



Information for Food Banks:

Supporting
pregnant women
and families with
infants

Information for Food Banks: Supporting pregnant women and families with infants.
First published 2015.
Updated in 2017.

ISBN e-book: 978-1-908924-36-0
ISBN hard copy: 978-1-908924-37-7

The aim of this resource

The authors of this resource regret the fact that despite the UK's well-established welfare system, increasing numbers of UK families are resorting to using food banks.

This resource aims to encourage organisers and volunteers working in food banks to ensure that food bank donations, and information given to mothers and families, do not inadvertently undermine breastfeeding and harm infant and young child health.

Who has written this resource?

This resource was written by Helen Crawley and Sally Etheridge, and reviewed by members of the Baby Feeding Law Group UK.
www.babyfeedinglawgroup.org.uk



We are a coalition of the leading health professional and voluntary sector bodies involved in infant feeding and the care of mothers, babies and young children. Members include the Royal College of Midwives, the Royal College of Nursing, Community Practitioners and Health Visitors Association (CPHVA), the Institute of Health Visiting, Unicef UK Baby Friendly Initiative, The GP Infant Feeding Network, Lactation Consultants of Great Britain, mother support groups such as NCT, La Leche League, Breastfeeding Network and the Association of Breastfeeding Mothers as well as other relevant groups such as UNISON and charities such as First Steps Nutrition Trust, Baby Milk Action, and Best Beginnings. Together we work to strengthen UK baby feeding laws in line with United Nations recommendations to protect the health and well-being of all babies, however they are fed.

Topics covered in this resource

- 1** Why do food banks need information to support pregnant women and families with infants?
- 2** Making sure all eligible families know about the welfare food scheme 'Healthy Start'
- 3** Supporting women in pregnancy
- 4** Supporting breastfeeding families
- 5** Frequently asked questions and myth-busting about breastfeeding
- 6** Supporting families with babies who are bottle-fed
- 7** Guidance on infant formula donations – why these are inappropriate
- 8** Organisations and resources that offer further support

Who is the information in this resource for?

The information in this resource is for:

- those involved in developing, delivering, running or supporting food banks
- those involved in setting standards and commissioning services around poverty and food security in local and national areas, and
- those involved in providing family and childrens services.

We hope that its contents will be part of the induction for volunteers in food banks, and that the information can also be used to make posters to illustrate the key points for display in food banks.

1 Why do food banks need information to support pregnant women and families with infants?

As more families turn to food banks for help with feeding themselves and their family, food bank organisers and volunteers will be faced with both increased requests for help and with offers of donations and support from a growing sector of society. They will be faced with social and ethical issues that they may not have envisaged, or be asked questions about their services they may not have considered.

The need to ensure that the most vulnerable in our society are protected and their health and well-being prioritised is fundamental.

Pregnant women need support to eat well to ensure good future health for themselves and their babies.

Babies and young children are dependent on their care-givers in a way few other groups are. Their health and well-being are paramount to ensure their life-chances are safeguarded.

Protecting babies is of concern to all of us, and is at the heart of a caring society.



Breastfeeding is the safest and healthiest way to feed babies.

Breastfeeding is the normal way to feed a baby. Support to protect breastfeeding is everyone's responsibility. The World Health Organization and the UK Departments of Health recommend that babies should receive only their mother's milk for the first six months of life, followed by continued breastfeeding alongside appropriate complementary foods.

In the UK we have some of the lowest breastfeeding rates in the world and many women start breastfeeding but are unable to achieve their breastfeeding goals. This is rarely because of physical issues and more to do with lack of social support.

Food banks can do a great deal to support families to breastfeed. Breastfeeding also saves families' money. It is free, safe and readily available whenever it is needed.

This document aims to ensure that food banks support pregnant women, that they do not inadvertently undermine breastfeeding, and that they offer appropriate support to families whose babies are not breastfed.

The support people need may not be immediately evident to food bank organisers and volunteers. Donations of infant formula are often seen by the general public, and those involved in helping families, as an obvious way to help.

Donations of infant formula are not in line with established internationally agreed codes of practice, and may put babies' health at serious risk.

This resource aims to help food bank organisers and volunteers find out what they can do to support families of non-breastfed babies, in a way that puts the safety and health of babies first.

The importance of 'The first 1000 days'

'The first 1,000 days – that is, the nine months of pregnancy and the first two years of the baby's life – are seen as a critical window of opportunity to get food and nutrition right for every individual around the world. The nutrition of women and children in developed countries is as important as anywhere else and many parents appreciate this period as one where they can make the most important contribution to their child's healthy future. The concept of the first 1,000 days – along with clear information about how good nutrition can be supported during this time – is useful for those supporting families'.

From *Eating well for a healthy pregnancy*,
by Dr Helen Crawley. Published by First Steps
Nutrition Trust, 2017.



2 Making sure all eligible families know about the welfare food scheme 'Healthy Start'

What is the Healthy Start scheme?

Healthy Start is the welfare food scheme in the UK, which provides additional food and nutrition support to young and low-income women and their children.



If pregnant women are under 18 years of age, or are entitled to income support or are on a low income, they are likely to be eligible for Healthy Start benefits. Children under 4 years in low-income families are also eligible.

Benefits include:

- Free Healthy Start vitamins for pregnant women, mums and children
- Food vouchers which can be spent on fresh or frozen plain fruit and vegetables, cows' milk or first infant formula.

In 2017 eligible families receive £3.10 per week during pregnancy or for each child aged one to four, or £6.20 per week for a baby under one year. Women must be at least 10 weeks pregnant to apply. Eligibility is checked by the Department for Work and Pensions so vouchers may not arrive for a few weeks after an application has been made. A safe address for the delivery of vouchers is also needed as these come by post. Asylum seeking families are not currently entitled to Healthy Start.

For information about how to apply for Healthy Start, see <http://www.healthystart.nhs.uk>. Families need to have their application form signed by a midwife, health visitor or their GP.

In some areas of the country Healthy Start vitamins are free to all families, and vitamins can be prescribed by GPs. Pregnant women and women up to 1 year after birth are entitled to free prescriptions. Ask a health visitor or midwife in your local area if this is the case.

How can food banks help to support the Healthy Start scheme?

Food banks can:

- Have copies of the Healthy Start booklets and application forms available, and support pregnant women or young families to complete the forms.
- Help ensure families know about Healthy Start and encourage them to ask their midwife or health visitor for an application form and to sign it for them.
- Talk about how they might use their Healthy Start food vouchers wisely to prepare meals for themselves and their family.
- Find out if Healthy Start vitamins are free to all in your area, and if so, where families can access these (usually at childrens centres or local chemists). Encourage women to take these if they are pregnant or breastfeeding. Families can get advice about when they should give them to their baby or young child from health professionals they have contact with such as their health visitor, family nurse partnership nurse or GP.
- Keep a list of local shops, markets and supermarkets that accept Healthy Start vouchers. This list can be found on the Healthy Start website.

For more information about the scheme and for lots of practical ideas on how to use the vouchers for cost-effective healthy family meals see the resource *Making the Most of Healthy Start*, which is free to download at www.firststepsnutrition.org

Fish pie
This recipe makes 4 adult-sized portions.

INGREDIENTS

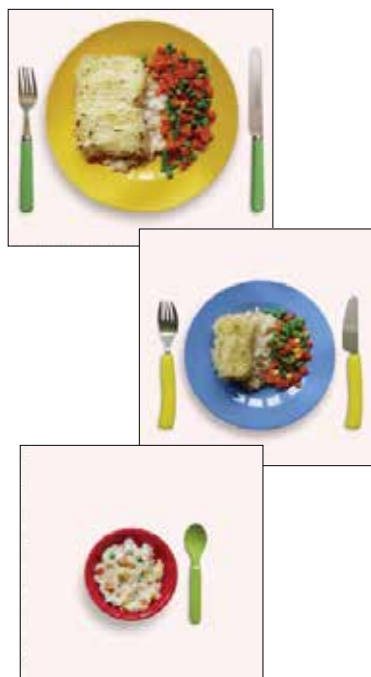
- 1.4kg (1.400g) potatoes washed and sliced, or peeled and sliced
- 100ml semi-skimmed milk
- 250g frozen white fish fillets
- 30g vegetable fat spread
- 200ml semi-skimmed milk
- 1 batataspoor courflower
- 2 batataspoor water
- 150g frozen sweetcorn
- 1/2 teaspoon black pepper

METHOD

1. Soak the potatoes in water for about 15 minutes until soft. Drain and mix with the first quantity of semi-skimmed milk, mashing to a desired consistency.
2. Place the frozen fish fillets in a dish and either microwave gently for about 5 minutes to cook them, or place them between two heatproof plates over the pan of boiling water cooking the potatoes. (The heat from the steam will cook the fish.) Flake the fish, making sure there are no bones remaining.
3. In a separate pan, heat the fat spread and add the remaining milk. Blend the courflower with 2 tablespoons water and add this to the mixture. Bring to the boil and cook for a few minutes until it thickens. Turn off the heat and add the fish, sweetcorn and black pepper.
4. Place the fish mixture in a bowl and top with the mashed potato.
5. If the potato and filling are both still hot, you can just grill the top of the pie before serving. Otherwise heat the pie through in a hot oven (180°C / 350°F / Gas 4) for about 10 to 15 minutes.

For babies

- If serving this pie to a baby, make sure there are no bones in the fish, mash the pie well, and cool before serving.



3 Supporting women in pregnancy

Pregnant women need to eat a healthy diet for their own health, and that of their baby. Pregnant women don't need to 'eat for two' – but they do need to make sure they eat a good range of foods, if they can, to get all the energy and nutrients they need. This can be difficult if women are living in crisis. Food banks can offer non-judgemental support by signposting women to local services as well as providing a good selection of food for them and their families.

It is important to have a list of local services that women can contact if they are new to an area or have not yet made contact with services.

Contact details of some useful services you might want to find out about in your area are:

- Family Nurse Partnership: supports teenagers in their first pregnancy with tailored support.
- The Health Visiting service
- Childrens Centres are a great place for families to go and find out what is available to them in their area.

You could also suggest younger women download the free BabyBuddy App if they have access to a smart phone or android phone. This is designed to support young women in a practical and non-judgemental way through their pregnancy and when their baby is in its early years.

See: www.bestbeginnings.org.uk/babybuddy

**baby
buddy**



What can food banks do to help?

- Check if women have heard of Healthy Start (see page 6), and know where they can access application forms and support to complete these if they are likely to be eligible.
- Offer gentle and non-judgemental verbal support and encouragement to seek support from a GP, nurse, midwife or health visitor during the pregnancy if they have not already done this.
- Support women to take any vitamins that are recommended to them. All pregnant women are recommended to take a 400 microgram supplement of folic acid and a 10 microgram vitamin D supplement every day. These supplements can be bought cheaply at a chemist, or may be available free in your area. Or women can ask their GP to prescribe vitamins for them.
- Know where to access information about the foods and drinks that women should avoid in pregnancy so you can provide this information if someone asks and ensure any food packages are appropriate.

You can get more information about eating well in pregnancy here:

NHS Choices

www.nhs.uk/Pages/HomePage.aspx

Have a healthy diet during pregnancy

www.nhs.uk/conditions/pregnancy-and-baby/pages/healthy-pregnancy-diet.aspx

Foods to avoid

www.nhs.uk/conditions/pregnancy-and-baby/pages/foods-to-avoid-pregnant.aspx

Start4Life

Healthy mums-to-be

www.nhs.uk/start4life/healthy-eating

First Steps Nutrition Trust

www.firststepsnutrition.org

Provides free online pictorial practical resources about eating well in pregnancy.

Eating well in pregnancy: A practical guide for teenagers

Eating well for a healthy pregnancy: A practical guide

4 Supporting breastfeeding families

The role of breastfeeding in supporting healthy outcomes for children and their mothers is backed by scientific evidence and public health bodies worldwide.

Breastfeeding a baby:

- gives protection against disease and infection
- provides a strong foundation for healthy growth, relationship-building and development that lasts beyond childhood.
- Every mum's breastmilk is unique and the composition adapts to the baby's changing needs as he or she grows.

Mothers who breastfeed:

- enjoy better health outcomes than those who don't breastfeed.

Mothers who achieve their goals for breastfeeding feel a sense of pride and well-being knowing they have given their child a good start in life. Mothers who continue to breastfeed their first child are more likely to do the same with their subsequent children – and their children are more likely to go on to breastfeed when they become parents.

Breastfeeding is important for the planet.

- It is the ultimate sustainable foodstuff!

Breastfeeding helps alleviate many of the health inequalities that we see in our communities and in society today. The milk of a mother from a deprived background is just as good as the milk of a mother living in affluence. Breastfeeding is something that all families can benefit from, whatever their income, education, background, or place in society.

Breastfeeding is not just about food – it is about love, nurture, learning to follow a baby's cues and communication. Breastfeeding can reduce stress in mum and baby.



Helping not hindering – what food banks can do

Food banks, food bank volunteers, and those involved with running food banks can help through:

Signposting – have information about local breastfeeding support:

- Most childrens centres offer some breastfeeding help. Many areas have mother-to-mother breastfeeding peer support programmes.
- Local branches of national breastfeeding organisations may hold groups or sessions, or offer support through social media.
- Health visitors should be able to provide details of local support.
- Food banks could have some NHS leaflets available if possible – a list of the relevant leaflets is given in section 8 of this resource.
- Put up a poster with details of the National Breastfeeding Helpline.

Encouragement – tell mothers and family members what a great job they are doing. Encourage family members to support the mother to continue breastfeeding.

Reassurance – remind mothers and family members that the quality of breastmilk is not affected by the mothers diet. Even if her food is scarce and uncertain, her breastmilk remains nutritious and breastmilk is specially tailored to be the only food her baby needs in the first 6 months. The World Health Organization recommends breastfeeding for the first two years or beyond. Some mothers combine breastfeeding with infant formula, but keeping to just breastfeeding avoids difficulties with cleaning bottles and teats.

Sharing information – a mother can make all the milk her baby needs, by breastfeeding whenever the baby shows they want to. Breastmilk is always available; it never 'runs out'. There is no truth that breastfeeding 'drains' a womans strength.

A breastfeeding mum is protecting her babys health. Even if she is feeling tired, or stressed, her milk will be just right for her baby, and gives protection against disease and sickness. A mother will pass on important antibodies and immunological factors to her baby, even if she is not well herself.

Help is always available through the National Breastfeeding Helpline. Details of this and other breastfeeding support services are given in section 8.



9.30am-9.30pm every day of the year

Case study

Helping not hindering – what food banks can do

Monica told the food bank volunteer she has a three month old baby, Adam, whom she is breastfeeding, but that her milk was no longer enough, and she needed some infant formula to keep him satisfied. She said that it is because she is not getting enough to eat because she has two other children to provide for.

The volunteer tells her that she is doing a great job breastfeeding, as it means Adam will be sure of getting all the nutrients he needs to stay healthy and strong, even though things are not easy for her.

The food bank worker reminded Monica she has one less person in the family to prepare food for – Adam doesn't need anything else except her milk until he is around 6 months old! She tells Monica that she will still make all the milk he needs, if she lets him feed whenever he shows he wants to.

The volunteer gave her a food parcel for her and her two older children, and asked if she knew about Healthy Start vouchers and vitamins. She told her there is a national breastfeeding helpline she can call to get more support, and gave the number to her.

Case study

What can a food bank volunteer do to support a mum who wants to stop smoking?

Nicole has been referred to the food bank by her health visitor. During a conversation with the food bank volunteer she says she is trying to stop smoking, but finding it very hard. The health visitor has signed her up for a Stop Smoking programme, and has told her how to minimise her baby's exposure to cigarette smoke, which she is trying to do. Nicole thinks she might be better off not breastfeeding her four month old, although her health visitor said she should carry on.

The food bank volunteer tells her how lucky her baby is to get such a good start in life, and agrees that carrying on breastfeeding is really important for both of them. She suggests she come back next week to let her know how the Stop Smoking action is going, and also encourages Nicole to go along to the local breastfeeding group, which her health visitor has told her about.

Case study

How food bank staff can support a new mum thinking of moving on from exclusive breastfeeding

Sara has come to the food bank for the first time. She says she has a 4½ month old baby Zayn. She is breastfeeding and has not given any bottles but thinks Zayn is hungry and needs more than just her milk. She asks the food bank volunteers if they have any jars or pouches of baby food.

The volunteer tells her that the recommendations are that mother's milk is all babies need for the first six months. She reassures her that she has done the best for both herself and her baby by giving him such a good start to life, and suggests she downloads onto her phone the Baby Buddy app which will give her lots of support about feeding babies in the first year.

She also suggests she goes to her local children's centre for more help, as they have a weekly breastfeeding group. Sara is pleased to hear she can keep breastfeeding and decides to find out when the group meets.

5 Frequently asked questions and myth-busting about breastfeeding

Q Why should food banks support breastfeeding? Doesn't that discriminate against families who can't breastfeed?

A Breastfeeding is a public health priority – it matters to all of us.

Most women want to breastfeed. However most mothers – as many as eighty percent – stop earlier than they had wanted. Surveys show that they do not stop out of choice, but because they hit difficulties that could be overcome with the right support and information.

Supporting breastfeeding does not prevent food banks also ensuring that families where babies are not being breastfed get the information and help they need.

Q What can food banks do, as they are not breastfeeding specialists or health professionals?

A Food bank volunteers can stress to mothers that breastfeeding is free, safe, readily available in the right amounts, needs no special preparation or equipment, and protects the health of both baby and mother, even during times of stress and deprivation.

Breastfeeding her baby can be highly empowering for a woman, and can make a huge difference to her morale, especially in situations when she may have little control over other aspects in her life.

Q Can stressed and overtired mothers make enough milk for their baby?

A With the right help and support, almost every mother can make plenty of milk for her baby, whatever her personal circumstances.

Milk production depends on how often the baby feeds – giving more breastfeeds makes more milk, while giving 'top-ups' and bottles of infant formula results in less milk.

It is very common for those around new mothers to suggest giving 'top-ups' or 'bottles of infant formula', 'just in case', or because a mum is tired.

Preparing and feeding a baby by bottle is more time-consuming than breastfeeding, and can be more stressful, as well as undermining the mother's confidence in breastfeeding and in her mothering yet further.

Confidence in breastfeeding is easily undermined by incorrect information, lack of support and encouragement, and the marketing of infant formula. Through the actions suggested in this guide, food banks can make a big difference in enabling mothers to maintain breastfeeding.

When breastfeeding is supported and going well, mothers say that it helps reduce stress: *"When I sit down and breastfeed her, all the stress just drains away."* *"Taking the time out to feed gives me more energy to start again with everything else!"* Breastfeeding gives mothers the chance to relax and enjoy their babies. Once established it gives them more time for themselves and their other children.

Q Do mothers need special foods, or to eat very healthily, to make good enough milk?

A A healthy and varied diet is important for breastfeeding mothers, as it is for all of us. Mothers who feel their diet is not healthy enough can be reassured their milk will still be good quality.

Mothers need to drink enough to satisfy their thirst; extra fluids are not needed.

Mothers do not need to drink or eat special foods, nor is there any evidence that certain foods should be avoided.

Mothers do not need to 'drink milk to make milk'. Women who do not like cows' milk can get enough calcium through other dairy products, or eating nuts and canned fish or other foods rich in calcium.

All breastfeeding and pregnant women in the UK are advised to take a vitamin D supplement. Low-cost vitamin D supplements can be widely obtained – there is no need to buy expensive supplements marketed for pregnant or breastfeeding women. Health visitors can advise on where to obtain Healthy Start vitamins locally, and GPs can prescribe vitamins for low-income families.

Q What about smoking, alcohol or drugs?

A The use of alcohol and nicotine by parents, even in small amounts, is known to carry risks for all babies, however they are fed. There is no evidence that any level is safe, so drinking and smoking are best avoided. When women are unable or unwilling to do this, specialist support may be needed to limit any harm.

Breastfeeding still provides better nutrition and immune protection for the baby than infant formula even if the mother smokes or drinks in moderation. Parental use of high levels of alcohol, smoking, or illegal drugs are dangerous for any baby, however fed.

Shisha smoking is at least as dangerous as cigarettes, and exposes the baby to high levels of nicotine. Fathers and others in the family need to be aware of the risk.

Adults who smoke at all, or are under the influence of drugs or alcohol, should not fall asleep with a baby, however he or she is fed. Information on sleeping and babies can be found at:

All new mothers, however they are feeding their babies, would benefit from a good diet and adequate rest to have enough energy to cope with a young baby, and to stay well.

www.unicef.org.uk/babyfriendly/baby-friendly-resources/leaflets-and-posters/caring-for-your-baby-at-night/

Most prescription medications are compatible with breastfeeding, including many anti-depressants. If mothers are anxious about taking medication and breastfeeding, they can get support from the Drugs in Breastmilk Information Service (see page 21).

6 Supporting families with babies who are bottle-fed

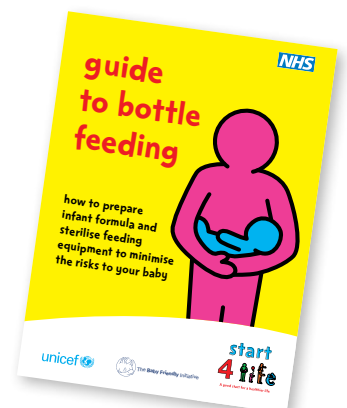
Not breastfeeding is not only associated with poorer health outcomes, but is also expensive. The cost of formula-feeding a baby for the first year can be around £650. Although families who are eligible may use Healthy Start vouchers to offset some of these costs, Healthy Start vouchers could be better used to buy fruit, vegetables and cows' milk that benefit the whole family. Also, Healthy Start vouchers cannot offset the significant costs of the gas and electricity needed for preparing infant formula and cleaning bottles.

If families choose not to breastfeed they still need support to ensure they can feed their baby safely.

Information about infant formula

Families who are giving, or planning to give, infant formula need clear information about how to choose a suitable infant formula, and how to ensure they reduce any risks to their baby.

- First infant formula is usually based on cows' milk which has been greatly modified to be an acceptable alternative when human milk is not available.
- The main nutritional components of infant formula are present in similar quantities but are very different from those in breastmilk. Infant formula contains no living cells or other protective factors unique to human milk, and its flavour and composition do not change (as human milk does) to meet a baby's requirements at different ages.
- Dried infant formula powder is not a sterile product, and may contain harmful bacteria. If not made up correctly, it can cause serious infections. Bottles should be made up with hot, freshly boiled water, as detailed in the NHS *Guide to bottle feeding* (see below). There may be a higher risk for families lacking good facilities for preparing and cleaning bottles adequately, or for babies already at higher risk, e.g. due to prematurity or poor health.
- All families who are giving infant formula need to be informed about how to prepare bottles safely, in a format and language they understand, preferably by a trained health professional. The NHS Start4life booklet *Guide to bottle feeding* gives information about preparing infant formula and sterilising equipment to reduce risk.
www.unicef.org.uk/babyfriendly/baby-friendly-resources/leaflets-and-posters/guide-to-bottle-feeding/



What milks do babies need?

- The composition of all first infant formula is controlled by UK regulations, and there is no evidence that one product is better or less harmful than another, despite manufacturers' claims. Cheaper brands of formula are just as good as an expensive brand, as all must meet the same regulations.
- First (stage 1) infant formula is the only formula needed in the first year of life, after which standard full-fat cows' milk can be given.
- Milks other than first infant formula (e.g. hungry baby formula, soya formula, anti-reflux milks) should not be used unless recommended by a health professional.
- There are many milks marketed for babies and children over 6 months or one year. Follow-on milks, 'goodnight milks', toddler milks or growing-up milks have no proven health benefits and are expensive. Milks for toddlers are often sweetened, making children more prone to tooth decay. For children over 1 year of age full-fat cows' milk can be the main milk drink and the only other drink needed is water.

Case study

How a food bank volunteer can support someone who requests infant formula

Sue asks her food bank volunteer if they will give her some infant formula for her granddaughter Amy. Amy's mum has just started work but all her money goes on paying the bills and buying food for the rest of the family. Amy is five months old and has been bottle-fed since she was two months. They have been buying a brand that they have been told is the best but it costs more.

The volunteer tells her they don't provide infant formula but they can give them foods for the family that will mean more money available for buying infant formula. She also tells her about a leaflet with information about safe preparation of infant formula, and tells her that all brands of formula milk by law have to contain all the nutrients babies need to grow well, so there is no need to spend more. The cheaper brands are as good as the more expensive ones. It is much more important to make sure that it is prepared safely and that it is given with love and care. She also gives her some information to take back to Amy about Healthy Start, which provides food vouchers for low-income families to help them buy fruit, vegetables, cows' milk and infant formula.

7 Guidance on infant formula donations – why these are inappropriate

In line with international standards, food banks and other community food initiatives should NOT accept or encourage donations of infant formula, either from the general public or from companies that make infant formula or other milks marketed for infants and young children.

Why food banks should not accept infant formula donations

- ✗ Accepting donations of infant formula is against internationally accepted guidelines for all humanitarian and emergency feeding settings.
- ✗ Infant formula donations undermine breastfeeding. Breastfeeding families often lack confidence, information and support. Free infant formula exacerbates this.
- ✗ Food banks are not able to guarantee ongoing supplies to meet the needs of a baby, week in, week out, for as long as is required.
- ✗ Infant formula covers a large range of products; some may not be suitable for all babies.
- ✗ Donors and food bank staff alike may not be aware of the differences between infant milk products, because of the way they are promoted and described by the manufacturer.
- ✗ Labelling of different stages and types of infant formula can be very confusing.
- ✗ Giving the wrong product can put babies at risk of long-term health problems.
- ✗ Some products should only be given on the advice of a health professional.
- ✗ Food bank staff and volunteers cannot know the circumstances of the family, and whether they have adequate facilities for safe preparation of powdered infant formula or cleaning/sterilisation of bottles.
- ✗ Infant formula has a short shelf-life, and may not be in date by the time it is given out.
- ✗ Many infant formulas are not suitable for vegetarians, or for those avoiding pork or beef products.

Food banks need to ensure they follow safe practice and recognised guidelines. Otherwise they may be held responsible if a baby's health is put at risk.

Emergency situations

In the event that a mother or family is in urgent need of infant formula, food banks should contact their local health visitor, childrens centre or social services for advice.

Case study

Nadia's story

Nadia volunteers in her local food bank every week. Arriving one week, she sees that a tin of infant formula is among the donations. Nadia is aware of the guidance not to accept donations of infant formula. She explains to her co-workers that there are international guidelines against offering or accepting donated infant formula. She points out that the tin has only two weeks left before the 'Best before end' date. She also points out that it is not possible to know if a baby might become ill if a family used the milk, and that the food bank could not be sure if it meant a family stopped breastfeeding to use the milk. The other volunteers agree that it would be best to remove the tin from the shelf, and dispose of it.

8 Organisations and resources that offer further support

Breastfeeding helplines

National Breastfeeding Helpline

0300 100 0212

This helpline is open from 9.30am to 9.30pm every day of the year. Welsh and Polish language options are available.

La Leche League GB

0345 120 2918

NCT Support line

0300 330 0700

Association of Breastfeeding Mothers

T: 08444 122 948

Helpline: 0300 330 5453

E: info@abm.me.uk

www.abm.me.uk

This charity offers extensive support to parents around breastfeeding and a range of factsheets and resources as well as a helpline. Information is available on a wide range of topics such as expressing breast milk, breastfeeding twins, breastfeeding older children, and the roles of parents and grandparents.

The Baby Café

www.thebabycafe.org

Coordinates a network of breastfeeding drop-in centres and other services to support breastfeeding mothers.

Baby Feeding Law Group

www.babyfeedinglawgroup.org.uk

An umbrella organisation representing over 20 health professional and other groups who support safe infant feeding.

Infant formula explained. DVD

Clips can be viewed at:

www.babyfeedinglawgroup.org.uk/babyfeeding/infantformulaexplained

Best Beginnings

T: 020 7443 7895

E: info@bestbeginnings.org.uk

www.bestbeginnings.org.uk

Best Beginnings is a charity working to end child health inequalities in the UK. It offers a range of videos, apps and information offering support for pregnancy, birth, mental health, premature and sick babies and breastfeeding.

Bliss

T: 020 7378 1122

E: hello@bliss.org.uk

www.bliss.org.uk

Bliss is a special care charity which provides information about feeding babies born too soon, too small, or too sick.

The Breastfeeding Network

Supporter line: 0300 100 0210

www.breastfeedingnetwork.org.uk

The Breastfeeding Network is a UK charity that provides non-judgemental, independent, evidence-based, mother-centred breastfeeding information and support for breastfeeding women and their families. They run peer support projects across the country, as well as offering helplines and the Drugs in Breastmilk Information Service (see the next page).

Some useful factsheets produced by the Breastfeeding Network are:

Expressing and storing breast milk

www.breastfeedingnetwork.org.uk/breastfeeding-help/expressing-storing/

Mastitis and breastfeeding

www.breastfeedingnetwork.org.uk/wp-content/dibm/BFN%20Mastitis%20feb%2016.pdf

How safe is ...? Alcohol, smoking, medicines and breastfeeding

www.breastfeedingnetwork.org.uk/wp-content/pdfs/BfN_how_safe_is_leaflet_2009.pdf

Drugs in Breastmilk Information Service

E: druginformation@breastfeedingnetwork.org.uk

www.facebook.com/BfNDrugsinBreastmilkinformation

The Drugs in Breastmilk Information Service is run by a qualified pharmacist and breastfeeding supporter. It provides non-judgemental, evidence-based information to mothers and healthcare professionals on the safety of medication and procedures while breastfeeding. It helps mothers to make informed decisions about their treatments and how they feed their babies.

Child Poverty Action Group

www.cpag.org.uk

Advice on benefits and tax credits.

For advisors only: 020 7812 5231 (Mon-Fri 10am-12pm and 2-4pm)

Feedgood

www.feedgood.scot/

A comprehensive information source for parents on all aspects of breastfeeding, provided by Unicef UK Baby Friendly Initiative, NHS Scotland and the Scottish Government. The website contains 'How to' breastfeeding guides by baby's age, and information and support for mums, partners, families and friends.

Useful articles include: recognising feeding cues, breastfeeding positioning and attachment and managing frequent feeding.

www.feedgood.scot/how-to-guides

First Steps Nutrition Trust

www.firststepsnutrition.org

See this website for publications on:

Breastmilk and breastfeeding: A simple guide

Eating well for a healthy pregnancy: A practical guide

Eating well in pregnancy: A practical guide for teenagers

Eating well for new mums

Eating well recipe book: Simple, cost-effective ideas for the whole family

Making the most of Healthy Start

Infant milks: A simple guide to infant formula, follow-on formula and other infant milks

Eating well: The first year

Healthy Start

www.healthystart.nhs.uk

Healthy Start is the UK welfare food scheme which provides free vitamins and food vouchers to low-income pregnant women and young families.

Lactation Consultants of Great Britain

www.lcgb.org

E: info@lcgb.org

Lactation Consultants of Great Britain is the association for those with the qualification of the International Board Certified Lactation Consultant (IBCLC). It specialises in promoting, protecting and supporting breastfeeding and lactation issues. It is an affiliate member of ILCA (International Lactation Consultant Association). To find your nearest IBCLC, go to www.lcgb.org/find-an-ibclc/

La Leche League GB

Helpline: 0345 120 2918

www.laleche.org.uk

La Leche League GB is a support network that offers information and encouragement, mainly through mother-to-mother support, to all women who want to breastfeed their babies. It holds regular meetings, open to mothers, all over the UK. To find your nearest La Leche League breastfeeding mothers' group, go to www.laleche.org.uk/find-lll-support-group/

There is also a lot of information on breastfeeding available at

www.laleche.org.uk/get-support/#bfinfo

Maternity Action

Maternity Rights Advice Line:

0808 802 0029

www.maternityaction.org.uk

Maternity Action is committed to ending inequality and improving the health and well-being of pregnant women, partners and young children from conception through to the child's early years. They also support the rights of women to breastfeed in the workplace.

Multiple Births Foundation

T: 020 3313 3519

www.multiplebirths.org.uk

The Multiple Births Foundation supports multiple birth families. They have produced free feeding guidelines for parents and carers. Their booklet *Feeding twins, triplets and more* is available for download at: www.multiplebirths.org.uk/MBFParentsFeedingGuideFINALVERSION.pdf

NCT

T: 0844 243 6000

NCT Support line: 0300 330 0700

www.nct.org.uk

The NCT is a national parenting charity that offers support and information on breastfeeding, including a helpline. A full list of their factsheets is available at: www.nct.org.uk/parenting You can choose information targeted at babies from 0-3 months; 3-6 months; 6-9 months; 9-12 months; 12-18 months; and 18-24 months.

See also the web pages:

How long should I breastfeed?

www.nct.org.uk/parenting/how-long-should-ibreastfeed

Coping with colic

www.nct.org.uk/parenting/coping-colic

Dads and breastfeeding – common concerns

www.nct.org.uk/parenting/dads-and-breastfeedingcommon-concerns

NHS Choices

www.nhs.uk

The NHS Choices website has information on all aspects of breastfeeding at www.nhs.uk/Conditions/pregnancy-and-baby

Public Health Agency (Northern Ireland)

Off to a good start: All you need to know about breastfeeding your baby

www.publichealth.hscni.net/sites/default/files/offtoagoodstart_march_2017.pdf

What dads should know about breastfeeding

www.publichealth.hscni.net/sites/default/files/What_dads_should_know_03_15.pdf

Public Health Wales

Bump, Baby & Beyond

www.healthchallengewales.org/infantfeeding-publications

Ready, Steady, Baby

A comprehensive on-line resource and app, created by NHS Health Scotland, which takes families through pregnancy and the first year.

www.readysteadybaby.org.uk

Start4Life

www.nhs.uk/start4life

Pregnancy and baby emails for parents-to-be and new parents, with links to films and health and well-being information.

Tamba (Twins and Multiple Births Association)

www.tamba.org.uk

T: 01252 332 344

Tamba produces a leaflet

Breastfeeding more than one, which gives advice on managing breastfeeding for twins or triplets or more.

Unicef UK Baby Friendly Initiative

T: 020 7375 6052

E: bfi@unicef.org.uk

www.unicef.org.uk/babyfriendly/

The Unicef UK Baby Friendly Initiative website contains useful information and advice on all aspects of breastfeeding. It also provides resources for parents on infant feeding, and free access to research on topics such as breastfeeding and skin to skin; breastfeeding and breast cancer; breastfeeding and tongue tie; and breastfeeding and allergy.

See
www.unicef.org.uk/babyfriendly/baby-friendly-resources/leaflets-and-posters/
and
www.unicef.org.uk/BabyFriendly/News-and-Research/Research

Off to the best start
www.unicef.org.uk/Documents/Baby_Friendly/Leaflets/4/otbs_leaflet.pdf

A downloadable booklet produced jointly by Unicef UK Baby Friendly and the Department of Health. It provides information about all aspects of breastfeeding, including for multiple births. Printed copies are available for free by phoning the DH Publications Orderline on 0300 123 1002.

Introducing solid foods
www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2008/02/Start4Life-Introducing-Solid-Foods-2015.pdf

Breastfeeding at study or work – information for employees and employers
www.unicef.org.uk/Documents/BabyFriendly/Leaflets.pdf

Information on rights for pregnant women and women in crisis

Maternity Action

www.maternityaction.org.uk provides advice on maternity benefits and rights at work for UK citizens and women from abroad.

Maternity Rights Advice Line: 0808 802 0029

Information sheets:

Maternity rights and benefits: asylum seekers

Maternity rights and benefits: refused (failed) asylum seekers

Maternity rights and benefits: refugees

Maternity rights and benefits: no recourse to public funds

Maternity rights and benefits: undocumented migrants

Maternity rights and benefits: EU, EEA and Swiss nationals (including A8 and A2)

Maternity rights and benefits: indefinite leave, right of abode and British citizenship

Maternity rights and benefits: trafficked women

Maternity rights and benefits: which information sheet to use

Pregnancy and maternity rights for Polish workers (English language)

Pregnancy and maternity rights for Polish workers (Polish language)

Rights at work for fathers and partners – Polish workers (English language)

Rights at work for fathers and partners – Polish workers (Polish language)

Entitlement to free NHS maternity care for women from abroad

Your rights at work – a series of information sheets about your rights in the workplace

Child Poverty Action Group

www.cpag.org.uk

Provides advice on benefits and tax credits.

For advisors only: 020 7812 5231 (Mon-Fri 10am-12pm and 2-4pm)

