

Promotion Gear

Key questions: What promotional activities have occurred to support the scaling up of breastfeeding initiatives? What is the quality of those promotional activities?

Background

The BFGM posits that effective facility and community-based training as well as delivery of breastfeeding programs drives promotion efforts to communicate key breastfeeding messages and facilitate behavior change.¹ Promotional strategies use a variety of methods (including social media, national and local events, campaigns, community activities, interpersonal skills) to convey breastfeeding messages to targeted audiences. Messages should be informative, culturally appropriate, motivational, accurate and concise so that they can be easily understood and readily accepted.

Themes and Benchmarks

There are two themes for this gear: a) National Breastfeeding Promotion Strategy, and b) Government and civic breastfeeding promotion. Two benchmarks assess the first theme by measuring the existence and implementation coverage of a national breastfeeding promotion strategy. One benchmark assesses the second theme by measuring the level of awareness raised by government or civic societies about breastfeeding. All benchmarks reference "the past year" unless otherwise noted.

1. National Breastfeeding Promotion Strategy Theme

Benchmark PG1: There is a national breastfeeding promotion strategy that is grounded in the country's context.

Description: This benchmark assesses the existence and quality of a national breastfeeding promotion strategy. The national breastfeeding promotion strategy can include formal campaign(s) (including one or more) targeting specific or entire population. It can also include the relaying of messages through one or multiple channels including mass media campaigns, interpersonal communication, posters, educational materials, etc. If a national promotion strategy exists, to be considered grounded in the country's context, it has to be: a) based on formative research; b) pre-tested within the country; and c) be culturally, socially, economic, and literacy appropriate. It must also be time bound, which means that it needs to



specify a certain time frame or have an implementation deadline for it to be completely effective.

Example: The Healthy Eating – Healthy Action (HEHA) strategic framework was launched in 2004 by the Ministry of Health in New Zealand as an obesity prevention strategy. A multipronged approach was used to implement the HEHA from 2004-2010 and included a breastfeeding promotion campaign that targeted New Zealand women and their families, with specific focus on Māori and Pacific women with the goal of increasing breastfeeding support.

Possible data sources: Interviews with national level government officials should reveal the existence of this strategy. A desk review of government reports and documents within the area of behavior change communication and breastfeeding should be able to reveal the expected activities of the national breastfeeding promotion strategy, the development of it (as to whether it was developed based on formative research and pre-testing), and if it is linked to a specific time frame.

How to score: The scoring for this benchmark reflects: a) if a national breastfeeding promotion strategy exists, b) if it is grounded in the country's context, and c) if it is time bound.

No progress has been made if there is no national breastfeeding promotion strategy.
Minimal progress has been made if there is a national breastfeeding promotion
strategy but it is not grounded in the country's context nor is it time bound.
Partial progress has been made if there is a national breastfeeding promotion
strategy that is grounded in the country's context but it is not time bound.
Major progress has been made if there is a national breastfeeding promotion strategy
that is grounded in the country's context and is time bound.

Benchmark PG2: The national breastfeeding promotion strategy is implemented.

Description: This benchmark builds off of the previous benchmark and assumes that there is a national breastfeeding promotion strategy, which can include formal campaign(s) (including one or more) targeting specific or entire population. It can also include the relaying of messages through one or multiple channels including mass media campaigns, interpersonal communication, posters, educational materials, etc... This benchmark assesses whether the national breastfeeding promotion strategy, if it exists, has been implemented (i.e. carried out within the country). The effectiveness and coverage of the implementation is determined in the scoring.



Example: In 2008, the New Zealand MOH received government funding to implement a national breastfeeding promotion campaign targeted to improve breastfeeding initiation and duration, especially among high risk groups, such as the Māori and Pacific mothers. This campaign supported the Healthy Eating-Healthy Action strategic framework and implementation plan, which had highlighted breastfeeding as a key message. The breastfeeding promotion social marketing campaign aimed to improve individual and environmental breastfeeding support among New Zealand women, especially among Māori and Pacific mothers. Since then, another breastfeeding social marketing campaign was launched in 2009 and then expanded to include other social platforms with the goal of increasing communication exchange about breastfeeding. These campaigns were grounded in the country context as they utilized local organizations as well as successful breastfeeding stories as the foundation for the social communication of the key breastfeeding messages.

Possible data sources: Data to measure if a national breastfeeding promotion strategy has been implemented can be obtained from interviews with national government officials within the area of infant/young child feeding issues. Interviews with national level nutrition or infant feeding coordinators or trainers may also yield information related to the implementation of a national breastfeeding promotion strategy. To understand if it has been effective and the level of coverage, country level data on breastfeeding knowledge, attitudes, and behaviors can be used. To assess coverage of the implementation, media sources, reports, or other documentation that indicates where the promotion strategy has targeted can be used.

How to score: The scoring for this benchmark reflects the effectiveness and coverage of the implementation of the national breastfeeding promotion strategy. Effectiveness means the degree to which the promotion strategy has raised breastfeeding awareness and practice. Coverage can be national or full depending on the goals of the strategy. A national promotion strategy has been implemented to the entire population, while full coverage refers to complete coverage of a subpopulation.

	No progress has been made if there is no national breastfeeding promotion strategy or, if there is, it is not being implemented.
	3, .
	Minimal progress has been made if the national breastfeeding promotion
	strategy is being implemented but its effectiveness is unknown or has limited
	coverage (i.e. local coverage only).
	Partial progress has been made if the national breastfeeding promotion strategy
	is being implemented and it is effective but has partial coverage (i.e. local and
	subnational coverage only).
	subhational coverage only).



Major progress has been made if the national breastfeeding promotion strategy is
being implemented, is effective and has high coverage (i.e. national, subnational,
and local coverage).

2. Government or Civic Breastfeeding Promotion Theme

Benchmark PG3: Government or civic organizations have raised awareness about breastfeeding.

Description: This benchmark assessed whether government or civic organizations have raised awareness about breastfeeding through various activities or actions. Government and/or civic organizations' promotion campaigns, activities, or actions designed to raise awareness about breastfeeding should be considered under this benchmark.

Example: In 2008, the government and a civic organization partnered to launch a breastfeeding promotion campaign targeted to young women, ages 16-25, in England. The Be a Star campaign highlighted local breastfeeding young mothers as "Stars" for breastfeeding. These mothers were featured in ad campaigns that transformed them to look like models, actresses, singers, etc. to emphasize that breastfeeding is glamorous. The goal of the campaign was to "support these women through the breastfeeding process, via peer support and improve understanding and acceptance of breastfeeding within the community". Within the first few months of the campaign, breastfeeding initiation rates among the target group increased 11%.

Possible data sources: Audio, television, or written materials either documenting or advertising the campaigns/activities from media, government, or civic society sources should be consulted for measuring this benchmark. If country level data on breastfeeding knowledge, attitudes, and behaviors exists, this can be used to assess level of awareness about breastfeeding.

How to score: The scoring of this benchmark reflects the level of awareness raised about breastfeeding by actions taken by government or civil organizations.

No progress has been made if government or civic organizations actions have not
raised awareness about breastfeeding.
Minimal progress has been made if government or civic organizations actions have
raised minimal awareness about breastfeeding (i.e. reaching local level only).



	Partial progress has been made if government or civic organizations actions have
	raised some awareness about breastfeeding (i.e. reaching local and subnational
	levels).
П	Major progress has been made if government or civic organizations actions have

Major progress has been made if government or civic organizations actions have raised strong awareness about breastfeeding (i.e. reaching local, subnational, and national levels).

¹Perez-Escamilla R, Curry L, Minhas D, Taylor L, Bradley E. Scaling up of breastfeeding promotion programs in low- and middle-income countries: the "breastfeeding gear" model. *Adv Nutr.* 2012;3:790-800.