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Becoming Breastfeeding Friendly in Britain

Scaling up Breastfeeding in Wales, Scotland and England

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BACKGROUND

Global efforts to further improve exclusive breastfeeding rates have not been successful, in part because effective scaling-up frameworks and roadmaps have not been developed¹. Breastfeeding and the provision of human milk is the most accessible and cost-effective activity available to public health which is known to prevent a range of non-communicable diseases (NCDs), specifically childhood obesity, diabetes type 2 and maternal breast cancer^{2,3}.

The **UK has one of the lowest breastfeeding rates in the world; 80% of babies are breastfed at birth, only 1% are exclusively breastfed by 6 months**⁴. Breastfeeding rates are lower among women in areas of higher deprivation, exacerbating health inequalities.

The **Becoming Breastfeeding Friendly** toolkit was developed through highly structured technical and academic collaboration, led by **Yale University**. It has been piloted in Mexico and Ghana.

- **In the short term:** it provides an evidence-based tool to guide countries in assessing their breastfeeding status, and their readiness to scale up.
- **Long term:** it supports countries to identify the concrete measures they can take to sustainably increase breastfeeding rates, based on data-driven recommendations.

PROGRAMME THEORY

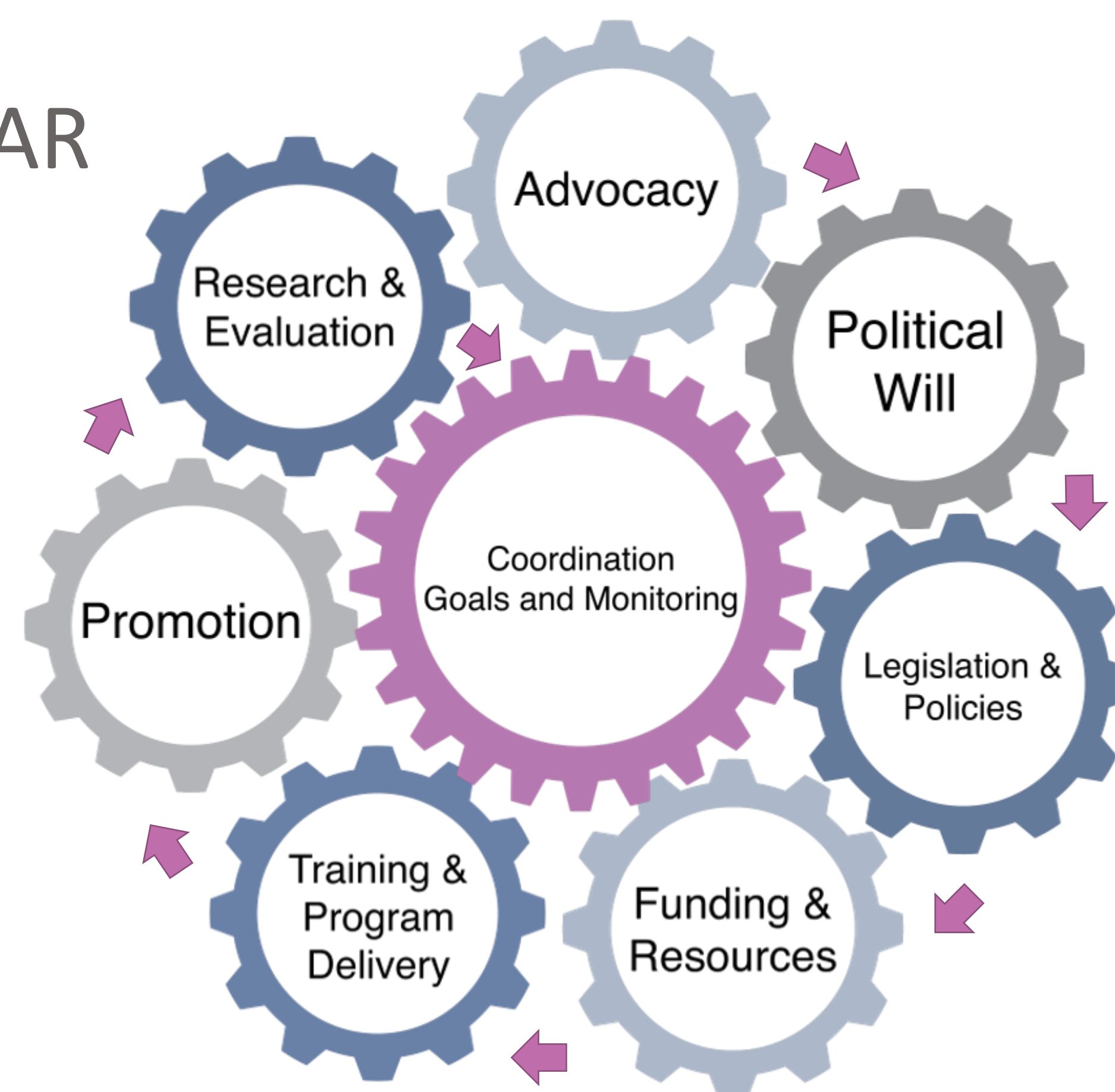
The **BBF Gear Model** is made up of eight simultaneous conditions which sustain breastfeeding: **the gears**. Each gear must be sufficiently mobilised to turn the next, eg:

- strong, evidence-based *advocacy* can generate *political will* to enact legislation and policies to protect, promote and support breastfeeding
- the *coordination, goals and monitoring* gear can keep the multi-sectoral gears in motion and provide timely proactive feedback

Country-based committees allocate **Gear Teams** to score their country for each gear based on performance in 54 sub-categories or **benchmarks over the preceding year**.

Teams present evidence for their scoring and together formulate the country's overall **BBF Index score**, identifying gaps where action is needed and recommendations based on the data.

BBF GEAR MODEL



THE 3 GB COUNTRIES

ENGLAND With Public Health England		WALES With Public Health Wales		SCOTLAND With Scottish Government	
Initial BF rate (any breastmilk)	At 6 weeks	Initial BF rate (any breastmilk)	At 6 weeks	Initial BF rate (any breastmilk)	At 6 weeks
83% (IFS 10) ⁵	Any BF: 57% Exclusive BF: 24% (IFS 10)	71% (IFS 10)	Any BF: 40% Exclusive BF: 17% (IFS 10)	74% (IFS 10) 75% (MINS 17) ⁶	Any BF: 50% ; Exclusive BF: 22% (IFS 10) Any BF: 55% (MINS 17)

BBF GB

Launching BBF GB, breastfeeding experts from Scotland, Wales and England attended the first **GB Engagement Committee in December 2017**, agreeing to deliver BBF separately in each country to reflect structural and cultural variation.

- The CHSS team is now supporting three locally developed **Country Committees of experts in Scotland, Wales and England** to carry out the **5 step meeting process**
- The GB Engagement Committee provides **critical oversight** of the process, findings and dissemination planning through twice yearly meetings
- Country committees began the **benchmarking process from April 2018** using document and media searches, collaborative reviews and interviews
- Through scoring and identifying the gaps, teams are **producing and prioritising focused recommendations** based on a Delphi process delivered by CHSS

Alongside the countries' work, **CHSS and Yale** are undertaking a structured **media analysis** to understand how often breastfeeding is discussed in the main media channels and to review its content, framing, main spokespersons and response.

NEXT STEPS

- Report scores and recommendations back to governments
- Share findings internationally with Yale and the other countries: Mexico, Ghana, Germany, Myanmar, China, Samoa
- Build on findings, develop new research questions
- Disseminate to academics, policy, practice and the public

More information at bbf.yale.edu

REFERENCES:

1. Pérez-Escamilla R, Hromi-Fiedler AJ, Gubert MB, Doucet K, Meyers S, dos Santos Buccini G (2018) Becoming Breastfeeding Friendly Index: Development and application for scaling-up breastfeeding programmes globally. *Matern Child Nutr.* 2018;e12596.
2. Victora CG, Bahl R, Barros AJD, Franca GVA, Horton S, Krusevic J, Murch S, Sankar MJ, Walker N, Rollins NC (2016) Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect. *Lancet* 387 10017: 475–490.
3. Renfrew M et al (2012) Preventing disease and saving resources: the potential contribution of increasing breastfeeding rates in the UK. UNICEF UK
4. McAndrew F, Thompson J, Fellows L, Large A, Speed M, Renfrew MJ (2012) Infant Feeding Survey 2010. Health and Social Care Information Centre
5. As above. NB: this UK-wide survey has been discontinued.
6. Scottish Government (2018) Scottish Maternal and Infant Nutrition Survey 2017

5 STEP COUNTRY COMMITTEE PROCESS

