

Advocacy Gear

Is evidence-informed, community-driven advocacy present and active to protect, promote and support breastfeeding?

Background

Global breastfeeding promotion efforts have intensified over the past decades with the release of international, evidence-based infant feeding recommendations in the early 1990s. International and local advocacy groups have been instrumental in translating these evidence-based breastfeeding recommendations into action to promote breastfeeding. Scaling-up breastfeeding promotion and support efforts require changing the political climate; by influencing the political will of politicians, legislation and policies supporting breastfeeding can be implemented. The Breastfeeding Gear Model (BFGM) posits that evidence-informed, community-driven advocacy is necessary to generate political will. The presence of strong evidence-informed advocacy can lead to massive social mobilization and engagement of persons and resources, subsequently generating enough political pressure to influence political will. While there may be numerous in-country proponents of breastfeeding initiatives, advocacy efforts must be visible, impactful, consistent, and wide-reaching in order to generate enough social concern to push for political change. Media reports and/or social marketing campaigns can be effective delivery tools for disseminating key, appropriate, evidence-based breastfeeding advocacy messages.

Themes and Benchmarks

The themes for the Advocacy Gear measure the presence and degree of advocacy to protect, promote and support breastfeeding scaling up efforts:

- 1) Public Attention
- 2) Individual Champions
- 3) Social Cohesion/Mobilization

Each theme is assessed by at least one benchmark. All benchmarks are referenced to “the past year” unless otherwise noted.

1. Public Attention Theme

Benchmark AG1: *There have been major events that have drawn media attention to breastfeeding issues.*

Description: This benchmark measures whether any media attention has been drawn to breastfeeding problems, concerns, or issues through major events and, if so, how much media attention has been garnered. Major events can include conferences, gatherings, reports, photos, TV ads, or anything that happens to galvanize public attention towards advocating for breastfeeding.

Example: On January 29th, 2016 The Lancet launched its 2016 breastfeeding series in Washington DC, which drew extensive media attention in the United States. Similar launches were done in other countries where public attention was strongly galvanized as well.

Possible data sources: To determine if and how much public attention was drawn to breastfeeding issues by the media through major events in the past year, local/subnational/national media data sources will need to be evaluated to determine the level of coverage. Media data sources can include social media announcements or articles (i.e. Facebook, Twitter, Instagram, etc.), newspaper articles, radio or TV stories, etc.

How to score: The scoring for this benchmark assesses the amount of media attention generated by events.

- No progress:** No major events have drawn national media coverage to breastfeeding issues
- Minimal progress:** One major event has drawn national media coverage to breastfeeding issues
- Partial progress:** Two major events have drawn national media coverage to breastfeeding issues, at different times of the year
- Major progress:** Three or more major events have drawn national media coverage to breastfeeding issues, at different times of the year

2. Individual Champions Theme

Benchmark AG2: *There are high-level advocates (i.e. 'champions') or influential individuals who have taken on breastfeeding as a cause that they are promoting.*

Description: This benchmark assesses whether there are champion(s) that have publicly been promoting breastfeeding as an important cause for the country. The champion(s) can be non-governmental high-level advocates or influential individuals who are highly visible people, are seen frequently (at least 3 times within the year) promoting breastfeeding, and/or who are recognized/respected people whose opinions are valued and generate advocacy. These individuals can include traditional, religious, social leaders, public figures, social media bloggers, as well as former political figures.

Example: Alissa Milano, a 43-year-old actress in the US, uses social media to promote breastfeeding. She calls herself “a breastfeeding advocate” and uses the hashtag *#normalizebreastfeeding* to tweet and post about breastfeeding issues on Facebook and Instagram. Milan is also vocal about breastfeeding on television shows and popular magazines.

Possible data sources: To determine if there are high level advocates (i.e. ‘champions’), or influential individuals that have taken on breastfeeding as a cause they are promoting, data may need to be drawn from a few sources. Consulting media data sources (i.e. social media announcements or articles, Facebook, Twitter, Instagram, etc., newspaper articles, radio or TV stories, newsletters, magazines, etc.) and/or commissioning/conducting a media survey can help to identify high-level champions. Written reports from individuals or advocacy groups specifically focused on breastfeeding issues or initiatives can be consulted. Interviews with health officials may also provide detailed information as to the presence and number of individuals championing breastfeeding within the country.

How to score: The scoring for this benchmark assesses the number of high level advocates taking on breastfeeding as a cause.

- No progress:** No high-level advocates or influential individuals have taken on breastfeeding as a cause that they are promoting.
- Minimal progress:** One high-level advocate or influential individual has taken on breastfeeding as a cause he/she is promoting.
- Partial progress:** Two high-level advocates or influential individuals have taken on breastfeeding as a cause they are promoting.
- Major progress:** Three or more high-level advocates or influential individuals have taken on breastfeeding as a cause they are promoting.

3. Social Cohesion/Mobilization Theme

Benchmark AG3: *There is a national advocacy strategy based on sound formative research.*

Description: This benchmark evaluates the presence and content of a national advocacy strategy. A national advocacy strategy is a governmental or non-governmental document or initiative that aims to organize and/or systematize breastfeeding advocacy actions within the country. If a national advocacy strategy exists then it must be based on sound formative research. Formative research helps to systematically understand characteristics, needs, preferences, etc. of different communities to then effectively build strategies and interventions. Sound formative research is grounded in theory and the country's context. A national advocacy strategy should be based on the country-level characteristics and needs.

Example: One NGO, Alive & Thrive, who has a strong presence in Bangladesh and Vietnam, has developed an approach to evidence-based breastfeeding advocacy which draws on global and national evidence, stakeholder mapping, and opinion leader research to inform breastfeeding advocacy policy strategies.

Possible data sources: If a national advocacy strategy exists, it should be available through a formal document from the entity in charge of coordinating the strategy. Accessing the national advocacy strategy is necessary to evaluate its content and determine if it is based on formative research or not.

How to score: The scoring for this benchmark reflects the existence and effectiveness of a national advocacy strategy. To score this benchmark, "effective" means that the national advocacy strategy has been strategically implemented, and has generated support for breastfeeding protection, promotion and support.

- No progress:** There is no national advocacy strategy.
- Minimal progress:** There is a national advocacy strategy but it is not based on sound formative research.
- Partial progress:** There is a national advocacy strategy that is based on sound formative research but it is not effective.
- Major progress:** There is a national advocacy strategy that is based on sound formative research and is effective.

Benchmark AG4: A national cohesive network(s) of advocates exists to increase political and financial commitments to breastfeeding.

Description: This benchmark assesses the presence or absence of a national cohesive network(s) of advocates that specifically works to increase political and financial commitments to breastfeeding. A network is formed by two or more advocate groups and is considered cohesive when they work collectively. The network activity must be proportional to its coverage (national, subnational, and/or local). The network needs to include breastfeeding advocacy as a key focus, but it does not need to be the only advocacy issue it defends.

Example: In the US, the National Alliance for Breastfeeding Advocacy (NABA) “advocates for breastfeeding at the state and federal level, seeks to better place breastfeeding in the public health arena and aims to restore breastfeeding as the cultural norm”. They are represented on the US Breastfeeding Committee and the USDA’s Breastfeeding Promotion Consortium. NABA coordinates efforts by organizations and individuals towards the development of strategic plans, policies, and goals for breastfeeding reform. It also provides advocates with information, appropriate agencies, legislative processes, regulations, organizations and people.

Possible data sources: Media sources should be consulted to see if this type of network has emerged in the past year. Interviews with government officials on the local, subnational, and national level may also help to determine if there is this type of network. Written reports from individuals or advocacy groups specifically focused on breastfeeding issues or initiatives may be consulted.

How to measure: The scoring for this benchmark reflects the existence and coverage of a national network of advocates dedicated to breastfeeding.

- No progress:** There is no national cohesive network(s) of advocates to increase political and financial commitments to breastfeeding.
- Minimal progress:** A cohesive network(s) of advocates exists to increase political and financial commitments to breastfeeding but only to a limited extent, i.e. they only have **local** coverage.
- Partial progress:** A cohesive network(s) of advocates exists to increase political and financial commitments to breastfeeding to some extent, i.e. they have **subnational** coverage.
- Major progress:** A national cohesive network(s) of advocates exists to increase political and financial commitments to breastfeeding **nationwide**.