



Executive Summary: Breastfeeding Plan 2025–2028

The Royal Borough of Kensington and Chelsea and Westminster City Council have developed a Breastfeeding Plan (2025–2028) to improve breastfeeding outcomes and support families.

Breastfeeding supports positive parent–infant relationships, oral health (breastfed babies are less likely to have misaligned teeth or develop speech and language problems) and healthy weight throughout life (babies who are breastfed are less likely to be overweight and obese later in life).

The Breastfeeding Plan aligns with international and national guidance, including the World Health Organization (WHO) and UNICEF Baby Friendly Initiative standards, and is structured around four key pillars: **Protecting, Promoting, Supporting, and Normalising Breastfeeding.**



City of Westminster



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

Context and rationale

Locally, despite high initiation rates (over 91%), breastfeeding rates decline significantly by six-eight weeks, particularly in areas of higher deprivation. The UK has one of the lowest exclusive breastfeeding rates globally, with only 1% of babies exclusively breastfed at six months.

Key findings

Resident Engagement: Surveys and focus groups with residents highlighted barriers such as returning to work, lack of support, and receiving inconsistent breastfeeding advice. Mothers valued professional support but cited workplace and physical difficulties as significant barriers.

Service Landscape: Existing support in Kensington and Chelsea and Westminster includes midwifery, health visiting, family hubs, peer support (Maternity Champions), and Public Health commissioned services such as the Change4Life service. Both boroughs have consistently upheld UNICEF Baby Friendly Initiative (BFI) Gold accreditation in health visiting, demonstrating a long-standing commitment to excellence in supporting families and infant wellbeing.

Policy Alignment: The Breastfeeding Plan complements local strategies on health inequalities, early years, and perinatal mental health, and aligns with national frameworks like the NICE guidelines and the Marmot Review.



Strategic pillars and actions

Working closely with residents and through a multiagency working group, the action plan aims to strengthen and support areas for improvement.



Pillar 1 – Protecting Breastfeeding

Train community-facing staff on breastfeeding messages and WHO Code compliance; ensure breastfeeding-friendly spaces; integrate breastfeeding into council HR policies.



Pillar 2 – Promoting Breastfeeding

Maintain and expand UNICEF BFI accreditations across maternity, neonatal, and community services; engage GPs, pharmacies, and paediatric professionals in breastfeeding promotion; increase awareness of breastmilk donation.



Pillar 3 – Supporting Breastfeeding

Strengthen communication between professionals and ensure timely, consistent support for all families, including those with preterm infants.



Pillar 4 – Normalising Breastfeeding

Co-produce a communications plan with residents; embed breastfeeding education in early years and school settings; promote breastfeeding as a societal norm.

Outcomes and monitoring

The three-year plan includes outcomes such as increased breastfeeding rates at six-eight weeks, improved service access, and raising awareness. Progress will be reviewed annually through the multi-agency stakeholder group.