Cyflwynwyd yr ymateb i ymgynghoriad y Pwyllgor Iechyd a Gofal Cymdeithasol ar Atal iechyd gwael - gordewdra

This response was submitted to the Health and Social Care Committee consultation on Prevention of ill health - obesity

OB07 : Ymateb gan: Dr Sara Jones | Response from: Dr Sara Jones

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Dr Sara Jones. PhD
[redacted]

I would like to submit evidence for the consultation on 'Prevention of ill health - obesity' in consideration of the following aspect of the call: 'interventions in pregnancy and early childhood to promote good nutrition and prevent obesity.'

My PhD, titled 'The SHIFT study: exploring the role of a baby-led feeding approach – implications for childhood obesity' (2020) centred upon exploring the impact of infant feeding approaches on growth and risk of childhood obesity, with a particular focus on milk feeding and complementary feeding behaviours.

The full thesis can be found on Swansea University's repository here: https://cronfa.swan.ac.uk/Record/cronfa59591

The peer-reviewed paper in *Maternal and Child Nutrition* (2020) which came from the study can be found here: https://onlinelibrary.wiley.com/doi/10.1111/mcn.12941

Chapter 2 of the thesis presents a literature review of known factors influencing childhood obesity, including pregnancy and psychosocial factors which may be of interest to the committee. Chapter 12 summarizes and discusses the findings of my research, including recommendations for supporting parents with responsive feeding.

I include below the abstract of my thesis which summarizes the research:

Abstract
Recently, a baby-led weaning method of complementary feeding, where infants are allowed to self-feed whole foods has grown in popularity. Proponents of the method posit that it may reduce risk of overweight because the self-feeding aspect (and the lower level of maternal control

that this affords) is likely to allow infants to better regulate their appetite, and this has been supported by exploratory research (Brown & Lee, 2011; Brown & Lee, 2012). However, the impact of the method on infant growth has been largely untested, with studies focussing on the potential effects of baby-led weaning on later overweight (Townsend & Pitchford, 2012; Brown & Lee, 2015). Furthermore, studies focus on the self-feeding aspect of the baby-led weaning method, and do not consider the impact of, and the interaction with other feeding behaviours. The SHIFT (Studying Healthy Infant Feeding and growth Trajectories) study explored associations between aspects of infant feeding; milk-feeding, the age of introduction to complementary foods, the transition from milk onto foods, the method of introduction to food (self-feeding or spoon-fed), diet and texture offered, and growth outcomes of infants aged 6- 12 months. This research did not find a conclusive association between the baby-led weaning method (i.e. self-feeding) and infant growth. However, behaviours which could be considered to be more broadly 'baby-led' in approach; breastfeeding, later age of introduction to complementary foods and a gradual transition from milk onto a diet consisting of mainly whole foods, appeared to foster healthier weight gain trajectories. These findings support the WHO (2003) recommendation for 'responsive' infant feeding. Why mothers choose a more baby-led or parent-led approach is complex; concerns around infant weight, intake and behaviour are commonly cited as driving parent-led behaviour (Redsell et al., 2010; Clayton et al., 2013; Brown & Harries, 2015), and were also reported by mothers in this study. The SHIFT study provides the impetus for effective support for parents in infant feeding, so that they feel confident adopting a baby-led, responsive approach.

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I would be very happy to provide further information on my research or to discuss other evidence relating to infancy and early years obesity risk factors at the committee's request.