

# Breastfeeding Survey 2023

## Background

The Department of Health (DH) monitors the trend of local breastfeeding rates by collecting reports of breastfeeding rates at hospital discharge from birthing hospitals.

2. In parallel, to monitor the breastfeeding rates during the first year of infants, DH conducts breastfeeding survey regularly at Maternal and Child Health Centres (MCHCs), where about 90% of locally born babies born could be accessed. Since 2002, the survey was conducted biennially.

## Objective

3. The Breastfeeding Survey 2023 aims to assess breastfeeding rates in the first year of life among babies born in Q2 2022, so as to monitor the local trend.

## Methodology

4. It is a cross-sectional survey through convenience sampling. The sample includes all one-year-old babies brought by their parents or main carers to attend the MCHC within the data collection period. Longitudinal data on the baby's feeding practices at 1 month, 2 months, 4 months and 6 months are transcribed from the child health record, and at 12 months through directly enquiring the parent or the carer at the time of consultation. A baby's breastfeeding status is categorised according to the WHO's latest standard.<sup>1</sup> The reasons for not able to sustain breastfeeding during the first six months after birth were also explored. All data are recorded by nurses on a standardised data collection sheet.

5. All breastfeeding surveys were conducted in the second quarter of the year to reduce seasonal variations of the findings and improve comparability. This year, the data collection was conducted at all 28

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<sup>1</sup> Indicators for assessing infant and young child feeding practices: definitions and measurement methods, World Health Organization and the United Nations Children's Fund (UNICEF), 2021

MCHCs from 24 April to 12 May 2023.

## Results

### Breastfeeding rates at hospital discharge in 2022: (see Table 1)

6. According to the reports from all local hospitals with maternity units<sup>2</sup>, a total of 32 496 babies was born in 2022. The rate of any breastfeeding<sup>3</sup> and exclusive breastfeeding rate<sup>4</sup> at hospital discharge of babies born in 2022 were 84.7% and 15.4% respectively.

### Findings from Breastfeeding Survey for babies born in 2022: (See Table 2)

7. A total of 1 515 babies who were born in 2022 attended the routine 12-month MCHC visit within the data collection period. Among them, 1 392 babies (92%) completed the Survey.<sup>5</sup> It represented roughly 81 % of babies who were born during the data collection period (i.e. from 24 April to 12 May in 2022).

8. The rates of any breastfeeding for babies born in 2022 at 1, 2, 4, 6 and 12 months<sup>6</sup> were 77.2%, 66.6%, 52.7%, 42.3% and 22.1% respectively. Whereas, the exclusive breastfeeding rates of babies born in 2022 at 1, 2, 4 and 6 months<sup>7</sup> were 23.9%, 23.9%, 21.8% and 18.2% respectively.

9. For barriers to sustained breastfeeding during the first six months (see Table 3), about 60% of the respondents mentioned reasons which

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<sup>2</sup> Data were collected from 19 hospitals with maternity units in Hong Kong, including 8 public hospitals under the Hospital Authority and 11 private hospitals.

<sup>3</sup> Rate of any breastfeeding at hospital discharge is defined as proportion of infants who ever feeding on breastmilk before hospital discharge.

<sup>4</sup> Exclusive breastfeeding rate at hospital discharge is defined as proportion of infants who only received breastmilk from birth to hospital discharge.

<sup>5</sup> Those babies whose feeding information could not be obtained from the mother / carer nor the clinical records were not included in the BF Survey.

<sup>6</sup> Rates of any breastfeeding at 1,2,4,6 and 12 months are defined as proportion of infants at 1,2,4,6 and 12 months of age who were fed with breastmilk with or without formula milk feeding during the previous day.

<sup>7</sup> Exclusive breastfeeding rates at 1,2 and 4 months are defined as proportion of infants at 1,2 and 4 months of age who were fed exclusively with breastmilk during the previous day. Exclusive breastfeeding rate at 6 months is defined as proportion of infants at 6 months of age who were fed with breastmilk during the previous day without any use of formula milk. The children may or may not have started complementary food.

reflected their inadequate knowledge and skills in breastfeeding or infant feeding. Nearly 20% of the respondents mentioned inadequate social support, which included those provided by family members or at the workplace. Other less commonly reported reasons included mother taking medication or having illness (e.g. COVID-19) during lactation, mother having mastitis or mother opted not to breastfeed (e.g. feeling too tired with breastfeeding).

## Discussion

10 Across the time period for the birth cohorts 2018-2022 (including the birth cohorts who are born during COVID-19 pandemic in 2020 and 2022):

(a) Based on routine statistics, there is a decreasing trend in rates of any breastfeeding and exclusive breastfeeding at hospital discharge.

(b) Based on the breastfeeding survey, while the rates of any breastfeeding at 1, 2, 4 months is relatively stable, there is a statistically significant decreasing trend<sup>8</sup> in the rates of any breastfeeding at 6 and 12 months and the exclusive breastfeeding rate at 1, 2, 4, 6 months.

11. The observed decline was likely due to the impact of COVID-19 epidemic which may have posed challenges for mothers to initiate and sustain breastfeeding. During the epidemic, breastfeeding assessment and coaching, both at birthing hospitals and MCHCs, were scaled down. Mothers were more anxious and hesitated to seek breastfeeding support with their newborns at healthcare facilities. Access to breastfeeding support and antenatal education on breastfeeding were also reduced. There were also less social support, peer support service and promotional effort in the community due to social distancing measures. It is worthy to note that the barriers to sustained breastfeeding reported by lactating mothers in this survey also reflected the impact of COVID-19 on them due to disruption to the healthcare system and the related support services in society.

12. Promotion and support on breastfeeding require concerted effort of different sectors of the community. The Government will continue to work

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<sup>8</sup> The p-value of Cochran-Armitage Test was less than 0.05, indicating a significant linear trends when comparing the birth cohorts born in 2018, 2020 and 2022

closely with relevant stakeholders to further promote, protect and support breastfeeding through multi-pronged approach. DH will step up efforts to strengthen professional support in healthcare sector to lactating mothers as well as the efforts to cultivate supportive culture and environment.

**Family Health Service, the Department of Health.**

**April 2024**

**Table 1: Breastfeeding rates at hospital discharge of babies born in 2018, 2020 and 2022 (based on routine statistics)**

		Year of Birth		
		2018	2020	2022
Number of live births		53 711	43 024	32 496
Rate of any breastfeeding at hospital discharge <sup>i</sup>	Overall	87.5%	86.8%	84.7%
	Public	83.8%	82.4%	78.9%
	Private	94.9%	94.0%	93.8%
Exclusive Breastfeeding rate at hospital discharge <sup>ii</sup>	Overall	21.0%	18.9%	15.4%
	Public	28.7%	26.8%	21.9%
	Private	5.9%	5.9%	5.2%

**Note:**

<sup>i</sup> Rate of any breastfeeding at hospital discharge is defined as proportion of infants who ever feeding on breastmilk before hospital discharge.

<sup>ii</sup> Exclusive breastfeeding rate at hospital discharge is defined as proportion of infants who only received breastmilk from birth to hospital discharge.

**Table 2: Breastfeeding rates of babies born in 2018, 2020 and 2022 (based on breastfeeding surveys)**

Breastfeeding Surveys		2018	2020	2022	P value for trend
		N=2218 (95%CI)	N=1755 (95%CI)	N=1392 (95%CI)	
<b>Rate of any breastfeeding<sup>a</sup></b>	At 1 month	76.6% (74.8-78.4%)	77.4% (75.3-79.3%)	77.2% (74.9-79.9%)	0.632
	At 2 month	66.4% (64.4-68.4%)	66.6% (64.3-68.8%)	66.6% (64.0-69.1%)	0.900
	At 4 month	55.7% (53.6-57.7%)	53.9% (51.5-56.3%)	52.7% (50.0-55.3%)	0.070
	At 6 month	46.5% (44.4-48.6%)	43.1% (40.7-45.4%)	42.3% (39.7-45.0%)	<b>0.001</b>
	At 12 month	26.1% (24.3-27.9%)	23.9% (21.9-25.9%)	22.1% (19.9-24.3%)	<b>0.005</b>
<b>Exclusive breastfeeding rate<sup>b</sup></b>	At 1 month	32.6% (30.6-34.5%)	28.8% (26.7-31.0%)	23.9% (21.6-26.2%)	<b>&lt;0.001</b>
	At 2 month	31.5% (29.6-33.4%)	28.1% (26.0-30.3%)	23.9% (21.7-26.3%)	<b>&lt;0.001</b>
	At 4 month	29.1% (27.2-31.0%)	25.6% (23.6-27.8%)	21.8% (19.7-24.1%)	<b>&lt;0.001</b>
	At 6 month	26.3% (24.5-28.1%)	22.2% (20.2-24.2%)	18.2% (16.2-20.3%)	<b>&lt;0.001</b>

***Bold fonts of p-value for trend indicates the detection of a statistical significant change over 2018-2022.***

**Note:**

<sup>a</sup> Rate of any breastfeeding at 1, 2, 4, 6 and 12 months are defined as proportion of infants at 1, 2, 4, 6 and 12 months of age who were fed with breastmilk with or without formula milk feeding during the previous day.

<sup>b</sup> Exclusive breastfeeding rates at 1, 2 and 4 months are defined as proportion of infants at 1, 2 and 4 months of age who were fed exclusively with breastmilk during the previous day. Exclusive breastfeeding rate at 6 months is defined as proportion of infants at 6 months of age who were fed with breastmilk the previous day without any use of formula milk. The children may or may not have started complementary food.

**Table 3: Barriers to sustained breastfeeding during the first six months**  
*(respondents are allowed to more than one reason)*

<b>Barriers</b>	<b>Percentage (%)</b>	
Feeding concerns: <ul style="list-style-type: none"> <li>• I did not have enough breastmilk ;</li> <li>• Baby was not satisfied with breastmilk as he/she cried often ;</li> <li>• Breastfeeding alone could not well support baby’s weight gain</li> </ul>	58.3%	<b>61.9%</b> reflecting mothers’ inadequate breastfeeding knowledge and skills
Skill concerns: <ul style="list-style-type: none"> <li>• My baby did not latch on well ;</li> <li>• My baby could not suck well on breasts ;</li> <li>• I feel pain while breastfeeding ;</li> <li>• My breasts felt very engorged</li> </ul>	3.6%	
Lack of support from workplace	12.3%	<b>18%</b> reflecting inadequate social support
Lack of support from family members	5.7%	
Mother reported taking medication and was ill (e.g. having COVID)	5.7%	
Mother's preference not to breastfeed or felt tired when breastfeeding	3.9%	
Breast problems during lactation (e.g. mastitis)	3.6%	
Others (e.g. baby-mother separation)	7.0%	

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