Background: South Africa has been reported to have one of the lowest Exclusive Breastfeeding (EBF) rates in Africa, between 1998 and 2009 rates in infants aged 0-3 months ranged from 6% to 14.9%. In 2011, there was a shift in national policy to promote EBF through the release of the ‘Tshwane Declaration’. Free formula for HIV-positive mothers was withdrawn from the Prevention of Mother-to-Child Transmission of HIV (PMTCT) programme and EBF messaging for front line healthcare workers was emphasized as a policy priority. This analysis aims to examine changes in EBF rates between 2010 and 2013 (2010 prior to Tshwane Declaration; 2011-12 during policy transition; and 2012-13 after the Declaration).

Methods: Data from three national, cross-sectional, facility-based surveys with stratified multi-stage probability sampling proportional-to-size were analysed. Participants were caregivers with infants aged 4-8 weeks. Interviews gathered data on maternal socio-demographics and health services. Infant feeding was assessed using structured 24 hour recall. EBF was defined according to WHO definitions. Data were weighted for sample realisation and population live births and analysed for trend over time.

Results: 4-8 week EBF rates were 23.6% in 2010, 36.5% in 2011-12, and 60.4% in 2012-13, p<0.001. Exclusive Formula Feeding (24.7% to 16.5%), Mixed Breastfeeding (19.0% to 15.1%) and early solids introduction saw significant reductions (p<0.001) from 2010 to 2013.

Conclusion: With what seemed to be an intransigently low EBF rate since 1998, South Africa saw a remarkable increase in early EBF from 2010 to 2013 coinciding with major national infant feeding policy change.