

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES  
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QUESTION SUBMITTED ON MONDAY 10th MARCH 2025  
ANSWER TO BE TABLED ON MONDAY 17th MARCH 2025**

### **Question**

“Will the Minister state the number of mothers breastfeeding from discharge from maternity care and after 6 weeks from birth, and broken down by the following types of births –

- (a) an elective caesarean section;
- (b) an emergency caesarean section;
- (c) a home birth (low risk pregnancy/low intervention/vaginal birth);
- (d) a hospital birth (low risk pregnancy/low intervention/vaginal birth); and
- (e) an induced vaginal birth in hospital?”

### **Answer**

#### **Data Availability and Reporting Approach**

This response presents data on breastfeeding rates by birth type for deliveries occurring in 2024, covering the period from 1<sup>st</sup> January 2024 to 31<sup>st</sup> December 2024. It shows the proportion of mothers who initiated **breastfeeding at birth** and those who were **breastfeeding at discharge from maternity care**, broken down by birth type. Data on breastfeeding at six weeks postpartum is unavailable for reporting.

To ensure clarity, comparability, and data privacy, only percentages are provided in this response.

- Percentages represent the proportion of mothers in each birth category who breastfed.
- The denominator for each percentage is the total number of recorded deliveries for that specific birth type.

#### **Definitions of Deliveries**

A **delivery** refers to the completion of pregnancy, with each delivery counted once per mother, regardless of whether it results in a single or multiple birth (e.g., twins or triplets).

Deliveries are classified as follows:

- **Home Birth** – A planned home birth, typically attended by midwives.
- **Spontaneous Vaginal Birth** – A vaginal birth where labour started naturally (without medical induction) and proceeded without the use of forceps or ventouse.
- **Assisted Vaginal Birth** – A vaginal birth where medical intervention was required to assist delivery. This includes:
  - **Instrumental Vaginal Birth** – A vaginal birth assisted with forceps or ventouse.
  - **Other Assisted Vaginal Births** – Deliveries requiring intervention that does not involve forceps or ventouse (e.g., manual rotation, episiotomy assistance).
- **Elective Caesarean Section** – A planned caesarean section carried out before the onset of labour.
- **Emergency Caesarean Section** – A caesarean section performed due to complications after labour has started or due to urgent medical need.

- **Induced Birth** – A birth where labour was medically induced, regardless of whether the delivery resulted in a vaginal birth or a caesarean section.

### Important Caveats on Home Births and Induced Births

Due to the low number of home births, percentage-based comparisons should be interpreted with caution, as small absolute changes can lead to large percentage variations.

Induction of labour is a **method of initiating labour** rather than a mode of birth. As such:

- **Induced births category** includes all births where labour was medically induced regardless of whether the final mode of delivery was **vaginal or via caesarean sections**.
- Because this category overlaps with other birth types, percentages for induced births should be interpreted separately from the standalone birth categories.

### Breastfeeding Rates by Birth Type

Birth Type	Breastfeeding at Birth (%)	Total Breastfeeding at Discharge (%)
Home Birth (Low Risk)	85%	85%
Spontaneous Vaginal Birth	82%	78%
Assisted Vaginal Birth	76%	85%
Elective Caesarean Section	71%	68%
Emergency Caesarean Section	68%	67%
Induced Birth	74%	69%

**Data Source:** Hospital Patient Administration System (Maternity reports)

### How to Interpret This Table:

- **Breastfeeding at Birth (%)** – The proportion of mothers who initiated breastfeeding immediately after delivery, relative to all deliveries in that category.
- **Total Breastfeeding at Discharge (%)** – The proportion of all mothers breastfeeding (either exclusively or mixed feeding) at discharge, relative to total deliveries in that category.

### Further Notes on Data Completeness

While every effort has been made to ensure data quality, there are **instances where records may be missing or incomplete**, particularly in breastfeeding status.

- Percentages are calculated based only on available recorded data.
- Some facilities may have inconsistencies in reporting, leading to minor variations in totals.

Despite these limitations, the data provides a robust overall picture of breastfeeding trends by birth type.

### Final Summary

Although data on breastfeeding at 6 weeks postpartum is unavailable, the figures above provide insight into breastfeeding initiation and continuation until discharge. Percentages have been used instead of absolute numbers to ensure privacy and accurate comparisons across birth types.