

Digital breastfeeding support: friend or foe?

presented by Shel Banks and Hannah Cresswell

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Our joint declaration of interests:

NOTE: we both work every day to promote, protect and support breastfeeding. We are fully compliant with the WHO Code of Marketing of Breastmilk Substitutes and subsequent resolutions: we have never and will never accept money or any form of incentive from companies which may profit from undermining breastfeeding.

Shel Banks



- Became a BfN Peer Supporter in 2002
- Researcher since 2008
- BFI Co Ordinator in NHS Trust since 2009
- IBCLC since 2010
- Chair of LIFIB, and Nursing Matters
- Vice Chair of UKAMB since 2013
- Clinical Director for Anya LatchAid since 2018
- Author of "Why Formula Feeding Matters" 2022
- PhD Student at UCLAN MAINN

Hannah Cresswell




- Secondary School Drama Teacher
- Trained as a peer supporter in 2019
- Became a BfN Peer Supporter in 2021
- Senior Moderator for Anya LatchAid since 2021

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a new
market

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A huge unmet need:

The UK has one of the lowest breastfeeding rates, globally, with only 1% still breastfeeding at 6m. ¹

90%

families stop breastfeeding before they planned to, often due to pain or a lack of support ₅

20% of mothers (plus 12% of partners) experience a **mental health problem** during pregnancy or following birth²

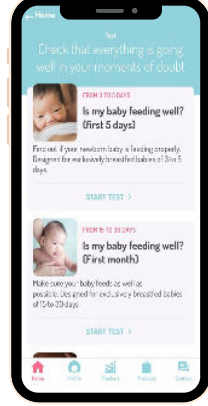

28% greater chance that **mothers will experience burnout** than fathers³

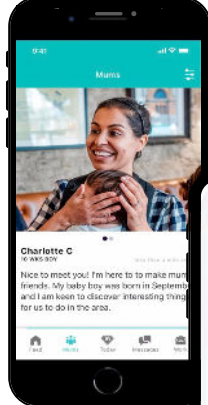
31% of working mothers rated **returning to work as 'difficult' or 'very difficult'**⁴

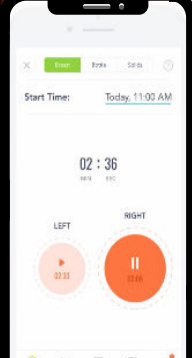
¹ Infant Feeding Survey UK (2010) ² Mental Health in Pregnancy (2018) ³ Parents of the Best Workplaces (2020), Great Place to Work Royal College of Psychiatrists ⁴ TemPR Review (2020) ⁵ Better Births National Maternity Review (2016)

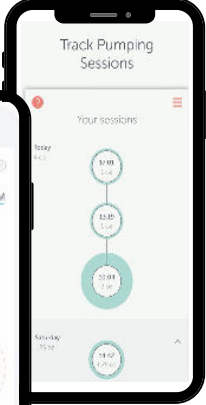
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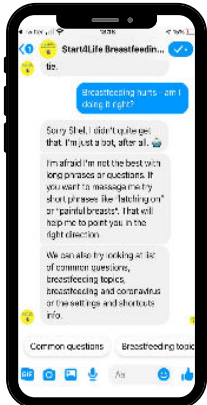
What's in the lactation space?

















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Why some families avoid in person support:



"I had a c section so couldn't drive and also couldn't get myself together to be in a specific place at a specific time with a tiny newborn."

"I'm a bit socially awkward even when I haven't just had a baby, so the thought of having to go take baby out for support fills me with dread and anxiety."

"No pressure to be dressed or even showered"

"My fear was that a lactation consultant or breastfeeding supporter would touch me and I would feel too uncomfortable, but unsure of whether I could say anything."

"I find local health care professionals often lack basic breastfeeding knowledge and you have to fight for your right to keep breastfeeding"



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Why families don't access traditional support:



"sometimes with doctors, health visitors, other professionals, there's a 'them and us' feeling"

"Even before the pandemic, local groups were 2-3 times a week and I was scared to wait that long if my baby wasn't getting enough milk!"

"Standard support felt scary as I'd already had a few professionals encourage me to give up and I was so protective of our journey"

"Anxiety makes phone calls and F2F meets difficult"

"I found it really difficult to advocate for myself in the early days - I knew that the advice I was receiving wasn't right, but I didn't feel confident enough to question the professionals as a first time mum."

"I was offered zero breastfeeding support in the hospital or at home afterwards"



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Issues with remote support:



"When breastfeeding support is offered to women, the duration and exclusivity of breastfeeding is increased... Strategies that rely mainly on face-to-face support are more likely to succeed with women practising exclusive breastfeeding." – from **Support for healthy breastfeeding mothers with healthy term babies** by Alison McFadden et al (2017)

www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD001141.pub5/full

Digital exclusion / digital poverty will mean that some parents will not have access to a mobile phone to download an app, or not have access to the data to run it on ('data poverty').

While a reported 98% of the UK population have a mobile phone, this leaves 2% who do not, and some of them may be expectant and new parents.

The pandemic showed us that some people really just prefer a face-to-face delivery of their infant feeding support and didn't gel with remote offerings.

Those for whom reading is not easy, whether because of literacy, language or sight issues, would clearly benefit from more face-to-face support and interaction. Some families' individual circumstances might require a very much more individualised approach, which would need to be face-to-face.

"Face-to-face support was found to be more effective than telephone support"

- from **UK women's experiences of breastfeeding and additional breastfeeding support: a qualitative study of Baby Café services** by Rebekah Fox et al (2015)

[BMC Pregnancy and Childbirth](https://doi.org/10.1186/s12913-015-0741-1) volume 15, Article number: 147

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Why remote support can work well:



"Because in the middle of the night when you're up for the 1000th time, reading support in your phone and knowing you're not alone really helps"

"I did use NHS and local breastfeeding support too, but having information and support in my phone was a godsend"



"I couldn't afford to see a specialist at the time to help with my feeding issues, so wanted to try everything before scraping the money together. The support I got was excellent and I didn't need to see a specialist in the end"

"Anytime, in the middle of the night or whenever - and even if it is completely unwarranted panicking - remote support is actually there for me."

"Answers are almost instant"

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Why remote support can work well:

"Access to local face-to-face support is great, but holding on to your concern until the next infant feeding group can be the difference between carrying on and stopping"


"Access is 24/7 so when you reach that crisis point with breastfeeding and all the services are closed, it feels like there is always someone around to help."

"I found it beneficial just to look at all the information whilst pregnant, and felt armed with information when the time came"

"Available at all hours"

"It's there exactly when you need it, and it feels more specialist."

"Being able to use the search function"



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What support do families want?

"My girlfriend was exhausted and in pain and really struggling with our little girl, and I wanted to be able to fix it for them and find them the answers they needed."

"I wanted to be treated with compassion and respect, not be patronised, ignored, or dismissed. I wanted to understand what was happening and feel that I was involved in problem solving, not being told what to do."

"True peer support, from other real parents who understand, don't judge and want you to succeed"

"This is all new to me and I feel out of my depth, so when I ask for help or information, I want to get it in a form I can understand and act on - and I don't want to feel like I am being a burden."

"I wanted someone to be with me at 3.30am when my baby wouldn't settle and I didn't know what to do."

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What support do WE think families need?



In order to **protect all families**, support should be:

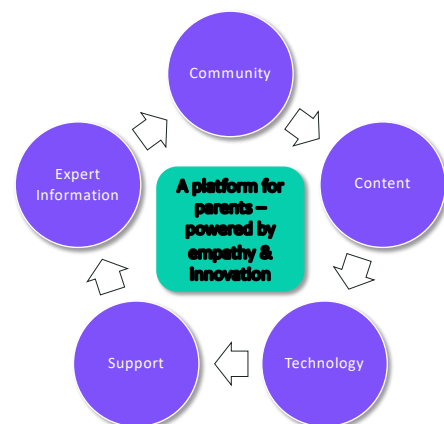
- free from promotion, advertising and marketing of all kinds as well as **WHO Code Compliant**
- ideally **free** or very reasonably priced at the point of access
- **GDPR compliant** and not scrape data from other sources to use in targeting
- honest and **factual** but also gentle and encouraging
- provided at a surface level and **backed up** by more in-depth resources
- available in formats which are **accessible** to most who need it – whether that is simple English, subtitles, videos, or translated text / audio
- provided via **a mix of topic specialists and lived experience** / peers
- **tailored** to the individual's circumstance, including how they like to receive information
- aligned with content constantly reviewed and updated in line with **evidence base**
- **able to escalate** to more specialist support 24/7 with a short lead time to receive the support
- able to spot signs of **emotional crisis** or symptoms of **medical ill health** and to flag this up
- **able to signpost** on to in person local support
- able to **adapt swiftly to feedback**

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Introducing the Anya app:



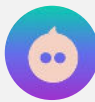
- LatchAid™ launched in 2021, providing innovative digital breastfeeding support
- Became Anya in 2022 to better reflect the support offered throughout pregnancy and early parenthood
- Covers 1000 Days from conception to 2nd birthday
- No.1 breastfeeding app in the ORCHA digital library
- > 4.3M NHS service users in commissioned areas
- Users exclusive breastfeeding at 6-8 weeks at 2x national average rate*



*NHS pilot outcomes study. Data analysis by Exeter University (271 respondents) vs. average breastfeeding rate in England.

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Introducing the Anya app:



AI-powered virtual companion

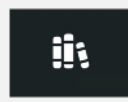
#AskAnya, 24/7. A personalised parenting companion for 1001 days

Backed up by a team of specialists ready to offer one-to-one support



Interactive 3D animations

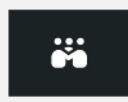
Our LatchAid™ 3D breastfeeding animation tool is a ground-breaking and entirely unique way to learn infant feeding skills



Tailored content & resources

An extensive library of resources, personalised to users and their journey to parenthood

Specialist support drop-in sessions, deep-dive webinars & courses on key parenting topics


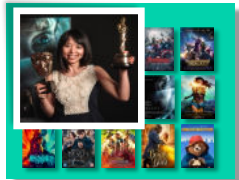



Virtual communities

Themed virtual communities that offer a place for virtual support networks and safe discussion.


Moderated by experts.

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About Anya:

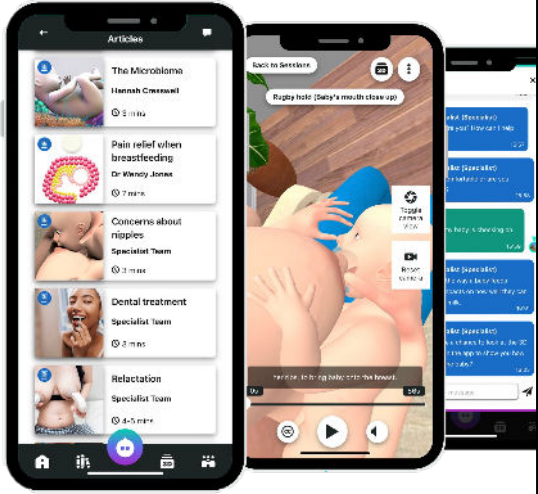
- 📌 Developed by Dr. Chen Mao Davies, a **BAFTA & Oscar-winning visual effects designer**, after her own struggles with breastfeeding
- 📌 Began as CGI/3D animations – focus groups changed concept and added first communities + AI to support lactation: **now also articles + ‘conception to age 2’**
- 📌 Supported by **Innovate UK, NHS England, & NHS Innovation Accelerator**
- 📌 Supporting parents in **over 100 countries**
- 📌 Selected for inclusion project with **SBRI Healthcare & NHS England** which will lead to ED&I initiatives including **multi-ethnicity & multi-language versions.**



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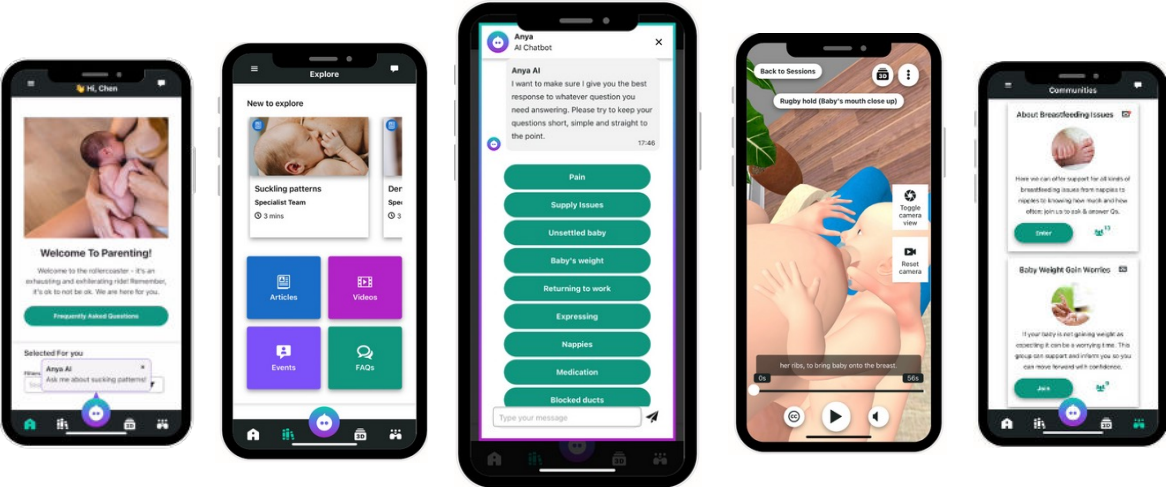
What makes Anya unique?

- ❑ Responsive **AI-powered virtual companion** providing **24/7 support**, backed up by a team of WHO Code compliant specialists.
- ❑ Our LatchAid™ **3D breastfeeding animation tool** is ground-breaking and entirely unique.
- ❑ **Tailored content based** on the needs, ages & stages of families and babies.
- ❑ Themed **virtual communities** to create virtual support networks and safe discussion.
- ❑ Specialist support **drop-in**, deeper-dive **webinars & courses** on key parenting topics.
- ❑ **We will never** sell data, accept ads or partner with those who don't align with our ethos



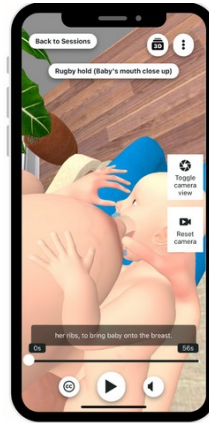
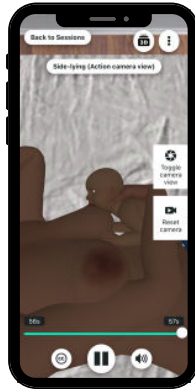
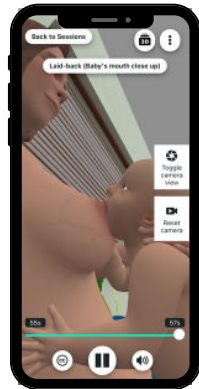
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Anya – 1001 days parental support 24/7:



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LatchAid Interactive 3D animations:



"I struggle to understand what people mean when they describe in words, so really needed to see the visuals"

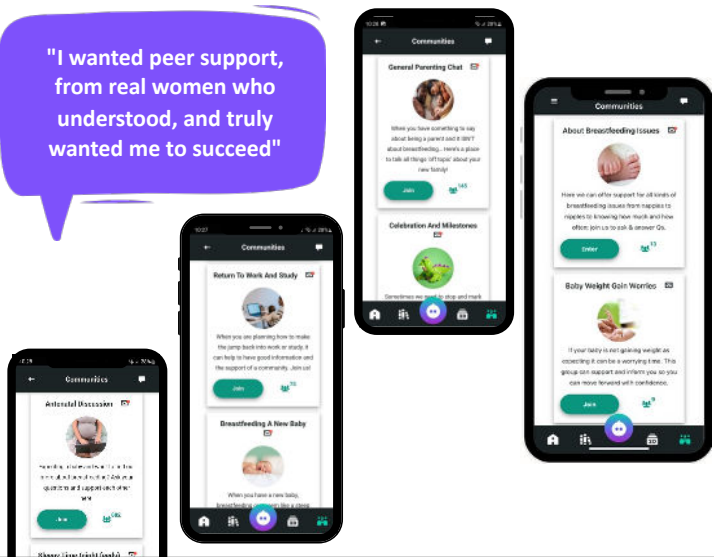
Peer support communities:



"Because in the middle of the night when you're up for the 1000th time, reading support in your phone and knowing you're not alone really helps"

"I wanted peer support, from real women who understood, and truly wanted me to succeed"

"The wealth of knowledge from asking a group of people who are either expert or who have been through it, is good."

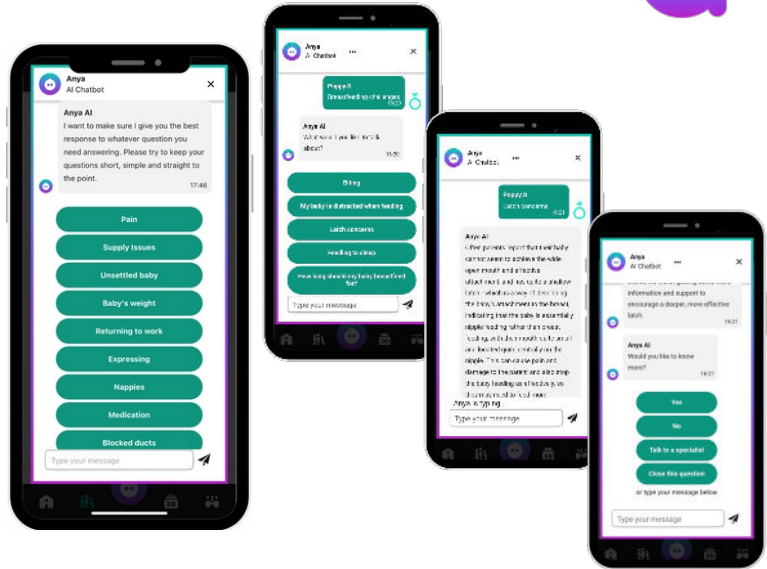


Our groundbreaking AI powered supporter, Anya:



- is trained as a well-informed peer
- does not offer advice
- covers pregnancy, postnatal, toddlerhood – the ‘1000 days’
- links to relevant & credible external info
- recognises baby age / stage of user / type of user and responds appropriately, then offers follow up content
- has over 1500 pieces of content, regularly reviewed, updated and added to
- is currently > 91% accurate, with missed responses re-trained, to work next time
- asks users how they are feeling, and signposts to relevant in-app content
- recognises when a specialist is needed
- flags up queries of concern

All conversations are monitored by a human with interventions carried out < 24 hours
Does not use open AI – eg ChatGPT or similar



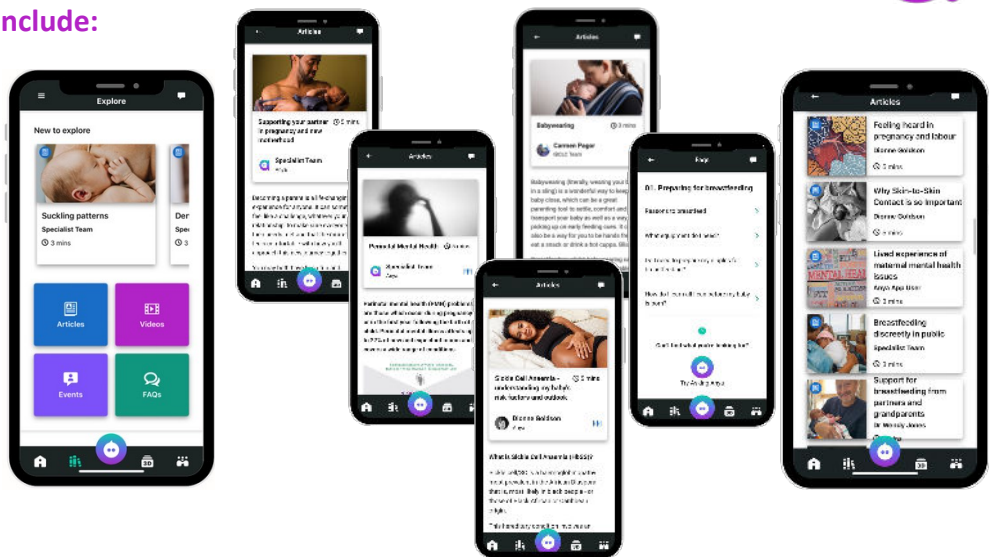
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Articles written by topic specialists:



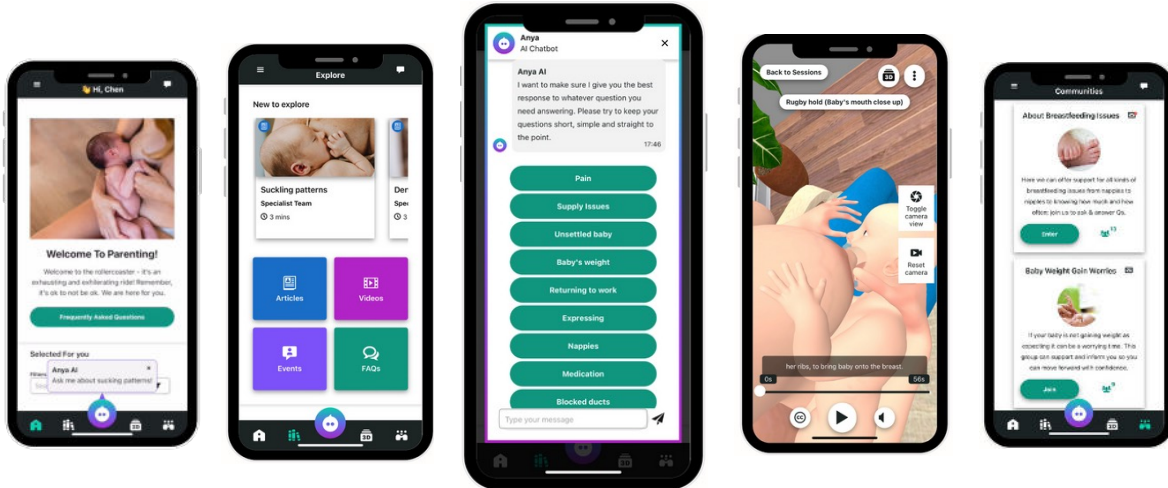
Anya specialists include:

- IBCLCs
- MWs
- HVs
- Doulas
- Pharmacist
- TT specialist
- Sleep specialists
- Baby poo expert
- and
- Service users



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Anya – 1001 days parental support 24/7:



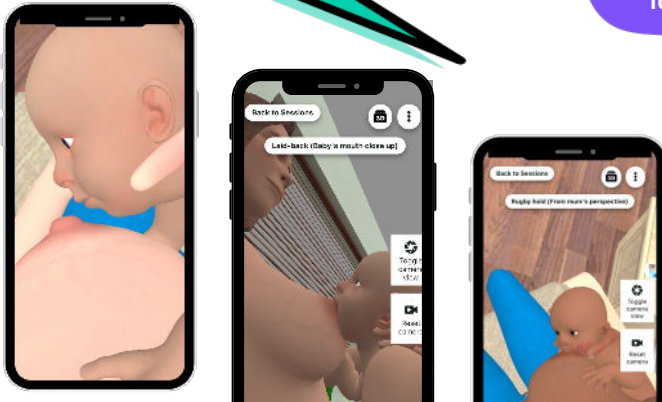
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Whether it be a 'quick answer' query or a more complex issue, the app can support with answers through Anya, positioning visualisation, discussion with an expert or even signposting to local services.

Use of innovation:



"Having the mother's perspective has been a complete game changer. I've watched countless videos etc but the 3D animation is the clearest demonstration I've found for the latch, and makes complete sense now!"



"I feel like this is just what is needed; it has the potential to completely change the landscape of breastfeeding support, all over the world"

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Evidence-based & expert backed:

- 📌 Developed with leading infant feeding and parenting specialists
- 📌 WHO Code & BFI compliant
- 📌 Specialist team including; IBCLC Lactation Consultants, Health Visitors, Midwives, Doulas, Pharmacist, Tongue Tie Practitioner, Educational Specialist and a Clinical Psychologist
- 📌 Stakeholders including young parents, for reference
- 📌 NHS Digital Technology Assessment Criteria compliant

2x

exclusive breastfeeding rate at 6-8 weeks

88%


HCPs considered Anya to be useful in supporting the continuation of breastfeeding

62%

of user support occurs out-of-hours


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‘They said, we did’: new features to support Continuity of Care:



* Image shows front screen for someone who has identified as the partner of an expectant mother

Voice of user	Analysis	Idea	Evidence	
	Can we give users a succinct way of recording their history, which can be accessed by specialists in the app, so that they don't have to repeat their history every time they ask for a specialist?	User history log Create a free text box within the user's profile where they can record anything which is relevant to them when using the app	In production app users appear that being able to make notes in their profile helped their conversation with the specialist.	
	A more joined up approach. As a high risk pregnancy I hated having to repeat my history at every appointment.	Create a link in the user profile leading to the user's 'My Chat' history, visible to specialists only.	Specialist said: "being able to see a bit more information about the user's history, wants and needs is really useful and means I can provide more tailored responses"	
	what content a user has previously accessed, so that they understand a user's knowledge and can signpost them to additional relevant content, and not back to something they have	A dashboard showing the user access history to AI/ specialist support and to the contents (articles, videos, drop-ins, webinars)	a) This is work in progress and will be released soon. b) this dashboard will be developed as part of the phase-2 project.	
	Continuity of care means Someone who initiates conversation with me and asks me questions	Users want to have conversations with someone who they feel they know and can trust. Someone who starts a relevant conversation with them	Train the AI to initiate conversation with suggestions relevant to a user's age and stage	In production app 7 out of 8 users agreed that the AI understood their situation based on the tailored conversation starters they received.
		AI will be trained to initiate conversation based on topics a user has previously asked about this will help a user to feel that Anya understands their day-to-day challenges	Literature review and the initial R&D work to be carried out in phase-1. The substantial part of the R&D work to bring the feature the FRLS-9 level will be delivered in phase-2 of this project.	



* Image shows the 'new B'ing mother' sign-up screen

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Trusted & proven:


Loved by parents. Trusted by specialists. Endorsed by the NHS.


93%


of Anya users would recommend us to other parents

"In real life, you can get a lot of information from people around that sow seeds of doubt. The Anya app provides you with that kind of alternative, compassionate, evidence-based response when you are doubting yourself. It's like a warm hug: you are doing the right thing."

Anya user, mother of 2

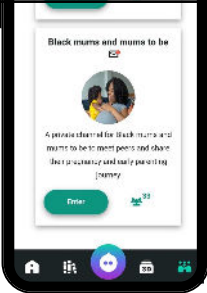
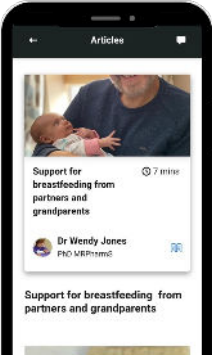








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Make the change with Anya:

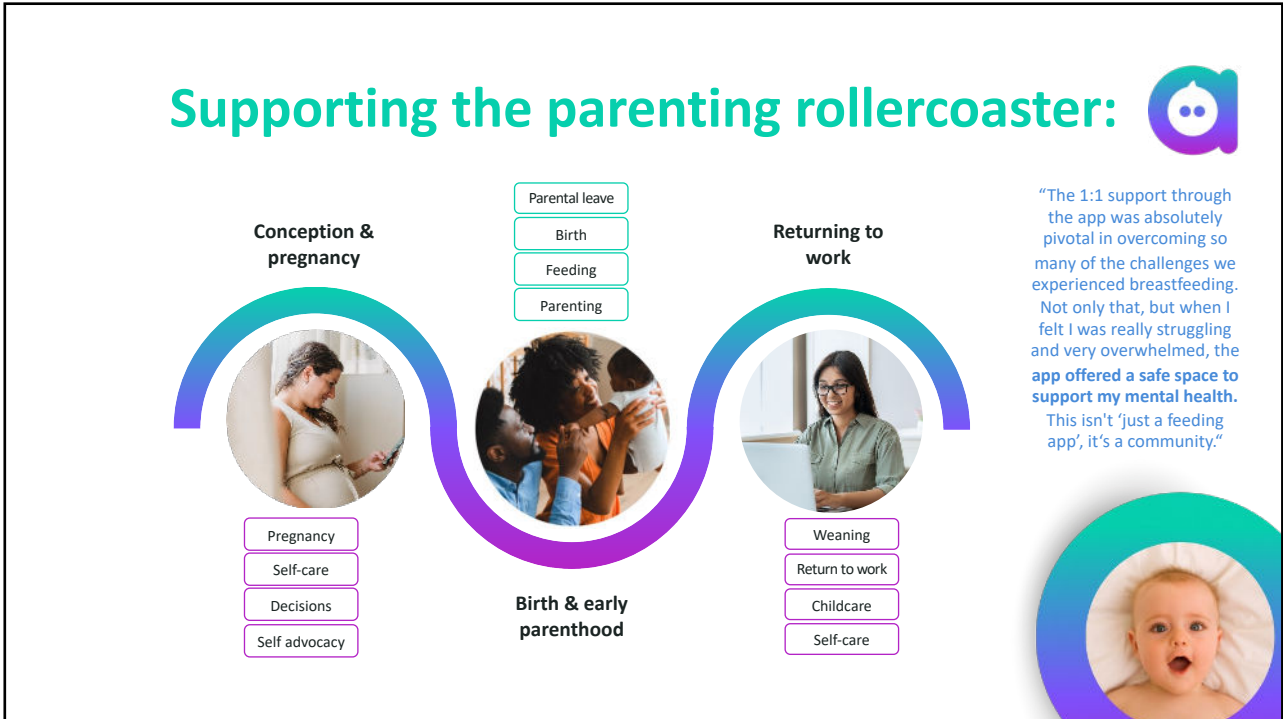





"We talk about feeding on demand and parenting responsively, but how about supporting on demand, supporting responsively? The app offers exactly this: support when you need it, wherever you are."



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What users have said:

I watched endless YouTube videos and looked for as much information as I could find and this was the only thing that made sense; a game changer for latching and breastfeeding positioning, which really helped me. This was what made it click for me.

"Having used the Anya app myself, now as a breastfeeding peer supporter I am able to use it to support other parents, both fact-checking the information and support I offer and signposting to the many resources available within it."

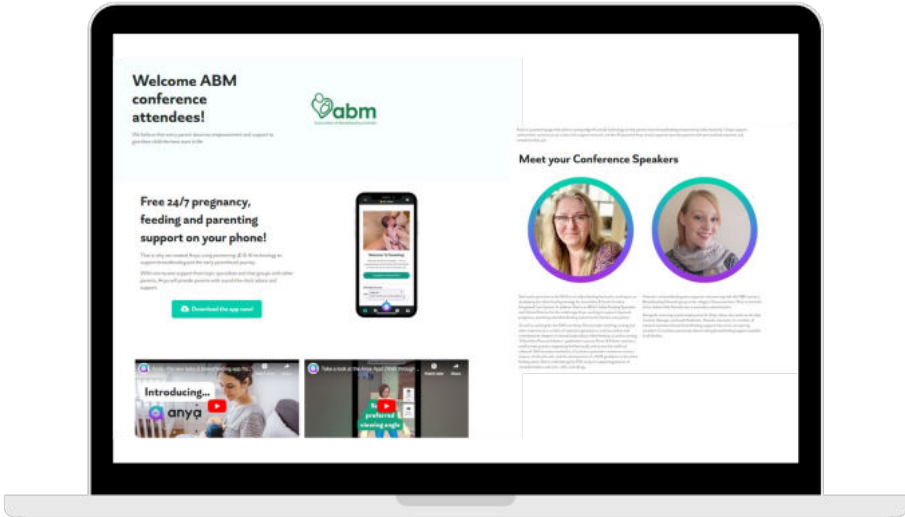
"The app meant at any time, day or night, I could get a lot of the answers I needed to my parenting questions. When the 3am niggles started, I didn't have to fall down the Google rabbit hole of 'is this normal...?' I had evidence-based accurate information in the palm of my hand."

"It's a great app and a really useful support - especially in recent times when it's been a bit difficult to connect with other mums."

"It gave me the confidence to feed in public for the first time."

"Helped me to improve my baby's latch. The 3D animation was extremely helpful. I was overthinking the latch before - this app provided the necessary info."

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anya.health/ABM

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Any questions?

anya

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Together we nurture

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