

BBF recommendations for action: Guidelines for writing and prioritizing recommendations

Who is this for?

This document guides the Director, Coordinator and Committee through writing and prioritizing recommendations.

How to use this document

The Director and/or Coordinator should fully review this document before the 2nd meeting and follow the timeline of activities outlined to complete the process of writing and prioritizing recommendations. All of the tools needed for this process are included as appendices, as well as an example of the application. The Director and/or Coordinator should take the time to fully review all appendices thoroughly along with this document.

Background

A critical aspect of BBF is identifying the gaps in your country's breastfeeding environment and making robust, concrete recommendations to address these gaps. Experts in the country may already be aware of some gaps and these may be confirmed or modified by the evidence-based benchmark and gear scores. It is from the BBFI scores and corresponding gaps that recommendations will be developed. The relationship between the scores, gaps and recommendations is a dynamic and iterative one that should be considered throughout the 5-meeting process (**Figure 1**).

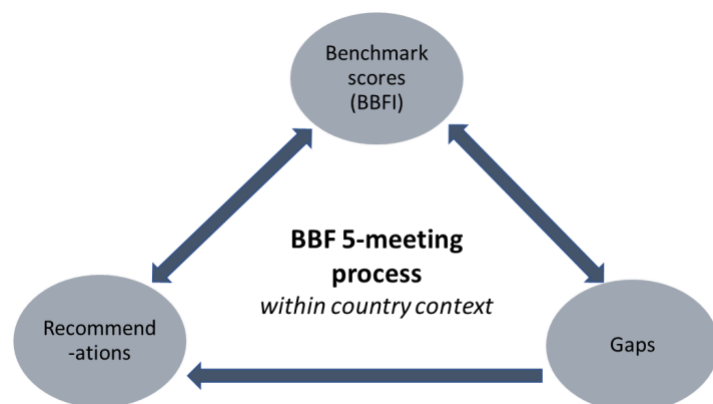


Figure 1. Relationship between benchmark scores, gaps and recommendations

Crafting meaningful recommendations that are understood by key stakeholders, such as policy and decision makers, media sources, funders, and other relevant organizations, is vital to translating these into actions. Well-designed recommendations can also be effectively monitored and evaluated, allowing a country to track its progress.

The BBF recommendation development and prioritization is summarized in 3 steps (**Figure 2**). The prioritization process has been adapted from The Child Health and Nutrition Research Initiative (CHNRI)

research priority-setting methodology for BBF purposes². It is highly recommended that you use specific strategies to reach consensus during this process, similar to those utilized during benchmark scoring³. These three steps are described in detail in the following sections.

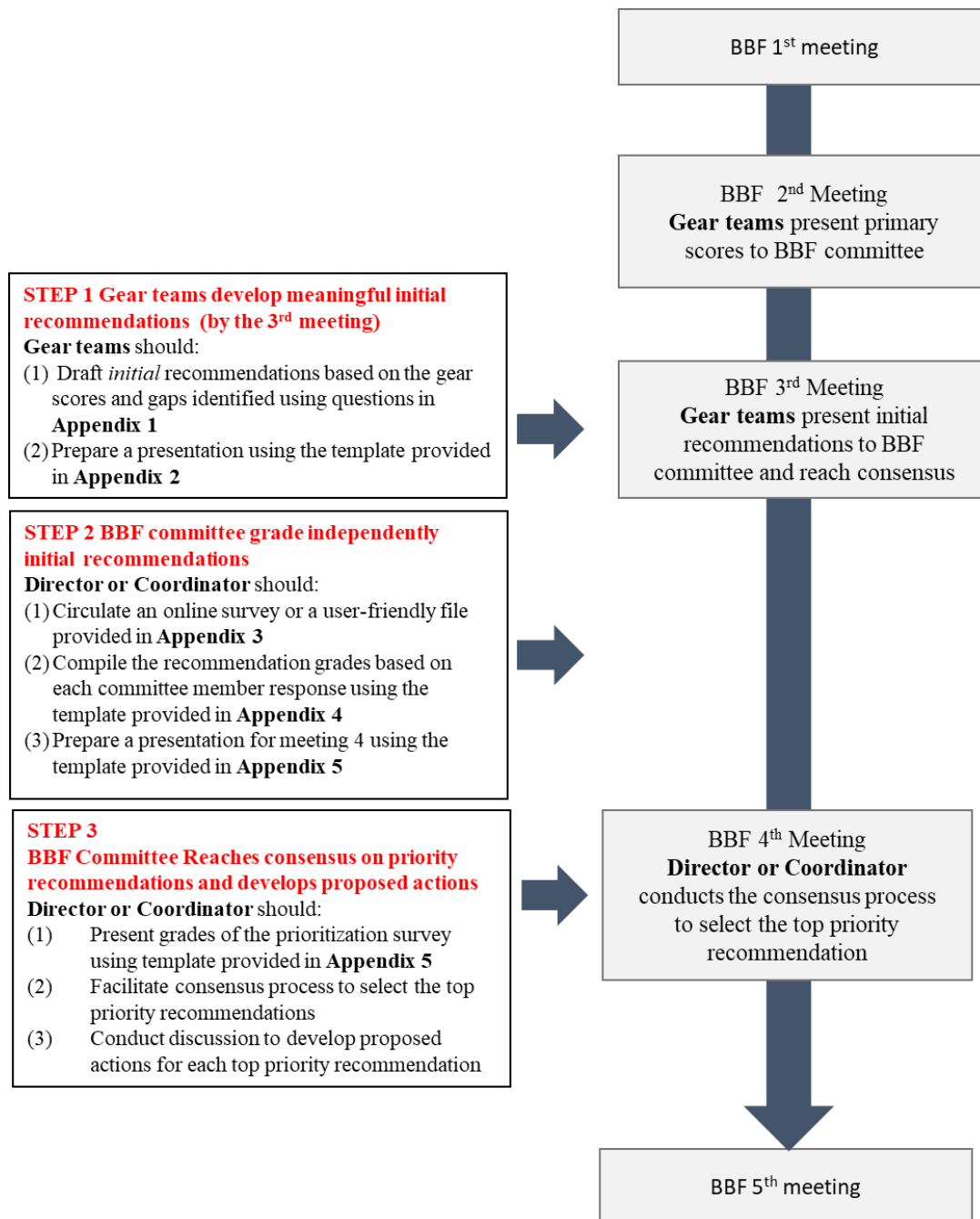


Figure 2. Steps of recommendation development and prioritization embedded in the 5-meeting process

STEP 1. Gear teams developing meaningful *initial* recommendations by the 3rd meeting to be presented at the 3rd meeting

The generation of recommendations may be ongoing, alongside the scoring of benchmarks and identification of gaps. Notes on any proposed recommendations throughout the BBF 5-meeting process should be documented and can be considered by gear teams when developing recommendations.

Gears teams draft *initial* recommendations using the template provided in **Appendix 1** and should keep in mind the criteria in **Box 1**, as committee members will need to grade the recommendations based on these criteria. If a gear team cannot complete **Appendix 1** for a recommendation, it is fine to leave some sections blank to be discussed in the 3rd meeting. By the 3rd meeting, gear teams should compile all *initial* recommendations into **Appendix 2** (a PowerPoint Template). These initial recommendations are presented in the 3rd meeting to the committee for discussion.

At the 3rd meeting, the Director or Coordinator takes notes on the discussion of the initial recommendations and compiles a list of agreed-upon recommendations. This may involve eliminating some of the *initial* recommendations presented. This list is the basis for step 2 and represents the final list of recommendations that the committee has come to consensus on.

Box 1. Criteria for identifying priority recommendations

Criteria	Explanation of criteria
Effectiveness	This criterion assesses the recommendation effectiveness by understanding if it will have an effect or impact on breastfeeding outcomes. This is primarily assessed through understanding the existing evidence regarding the effect or impact of this recommendation elsewhere.
Affordability	This criterion assesses the affordability of the recommendation based on an understanding of available information on the cost of implementing such a recommendation, and the likely financial means to pay for it.
Feasibility	This criterion assesses the feasibility of the recommendation by understanding whether all the necessary resources to implement such a recommendation are present.

STEP 2. BBF committee members independently grade recommendations between 3rd and 4th meeting

Soon after the 3rd meeting, the Director or Coordinator circulates the list of recommendations to committee members in a survey (**Appendix 3**) using the introduction letter or email template (**Appendix 3a**). It is also possible to conduct this survey *during* the 3rd or 4th meeting depending on the committee needs. However, in such scenario, time management in the meeting must be considered in order to finalize this process in the 4th meeting. Committee members are asked to independently grade all the proposed recommendations by answering nine yes/no questions about each of the recommendations. Best practice is for the Director or Coordinator to review these questions for understanding and to go over the questions with the committee members to insure consensus on the understanding of all questions and how to answer them. The Director or Coordinator compiles the survey responses (i.e. grades) in **Appendix 4**

or **Appendix 4b** depending on how the survey is conducted. Instructions on data management can be found in **Appendix 4a**. In the 4th meeting, recommendations are listed in order of highest to lowest grades using **Appendix 5**.

In brief, recommendation grades are calculated by assigning “points” to each recommendation based on the responses. “Yes” translates into 1 point, “cannot decide” translates into 0.5 point, “no” translates into 0 point, and “no answer” is considered missing data and does not contribute to the grade. Averages across all survey respondents are taken to calculate the grade for a given recommendation. These grades are generated in **Appendix 4 or Appendix 4b**.

The Director or Coordinator must carefully manage the interim timeline between the 3rd and 4th meetings and ensure that: 1) recommendations are compiled; 2) recommendations are graded by committee members using the survey; 3) recommendation *grades* are compiled; and 4) a presentation of the survey outcomes is prepared for the 4th meeting.

STEP 3. Reaching consensus on priority recommendations and develop proposed actions at the 4th meeting

In the 4th meeting, the Director or Coordinator presents the list of graded recommendations from the survey using the PowerPoint template (**Appendix 5**). The committee discusses this full list and comes to a consensus on the BBF *top priority* recommendations (approximately 3-5 recommendations total).

For each top priority recommendation, the committee develops proposed actions for guiding the advocacy, enforcement and monitoring processes. **Appendix 5** provides a template to develop the proposed actions. These top priority recommendations and proposed actions are disseminated at the 5th meeting and highlighted in policy briefs.

If you want to learn more about the methodology used in this guideline for prioritizing recommendations see **Appendix 6**.

Example

STEP 1. Gear teams develop meaningful *initial* recommendations to be presented at the 3rd meeting

1A. Presentation of initial recommendations from each gear team:

LPG Recommendation 1.

Initial Recommendation	Adoption of Code of Marketing of Breast Milk Substitutes into legislation with all provisions covered.
WHAT do we want to happen?	The Code needs to be amended to include all provisions.
WHY is it important for this activity to be accomplished?	To protect the population from harmful marketing of infant formula.
WHEN should this activity be completed by?	Government will need to adopt this into legislation by ?? (We aren't sure – to discuss with committee)

HOW will these activities get done?	Small meetings with key government officials to discuss the missing provisions and how to adopt them.
HAVE similar actions been effective in enabling the breastfeeding environment in other contexts? (Provide examples and use the BBF case studies.)	Many countries have adopted the Code fulling into legislation, for example Vietnam.

1B. Notes take on revisions of reach recommendation from the meeting and final list of recommendations from consensus of full committee (for each of the final recommendation agreed upon). Note: in red font is an example of a note taken by the country coordinator about the consensus reached among committee members of combining recommendations from different gear teams.

Initial Recommendation	Strengthen enforcement of Code of Marketing of Breast Milk Substitutes with 5 years.
WHAT do we want to happen?	<ul style="list-style-type: none"> • The Code needs to be amended to include all provisions • A monitoring and enforcement body need to be established to handle violations • A way to report violations must be developed
WHY is it important for this activity to be accomplished?	To protect the population from harmful marketing of infant formula.
WHEN should this activity be completed by?	<ul style="list-style-type: none"> • Government should adopt this into legislation within 1 year • Government and partners can work together to develop a monitoring, enforcement and reporting system within 1 year • Roll out of monitoring, enforcement and reporting system to be operationalized over the next 5 years
HOW will these activities get done?	<ul style="list-style-type: none"> • Small meetings with key government officials to discuss the missing provisions and how to adopt them. • Small meetings with key government officials and key partners to design monitoring, enforcement and reporting system within 1 year
HAVE similar actions been effective in enabling the breastfeeding environment in other contexts? (Provide examples and use the BBF case studies.)	India has successfully implemented the code with a monitoring system in place, but they do not have a strong enforcement system. India has very strong advocacy in the country for enforcing the Code. (<i>Ref -BBF EBB India Infant Milk Substitute Act, Monitoring and Enforcement</i>)
Revisions proposed in meeting 3 discussion	REG & LPG highlight gaps regarding the Code – adoption of all provision and a monitoring system to track the code. These were combined to reflect both.

STEP 2. BBF committee members independently grade recommendations between 3rd and 4th meeting

In the survey, each recommendation is presented and 9 questions are answered for each recommendation, as follows:

Initial Recommendation	Strengthen enforcement of Code of Marketing of Breast Milk Substitutes with 5 years.
WHAT do we want to happen?	<ul style="list-style-type: none"> • The Code needs to be amended to include all provisions • A monitoring and enforcement body need to be established to handle violations • A way to report violations must be developed
WHY is it important for this activity to be accomplished?	To protect the population from harmful marketing of infant formula.
WHEN should this activity be completed by?	<ul style="list-style-type: none"> • Government should adopt this into legislation within 1 year • Government and partners can work together to develop a monitoring, enforcement and reporting system within 1 year • Roll out of monitoring, enforcement and reporting system to be operationalized over the next 5 years
HOW will these activities get done?	<ul style="list-style-type: none"> • Small meetings with key government officials to discuss the missing provisions and how to adopt them. • Small meetings with key government officials and key partners to design monitoring, enforcement and reporting system within 1 year
HAVE similar actions been effective in enabling the breastfeeding environment in other contexts? (Provide examples and use the BBF case studies.)	India has successfully implemented the code with a monitoring system in place, but they do not have a strong enforcement system. India has very strong advocacy in the country for enforcing the Code. (<i>Ref - BBF EBB India Infant Milk Substitute Act, Monitoring and Enforcement</i>)

Questions		Response Options	
1	Consider effectiveness when answering the following 3 questions:		
1A	Is there high-quality evidence and knowledge of this recommendation being effective (i.e. having an impact) from other contexts?	Yes Cannot decide	No No answer
1B	Is the evidence for this recommendation translatable to your context?	Yes Cannot decide	No No answer
1C	Is this recommendation scalable?	Yes Cannot decide	No No answer
2	Consider affordability when answering the following 3 questions:		
2A	Is the cost of implementing this recommendation known?	Yes Cannot decide	No No answer
2B	Can this recommendation be funded?	Yes Cannot decide	No No answer

2C	Are there potential funders who can fund this recommendation?	Yes Cannot decide	No No answer
3	Consider feasibility when answering the following 3 questions:		
3A	Are the necessary human and financial resources in place (or can reasonably be expected to be in place) to implement this recommendation?	Yes Cannot decide	No No answer
3B	Are the necessary institutions and partnerships in place (or can reasonably be expected to be in place) for this recommendation to be implemented?	Yes Cannot decide	No No answer
3C	Is there a foreseeable path to fully and successfully implement this recommendation?	Yes Cannot decide	No No answer
4	Anything else you would like to say or ask about this recommendation?		

STEP 3. Reaching consensus on priority recommendations and develop proposed actions at the 4th meeting

Present all recommendation with grades and decide on top priority recommendations.

Recommendation	Effectiveness Grade	Affordability Grade	Feasibility Grade	Recommendation Grade
Strengthen enforcement of Code of Marketing of Breast Milk Substitutes with 5 years.	.7	.4	.5	.53
Recommendation 2				
Recommendation 3... (etc.)				

For each top priority recommendation, develop proposed actions as a committee with consensus.

Priority Recommendation	Proposed Actions
Strengthen enforcement of Code of Marketing of Breast Milk Substitutes within 5 years.	<ul style="list-style-type: none"> • Develop a budget line for monitoring and enforcement of the national law • Develop a monitoring system at national and local levels • Develop a penalties system be in accordance with severity • Develop and define a multi-sectorial enforcement strategies • Educate health professionals about the law and code violations

References:

1. Pérez-Escamilla R, Hromi-Fiedler AJ, Gubert MB, Doucet K, Meyers S & Buccini GS. Becoming Breastfeeding Friendly Index: Development and application for scaling-up breastfeeding programmes globally. *Matern Child Nutr.* doi: 10.1111/mcn.12596. [Epub ahead of print]
2. Rudan I, Gibson JL, Ameratunga S, Arifeen SE, Bhutta ZA, Black M, Black RE, Brown KH, Campbell H, Carneiro I, Chan KY. Setting priorities in global child health research investments: guidelines for implementation of CHNRI method. *Croatian medical journal.* 2008. 15; 49(6):720-33.
3. Okoli C. & Pawlowski S.D. (2004) The Delphi method as a research tool: an example, design considerations and applications. *Information & Management.* <https://doi.org/10.1016/j.im.2003.11.002>
4. Center for Disease Control and Prevention (CDC). Develop SMART Objectives. Available at: https://www.cdc.gov/phcommunities/resourcekit/evaluate/smart_objectives.html

Appendices

Appendix 1. Recommendations development template

Appendix 2. PowerPoint template for initial recommendations presented in the 3rd meeting by gear teams

Appendix 3. Template for online survey to grade recommendations (See Word Document or Google Forms link)

Appendix 3a. Letter to committee members requesting recommendation survey completion

Appendix 4. Excel file to compile survey responses and calculate summary grades for recommendations

Appendix 4a. Instructions for managing survey and survey responses

Appendix 4b. Summary grade calculator

Appendix 5. Template for priority recommendation and development of key actions

Appendix 6. Methods for prioritization process