondents or below (i.e.  $n \leq 3$ ).

**Table 3.3b: The promotional messages about breastfeeding or infant and young child feeding which could be recalled**

	%
Breastfeeding benefits the health of mothers and babies	77.3
Promoting employers and public venue to provide places for breastfeeding / expressing breast milk	9.9
Breastfeeding enhances mother-baby bonding	8.8
Knowledge about breastfeeding	0.4 <sup>^</sup>
Can't remember	11.0

Base: Those who had encountered promotional messages about breastfeeding or infant and young child feeding from DH in the past 3 months (n = 300) [Ref.: Q4]

Note: Multiple answers were allowed.

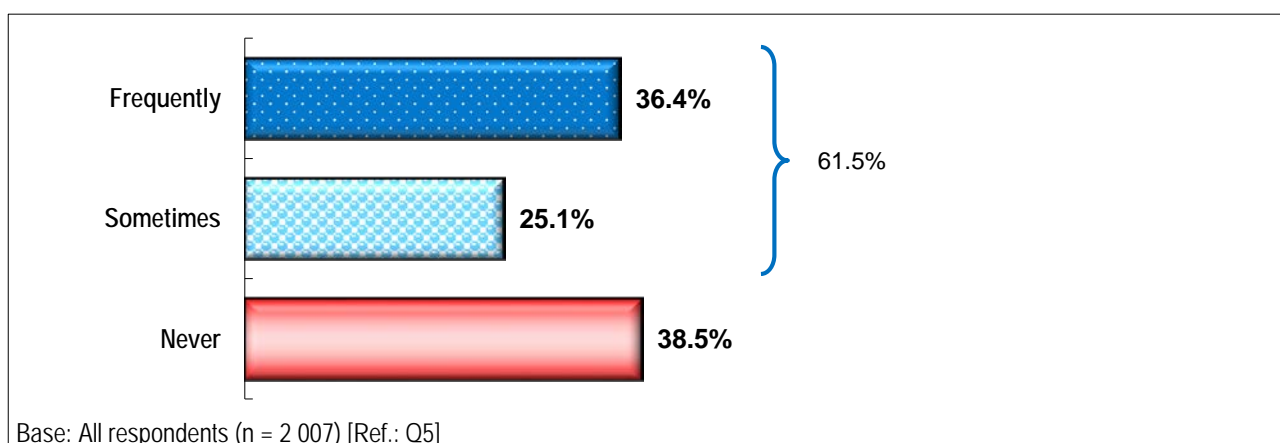
<sup>^</sup>Answer(s) given by 3 respondents or below (i.e.  $n \leq 3$ ).

### 3.4 ADVERTISEMENT & PROMOTION OF FORMULA MILK

61.5% of the respondents had frequently / sometimes encountered promotional messages about formula milk for infants and young children in the past 3 months before enumeration. Among them, the vast majority encountered the messages through electronic media (including TV, radio) (94.9%).

(Ref.: Figure 3.4a & Table 3.4)

**Figure 3.4a: Frequency of encountering promotional messages about formula milk for infants and young children in the past 3 months**



**Table 3.4: Channels of encountering the promotional messages about formula milk for infants and young children**

	%
Electronic media (incl. TV, radio)	94.9
Print media (incl. newspapers, magazines)	23.4
Internet (incl. websites of different brands, social media, forum, electronic advertisements or email)	10.1
Retail outlet (incl. promotion booth in supermarket / department store) and baby expo	9.5
Public transport	7.2
Poster / leaflet (e.g. in clinic, hospital, etc.)	6.0
Outdoor billboard / TV	2.3
Direct mail (e.g. newsletter of mothers' club)	1.1
Others	0.3 <sup>^</sup>

Base: Those who had encountered promotional messages about formula milk for infants and young children in the past 3 months (n = 1 234) [Ref.: Q6]

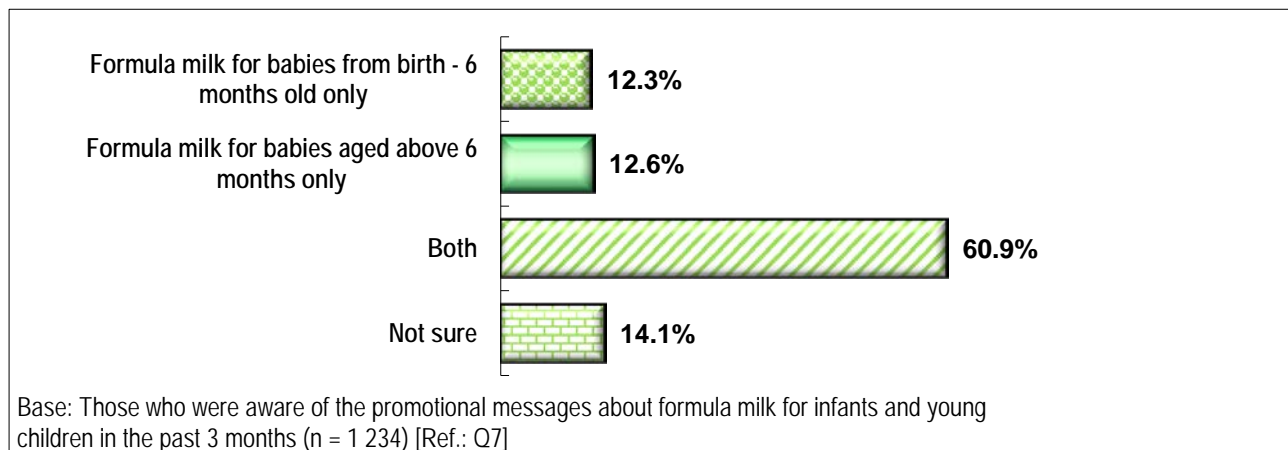
Note: Multiple answers were allowed.

<sup>^</sup>Answer(s) given by 3 respondents or below (i.e. n ≤ 3).

Of those who had encountered promotional messages, 12.3% perceived that the messages were promoting formula milk for babies from birth to 6 months old (infant formula) only, and 12.6% perceived that they were promoting formula milk for babies above 6 months old (follow-up formula) only. 60.9% perceived that the messages were promoting both infant and follow-up formulae. Another 14.1% were not sure about the target age range of formula milk that was being promoted / advertised.

(Ref.: Figure 3.4b)

**Figure 3.4b: Perception on the age range of formula milk promoted / advertised**





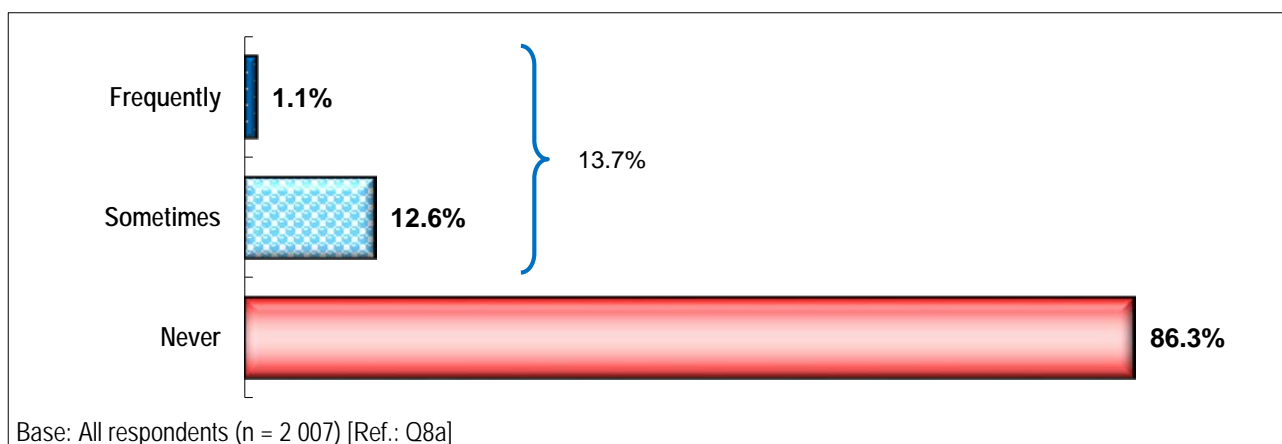
### 3.5 BREASTFEEDING IN PUBLIC PLACE

#### 3.5.1 Experience of encountering breastfeeding mothers in public places

13.7% of the respondents had encountered breastfeeding mothers in public places in the past 3 months before enumeration. Common places for such encounter included shopping malls (48.9%), restaurants (35.3%) and parks / children's playgrounds (17.8%).

(Ref.: Figure 3.5.1a & Table 3.5.1)

**Figure 3.5.1a: Frequency of encountering breastfeeding mothers in public places in the past 3 months**



**Table 3.5.1: Places of encountering breastfeeding mothers in public places**

	%
Shopping mall	48.9
Restaurant	35.3
Parks / children's playground	17.8
Public transport carrier (e.g. on bus, train compartment, ferry)	10.2
Waiting area of hospital or clinic	5.1
Public transport station (e.g. railway platform)	3.0
Others	3.8

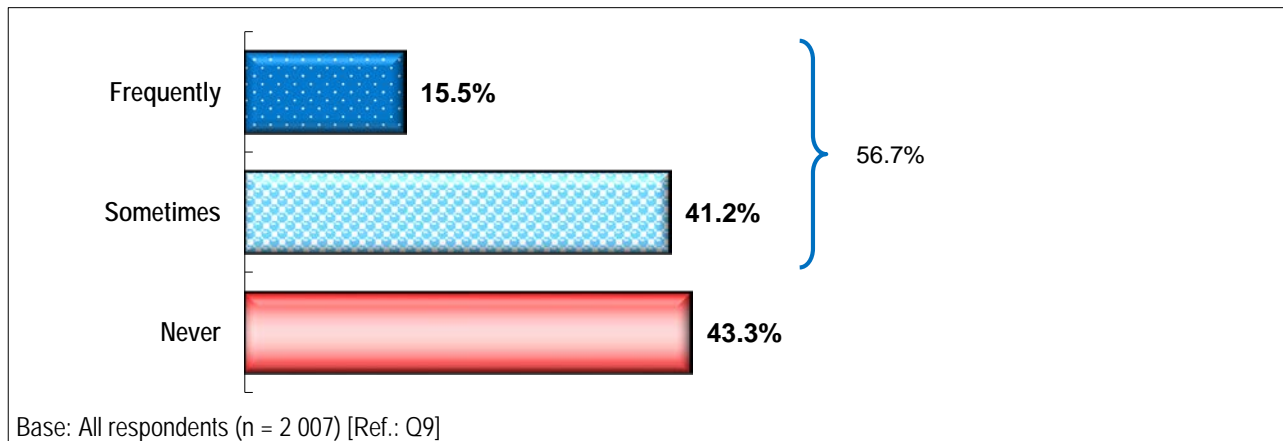
Base: Those who encountered breastfeeding mothers in public places in the past 3 months (n = 275) [Ref.: Q8b]

Note: Multiple answers were allowed.

56.7% of the respondents reported that they had encountered babies being fed with bottles in public places in the past 3 months before enumeration.

(Ref.: Figure 3.5.1b)

**Figure 3.5.1b: Frequency of encountering babies being fed with bottles in public places in the past 3 months**



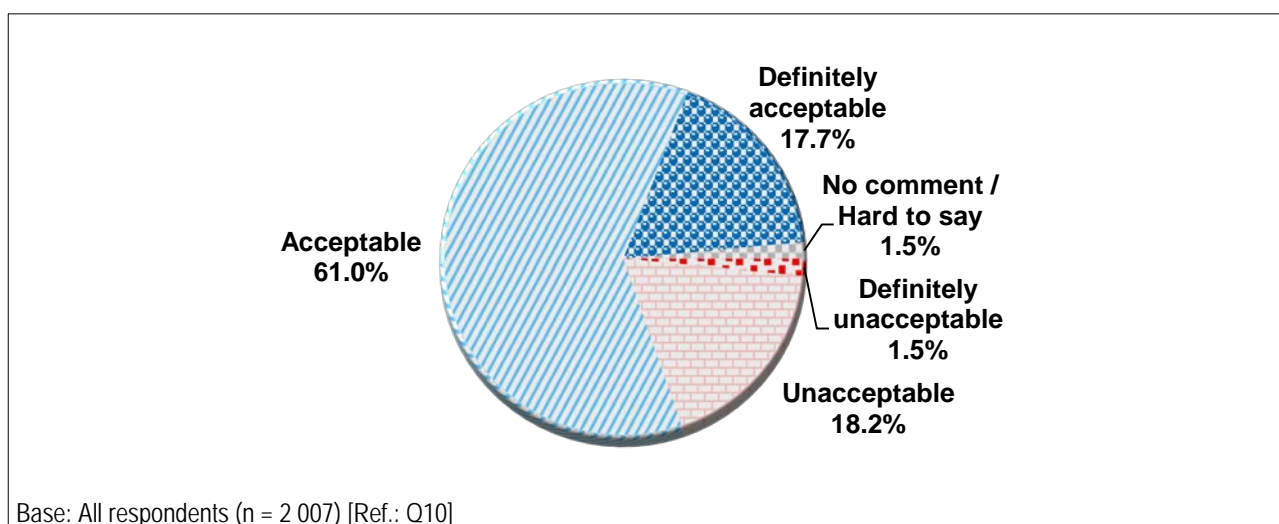
### 3.5.2 Acceptance of women breastfeeding near the respondents in public places

78.7% of the respondents expressed that it was definitely acceptable (17.7%) / acceptable (61.0%) to have women breastfeeding near them in public places. Most of them stated that it was because “breastfeeding is natural” (66.0%). Some said that “mothers / babies have the right to breastfeed / being breastfed” (25.3%), “breastfeeding benefits the health of mothers and babies” (15.1%) and “breastfeeding mothers did not disturb anyone” (13.5%).

Conversely, 19.7% expressed that it was definitely unacceptable (1.5%) / unacceptable (18.2%). The main reason cited was “it makes me / other people feel embarrassed” (60.8%), followed by “breastfeeding in public place is an indecent exposure” (41.2%) and “mothers should breastfeed in baby care room or other places” (24.0%).

(Ref.: Figure 3.5.2, 3.5.2a & b)

**Figure 3.5.2: Acceptance of women breastfeeding near the respondents in public place**



**Table 3.5.2a: Reasons for accepting breastfeeding in public places**

	%
Breastfeeding is natural	66.0
Mothers / babies have the right of breastfeeding / being breastfed	25.3
Breastfeeding benefits the health of mothers and babies	15.1
Breastfeeding mothers did not disturb anyone	13.5

Base: Those who expressed breastfeeding in public places as definitely acceptable / acceptable (n = 1 580) [Ref.: Q11]

Note: Multiple answers were allowed.

**Table 3.5.2b: Reasons for not accepting breastfeeding in public places**

	%
It makes me / other people feel embarrassed	60.8
Breastfeeding in public place is indecent	41.2
Mothers should breastfeed in baby care room or other places	24.0
Others	1.6

Base: Those who expressed breastfeeding in public places as definitely unacceptable / unacceptable (n = 396) [Ref.: Q12]

Note: Multiple answers were allowed.

### 3.5.3 Agreement on implementing breastfeeding friendly measures in public venue

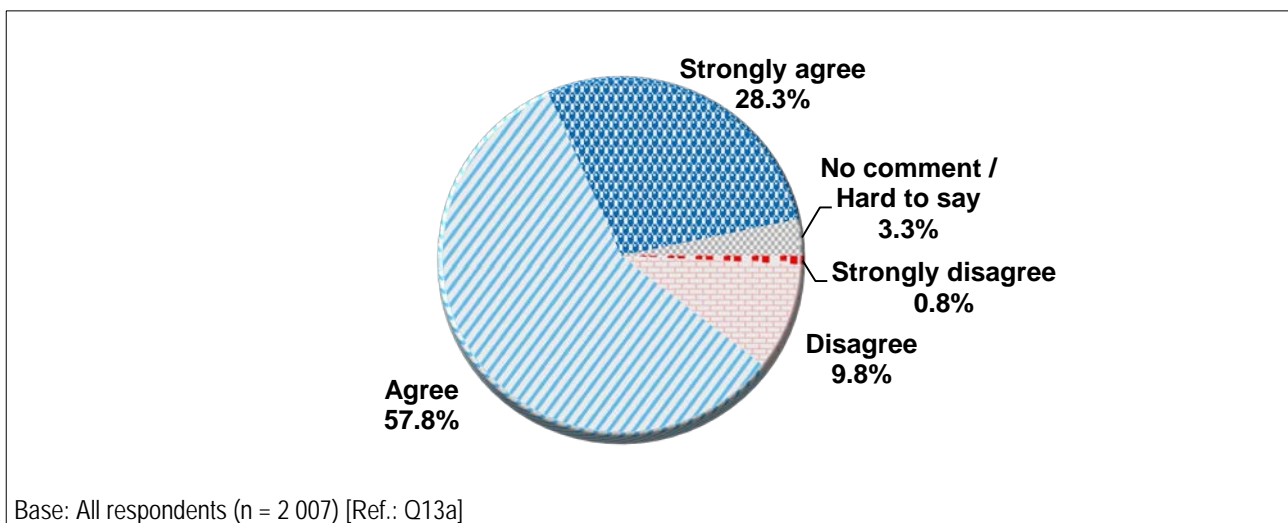
Respondents were asked whether they agreed if a public venue should implement the following breastfeeding friendly measures:

- A notice which states that mothers are welcome to breastfeed anytime and anywhere in the venue;
- Staff would not disturb a breastfeeding mother; and
- Staff are happy to help breastfeeding mothers in need (such as explaining to other customers when necessary).

It was found that the majority (86.1%) of respondents strongly agreed (28.3%) / agreed (57.8%) on implementing these breastfeeding friendly measures in public venue and 10.6% strongly disagreed (0.8%) / disagreed (9.8%).

(Ref.: Figure 3.5.3)

**Figure 3.5.3: Agreement on implementing breastfeeding friendly measures in public venue**



When asked about the reasons for their agreement, 36.1% stated that these measures could support breastfeeding effectively. Others agreed with the breastfeeding friendly measures because they opined that breastfeeding is natural (30.8%), and they understood the mothers' / babies' needs in respect to breastfeeding (25.0%).

On the other hand, among those who disagreed to implement breastfeeding friendly measures in public venue, the common reasons cited included “mothers should breastfeed in baby care room or other places” (46.2%), “breastfeeding makes other people feel embarrassed” (44.1%) and “breastfeeding in public place is indecent” (38.6%).

(Ref.: Tables 3.5.3a & b)

**Table 3.5.3a: Reasons for agreement on implementing breastfeeding friendly measures in public venue**

	%
These measures support breastfeeding effectively (e.g. mothers would not feel embarrassed, convenient for mothers to breastfeed in public venue)	36.1
Breastfeeding is natural	30.8
I understand the mothers' / babies' needs in respect to breastfeeding	25.0
Breastfeeding benefits the health of mothers and babies	15.5
Mothers / babies have the right of breastfeeding / being breastfed	11.6
Breastfeeding mothers did not disturb anyone	7.9

Base: Those who strongly agreed / agreed on implementing breastfeeding friendly measures in public venue (n = 1 727)  
 [Ref.: Q13b]

Note: Multiple answers were allowed.

**Table 3.5.3b: Reasons for disagreement on implementing breastfeeding friendly measures in public venue**

	%
Mothers should breastfeed in baby care room or other places	46.2
Breastfeeding makes other people feel embarrassed	44.1
Breastfeeding in public place is indecent	38.6
Public places have no responsibility to support breastfeeding	7.1

Base: Those who strongly disagreed / disagreed on implementing breastfeeding friendly measures in public venue (n = 214)  
 [Ref.: Q13c]

Note: Multiple answers were allowed.

### 3.6 BREASTFEEDING IN WORKPLACE

#### 3.6.1 Implementation of breastfeeding friendly measures in workplace

Among the 1 063 employed persons, 18.6% reported that their employers had implemented one or more breastfeeding friendly measures in the workplace. These measures included lactation breaks for mothers to express milk during working hours (15.4%), place for milk expression (12.6%) and facilities for storing the expressed milk (14.2%). Only 9% reported that all three measures had been implemented in their workplace.

(Ref.: Table 3.6.1a)

**Table 3.6.1a: Implementation of breastfeeding friendly measures in workplace**

	n	%
<b>Any breastfeeding friendly measure</b>		
Yes	198	18.6
No	865	81.4
<b>Lactation break for mothers to express milk during working hours</b>		
Yes	164	15.4
No	775	72.9
Don't know	124	11.7
<b>Place for milk expression</b>		
Yes	134	12.6
No	849	79.9
Don't know	80	7.6
<b>Facilities for storing the expressed milk</b>		
Yes	151	14.2
No	836	78.7
Don't know	76	7.1
<b>ALL of the 3 breastfeeding friendly measures mentioned above</b>	96	9.0

Base: All employed persons (n = 1 063) [Ref.: Q17]

#### Lactation break

Among the 164 employed persons who reported that lactation breaks were allowed during working hours, more than half (52.0%) stated there was no limit on the number of lactation breaks per day. 32.0% were unsure of the number of lactation breaks which were allowed.

(Ref.: Table 3.6.1b)

**Table 3.6.1b: Number of lactation breaks which were allowed during a working day**

	%
1	1.8 <sup>^</sup>
2	9.3
3	3.8
4	0.5 <sup>^</sup>
5	0.7 <sup>^</sup>
Not limited	52.0
Don't know	32.0

Base: Employed persons who reported that lactation breaks were allowed during working hours (n = 164) [Ref.: Q17a(ii)]

<sup>^</sup>Answer(s) given by 3 respondents or below (i.e. n ≤ 3).

### Place for milk expression

Among the 134 employed persons who reported that a place for milk expression was provided, the majority (87.2%) stated that the place(s) was fixed. Common places for milk expression included a specific lactation room (26.9%), conference room (26.3%), store room (16.2%). 13.1% reported that washroom was provided for milk expression, although this was not recommended due to hygienic reason.

(Ref.: Tables 3.6.1c & d)

**Table 3.6.1c: Fixed place for milk expression**

	%
Yes	87.2
No	8.6
Don't know	4.2

Base: Those employed persons who reported a place for milk expression was provided in workplace (n = 134) [Ref.: Q17b(ii)]

**Table 3.6.1d: Type of room for milk expression**

	%
Lactation room provided by the employer	26.9
Conference room	26.3
Store room	16.2
Washroom	13.1
Pantry	10.2
Public baby care room near the workplace	8.5
Server room	1.4 <sup>^</sup>
Don't know	5.6

Base: Those employed persons who reported a place for milk expression was provided (n = 134) [Ref.: Q17b(iii)]

Note: Multiple answers were allowed.

<sup>^</sup>Answer(s) given by 3 respondents or below (i.e. n ≤ 3).

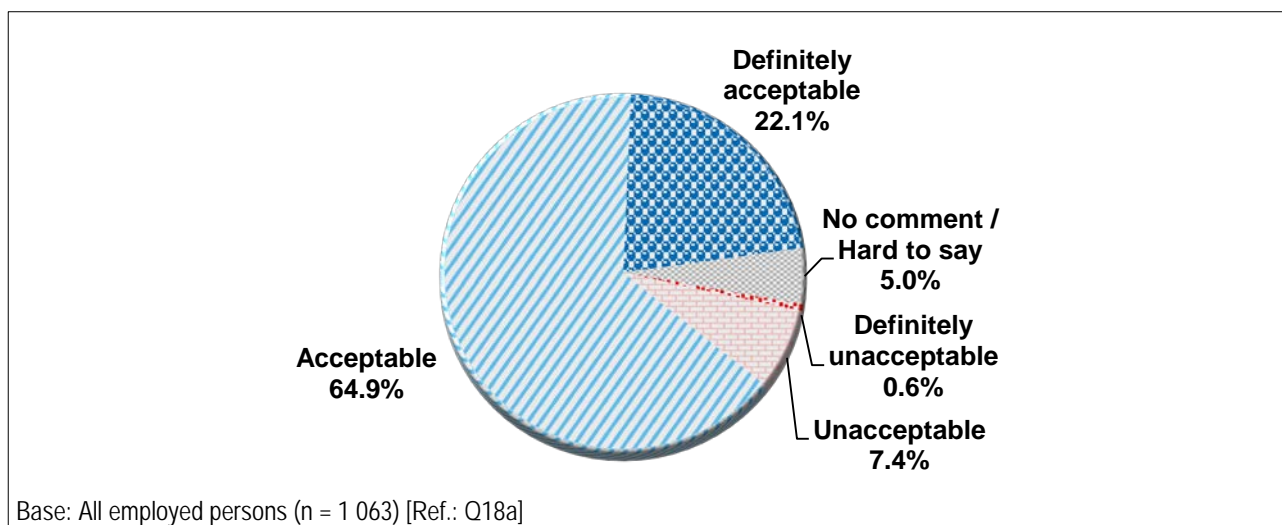


### 3.6.2 Acceptance of expressing breast milk in workplace

The employed persons were asked whether they considered acceptable for their colleagues to express breast milk during working hours. It was found that the majority of employed persons (87.0%) expressed that it was definitely acceptable (22.1%) / acceptable (64.9%). Conversely, only a small proportion (8.0%) expressed that it was definitely unacceptable (0.6%) / unacceptable (7.4%).

(Ref.: Figure 3.6.2)

**Figure 3.6.2: Acceptance of expressing breast milk in workplace**



Among the 925 employed persons who expressed milk expression in the workplace as acceptable, common reasons included “I understand my colleague’s needs in respect to breastfeeding” (46.9%), and “breastfeeding is natural” (28.1%).

On the other hand, among the 85 employed persons who did not accept milk expression in the workplace, the reasons cited were “it affects her work” (60.0%), and "personal matters should not be done within working hours" (47.0%).

(Ref.: Tables 3.6.2a & b)

**Table 3.6.2a: Reasons for accepting milk expression in workplace**

	%
I understand my colleague's needs in respect to breastfeeding	46.9
Breastfeeding is natural	28.1
Breastfeeding mothers did not disturb anyone	15.0
Breastfeeding benefits the health of mothers and babies	14.0
It does not affect her work	12.2
Mothers have the right of breastfeeding	10.9

Base: Those employed persons who considered milk expression in workplace as definitely acceptable / acceptable (n = 925)  
[Ref.: Q18b]

Note: Multiple answers were allowed.

**Table 3.6.2b: Reasons for not accepting milk expression in workplace**

	%
It affects her work	60.0
Personal matters should not be done within working hours	47.0

Base: Those employed persons who considered milk expression in workplace as definitely unacceptable / unacceptable (n = 85)  
[Ref.: Q18c]

Note: Multiple answers were allowed.

### 3.6.3 Agreement on implementing breastfeeding friendly measures in workplace

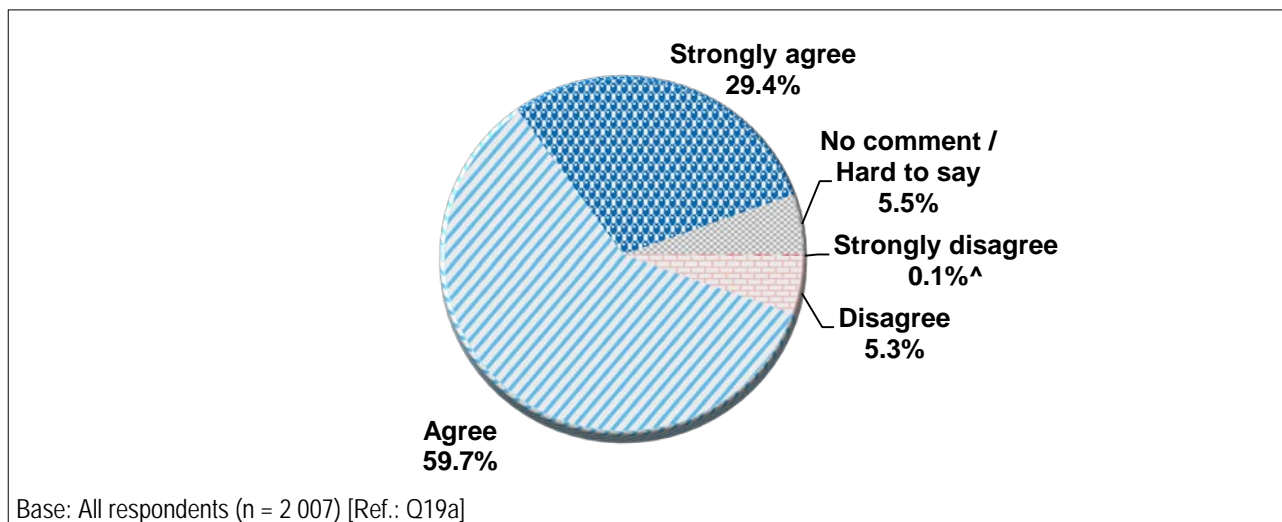
All of the 2 007 respondents were asked whether they agreed if an organisation should implement measures for working mothers to sustain breastfeeding, which include providing lactation breaks during working hours, a place for milk expression, and storing facilities for expressed milk, etc.

The vast majority of respondents (89.0%) strongly agreed (29.4%) / agreed (59.7%) on implementing these measures in workplace. Common reasons included “these measures support working mothers to sustain breastfeeding after returning from their maternity leave” (26.7%), “employers should respect the working mothers’ needs of breastfeeding” (24.8%) and “those who want to sustain breastfeeding can stay in the work force” (22.6%).

5.4% strongly disagreed (0.1%) / disagreed (5.3%), “personal matters should not be done within working hours” (40.6%) and “it affects the mother work” (34.5%) were the commonest reasons. Moreover, 5.5% had no comment.

(Ref.: Figure 3.6.3)

**Figure 3.6.3: Agreement on implementing breastfeeding friendly measures in workplace**



<sup>^</sup>Answer(s) given by 3 respondents or below (i.e. n ≤ 3).

Among the 110 respondents who disagreed, “personal matters should not be done within working hours” (40.6%) and “it affects the mother work” (34.5%) were the commonly mentioned reasons.

(Ref.: Tables 3.6.3a & b)

**Table 3.6.3a: Reasons for agreeing to implement breastfeeding friendly measures in workplace**

	%
These measures support working mothers to sustain breastfeeding after returning from their maternity leave	26.7
Employers should respect the working mothers' needs of breastfeeding	24.8
Those who want to sustain breastfeeding can stay in the work force	22.6
Breastfeeding benefits the health of mothers and babies	17.4
Breastfeeding is natural	17.4
Milk expression does not affect working mothers' work quality	7.7
Mothers have the right of breastfeeding	6.9
Working mothers who express milk did not disturb anyone	4.9
Improve the corporate image and demonstrate the corporate's social responsibility	1.7
These measures involve small amount of expenditure for employers	1.1

Base: Those who strongly agreed / agreed on implementing breastfeeding friendly measures in workplace (n = 1 787)  
[Ref.: Q19b]

Note: Multiple answers were allowed.

**Table 3.6.3b: Reasons for disagreeing to implement breastfeeding friendly measures in workplace**

	%
Personal matters should not be done within working hours	40.6
It affects her work	34.5
Hygienic problem incurred	15.9
It is unfair to other staff	11.9
Expressing breast milk in workplace makes other people feel embarrassed	11.0
Expression of breast milk in workplace is an indecent exposure	4.2

Base: Those who strongly disagreed / disagreed on implementing breastfeeding friendly measures in workplace (n = 110)  
[Ref.: Q19c]

Note: Multiple answers were allowed.

## **4 SUB-GROUP ANALYSIS**

In this section, further analyses were made to assess whether the knowledge and opinions on breastfeeding were different among respondents' different characteristics. Some responses have been regrouped into smaller number of categories in order to make the subgroup analyses more robust.

### **4.1 KNOWLEDGE ON BREASTFEEDING**

#### Breast milk or formula milk is more beneficial to the health of baby

Analysis showed that a significantly higher proportion of females (82.8%) and those with tertiary educational level or above (84.7%) were more likely to indicate that breast milk is more beneficial to baby than their counterparts.

*(Ref.: Table 4.1.1)*

**Table 4.1.1: Breast milk or formula milk is more beneficial to the health of baby**

	Base (n)	Breast milk (corresponded to WHO recommendation) (%)	Other answers (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Gender</b>					
Male	908	78.0	22.0	0.006	
Female	1 099	82.8	17.2		
<b>Age (Years)</b>					
18 – 29	352	82.0	18.0	0.157	
30 – 39	368	80.1	19.9		
40 – 49	375	77.5	22.5		
50 – 59	407	84.2	15.8		
60 or above	505	79.5	20.5		
<b>Educational attainment</b>					
Primary or below	286	77.3	22.7	0.008	
Lower secondary	320	80.5	19.5		
Upper secondary / matriculation	627	78.0	22.0		
Tertiary or above	758	84.7	15.3		
<b>Employment status</b>					
Employed person	1 063	81.0	19.0	0.683	
Not employed person	943	80.2	19.8		
<b>Monthly personal income</b>					
No income	574	80.1	19.9	0.259	
\$9,999 or below	405	78.5	21.5		
\$10,000 - \$19,999	409	82.0	18.0		
\$20,000 - \$39,999	362	82.6	17.4		
\$40,000 or above	136	85.0	15.0		
<b>Monthly household income</b>					
No income	62	78.3	21.7	0.801	
\$9,999 or below	174	81.1	18.9		
\$10,000 - \$19,999	242	78.8	21.2		
\$20,000 - \$39,999	563	81.7	18.3		
\$40,000 or above	530	82.1	17.9		
<b>Presence of a child in the household who was breastfed</b>					
Yes	222	82.8	17.2	0.373	
No	1 785	80.4	19.6		
<b>Overall</b>	<b>2 007</b>	<b>80.6</b>	<b>19.4</b>		

Base: All respondents [Ref.: Q1a]

### Duration of exclusive breastfeeding

Proportion of persons answering 6 months of exclusive breastfeeding as recommended by WHO was significantly higher among females (32.7%), those aged 40 – 49 (34.9%), those with monthly personal income \$40,000 or above (37.9%), those with monthly household income of \$40,000 or above (34.0%), and those having children in the household who were breastfed (34.4%).

*(Ref.: Table 4.1.2)*

**Table 4.1.2: Duration of exclusive breastfeeding**

	Base (n)	6 months (corresponded to WHO's recommendation) (%)	Other answers (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Gender</b>					
Male	908	22.2	77.8	<0.001	
Female	1 099	32.7	67.3		
<b>Age (Years)</b>					
18 – 29	352	19.4	80.6	<0.001	
30 – 39	368	34.0	66.0		
40 – 49	375	34.9	65.1		
50 – 59	407	27.5	72.5		
60 or above	505	24.6	75.4		
<b>Educational attainment</b>					
Primary or below	286	27.3	72.7	0.332	
Lower secondary	320	27.7	72.3		
Upper secondary / matriculation	627	25.7	74.3		
Tertiary or above	758	30.3	69.7		
<b>Employment status</b>					
Employed person	1 063	29.0	71.0	0.243	
Not employed person	943	26.7	73.3		
<b>Monthly personal income</b>					
No income	574	28.5	71.5	<0.001	
\$9,999 or below	405	19.6	80.4		
\$10,000 - \$19,999	409	28.9	71.1		
\$20,000 - \$39,999	362	32.2	67.8		
\$40,000 or above	136	37.9	62.1		
<b>Monthly household income</b>					
No income	62	22.5	77.5	0.020	
\$9,999 or below	174	28.6	71.5		
\$10,000 - \$19,999	242	23.5	76.5		
\$20,000 - \$39,999	563	28.6	71.4		
\$40,000 or above	530	34.0	66.0		
<b>Presence of a child in the household who was breastfed</b>					
Yes	222	34.4	65.6	0.020	
No	1 785	27.1	72.9		
<b>Overall</b>	<b>2 007</b>	<b>27.9</b>	<b>72.1</b>		

Base: All respondents [Ref.: Q1b]



Continuation of breastfeeding after the introduction of solid food

The proportion of persons answering that children should continue to breastfeed till 24 months or older after introduction of solid food as recommendation by WHO was significantly higher among males (26.0%), those aged 30 – 39 (31.0%) and among the employed persons (27.6%), those with monthly personal income of \$20,000 - \$39,999 (31.4%), those having children in the household who were breastfed (33.1%), and those with higher educational attainment (ranged from 16.9% for those with primary level or below to 26.1% for those with tertiary level or above).

*(Ref.: Table 4.1.3)*

**Table 4.1.3: Continuation of breastfeeding after the introduction of solid food**

	Base (n)	24+ months (corresponded to WHO's recommendation) (%)	Other answers (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Gender</b>					
Male	908	26.0	74.0	0.019	
Female	1 099	21.5	78.5		
<b>Age (Years)</b>					
18 – 29	352	25.5	74.5	<0.001	
30 – 39	368	31.0	69.0		
40 – 49	375	26.1	73.9		
50 – 59	407	21.3	78.7		
60 or above	505	16.6	83.4		
<b>Educational attainment</b>					
Primary or below	286	16.9	83.1	0.004	
Lower secondary	320	19.3	80.7		
Upper secondary / matriculation	627	25.9	74.1		
Tertiary or above	758	26.1	73.9		
<b>Employment status</b>					
Employed person	1 063	27.6	72.4	<0.001	
Not employed person	943	19.0	81.0		
<b>Monthly personal income</b>					
No income	574	20.2	79.8	<0.001	
\$9,999 or below	405	15.5	84.5		
\$10,000 - \$19,999	409	28.7	71.3		
\$20,000 - \$39,999	362	31.4	68.6		
\$40,000 or above	136	30.1	69.9		
<b>Monthly household income</b>					
No income	62	22.3	77.7	0.076	
\$9,999 or below	174	21.5	78.5		
\$10,000 - \$19,999	242	20.1	79.9		
\$20,000 - \$39,999	563	27.9	72.1		
\$40,000 or above	530	28.9	71.1		
<b>Presence of a child in the household who was breastfed</b>					
Yes	222	33.1	66.9	<0.001	
No	1 785	22.3	77.7		
<b>Overall</b>	<b>2 007</b>	<b>23.5</b>	<b>76.5</b>		

Base: All respondents [Ref.: Q1c]

### Overall breastfeeding knowledge

The proportion of those who were able to give all 3 answers which corresponded to WHO's recommendation was significantly higher among females (5.4%), those aged 30 – 39 (9.2%), employed persons (6.4%), and those having children in the household who were breastfed (8.9%). Moreover, the higher the educational attainment, the higher the proportion of respondents who answered all 3 answers which corresponded to WHO's recommendation (ranged from 2.8% for those with primary level or below to 6.7% for those with tertiary level or above).

Those with lower personal income and household income were more likely to have poorer breastfeeding knowledge.

*(Ref.: Table 4.1.4)*

**Table 4.1.4: Overall breastfeeding knowledge – number of answers corresponded to WHO's recommendations**

	Base (n)	All 3 answers corresponded (%)	2 answers corresponded (%)	0 – 1 answer corresponded (%)	<i>p-value</i>	
					Chi-Square test	KW test
<b>Gender</b>						
Male	908	4.9	31.4	63.7	0.007	
Female	1 099	5.4	37.1	57.5		
<b>Age (Years)</b>						
18 – 29	352	5.2	28.5	66.3	<0.001	
30 – 39	368	9.2	39.6	57.1		
40 – 49	375	5.9	41.1	53.0		
50 – 59	407	3.2	36.6	60.2		
60 or above	505	3.3	28.4	68.3		
<b>Educational attainment</b>						
Primary or below	286	2.8	32.3	64.9	0.001	
Lower secondary	320	4.4	31.8	63.7		
Upper secondary / matriculation	627	4.9	33.1	62.0		
Tertiary or above	758	6.7	37.8	55.5		
<b>Employment status</b>						
Employed person	1 063	6.4	37.5	56.1	<0.001	
Not employed person	943	3.9	31.1	65.1		
<b>Monthly personal income</b>						
No income	574	4.3	33.3	62.4	<0.001	
\$9,999 or below	405	2.0	25.2	72.8		
\$10,000 - \$19,999	409	7.7	35.0	57.3		
\$20,000 - \$39,999	362	7.3	42.1	50.6		
\$40,000 or above	136	7.5	47.6	44.9		
<b>Monthly household income</b>						
No income	62	4.5 <sup>^</sup>	28.2	67.3	0.001	
\$9,999 or below	174	3.9	34.6	61.5		
\$10,000 - \$19,999	242	4.2	29.9	66.0		
\$20,000 - \$39,999	563	7.1	34.9	57.9		
\$40,000 or above	530	6.6	42.3	51.1		
<b>Presence of a child in the household who was breastfed</b>						
Yes	222	8.9	42.0	49.1	0.001	
No	1 785	4.7	33.6	61.7		
<b>Overall</b>	<b>2 007</b>	<b>5.2</b>	<b>34.5</b>	<b>60.3</b>		

Base: All respondents [Ref.: Q1a – c]

<sup>^</sup>Answer(s) given by 3 respondents or below (i.e.  $n \leq 3$ ).

## **4.2 BREASTFEEDING IN PUBLIC PLACE**

### Acceptance of women breastfeeding near the respondents in public places

Respondents who considered that it was acceptable to have women breastfeeding near them in public places were significantly more likely to be male (83.5%), aged 30 – 39 (86.9%), employed persons (82.1%), those having children in the household who were breastfed (86.8%), those who had better knowledge on breastfeeding (91.6%), those who had encountered breastfeeding promotional messages (85.5%), and those who had encountered breastfeeding mothers in public places (90%). Those with higher personal income and higher household income also were more likely to accept women breastfeeding them in public places.

*(Ref.: Table 4.2.1)*

**Table 4.2.1: Acceptance of women breastfeeding near the respondents in public places**

	Base (n)	Definitely acceptable / acceptable (%)	Definitely unacceptable / unacceptable (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Gender</b>					
Male	887	83.5	16.5	<0.001	
Female	1 089	77.1	22.9		
<b>Age (Years)</b>					
18 – 29	350	81.0	19.0	0.004	
30 – 39	366	86.9	13.1		
40 – 49	370	78.4	21.6		
50 – 59	399	78.6	21.4		
60 or above	491	76.3	23.7		
<b>Educational attainment</b>					
Primary or below	279	77.4	22.6	0.237	
Lower secondary	313	77.9	22.1		
Upper secondary / matriculation	621	79.1	20.9		
Tertiary or above	749	82.6	17.4		
<b>Employment status</b>					
Employed person	1 052	82.1	17.9	0.010	
Not employed person	923	77.5	22.5		
<b>Monthly personal income</b>					
No income	564	78.0	22.0	0.021	
\$9,999 or below	395	75.9	24.1		
\$10,000 - \$19,999	405	82.6	17.4		
\$20,000 - \$39,999	359	84.4	15.6		
\$40,000 or above	135	84.6	15.4		
<b>Monthly household income</b>					
No income	57	83.8	16.2	0.036	
\$9,999 or below	172	72.1	27.9		
\$10,000 - \$19,999	234	79.4	20.6		
\$20,000 - \$39,999	561	81.5	18.5		
\$40,000 or above	523	83.8	16.2		
<b>Presence of a child in the household who was breastfed</b>					
Yes	220	86.8	13.2	0.008	
No	1 757	79.1	20.9		
<b>Overall</b>	<b>1 976</b>	<b>80.0</b>	<b>20.0</b>		

Base: All respondents (excl. "no comment / hard to say") [Ref.: Q10]

**Table 4.2.1: Acceptance of women breastfeeding near the respondents in public places (cont')**

	Base (n)	Definitely acceptable / acceptable (%)	Definitely unacceptable / unacceptable (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Knowledge level of breastfeeding – number of answers corresponded to WHO recommendations</b>				0.006	
All 3 answers corresponded	102	91.6	8.4		
2 answers corresponded	682	80.9	19.1		
0 – 1 answer corresponded	1 192	78.4	21.6		
<b>Whether encountered breastfeeding promotional messages</b>				0.010	
Yes	297	85.5	14.5		
No	1 679	79.0	21.0		
<b>Experience of encountering breastfeeding mothers in public places</b>				<0.001	
Yes	272	90.0	10.0		
No	1 705	78.4	21.6		
<b>Overall</b>	<b>1 976</b>	<b>80.0</b>	<b>20.0</b>		

Base: All respondents (excl. "no comment / hard to say") [Ref.: Q10]

**Agreement on implementing breastfeeding friendly measures in public venue**

Significantly higher proportion of males (90.6%), those aged 18-29 (93.3%), employed persons (90.4%), and those who accepted women breastfeeding near them (95.8%), reported they strongly agreed / agreed on implementing breastfeeding friendly measures in public venue.

(Ref.: Table 4.2.2)

**Table 4.2.2: Agreement on implementing breastfeeding friendly measures in public venue**

	Base (n)	Strongly agreed / agreed (%)	Strongly disagreed / disagreed (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Gender</b>					
Male	876	90.6	9.4	0.039	
Female	1 065	87.7	12.3		
<b>Age (Years)</b>					
18 – 29	350	93.3	6.7	0.002	
30 – 39	361	92.2	7.8		
40 – 49	366	87.9	12.1		
50 – 59	392	88.0	12.0		
60 or above	473	85.0	15.0		
<b>Educational attainment</b>					
Primary or below	263	86.2	13.8	0.211	
Lower secondary	304	87.1	12.9		
Upper secondary / matriculation	614	89.6	10.4		
Tertiary or above	747	90.5	9.5		
<b>Employment status</b>					
Employed person	1 038	90.4	9.6	0.036	
Not employed person	902	87.4	12.6		
<b>Knowledge level of breastfeeding – number of answers corresponded to WHO recommendations</b>					
All 3 answers corresponded	103	91.5	8.5	0.269	
2 answers corresponded	684	90.3	9.7		
0 – 1 answer corresponded	1 154	88.0	12.0		
<b>Whether encountered breastfeeding promotional messages</b>					
Yes	292	91.2	8.8	0.209	
No	1649	88.6	11.4		
<b>Acceptance of women breastfeeding near them in public places</b>					
Definitely acceptable / acceptable	1 538	95.8	4.2	<0.001	
Definitely unacceptable / unacceptable	378	60.9	39.1		
<b>Overall</b>	<b>1 941</b>	<b>89.0</b>	<b>11.0</b>		

Base: All respondents (excl. "no comment / hard to say") [Ref.: Q13a]



### 4.3 BREASTFEEDING IN WORKPLACE

#### Implementation of breastfeeding friendly measures in workplace

Significantly more respondents from office venue (22.7%) and workplaces with 50-99 employees (27.4%) reported that their workplace had implemented breastfeeding friendly measures.

(Ref.: Table 4.3.1)

**Table 4.3.1: Implementation of breastfeeding friendly measures in workplace**

	Base (n)	Yes (%)	No (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Workplace</b>					
Office	671	22.7	77.3	<0.001	
Shopping mall / shop	117	11.5	88.5		
Outdoor work	138	7.6	92.4		
Others	137	15.8	84.2		
<b>Size of establishment</b>					
1 – 9	213	7.6	92.4	<0.001	
10 – 49	291	14.1	85.9		
50 – 99	139	27.4	72.6		
100+	401	25.0	75.0		
<b>Overall</b>	<b>1 063</b>	<b>18.6</b>	<b>81.4</b>		

Base: All employed persons [Ref.: Q17a – d]

Acceptance of expressing breast milk in workplace

Respondents who had better knowledge of breastfeeding (100%), accepted women to be breastfeeding near them (95.8%), and whose employer had implemented breastfeeding friendly measures (97.1%), were significantly more likely to accept their colleagues expressing breast milk during working hours.

No significant association was found between the acceptance of colleague expressing breast milk in workplace and the respondents' demographics.

(Ref.: Table 4.3.2)

**Table 4.3.2: Acceptance of expressing breast milk in workplace**

	Base (n)	Definitely acceptable / acceptable (%)	Definitely unacceptable / unacceptable (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Gender</b>					
Male	527	92.2	7.8	0.436	
Female	482	90.9	9.1		
<b>Age (Years)</b>					
18 – 29	194	89.3	10.7	0.753	
30 – 39	270	92.7	7.3		
40 – 49	263	92.7	7.3		
50 – 59	233	90.7	9.3		
60 or above	50	92.7	7.3		
<b>Educational attainment</b>					
Primary or below	46	89.4	10.6	0.797	
Lower secondary	126	91.5	8.5		
Upper secondary / matriculation	334	90.6	9.4		
Tertiary or above	497	92.6	7.4		
<b>Working status</b>					
Employer	38	88.8	11.2	0.708	
Employee	850	91.9	8.1		
Self-employed person	121	90.2	9.8		
<b>Workplace</b>					
Office	652	92.8	7.2	0.161	
Shopping mall / shop	109	90.7	9.3		
Outdoor work	120	91.3	8.7		
Others	129	87.0	13.0		
<b>Size of establishment</b>					
1 – 9	194	92.2	7.8	0.459	
10 – 49	281	89.5	10.5		
50 – 99	131	93.4	6.6		
100+	388	92.3	7.7		
<b>Overall</b>	<b>1 010</b>	<b>91.6</b>	<b>8.4</b>		

Base: All employed persons (excl. "no comment / hard to say") [Ref.: Q18a]

**Table 4.3.2: Acceptance of expressing breast milk in workplace (cont')**

	Base (n)	Definitely acceptable / acceptable (%)	Definitely unacceptable / unacceptable (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Knowledge level of breastfeeding – number of answers corresponded to WHO recommendations</b>				0.037	
All 3 answers corresponded	66	100.0	-		
2 answers corresponded	383	90.5	9.5		
0 – 1 answer corresponded	561	91.3	8.7		
<b>Whether encountered breastfeeding promotional messages</b>				0.264	
Yes	175	93.9	6.1		
No	835	91.1	8.9		
<b>Acceptance of women breastfeeding near them in public places</b>				<0.001	
Definitely acceptable / acceptable	824	95.8	4.2		
Definitely unacceptable / unacceptable	179	72.8	27.2		
<b>Whether the employer implemented breastfeeding friendly measures</b>				0.002	
Yes	198	97.1	2.9		
No	812	90.2	9.8		
<b>Overall</b>	<b>1 010</b>	<b>91.6</b>	<b>8.4</b>		

Base: All employed persons (excl. "no comment / hard to say") [Ref.: Q18a]

Agreement on implementing breastfeeding friendly measures in workplace

Respondents who strongly agreed / agreed on implementing breastfeeding friendly measures in workplace were significantly more likely to have attained tertiary education level (96.2%) and be employed (95.4%).

Also, they were significantly more likely to have better knowledge of breastfeeding (99.1%) and better acceptance on women breastfeeding near them (96.5%).

*(Ref.: Table 4.3.3)*

**Table 4.3.3: Agreement on implementing breastfeeding friendly measures in workplace**

	Base (n)	Strongly agreed / agreed (%)	Strongly disagreed / disagreed (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Gender</b>					
Male	852	94.5	5.5	0.501	
Female	1 045	93.9	6.1		
<b>Age (Years)</b>					
18 – 29	343	94.5	5.5	0.065	
30 – 39	355	95.4	4.6		
40 – 49	363	95.6	4.4		
50 – 59	386	94.7	5.3		
60 or above	449	91.4	8.6		
<b>Educational attainment</b>					
Primary or below	253	89.3	10.7	<0.001	
Lower secondary	295	92.7	7.3		
Upper secondary / matriculation	604	94.7	5.3		
Tertiary or above	734	96.2	3.8		
<b>Employment status</b>					
Employed person	1 030	95.4	4.6	0.020	
Not employed person	866	92.8	7.2		
<b>Working status (among employed persons)</b>					
Employer	40	91.7	8.3 <sup>^</sup>	0.250	
Employee	856	95.9	4.1		
Self-employed person	132	92.9	7.1		
<b>Workplace (among employed persons)</b>					
Office	654	95.8	4.2	0.191	
Shopping mall / shop	113	96.7	3.3		
Outdoor work	132	95.3	4.7		
Others	131	91.9	8.1		
<b>Size of establishment (among employed persons)</b>					
1 – 9	206	94.2	5.8	0.161	
10 – 49	285	93.5	6.5		
50 – 99	134	95.9	4.1		
100+	389	97.0	3.0		
<b>Overall</b>	<b>1 897</b>	<b>94.2</b>	<b>5.8</b>		

Base: All respondents (excl. "no comment / hard to say") [Ref.: Q19a]

<sup>^</sup>Answer(s) given by 3 respondents or below (i.e.  $n \leq 3$ ).

**Table 4.3.3: Agreement on implementing breastfeeding friendly measures in workplace (cont')**

	Base (n)	Strongly agreed / agreed (%)	Strongly disagreed / disagreed (%)	<i>p-value</i>	
				Chi-Square test	KW test
<b>Knowledge level of breastfeeding – number of answers corresponded to WHO recommendations</b>				0.003	
All 3 answers corresponded	100	99.1	0.9 <sup>^</sup>		
2 answers corresponded	672	95.9	4.1		
0 – 1 answer corresponded	1 125	92.7	7.3		
<b>Acceptance of women breastfeeding near them in public places</b>				<0.001	
Definitely acceptable / acceptable	1 501	96.5	3.5		
Definitely unacceptable / unacceptable	370	85.1	14.9		

Base: All respondents (excl. "no comment / hard to say") [Ref.: Q19a]

<sup>^</sup>Answer(s) given by 3 respondents or below (i.e.  $n \leq 3$ ).

## 5 DISCUSSION

Although most respondents were aware of the superiority of breast milk over formula, there were 13.9% of the respondents who still perceived formula to be just as beneficial as breast milk. Awareness on the exclusivity and duration of breastfeeding as recommended by WHO was generally poor, particularly among the young adults (age 18 to 29) and the older (age 60 or above) groups. Public education on the optimal infant and young child feeding practices needs to be strengthened. Various forms of mass media should be utilised to reach a wide range of target audience.

A lot more respondents had encountered promotion or advertising concerning formula milk through a variety of channels as compared with breastfeeding in the past 3 months before enumeration, reflecting the multifaceted marketing strategies of formula milk in Hong Kong. For those who had encountered promotion or advertising concerning formula milk, most perceived that formula milk for babies from birth to 6 months old (infant formula) was also being marketed. In fact, the major manufacturers of formula milk had previously expressed that formula milk for babies from birth to 6 months old was not advertised or promoted to the general public in accordance with the International Code of marketing of breast-milk substitutes.<sup>11</sup> This finding about promotion and advertising is similar to other overseas' studies. An Australian study found that expectant mothers perceived toddler milk advertisements to be promoting a range of products including infant and follow-up formulae.<sup>12</sup> Another British study found that around 60% of mothers and expectant mothers thought the follow-up formula advertisement was promoting infant formula.<sup>13</sup> The infant and the follow-up formulae belonging to same brand have close resemblance in terms of packaging and labeling, which might lead to public perceiving that the promotion or advertising included infant formula as well. The marketing practices used to promote formula milk are of concern as they are considered to be contributory to exerting a negative influence on breastfeeding initiation, duration and exclusivity. There is a need to ensure parents and expectant parents receive unbiased information in order to make fully informed decisions on infant and young child feeding.

The survey found that most respondents considered breastfeeding in public places to be socially acceptable and supported the implementation of breastfeeding friendly measures. Addressing the needs and concerns of different stakeholders, for example, the management of shopping malls, restaurants and other public premises etc., and providing guidelines for them to implement breastfeeding friendly measures, including the training of staff to welcome and facilitate breastfeeding women, would help towards fostering a community that is conducive to breastfeeding.

A breastfeeding friendly workplace benefits the family, the employer and the society. Working mothers who breastfeed require the support of co-workers, supervisors and employers. Although the Government has taken the lead in adopting the breastfeeding friendly workplace policy in the majority of bureaux and departments and promoting it to the non-governmental organisations, the survey showed that breastfeeding friendly measures were not in place in the majority of the workplaces. Effort should be stepped up to promulgate the breastfeeding friendly workplace policy to different types of employers. As well as promoting and educating employers and employees on the benefits and ways of supporting breastfeeding, informing mothers to readily communicate their needs to their employers is also necessary.

Multiple factors influence the mothers' decision to breastfeed. Whilst the Government plays a leading role in protecting, promoting and supporting breastfeeding, joint efforts by various sectors are crucial in creating a supportive environment in the community.



## **6 LIMITATION OF THE STUDY**

6.1 This survey covered the land-based non-institutional population in Hong Kong, and the target respondents were contacted by using residential telephone numbers. The institutionalised persons and persons living in households without residential telephone numbers were excluded and the results cannot be generalised to these sub-populations.

6.2 Respondents were asked to recall their experience of encountering breastfeeding mothers in public places, the promotional messages about breastfeeding and formula milk. Although, the recall period was kept to within 3 months before the survey, it could still be subject to recall bias.

6.3 The response rate of the survey was low at around 30%, but comparable with other telephone surveys conducted by DH. However, the demographics of the non-respondents were unknown and hence, the characteristics between respondents and non-respondents could have been different.

6.4 Finally, for cross sectional study, any association found from the results cannot infer causal relationship.

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**APPENDIX**  
**- QUESTIONNAIRE -**

	Sup :	Case :
	Edit :	Check :

**Department of Health  
Public Perception Survey on Breastfeeding (2015)**

<b>RESTRICTED WHEN ENTERED WITH DATA ACCESSIBLE TO AUTHORIZED PERSONS ONLY</b>
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Tel. code: \_\_\_\_\_

Name of respondent: \_\_\_\_\_ Contact tel no.: \_\_\_\_\_

Interviewer no.: \_\_\_\_\_ Interview date: \_\_\_\_\_

Time started: \_\_\_\_\_ Time ended: \_\_\_\_\_

**Introduction:**

Hello! Our company has been commissioned by the Department of Health of the HKSAR Government to conduct an opinion survey on breastfeeding. My name is \_\_\_\_\_, and would like to conduct a short interview with you. The information you provide will be treated with strict confidentiality and will be used for data analysis only. Thank you for your co-operation.

Screening

S1. We wish to invite one of your household member to conduct the interview using a random selection method.

May I know how many members are there in your household, who are aged 18 or above? I mean those who live here at least 4 nights a week. Please exclude live-in domestic helpers.

Record the no. of person(s): \_\_\_\_\_ **[If more than 1, ask S2; if not, invite this member for interview.]**

S2. Among these \_\_\_\_\_ household members, may I know who has just passed the birthday?

(If the respondent does not understand: that means... today is the \_\_\_ of \_\_\_\_, so whose birthday is the last birthday?)

I am the one → **[Read out]** Thank you for your co-operation. **[Start the interview]**

Others → **[Read out]** I would like to conduct the interview with this member. Is he/she here? Can I talk to him/her? **[Repeat the introduction & start the interview]**

**[If the selected respondent is not at home or not available, interviewer should make appointment or call again later]** When should I call him/her again?

**[If the respondent refuses to conduct the interview, read out]** Your opinion is very important for the Department of Health. Our interview will only take a few minutes only. And don't worry, the information you provide will be treated with strict confidentiality and will be used for data analysis only.

## Main Questionnaire

### Advertisement & Promotion of Breastfeeding

**[Read out]** First, we'd like to know your view on feeding baby...

Q1.	<p>a. Based on what you know, is breastfeeding or formula milk feeding is more beneficial to the health of baby, or they are equally beneficial to the baby?</p> <table style="width: 100%; margin-left: 200px;"> <tr> <td style="text-align: right;">Breast milk</td> <td style="text-align: center;">1</td> </tr> <tr> <td style="text-align: right;">Formula milk</td> <td style="text-align: center;">2</td> </tr> <tr> <td style="text-align: right;">They are equally beneficial to baby</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: right;">Don't know / no comment / hard to say <b>[Do not read out]</b></td> <td style="text-align: center;">8</td> </tr> </table>	Breast milk	1	Formula milk	2	They are equally beneficial to baby	3	Don't know / no comment / hard to say <b>[Do not read out]</b>	8	<b>[SA]</b>	
Breast milk	1										
Formula milk	2										
They are equally beneficial to baby	3										
Don't know / no comment / hard to say <b>[Do not read out]</b>	8										
	<p>b. A baby should be put on exclusively breastfeeding without any formula milk or other supplementary feeding. Based on what you know, how long should the baby be exclusively breastfed for? At least till how many months old?</p> <p style="text-align: right;">_____ Month(s)</p> <p style="text-align: center;">Don't know / hard to say <b>[Do not read out]</b> 98</p>										
	<p>c. Based on what you know, when baby start having solid food, how old should the baby continue to have breast milk?</p> <p style="text-align: right;">_____ Year(s)old      _____ Month(s)</p> <p style="text-align: center;">Don't know / hard to say <b>[Do not read out]</b> 98</p>										

<p>Q2. In the past 3 months, did you encounter any promotional messages about breastfeeding or infant and young child feeding from the <b>Department of Health</b>?  <b>[If yes]</b> How often did you encounter the messages?</p> <p style="text-align: right;">Frequently 1  Sometimes 2  None 9</p>	<p><b>[SA]</b></p>	<p>↳ Ask Q3  → Skip to Q5</p>
<p>Q3. From which channel(s) did you encounter these promotional messages? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other channels?</p> <p style="text-align: right;">Electronic media (incl. TV, radio) 01  Press media (incl. newspapers, magazines) 02  Internet (incl. YouTube, websites) 03  Public transport 04  Poster / leaflet (e.g. in clinic, hospital, etc.) 05  Medical institutions / medical staff 06</p> <p style="text-align: right;">Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	
<p>Q4. Can you recall the promotional messages on breastfeeding or infant and young child feeding that you encountered? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any others?</p> <p style="text-align: right;">Breastfeeding benefits the health of mothers and babies 01  Breastfeeding enhances mother-baby bonding 02</p> <p style="text-align: right;">Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	

**Advertisement & Promotion of Formula Milk**

<p>Q5. In the past 3 months, did you encounter any promotional messages about infant and young child formula milk? <b>[If yes]</b> How often did you encounter the messages?</p>	<p><b>[SA]</b></p>	
<p style="text-align: right;">Frequently 1 Sometimes 2 None 9</p>		<p>↳ Ask Q6 → Skip to Q8</p>
<p>Q6. From which channel(s) did you encounter these promotional messages? <b>[Do not read out the answers] [Probe]</b> Any other channels?</p>	<p><b>[MA]</b></p>	
<p style="text-align: right;">Electronic media (incl. TV, radio) 01 Press media (incl. newspapers, magazines) 02 Internet (incl. websites of different brands, social media, forum, electronic advertisements or email) 03 Public transport 04 Retail outlet (incl. promotion booth in supermarket / department store and baby expo) 05 Poster / leaflet (e.g. in clinic, hospital, etc.) 06 Outdoor billboard / TV 07 Direct mail (e.g. newsletter of mothers' club) 08  Others (pls. specify): _____</p>		
<p>Q7. Were the advertisements or promotional activities on formula milk for : babies from birth – 6 months old, babies aged above 6 months, or both?</p>	<p><b>[SA]</b></p>	
<p style="text-align: right;">Formula milk for babies from birth – 6 months old <b>only</b> 1 Formula milk for babies aged above 6 months <b>only</b> 2 Both 3 Not sure 8</p>		



**Breastfeeding in Public Place**

Q8.	a. In the past 3 months, did you see any mothers breastfed in public places, such as shopping mall, restaurant, park, etc.? <b>[If yes]</b> How often did you have such encounter?	<b>[SA]</b>  Frequently 1 Sometimes 2 None 9	Ask b → Skip to Q9
	b. Where did you have these encounters? <b>[Probe]</b> Any other places?  Shopping mall 01 Restaurant 02 Parks / children’s playground 03 Public transport carrier (e.g. on bus, train compartment, ferry) 04 Public transport station (e.g. railway platform) 05 Waiting area of hospital or clinic 06  Others (pls. specify): _____	<b>[MA]</b>	

Q9.	In the past 3 months, did you see babies fed with bottles in public places? <b>[If yes]</b> How often did you have such encounter?	<b>[SA]</b>  Frequently 1 Sometimes 2 None 9
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<p>Q10. When you are in public places, do you accept a woman breastfeeds her baby near you? Is it “definitely acceptable”, “acceptable”, “unacceptable” or “definitely unacceptable”?</p> <p style="text-align: right;">Definitely acceptable 4 Acceptable 3 Unacceptable 2 Definitely unacceptable 1 No comment / hard to say <b>[Do not read out]</b> 8</p>	<p><b>[SA]</b></p>	<p>Ask Q11 Skip to Q12 → Skip to Q13</p>
<p>Q11. Why is it definitely acceptable / acceptable? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?</p> <p style="text-align: right;">Breastfeeding is natural 01 Mothers / babies have the right of breastfeeding / being breastfed 02 Breastfeeding mother did not disturb anyone 03 Breastfeeding benefits the health of mothers and babies 04 Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	<p>Skip to Q13</p>
<p>Q12. Is it unacceptable / definitely unacceptable? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?</p> <p style="text-align: right;">It makes me / other people feel embarrassing 01 Breastfeeding in public place is indecent 02 Mothers should breastfeed in baby care room or other places 03 Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	

<p>Q13. a. If a public venue has the following breastfeeding measures, which includes:</p> <p>1) A notice which stated that mothers are welcome to breastfeed anytime and anywhere in the venue;</p> <p>2) The staff would not disturb a breastfeeding mother; and</p> <p>3) Staff are happy to help breastfeeding mothers in need (such as explaining to other customers when necessary);</p> <p>Do you agree with these measures? Do you “strongly agree”, “agree”, “disagree” or “strongly disagree”?</p> <p style="text-align: right;">Strongly agree    4 Agree                    3 Disagree                2 Strongly disagree    1</p> <p style="text-align: right;">No comment / hard to say <b>[Do not read out]</b>    8</p>	<p><b>[SA]</b></p>	<p>Ask b</p> <p>Skip to c</p> <p>→ Skip to Q14</p>
<p>b. Why do you agree? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?</p> <p style="text-align: right;">Breastfeeding is natural    01 Mothers / babies have the right to breastfeeding / being breastfed    02 Breastfeeding mothers did not disturb anybody    03 Breastfeeding benefits the health of mothers and babies    04 These measures support breastfeeding effectively (e.g. mothers would not feel embarrassed, convenient for mothers to breastfeed in public venue)    05 I understand the mothers' / babies' needs in respect to breastfeeding    06</p> <p>Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	<p>Skip to Q14</p>
<p>c. Why do you disagree? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?</p> <p style="text-align: right;">Breastfeeding makes other people feel embarrassed    01 Breastfeeding in public place is indecent    02 Mothers should breastfeed in baby care room or other places    03 Public places have no responsibility to support breastfeeding    04</p> <p>Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	

## Breastfeeding in Work Place

<p>Q14. a. Are you working in the past 6 months?</p> <p style="text-align: right;">Yes 1 No 2 Refused to answer <b>[Do not read out]</b> 9</p> <p>b. Are you an employer, employee or self-employed person?</p> <p style="text-align: right;">Employer 1 Employee 2 Self-employed person 3 Refused to answer <b>[Do not read out]</b> 9</p>	<p><b>[SA]</b></p>	<p>→ Ask b ⌋ Skip to Q19</p>
<p>Q15. Is your workplace mainly in... <b>[Read out 1 – 4]</b>? <b>[If the respondent works in multiple locations, probe: I mean the place that you stay for most of the time.]</b></p> <p style="text-align: right;">Office 1 Shopping mall or shop 2 Outdoor work 3 Others 4 Refused to answer <b>[Do not read out]</b> 9</p>	<p><b>[SA]</b></p>	
<p>Q16. How many staff are there in the <b>organisation</b> that you are working in? <b>[Read out 1 – 4]</b> <b>[If the respondent works for multiple organisations, probe: I mean the organisation that you work for most of the time in a week.]</b></p> <p style="text-align: right;">1 – 9 1 10 – 49 2 50 – 99 3 100 or above 4 Refused to answer <b>[Do not read out]</b> 9</p>	<p><b>[SA]</b></p>	

<p>Q17. As far as you know, did your employer implement the following measures for working mothers to breastfeed? Such as...  <b>[If the respondent works for multiple organisations, probe: I mean the organisation that you work for most of the time in a week.]</b></p>			
<p>a. (i) Lactation break for mothers to express milk during working hours</p> <p style="text-align: right;">Yes      2</p> <p style="text-align: right;">No            1</p> <p style="text-align: right;">Don't know      8</p>	<p><b>[SA]</b></p>	<p>→ (ii) How many breaks are allowed during a working day?</p> <p style="text-align: right;">_____ break(s)</p> <p style="text-align: right;">Not limited      96</p> <p style="text-align: right;">Don't know      98</p> <p>→ Skip to Q18</p>	
<p>b. (i) Providing place for milk expression?</p> <p style="text-align: right;">Yes      2</p> <p style="text-align: right;">No            1</p> <p style="text-align: right;">Don't know      8</p>	<p><b>[SA]</b></p>	<p>→ (ii) Is the place fixed?</p> <p style="text-align: right;">Fixed      1</p> <p style="text-align: right;">Not fixed      2</p> <p style="text-align: right;">Don't know      8</p> <p>→ (iii) What place(s) can be used?  <b>[Do not read out the answers]</b></p> <p>Lactation room provided by the employer      01</p> <p>Public baby care room near the workplace      02</p> <p style="text-align: right;">Conference room      03</p> <p style="text-align: right;">Store room      04</p> <p style="text-align: right;">Server room      05</p> <p style="text-align: right;">Washroom      06</p> <p>Others (pls. specify): _____</p> <p style="text-align: right;">Don't know      98</p>	<p><b>[SA]</b></p> <p><b>[MA]</b></p>
<p>c. Providing facilities for storing the expressed milk, e.g. fridge, cooler bag?</p> <p style="text-align: right;">Yes      2</p> <p style="text-align: right;">No            1</p> <p style="text-align: right;">Don't know      8</p>	<p><b>[SA]</b></p>		

d. Apart from the above mentioned, is there any other friendly measures? <b>[If yes]</b> What is(are) the measure(s)?			
_____		Don't know	98
		None	99

Q18. a.	Do you accept your colleague to express breast milk during working hours? Is it “definitely acceptable”, “acceptable”, “unacceptable” or “definitely unacceptable”?	<b>[SA]</b>															
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">Definitely acceptable</td> <td style="text-align: center;">4</td> <td rowspan="2" style="vertical-align: middle;">} Ask b</td> </tr> <tr> <td style="text-align: right;">Acceptable</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: right;">Unacceptable</td> <td style="text-align: center;">2</td> <td rowspan="2" style="vertical-align: middle;">} Skip to c</td> </tr> <tr> <td style="text-align: right;">Definitely unacceptable</td> <td style="text-align: center;">1</td> </tr> <tr> <td style="text-align: right;">No comment / hard to say <b>[Do not read out]</b></td> <td style="text-align: center;">8</td> <td style="vertical-align: middle;">→ Skip to Q19</td> </tr> </table>	Definitely acceptable	4	} Ask b	Acceptable	3	Unacceptable	2	} Skip to c	Definitely unacceptable	1	No comment / hard to say <b>[Do not read out]</b>	8	→ Skip to Q19			
Definitely acceptable	4	} Ask b															
Acceptable	3																
Unacceptable	2	} Skip to c															
Definitely unacceptable	1																
No comment / hard to say <b>[Do not read out]</b>	8	→ Skip to Q19															
b.	Why is it definitely acceptable / acceptable? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?	<b>[MA]</b>															
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">Breastfeeding is natural</td> <td style="text-align: center;">01</td> <td rowspan="6" style="vertical-align: middle;">} Skip to Q19</td> </tr> <tr> <td style="text-align: right;">Mothers have the right of breastfeeding</td> <td style="text-align: center;">02</td> </tr> <tr> <td style="text-align: right;">Breastfeeding mothers did not disturb anybody</td> <td style="text-align: center;">03</td> </tr> <tr> <td style="text-align: right;">Breastfeeding benefits the health of mothers and babies</td> <td style="text-align: center;">04</td> </tr> <tr> <td style="text-align: right;">I understand my colleague’s needs in respect to breastfeeding</td> <td style="text-align: center;">05</td> </tr> <tr> <td style="text-align: right;">It does not affect her work</td> <td style="text-align: center;">06</td> </tr> <tr> <td style="text-align: right;">Others (pls. specify): _____</td> <td></td> <td></td> </tr> </table>	Breastfeeding is natural	01	} Skip to Q19	Mothers have the right of breastfeeding	02	Breastfeeding mothers did not disturb anybody	03	Breastfeeding benefits the health of mothers and babies	04	I understand my colleague’s needs in respect to breastfeeding	05	It does not affect her work	06	Others (pls. specify): _____		
Breastfeeding is natural	01	} Skip to Q19															
Mothers have the right of breastfeeding	02																
Breastfeeding mothers did not disturb anybody	03																
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c.	Why is it unacceptable / definitely unacceptable? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?	<b>[MA]</b>															
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">It affects her work</td> <td style="text-align: center;">01</td> </tr> <tr> <td style="text-align: right;">It is unfair to other staff</td> <td style="text-align: center;">02</td> </tr> <tr> <td style="text-align: right;">Personal matters should not be done within working hours</td> <td style="text-align: center;">03</td> </tr> <tr> <td style="text-align: right;">Others (pls. specify): _____</td> <td></td> </tr> </table>	It affects her work	01	It is unfair to other staff	02	Personal matters should not be done within working hours	03	Others (pls. specify): _____									
It affects her work	01																
It is unfair to other staff	02																
Personal matters should not be done within working hours	03																
Others (pls. specify): _____																	

<p>Q19. a. If an organisation implements the following measures for working mother to sustain breastfeeding, measures include providing lactation break in working hours, a place for milk expression, and storing facilities for expressed milk, etc., do you agree with such measures? Do you “strongly agree”, “agree”, “disagree” or “strongly disagree”?</p> <p style="text-align: right;">Strongly agree 4 Agree 3 Disagree 2 Strongly disagree 1 No comment / hard to say <b>[Do not read out]</b> 8</p>	<p><b>[SA]</b></p>	<p>Ask b Skip to c → Skip to X1</p>
<p>b. Why do you agree? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?</p> <p>These measures support working mothers to sustain breastfeeding after returning from their maternity leave 01 Employers should respect the working mothers’ needs of breastfeeding 02 Those who want to sustain breastfeeding can stay in the work force 03 Milk expression does not affect working mothers’ work quality 04 These measures involve small amount of expenditure for employers 05 Improve the corporate image and demonstrate the corporate’s social responsibility 06 Working mothers who express milk did not disturb anyone 07 Breastfeeding is natural 08 Mothers have the right to breastfeed 09 Breastfeeding benefits the health of mothers and babies 10 Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	<p>Skip to X1</p>
<p>c. Why do you disagree? <b>[Do not read out the answers]</b> <b>[Probe]</b> Any other reasons?</p> <p style="text-align: right;">It affects her work 01 It is unfair to other staff 02 Personal matters should not be done within working hours 03 Express breast milk in the work place makes others feel embarrassed 04 Expression of breast milk in the work place is indecent 05 Others (pls. specify): _____</p>	<p><b>[MA]</b></p>	

## Background Information

X1. Record the gender:		<b>[SA]</b>	
	Male	1	
	Female	2	

**[Read out]** Finally, for conducting statistical analysis, would you tell me...

X2. Which of the following age group are you in? <b>[Read out 1 – 5]</b>		<b>[SA]</b>	
	18 – 29	1	
	30 – 39	2	
	40 – 49	3	
	50 – 59	4	
	60 or above	5	
	Refused to answer <b>[Do not read out]</b>	9	

X3. Your educational level is... <b>[Read out 1 – 4]</b>		<b>[SA]</b>	
	Primary or below	1	
	Lower secondary (F. 1 – F. 3)	2	
	Upper secondary / matriculation	3	
	Tertiary or above	4	
	Refused to answer <b>[Do not read out]</b>	9	

X4. a. Do you have any child aged below 3 in your family?		<b>[SA]</b>	
	Yes	1	→ Ask b
	No	2	☐ Skip to X5
	Refused to answer <b>[Do not read out]</b>	9	☐
	b. Was the child ever been breastfed?		
	<b>[If the respondent has more than 1 child aged below 3, when one of the children was breastfed, the answer should be “yes”.]</b>		
	Yes	1	
	No	2	
	Don't know / can't remember <b>[Do not read out]</b>	8	
	Refused to answer <b>[Do not read out]</b>	9	



<p><b>[Refer to Q14a: ask X5a for “working person” (Q14a = 1); ask X5b for “non-working person” (Q14a = 2/9)]</b></p>			
X5.	<p>a. Your occupation is... ? <b>[Do not read out the answers]</b></p> <p style="text-align: right;">Professional (incl. accountant, teacher, lawyer, police force, doctor, nurse, engineer, etc.)</p> <p style="text-align: right;">Management level (incl. businessman)</p> <p style="text-align: right;">Clerk / clerical worker (incl. clerk, secretary, etc.)</p> <p style="text-align: right;">Sales / service worker (sales staff, waiter, etc.)</p> <p style="text-align: right;">Skilled / manual labour (incl. technician, electrician, driver, cook, factory worker, etc.)</p> <p>Others (pls. specify): _____</p> <p style="text-align: right;">Refused to answer</p>	<p><b>[SA]</b></p> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>9</p>	<p>Skip to X6</p>
	<p>b. Are you a.. <b>[Read out 2 – 5]?</b></p> <p style="text-align: right;">Student</p> <p style="text-align: right;">Home-maker</p> <p style="text-align: right;">Retired person</p> <p style="text-align: right;">Unemployed person</p> <p>Others (pls. specify): _____</p> <p style="text-align: right;">Refused to answer <b>[Do not read out]</b></p>	<p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>9</p>	

X6. Including all of your income sources, would you tell me which of the following group of total monthly **personal** income are you in? **[Read out 01 – 10]**

<b>[SA]</b>				
No income	01			
<u>With income</u>				
\$4,999 or below	02	\$20,000 - \$24,999		06
\$5,000 - \$9,999	03	\$25,000 - \$29,999		07
\$10,000 - \$14,999	04	\$30,000 - \$39,999		08
\$15,000 - \$19,999	05	\$40,000 - \$49,999		09
		\$50,000 or above		10
		Refused to answer <b>[Do not read out]</b>		97

X7. Including all of the income sources of your family, would you tell me which of the following group of total monthly **household** income are you in? **[Read out 01 – 10]**

<b>[SA]</b>			
No income	01		
<u>With income</u>			
\$9,999 or below	02	\$30,000 - \$39,999	06
\$10,000 - \$19,999	03	\$40,000 - \$49,999	07
\$20,000 - \$24,999	04	\$50,000 - \$59,999	08
\$25,000 - \$29,999	05	\$60,000 - \$69,999	09
		\$70,000 or above	10
		Don't know <b>[Do not read out]</b>	98
		Refused to answer <b>[Do not read out]</b>	97

~ **Thank you for your co-operation!** ~

**[Read out]** Another staff of our company may contact you later to re-confirm the interview that I have done or to clarify some other questions. He/she will ask a few questions only and will not disturb you for a long time.

**Interviewer declaration**

I hereby authenticate the data accuracy and integrity, and the interview was conducted by following the guidelines maintained by the international standard of market research.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_