

Jersey Births and Breastfeeding Profile 2018



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Contents

Key findings.....	3
Background Information	3
Births	4
Birth weight	6
Multiple births.....	7
Age of mothers.....	7
Teenage mothers.....	8
Breastfeeding patterns	9
Breastfeeding at birth.....	9
Breast feeding at 6-8 weeks.....	11
Breastfeeding at 9 months - 1 year	13
Hospital admissions.....	13
Infant mortality	14
Background notes.....	15
Data Sources	15
Confidence Intervals.....	15

Births and Breastfeeding Profile 2018

Births



Numbers of Births

2015: **1,021**

2016: **1,020**

2017: **954**

Caesarean Sections
accounted for

30%

of births

1 In **3**

mothers were aged

35 years or older

Breastfeeding



Over 75%

of mothers were

breastfeeding

before **discharge**

from hospital

60% of mothers

continued to

breastfeed at the

6-8 week check

Key findings¹

In 2017

- There were 954 live births² to Jersey residents, the smallest annual number of births since 2002
- the proportion of births by caesarean section (30 per cent) was higher than in England
- older mothers were more likely to elect to have a caesarean section
- the proportion of mothers classed as 'older' (aged 35 or over) in Jersey has been increasing from around a quarter (24 per cent) of all live births in 2000 to around a third (33 per cent)
- over three-quarters (78 per cent) of mothers were breastfeeding their babies before being discharged from maternity care
- three out of five babies (60 per cent) were being breastfed at 6-8 weeks of age
- at the 9 month - 1 year check, one in five (20 per cent) babies were receiving breastmilk
- rates of breastfeeding continue to be higher in rural parishes than in urban and sub-urban parishes
- over the period 2014-2016³, infant mortality in Jersey was 0.7 per 1,000 live births, significantly lower than the rate of 3.9 per 1,000 live births in England

Background Information

Details of all babies born in Jersey are recorded on the hospital system, TRAK, and also on the Child Health System, administered by the Preventative Programmes Child Health Team. All babies born in Jersey are offered a six-week check by a GP to check their development. Babies are then seen again by a Family Nursing and Health Care (FNHC) health visitor at a child health clinic between 9 months and 1 year after birth for their 1 year review. Information gathered during these interactions with health professionals is presented in this report.

¹ Information presented in this report is based on data provided by the Health and Social Services Department, GPs and Family Nursing and Home Care (FNHC), processed by Statistics Jersey. Information on the nature of sources of data and data handling are given in the background notes section of this report.

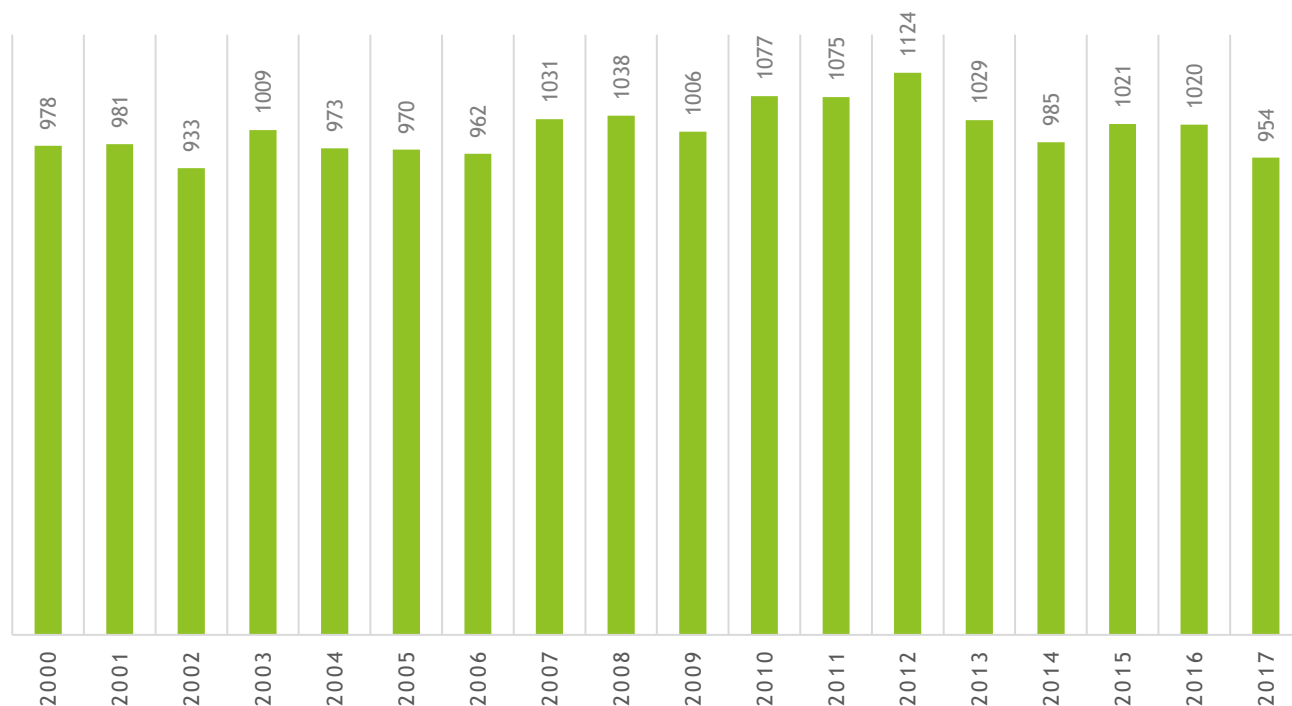
² Details of births refer to all births to Jersey resident mothers including those babies born off-Island. These details differ slightly to the information collected by the Superintendent Registrar who collects details of all babies born on-Island.

³ The latest information available for England.

Births

In 2017, there were 954 live births in Jersey. This is the lowest overall total since 2002 which recorded 933 live births (Figure 2). The mean number of live births per year over the period 2000 - 2017 is 1,009.

FIGURE 2: NUMBER OF LIVE BIRTHS EACH YEAR IN JERSEY



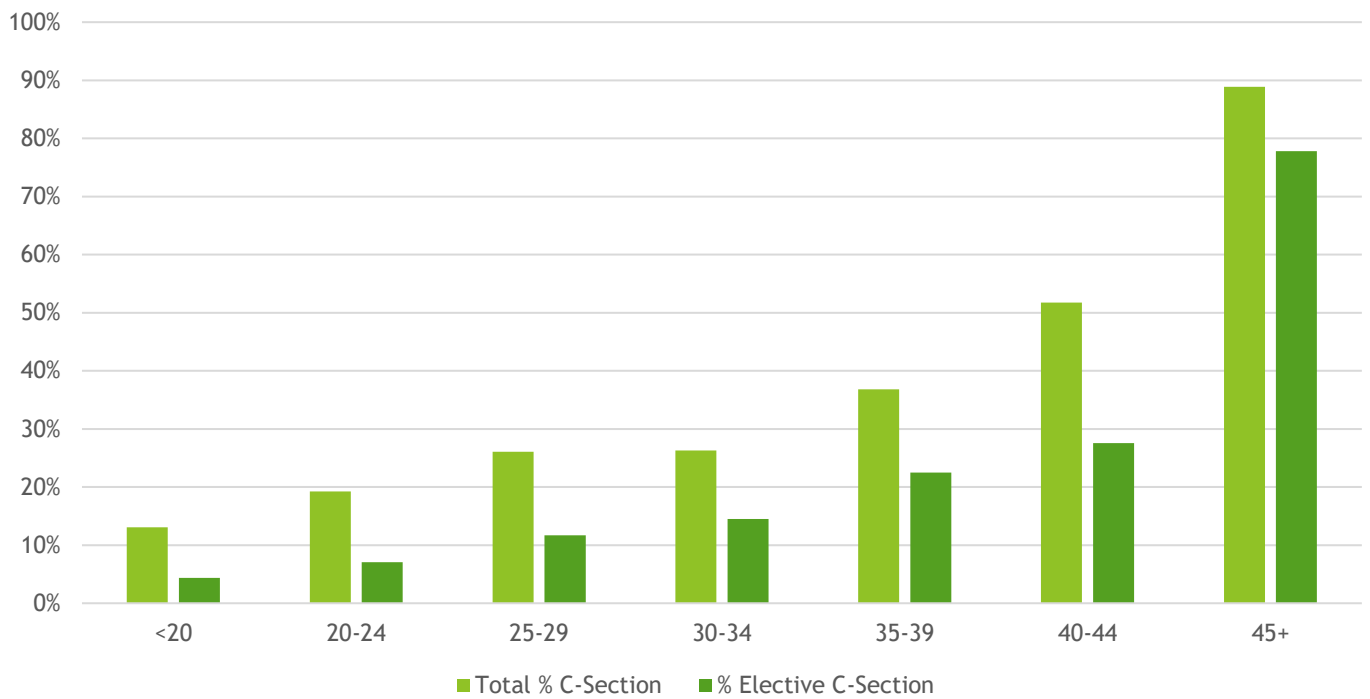
Almost a third (30 per cent) of births over the three year period 2015-2017 were delivered by caesarean section⁴, significantly more than England (26 per cent of births in financial year 2015-2016⁵, the latest period available).

Considering the proportion of mothers who have a caesarean section by their age shows that older mothers were more likely to have a caesarean, and were more likely to have an elective caesarean section. Figure 3 shows more than half of births to mothers aged 40 or over were by caesarean section during the period 2015-2017. Over three quarters of mothers in Jersey aged 45 or over had an elective caesarean in 2015-2017.

⁴ From 2016 caesarean information is no longer recorded on the CarePlus system and information is taken from the TRAK system. This data only records numbers of caesarean sections, not numbers of births, nor whether the baby was live. From 2016, the percentage is calculated by dividing the number of caesarean sections recorded in a given year by the number of mothers giving birth to live babies (be that a single or multiple birth) in that same year.

⁵ Public Health England, Overview of Child Health, updated March 2018, available from fingertips.phe.org.uk/profile-group/child-health/profile/child-health-overview/

FIGURE 3: PROPORTION OF WOMEN HAVING A CAESAREAN SECTION BY AGE, 2015-2017



In Jersey, a quarter of all births (25 per cent) were by caesarean section in 2000; this increased to a third of all births (32 per cent) in 2007, since when the proportion has stabilised (Figure 4).

FIGURE 4: PROPORTION OF WOMAN HAVING CAESAREAN SECTIONS, BY YEAR, 2000-2017

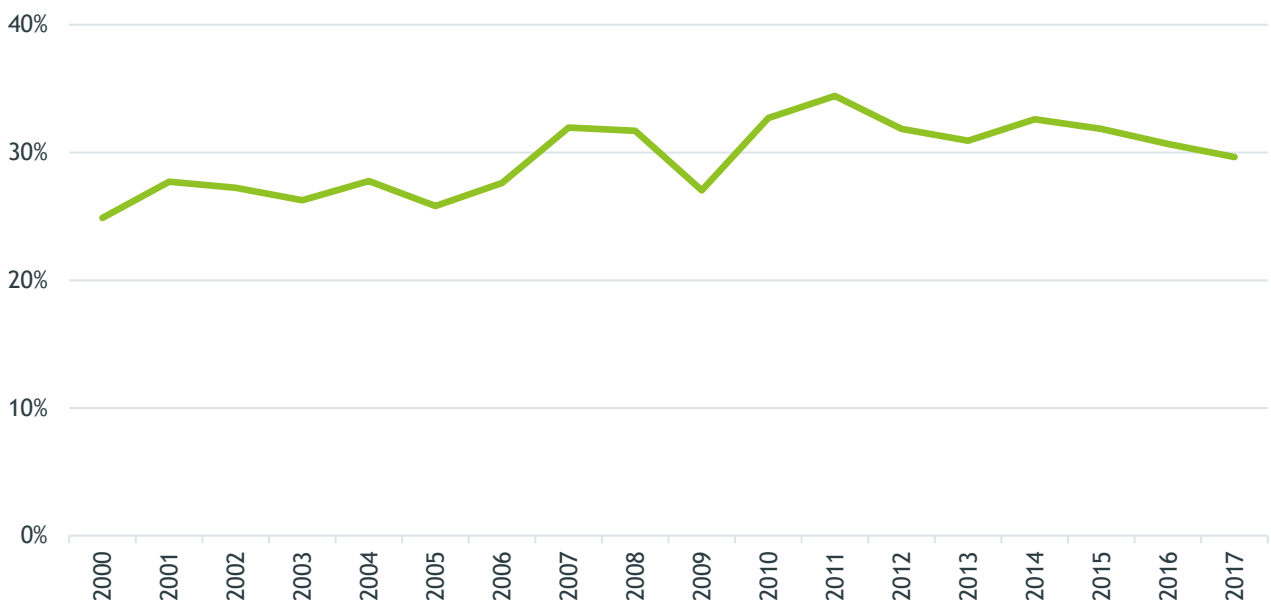
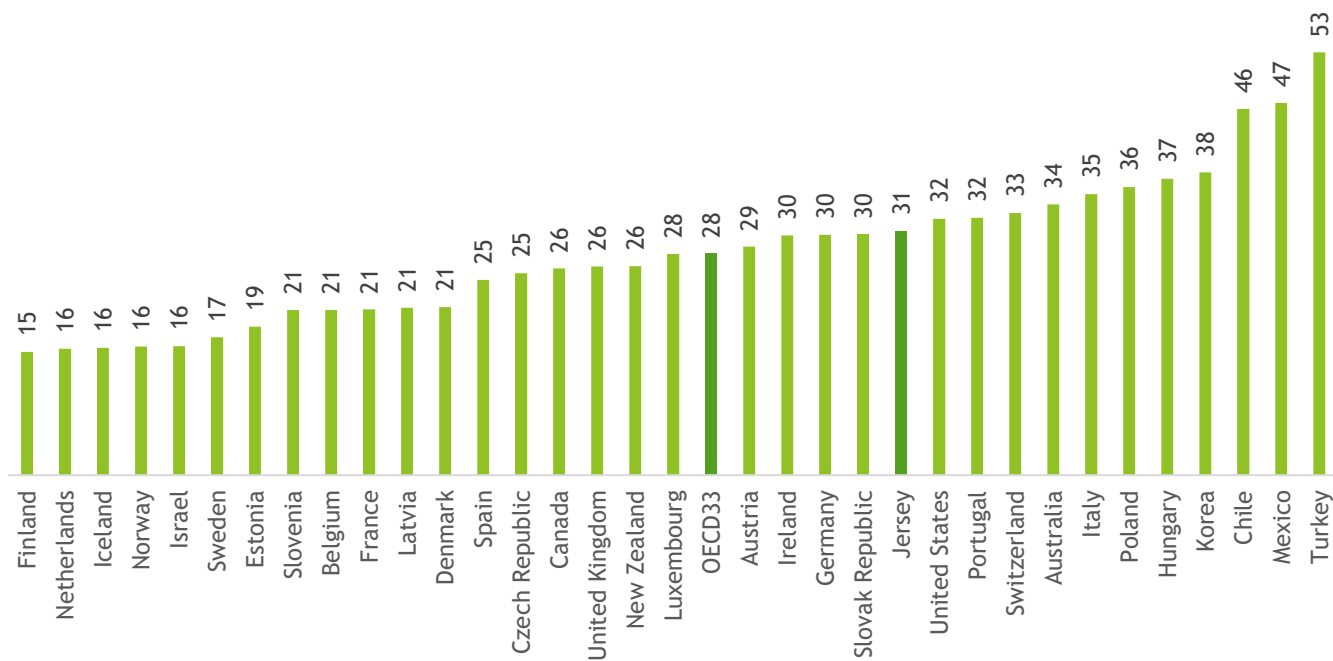


Figure 5 shows the pattern of caesarean sections across OECD countries. Jersey was similar to the average for the OECD (27.9 per cent, labelled as OECD33 in Figure 5).

FIGURE 5: PROPORTION OF WOMEN HAVING A CAESAREAN SECTION BY OECD COUNTRY, 2015



Source: Statistics Jersey and OECD

Birth weight

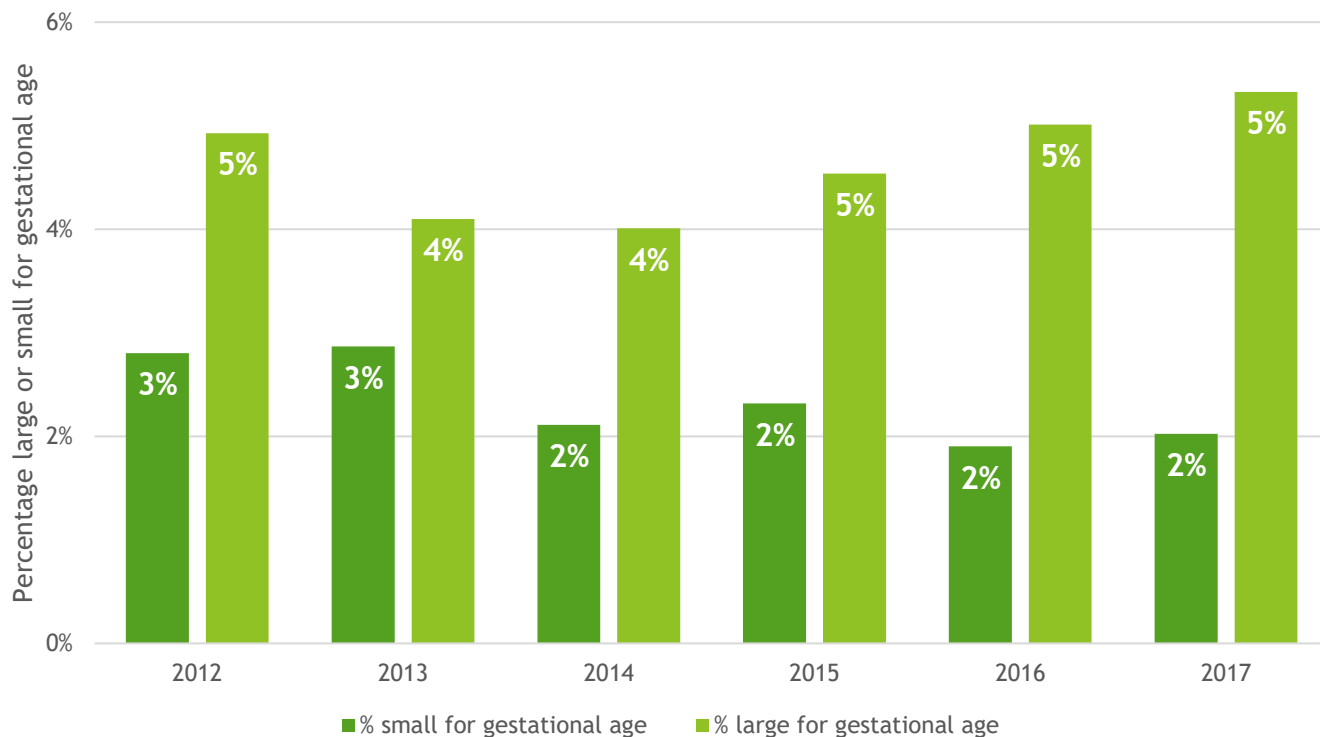
A baby is considered to have a healthy birthweight if it lies between the 5th and 95th centile of weight for their gestational age⁶. Babies whose birthweights lie above the 95th centile are considered ‘large for gestational age’, while those below the 5th centile are considered ‘small for gestational age’.

In 2017, of the 954 babies born, 939 could be assigned a gestational age⁷. Of these, 19 (2 per cent) were considered small for gestational age and 50 (5 per cent) were large for gestational age. Figure 6 shows the percentages of babies with small and large birthweights for gestational age over the period 2012- 2017.

⁶ Calculated using the LMS growth add-in charts based on the WHO - British 1990 birth cohort

⁷ Gestational age is estimated from first ultrasound scan or based on last menstrual period

FIGURE 6: PROPORTION APPROPRIATE, SMALL AND LARGE BIRTHWEIGHT FOR GESTATIONAL AGE, 2012-2017



Multiple births

In 2017, 16 children were born as part of a multiple birth (twins, triplets etc.) compared to 21 children in 2016 and 26 in 2015 (Figure 7). The proportion of children born as part of a multiple birth has remained stable at around 2 per cent.

Age of mothers

The mean average age of all mothers having children locally in 2017 was 32 years. The proportion of older mothers in Jersey has increased over the last 15 years, with a third (33 per cent) of mothers aged 35 or over in 2017 (Figure 8). In England, the proportion of mothers aged 35 or over was significantly lower (21 per cent⁸) for financial year 2015-2016.

⁸ Public Health England (PHE) Overview of Child Health updated March 2018, available from <https://fingertips.phe.org.uk/profile-group/child-health/profile/child-health-overview>

FIGURE 7: PROPORTION OF MOTHERS IN JERSEY AGED 35 YEARS OR OVER AT THE TIME OF BIRTH

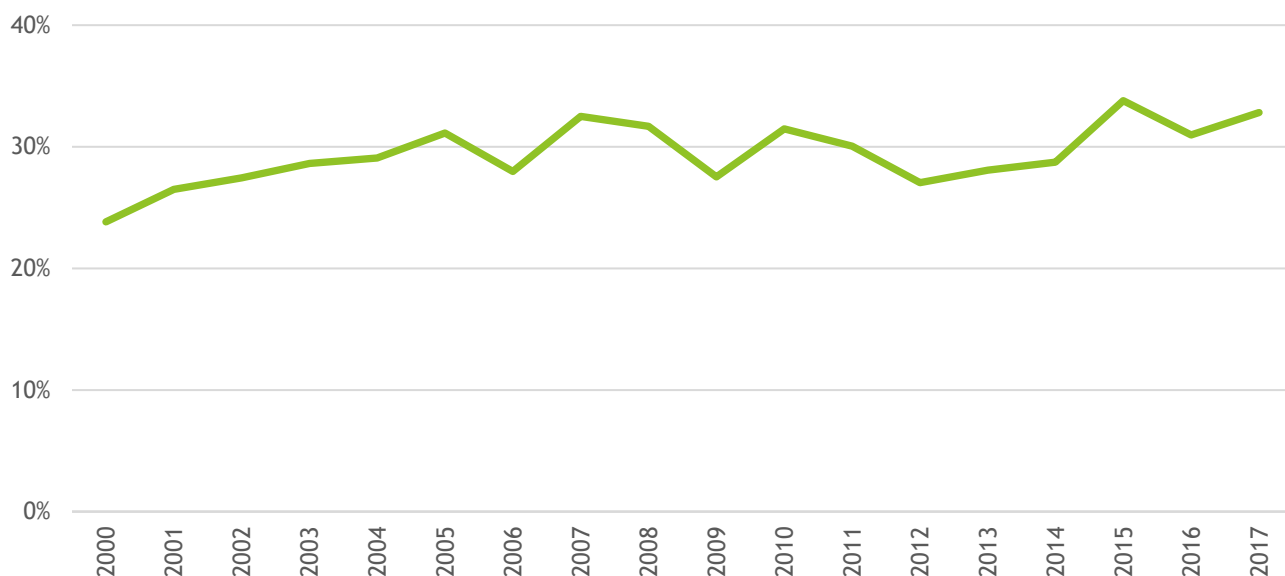


TABLE 1: PROPORTION OF MOTHERS AGED 35 YEARS OR OVER AT TIME OF BIRTH, EUROPEAN COUNTRIES AND JERSEY, 2015

Country	Percentage of mothers aged 35 or over
EU ⁹	22.9
Poland	15.4
France	19.0
UK	21.5
Portugal	29.6
Jersey	33.8
Ireland	34.5
Spain	37.6

Source: Statistics Jersey and WHO Europe Region¹⁰

Teenage mothers

Since 2000 there has been an average of 6 births a year to teenage mothers (mother under 18 years old).

Over the period 2015-2017, less than 1 per cent of births were to mothers aged under-18 years. This is similar to the average in England over the financial year 2016-2017 (0.8 per cent).¹¹

The World Health Organisation define teenage pregnancy as the proportion of births to mothers under 20 years of age. Using this definition and data from a similar time period, Table 2 shows the comparative figures for teenage pregnancies across Jersey, the EU and selected European countries. Jersey has a lower

⁹ Does not include figures for Belgium, Italy, Malta and Slovakia which are at present unavailable for 2015

¹⁰ World Health Organisation Europe Region, European health for all database, updated January 2018, available from <http://gateway.euro.who.int/en/hfa-explorer/>

¹¹ Public Health England, Pregnancy and Birth Benchmarking tool, updated March 2018, available from <https://fingertips.phe.org.uk/profile-group/child-health/profile/child-health-pregnancy/>

proportion than the EU average, Poland, Portugal and the UK; and a similar proportion to France, Ireland and Spain.

TABLE 2: PROPORTION OF TEENAGE MOTHERS (AGED UNDER 20), EUROPEAN COUNTRIES (2015) AND JERSEY (2014-2016)

Country	Percentage of mothers under 20 years of age
EU ¹²	2.8
France	1.8
Ireland	1.8
Jersey	1.8
Spain	2.0
Portugal	2.7
Poland	3.3
UK	3.5

Note: Jersey data is for three years due to small numbers:
Source: Statistics Jersey and WHO Europe Region¹³

Breastfeeding patterns

Breastfeeding at birth

Breastfeeding at birth is the proportion of mothers who give their babies breastmilk soon after delivery. From October 2015, mothers in Jersey have been assessed on whether they were breastfeeding on discharge¹⁴, a change from the previous assessment of 'feeding initiated at birth' which was defined as the 48 hours following delivery. In practice, these two definitions of breastfeeding at birth are very similar.

In Jersey, over three-quarters (78 per cent) of mothers breastfed their babies at birth in 2017; this figure has remained constant since 2010 (Figure 8).

Jersey was similar to the overall average for England: for the financial year 2016-17, breastfeeding initiation in England was 75 per cent, with the English regions¹⁵ ranging from 38 per cent to 97 per cent.

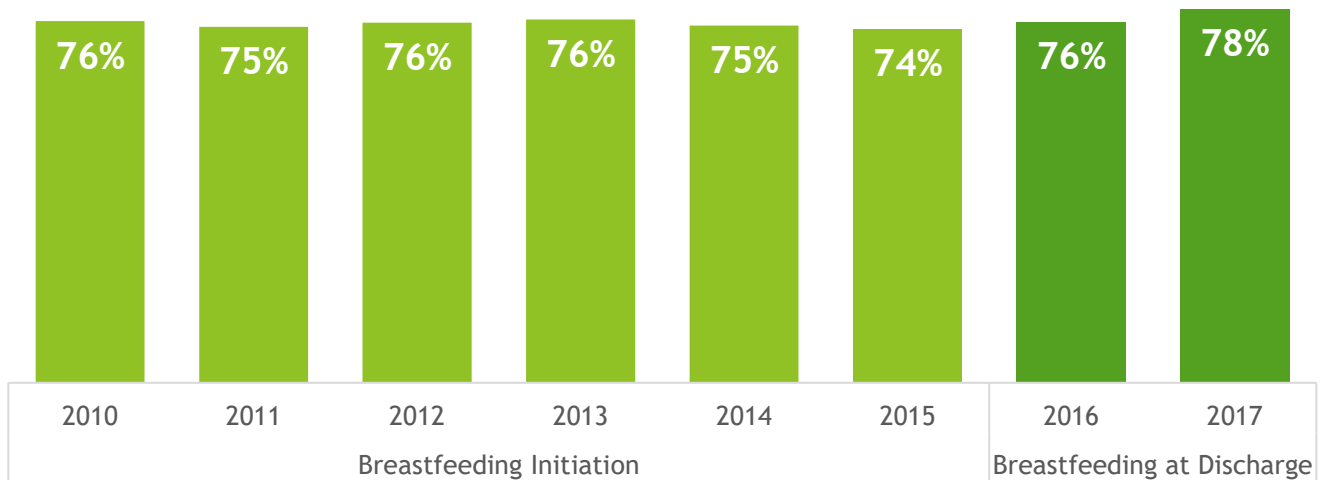
¹² Does not include figures for Belgium, Italy, Malta and Slovakia which are currently unavailable for 2015

¹³ World Health Organisation Europe Region, European health for all database, updated January 2018, available from <http://gateway.euro.who.int/en/hfa-explorer/>

¹⁴ Either discharge from hospital or, in the event of a home birth, when the midwife leaves the home

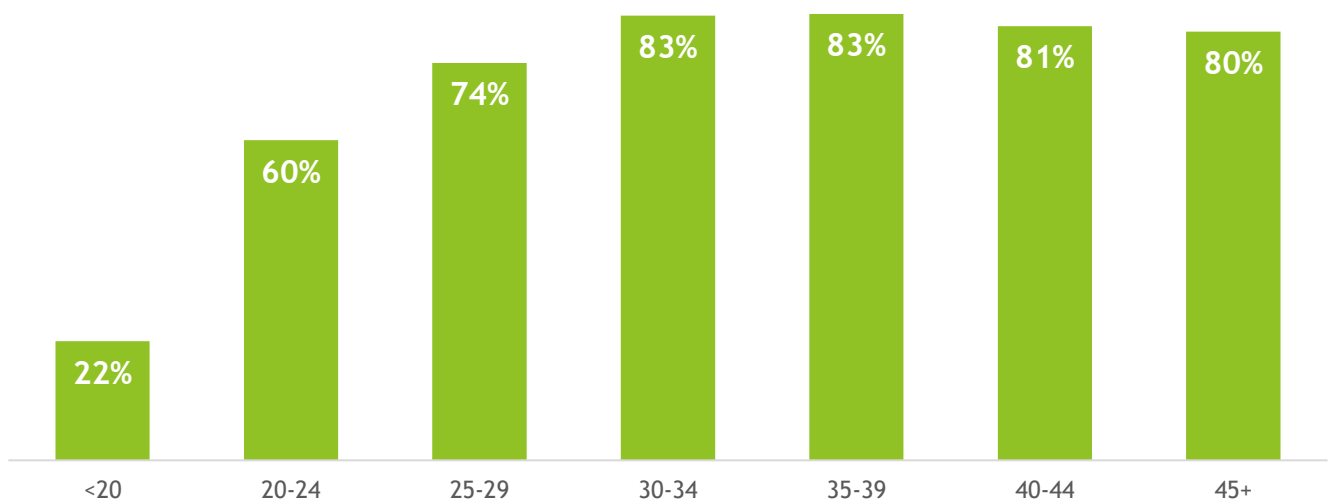
¹⁵ Public Health England, Overview of Child Health, Updated March 2018, available from: fingertips.phe.org.uk/profile-group/child-health/profile/child-health-overview

FIGURE 8: PROPORTION OF MOTHERS BREASTFEEDING AT BIRTH (BREASTFEEDING INITIATION / AT DISCHARGE): 2010-2017



Further analysis shows that as the age of the mother increased (up to the 30-34 age band), so too did the proportion breastfeeding by discharge from maternity care. Beyond the 30-34 age band, this proportion levelled off, as shown in Figure 9. Analysis is limited to data from 2016-2017 to only include breastfeeding at discharge data.

FIGURE 9: PROPORTION OF MOTHERS WHO ARE BREASTFEEDING AT DISCHARGE BY AGE OF THE MOTHER, 2017



Mothers living in rural parishes have previously been more likely to initiate breastfeeding than mothers living in urban (St Helier) and sub-urban parishes (St Clement, St Saviour and St Brelade). However, 2017 data shows this difference to be less pronounced; over three quarters of mothers were breastfeeding on discharge in urban (76 per cent) and sub-urban (78 per cent) parishes compared to over four-fifths (82 per cent) of mothers in rural parishes.

Breast feeding at 6-8 weeks

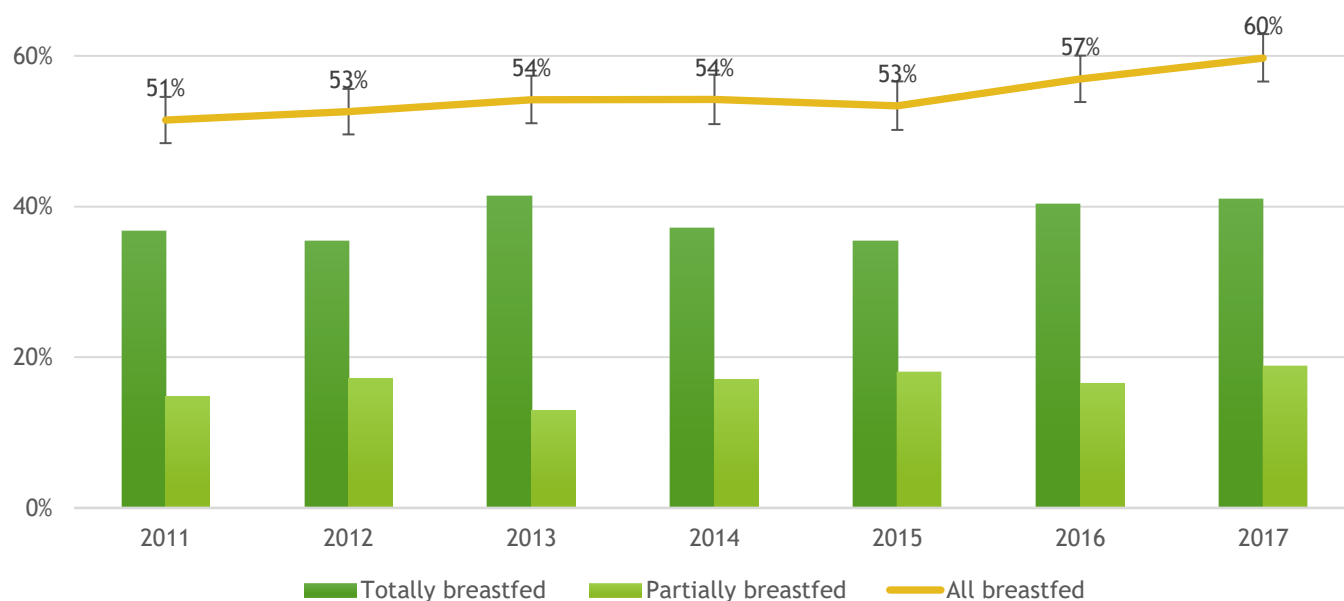
All babies in Jersey are offered a 6-8 week development assessment by a GP, and as part of these assessments breastfeeding status is recorded. Those babies who are being exclusively breastfed, that is they are not receiving any formula milk, any other liquids or food, are recorded as being totally breastfed. Partially breastfed babies are those who are receiving breastmilk as well as receiving formula milk, or any other liquids or food. Those babies not receiving any breastmilk are recorded as not being breastfed at all.

Of the babies born in Jersey in 2017, 60 per cent were breastfed at 6-8 weeks in Jersey; 19 per cent partially and 41 per cent totally.

In England, breastfeeding prevalence at 6-8 weeks was 44 per cent on average for 2016-2017 financial year (includes both partial and total breastfeeding), and ranged from 19 per cent to 76 per cent across the English regions¹⁶.

Since 2011, the proportion of babies being breastfed at 6-8 weeks in Jersey initially remained stable, but has shown an increase in 2016 and 2017 (Figure 10); the percentage in 2017 was significantly higher than the 2011 percentage.

FIGURE 10: PROPORTION OF BABIES WHO ARE BREASTFED AT 6-8 WEEKS, 2011-2017



There was a difference in the age of mothers who were breastfeeding at 6-8 weeks, as shown in Figure 11. As well as this, differences were found when breastfeeding prevalence was examined by parish, with a higher prevalence found in rural parishes compared to urban and sub-urban parishes, as shown in Figure 12.

¹⁶ Public Health England, Overview of Child Health, Updated March 2018, available from: fingertips.phe.org.uk/profile-group/child-health/profile/child-health-overview

FIGURE 11: PROPORTION OF BABIES WHO ARE BREASTFED AT 6-8 WEEKS OLD BY AGE OF THE MOTHER, 2017

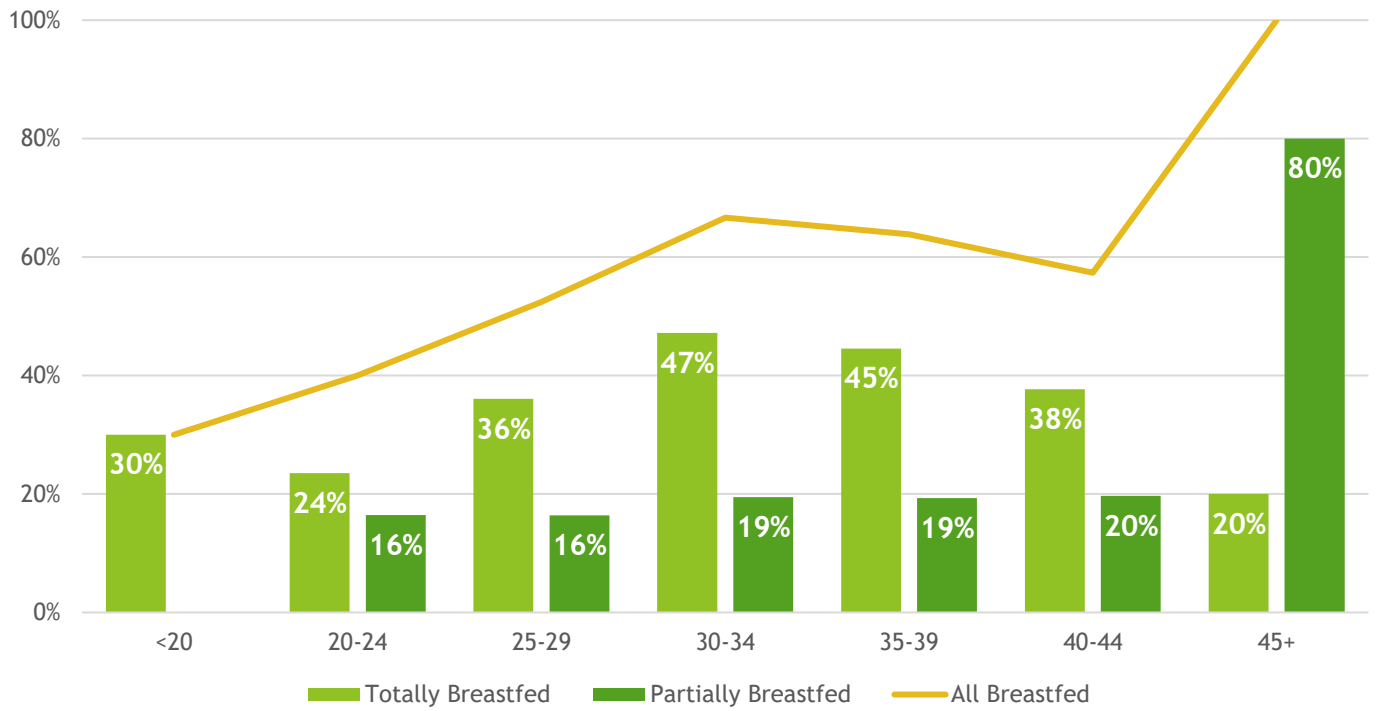
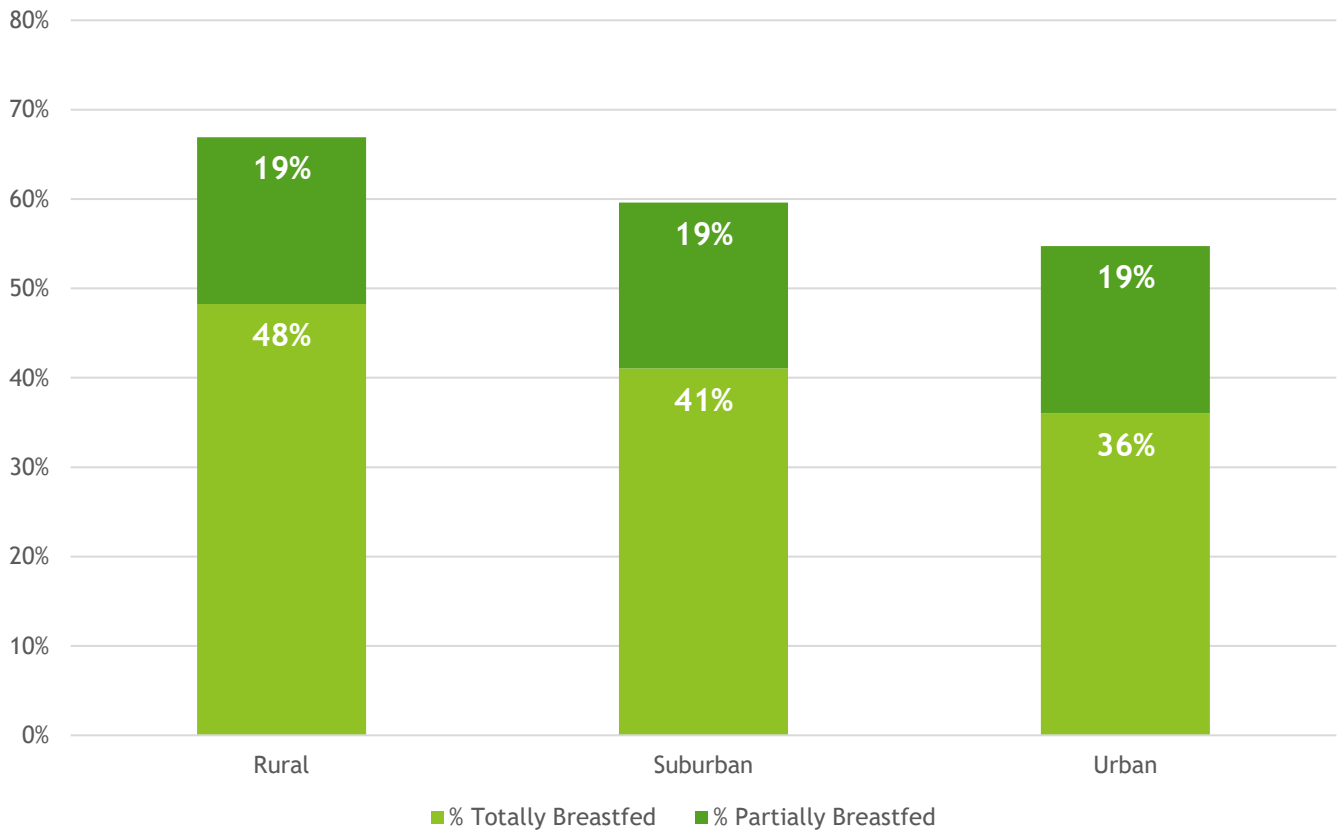


FIGURE 12: PROPORTION OF BABIES WHO ARE BREASTFED AT 6-8 WEEKS OLD BY PARISH OF RESIDENCE, 2017



Breastfeeding at 9 months - 1 year

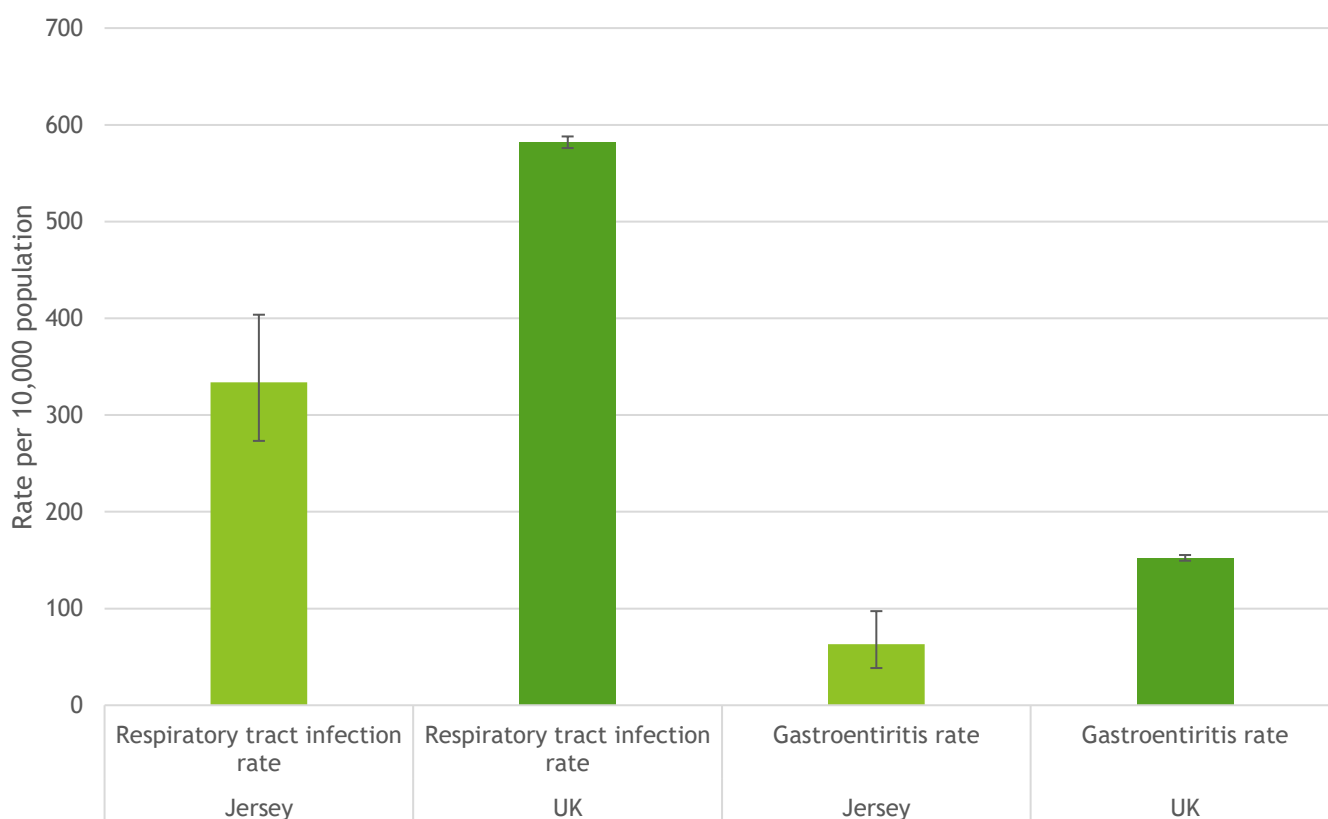
Family Nursing and Health Care health visitors have carried out 818 (9 months - 1 year) developmental checks of children born in 2016, and recorded a 'feeding status' for 750 of them. A sixth (17 per cent) were still receiving breastmilk, with a further 3 per cent receiving a combination of breast and formula milk, giving a total of 20 per cent being breastfed at 9 months - 1 year.

Hospital admissions

In Jersey, over the period 2015-2017, emergency admissions of infants (aged under 1) totalled almost 550. Considering these by primary diagnosis reveals that:

- 19 per cent of these admissions were primarily caused by infections of the respiratory tract, a rate of 330 admissions per 10,000 population. This rate is significantly lower than the English rate of 580 admissions per 10,000 population (see Figure 13).
- the rate of admissions primarily due to gastroenteritis is 60 per 10,000 population. This is lower than the English rate of 150 per 10,000.

FIGURE 13: RATES (PER 10,000 POPULATION) OF EMERGENCY ADMISSIONS TO HOSPITAL FOR INFANTS UNDER 1 YEAR OLD WITH RESPIRATORY TRACT INFECTION OR GASTROENTERITIS: 2015-2017



Source: Statistics Jersey and Public Health England

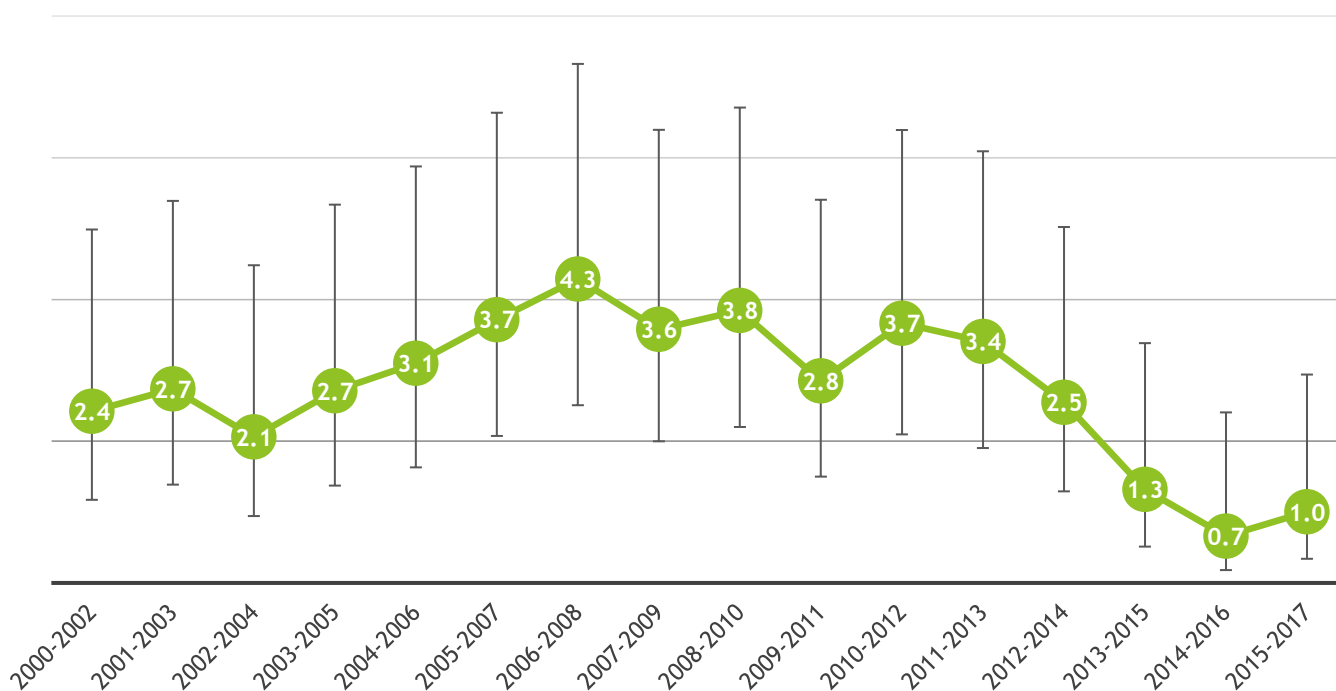
Note: Based on primary diagnosis; Jersey data 2015-2017, English data 2015/16

Infant mortality

The infant mortality rate is often used as an indicator of how well a jurisdiction's healthcare infrastructure is working.

Over the three-year period 2015-2017, the infant mortality rate for Jersey was 1.0 per 1,000 live births (confidence intervals ranging from 0.3 to 2.9). The rate remains similar to previous periods (Figure 14) and lower than the latest English rate (2014-2016) of 3.9 per 1,000 live births (confidence intervals ranging from 3.8 to 4.0)¹⁷.

FIGURE 14: INFANT MORTALITY RATE, PER 1,000 LIVE BIRTHS, 2000-2017



¹⁷ Public Health England, Overview of Child Health, Updated March 2018, available from: fingertips.phe.org.uk/profile-group/child-health/profile/child-health-overview

Background notes

Data Sources

All babies born in Jersey are offered a six-week check by a GP to check the baby's development. Babies are then seen again by a Family Nursing and Health Care (FNHC) health visitor at a child health clinic at 9 months to 1 year old for their 1 year review.

Birth and Breastfeeding data (up to and including the six-week check) comes from the Child Health System which is administered by the Preventative Programmes Child Health Team. This system tracks a child's development and immunisation history throughout their childhood. Statistics Jersey extracts data from this system for statistical purposes. Data on breastfeeding is gathered by the Maternity Unit through TRAK or GPs.

Data on caesarean sections comes from the Hospital system, TRAK, which was implemented in June 2011. All caesarean sections carried out in the hospital are recorded. Since October 2015, details of the type of birth (caesarean / vaginal) are no longer included in the record on the Child Health System meaning we can no longer correlate type of birth with breastfeeding status.

Information from the 9 month check is now collected by FNHC staff and entered on their own system (EMIS). FNHC have provided the data on breastfeeding at the 9 month check.

Data on hospital admissions is taken from the hospital computer system TRAK. Admissions data are classified using the International Classification of Diseases (ICD-10); each admission can have up to 20 diagnosis fields which provide the reasons why the patient was admitted to hospital. Data for this report was pulled from TRAK in March 2018.

Infant mortality uses information from the Deaths Database which is compiled by Statistics Jersey from notifications and registrations reported by parish registrars to the Superintendent Registrar as required by the Marriage and Civil Status (Jersey) Law 2001.

Confidence Intervals

Confidence intervals have been used in this report to compare hospital admission rates with the UK, and to compare Jersey data between years (breastfeeding proportions and infant mortality rates). Confidence intervals are a measure of the statistical precision of an estimate and show the range of uncertainty around the estimated figure. The confidence interval indicates the range within which the true value for the population as a whole can be expected to lie, taking natural random variation into account.

Comparisons between rates or over time have been tested to determine whether differences are likely to be statistically significant or the result of natural random variation. Only those differences deemed as statistically significant have been described in this report using terms such as 'increase', 'decrease', 'higher' or 'lower'.