

4.1.4 Pregnancy, Smoking, Breastfeeding, Birthweight and Stillbirths

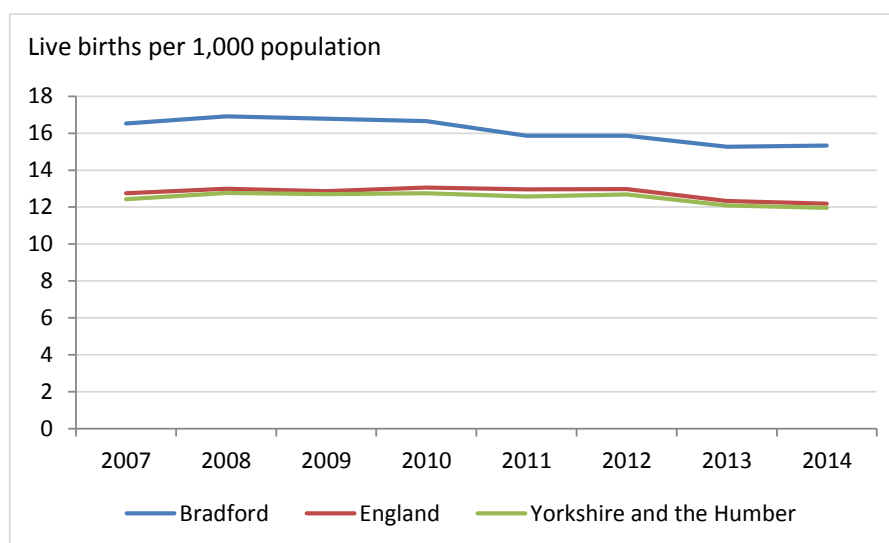
Introduction: why is this important?

Improving health for mothers and their babies is a priority programme for partners in Bradford. In addition to supporting a positive birth outcome, the health gain from improving the health of mothers and babies can be life-long. Much key work is taken forward through the 10 recommendations of the Every Baby Matters (EBM) Steering Group which leads on reducing infant mortality rates. Recommendation 4 has a specific focus on improving services which cover pre-conception, antenatal, postnatal and infant care for women and their families, while Recommendation 6 focuses on reducing smoking and substance misuse in pregnancy. Work under these headings includes:

- Booking-in with a midwife before 13 weeks of pregnancy to obtain expert care and access to support services early in pregnancy
- Quitting smoking by both parents and other people living in the household and increasing number of smoke free homes
- Increasing number of pregnant women monitored for CO levels
- Taking action to stop drinking alcohol during pregnancy Seeking support to manage a substance abuse problem during pregnancy
- Addressing housing needs before the baby is born
- Eating a balanced diet and keeping physically active to help maintain a healthy weight
- Taking folic acid and vitamin D in the Healthy Start supplements from twelve weeks before conception and throughout pregnancy.
- Integrate services into children centres and monitoring on health targets relating to breastfeeding, smoking, immunisations and infant mortality within children centres

What do the facts and figures tell us?

There were 8,100 live births in Bradford district in 2014 compared with 8,039 live births in 2013. The live birth rate in Bradford District remained the same between 2013 and 2014 at 15.3 live births per 1,000 population. This is different both nationally and regionally where falls in both the number of live births and rate of live births were seen. The average live birth rate for England fell from 12.3 live births per 1,000 population in 2013 to 12.2 live births per 1,000 population in 2014. For Yorkshire and the Humber the live birth rate fell from 12.1 in 2013 to 12.0 in 2014.



Source: Bradford Public Health Analysis

Breastfeeding and smoking in pregnancy

Breastfeeding is measured at initiation (the first 48 hours after delivery) and at 6-8 weeks after birth whilst The data show little change in the Bradford rates over the last 5 years. Although they have fallen, both breast feeding rates are below the average for England.

Nationally the number of women smoking at time of delivery is falling. Rates are higher than the average for England in Bradford, although they fell in 2014-15.

Year	Breastfeeding initiation		Breastfeeding at 6-8 weeks		Smoking status at time of delivery	
	Bradford	England	Bradford	England	Bradford	England
2010-11	69.5%	73.7%	39.7%	46.1%	15.7%	13.5%
2011-12	68.2%	74.0%	41.7%	47.2%	15.6%	13.2%
2012-13	68.4%	73.9%	39.7%	47.2%	15.9%	12.7%
2013-14	69.8%	74.0%	40.3%	45.8%	15.8%	12.0%
2014-15	70.7%	74.3%	41.6%	43.8%	15.1%	11.4%

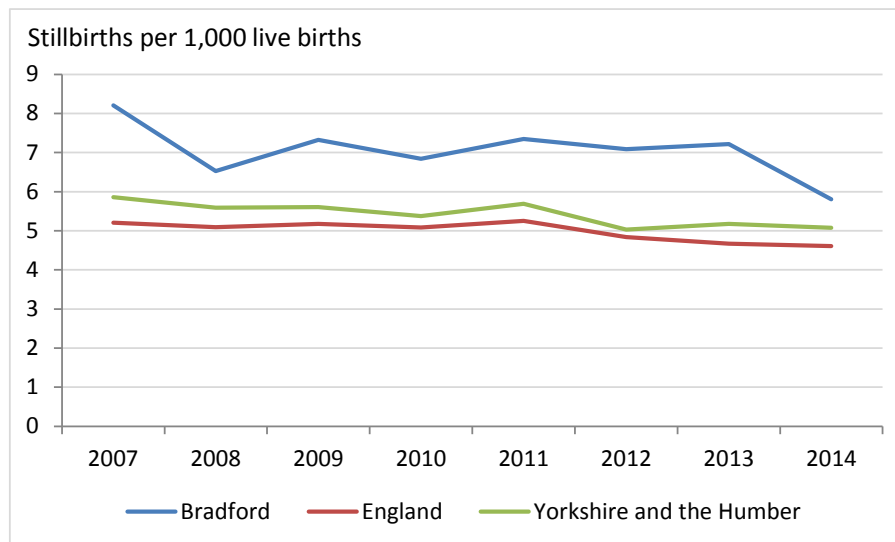
Source: Public Health Outcomes Framework

Access to a Midwife

Timely booking appointments are a key way of ensuring the best antenatal care for mothers and the health of babies. In Bradford over 90% of women see a midwife or maternity health professional before the 12th week of pregnancy. The proportion of women booking with a midwife has increased over the last two years.

Stillbirths

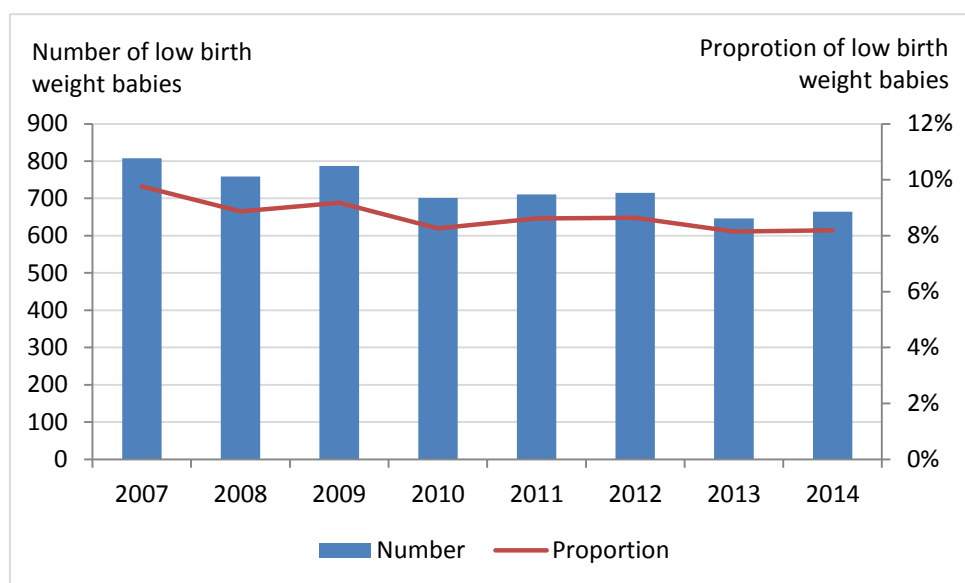
The number of stillbirths in Bradford District fell from 58 in 2013 to 47 in 2014, with the stillbirth rate falling from 7.2 per 1,000 live births to 5.8 per 1,000 live births. Although the stillbirth rate in Bradford District is still above the average for England (4.6 per 1,000 live births in 2014) the gap between the two rates has narrowed.



Source: Bradford Public Health Analysis

Low birth weight

The proportion of those babies who have a birth weight less than 2,500g in Bradford District increased slightly from 8.2% in 2014 compared to 8.1% in 2013. The number of low birth weight babies also increased from 646 in 2013 to 664 in 2014.



Source: Bradford Public Health Analysis

What challenges have been identified in a local context?

Key challenge 1: Low Birth Weight (LBW) and Very Low Birth Weight (VLBW)

LBW is defined as a birth weight below 2.5 kg and Very LBW as below 1.5kg. The risk of poor health and mortality is higher amongst the low birth weight and very low birth weight infants and the risk of death is highest amongst the VLBW infants. Infant birth weight is determined by many factors, including the physical stature and nutritional status of the mother at conception.

Key challenge 2: Smoking

Smoking in pregnancy increases infant mortality by about 40%. Reducing smoking during pregnancy will reduce the number of LBW and preterm births and has been identified as the key intervention to reduce overall health inequalities. Evidence has shown that gaining partner support to quit smoking in the home improves the quit rates amongst women. Babies born to women who smoke are on average 200–250g lighter than babies born to mothers who do not smoke. The more cigarettes smoked, the greater the probable reduction in birth weight, which can increase the risk of death and disease in childhood. Work to reduce smoking in pregnancy and promote smoke free homes and reduce the number of adults who smoke is taken forward in the District via the Tobacco Alliance. A subgroup of this Alliance has a particular focus on reducing smoking in pregnancy.

Key challenge 3: Vitamin D deficiency

Research carried out in Bradford district between 2000 and 2004 found that of 885 children aged 0–15 years who were referred for a vitamin D blood test, 89% (790) had 'deficient' or 'depleted' levels. Subsequent audit of children's admissions between 2007–10 for severe deficiency identified 67 children with rickets and over 1,000 with vitamin D deficiency. The Bradford and Airedale population is at particular risk from vitamin D deficiency because of higher than average levels of deprivation, a large South Asian population, its northern latitude and lack of useable sunlight in winter months. To help address this, Healthy Start vitamin drops containing vitamin D are provided free of charge to all women registered with a midwife in Bradford during pregnancy and to all infants 0–2 years olds at risk of deficiency. A number of public health initiatives to raise awareness of the importance of vitamin D have also been undertaken. This includes training community champions to promote positive messages in the community as well as the development of a Vitamin D and sunshine policy with training to meet the needs of Early Years staff.

Key challenge 4: Alcohol and substance misuse and pregnancy

Alcohol consumption can cause pre-term birth, low birth weight (small for gestational age) and some congenital anomalies in infants. The clear advice from the Department of Health is to abstain from drinking alcohol during pregnancy. Likewise, women who use illegal substances are encouraged to gain support during pregnancy from the specialised services in Bradford to minimise

the harm from both the substances and associated risky lifestyles on the baby. Alcohol consumption during pregnancy is much more common in White women than in South Asian women and has also been identified within the Born in Bradford study which provided further information on the prevalence of alcohol consumption during pregnancy.

Key challenge 5: Breastfeeding

Breast milk provides the best nutrition for babies and provides added benefits of protecting babies against infections during the early years. Breastfeeding helps babies to grow at the right rate and therefore to prevent obesity in childhood. The benefits to Bradford's babies and children brought about by breastfeeding are recognised in the District's work to become 'Baby Friendly' and to attain accreditation from UNICEF for the work being done to make choosing to breast feed the easy choice for mothers. The Breastfeeding Steering Group is the multi agency, district-wide partnership which takes forward work to support the initiation, continuation and promotion of breastfeeding. Bradford offers training to volunteer peer supporters who can work in the hospital and in the community to support women locally in a timely manner to continue to breastfeed. Both the BRI and AGH maternity units offer drop-in support clinics to support women with attachment and 'latching-on' difficulties.

Key challenge 6: Stillbirths

Although there has been a slight decrease in the number of stillbirths from 2002, Bradford continues to have the highest stillbirth rate within West Yorkshire. Some of the risk factors associated with stillbirth include smoking, substance misuse and low birth weight. The Maternity Network oversees the District's Stillbirth Action Plan.

What strategies, policies and best practice have been developed locally and nationally?

The overarching strategy for Bradford is the EBM strategy, with a number of key targets for improvement relevant to this section of the JSNA including increasing the percentage of mothers who initiate breastfeeding at birth and the prevalence of breastfeeding at 6-8 weeks from birth, reducing the percentage of women who are smoking at time of delivery, reducing the percentage of women who are smoking at time of delivery, and increasing access to midwives by the 12th week of pregnancy. Locally and nationally a number of other strategies are relevant:

- Good Health and Wellbeing: Strategy to improve health and wellbeing and reduce health inequalities, 2013-17
- Bradford District Health Inequalities Action Plan, 2013-17
- A Breastfeeding Strategy for Bradford District, 2016-18
- Bradford District Bradford District Children and Young People's Health and Lifestyle Survey, 2013
- Children and Young Peoples Plan, 2016–18
- NHS England National Maternity Review, 2016
- Saving Lives, Improving Mothers' Care: Confidential Enquiry into Maternal Death, 2015
- Saving Babies' Lives: A care bundle for reducing stillbirth, 2016

Recommendations: What do we need to do? How do we ensure this remains a priority?

The Every Baby Matters dashboard records actions against the plan for the District, and the most recent version of the dashboard highlights work done in the last year to improve the life chances of every baby born in the Bradford district. The dashboard also lists a number of initiatives for the future around pregnancy, breastfeeding, smoking, birth weight and stillbirth, which we will need to do to ensure this remains a priority:

- Utilising Women's Health Network to reach communities of women who do not routinely access health care
- Plan to set up Infant mental health team through Better Start Bradford
- Stillbirth Action Plan 2016 led by Maternity Network

- Understand the implications of the Annual Report of the Chief Medical Officer (published in Dec 2015) and the National Maternity Review, Better Births – Five Year Forward View for maternity care (published Feb 2016) for local services
- Further Midwife intervention at 12 week scan appointment for women continuing to smoke
- Launch of BabyClear programme 14th June 2016
- Rapid access to support and stop smoking medication for pregnant women admitted to BTHFT during pregnancy
- Increase the number of Children Centre staff trained to provide support to pregnant smokers
- Develop a pathway to incorporate Health Visiting service to maintain consistent messages and referral of smokers antenatal and postnatal
- Review of pathways between midwifery and treatment service is currently underway to ensure effective joint working
- A new service specification is being developed which will result in the re-tender of all drug and alcohol services across the service ensuring effective pathways are in place between maternity services and community drug treatment services
- Enhance assessment for services users to ensure issues around child protection and pregnant mothers are addressed

References

Bradford District Every Baby Matters

<https://www.bradford.gov.uk/health/improve-your-childs-health/every-baby-matters/>

NHS England National Maternity Review, 2016

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Saving Babies' Lives: A care bundle for reducing stillbirth, 2016

<https://www.england.nhs.uk/wp-content/uploads/2016/03/saving-babies-lives-car-bundl.pdf>