

DEVELOPING NOVEL AND INNOVATIVE APPROACHES TO INFANT AND YOUNG CHILD FEEDING ADVOCACY

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**THE
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Introduction

Despite global evidence for the life-long benefits of breastfeeding(1), and a progressive health policy environment(2), South Africa is challenged with sub-optimal breastfeeding rates(3).

Evidence highlights the negative impact of the manipulative and insidious marketing strategies of the infant formula industry(4).

Without accelerated and concerted efforts to build a pro-breastfeeding environment, countries will not realize the health and economic benefits of improved breastfeeding(5) resulting in negative health and development of future generations(6).

Aim of the project

The Infant and Young Child Feeding Advocacy (IYCF) Project aims to operationalize WHO findings to help create an enabling environment in South Africa, where women's breastfeeding choices are not influenced by the marketing of infant formula.

The key deliverable will be a comprehensive multi-year plan for an advocacy campaign to mitigate the effects of unethical and inappropriate marketing of infant formula.



Method: 1 Management

The project is funded by the Family Larsson Rosenquist Foundation (FLRF) and is aligned with and in support of the strategic initiatives of the WHO (World Health Organisation) to work with South Africa to strengthen the legislation and the monitoring and enforcement of Regulations, R991. The project is hosted by the University of the Western Cape, Centre of Excellence for Food Security and guided by a coalition of like-minded organizations working towards the realization of women and children's health rights. The project is managed by a UWC project team, and supported by a steering committee and technical working group (Figure 1).

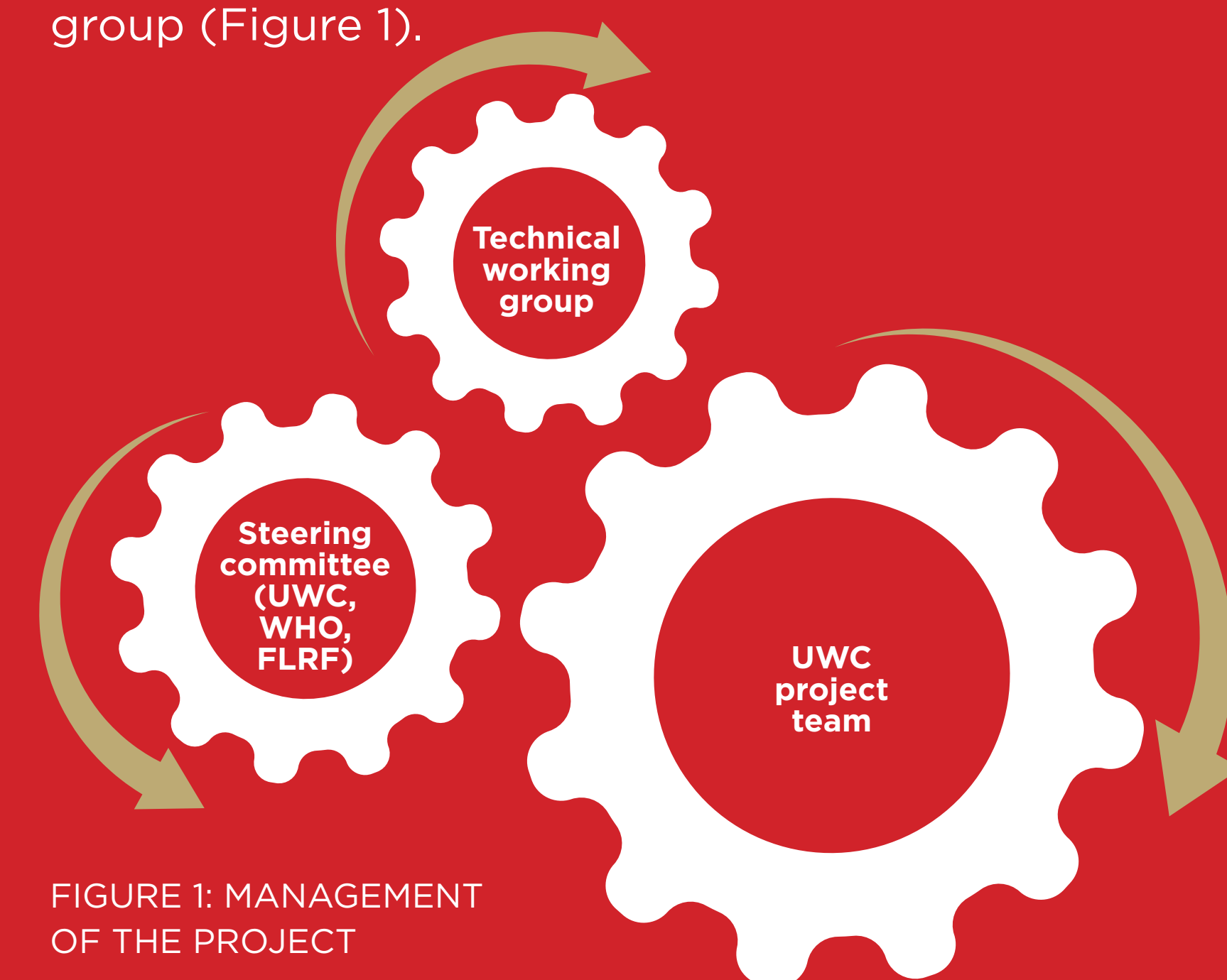


FIGURE 1: MANAGEMENT OF THE PROJECT

Method: 2 Process

Based on prior work of the funder a systematic process to plan advocacy campaigns is developed (Figure 2).

The steps followed in the formative research (which is part of the TRANSPARENCY PHASE), are detailed in Figure 3.

TRANSPARENCY PHASE

ANALYSIS AND DEFINITION OF STRATEGY

PREPARATION (advocacy messages & materials)

COSTING & FUNDING STRATEGY

FIGURE 2: PROCESS FOR DEVELOPING THE ADVOCACY CAMPAIGN

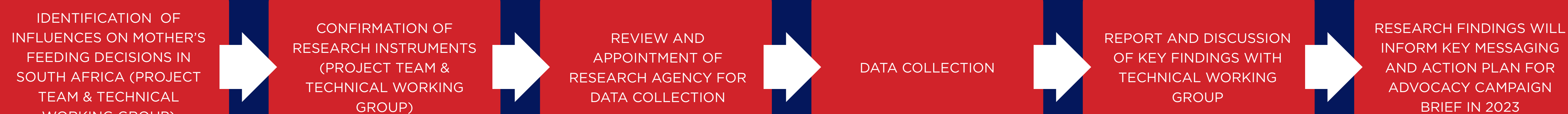


FIGURE 3: THE FORMATIVE RESEARCH PROCESS

We are currently engaged in the data collection process (Figure 4).

Recruitment & consent of key influencers

- Media
- Medical managers
- Health care professionals
- Retail staff
- Medical Aids
- Social media influencers
- Academics
- Health care professional bodies

Interviews

- Structured interview guides for each influencer
- Recorded
- Transcriptions of interviews completed

Data analysis & report

- Completed by UWC researchers
- Key findings report

FIGURE 4: THE DATA COLLECTION PROCESS

Results

Initial findings from the transparency phase are outlined in Figure 5.

Conclusion

Marketing and influencing tactics by the formula industry in South Africa are widespread and targets various influencers to sway a mum's feeding decision.

Influencers need to be made aware of the questionable means of marketing, and how this erodes breastfeeding and breastmilk feeding choices.

The findings will provide the systematic evidence needed to develop an effective advocacy campaign in support of WHO strategy to strengthen the South African breastfeeding environment.

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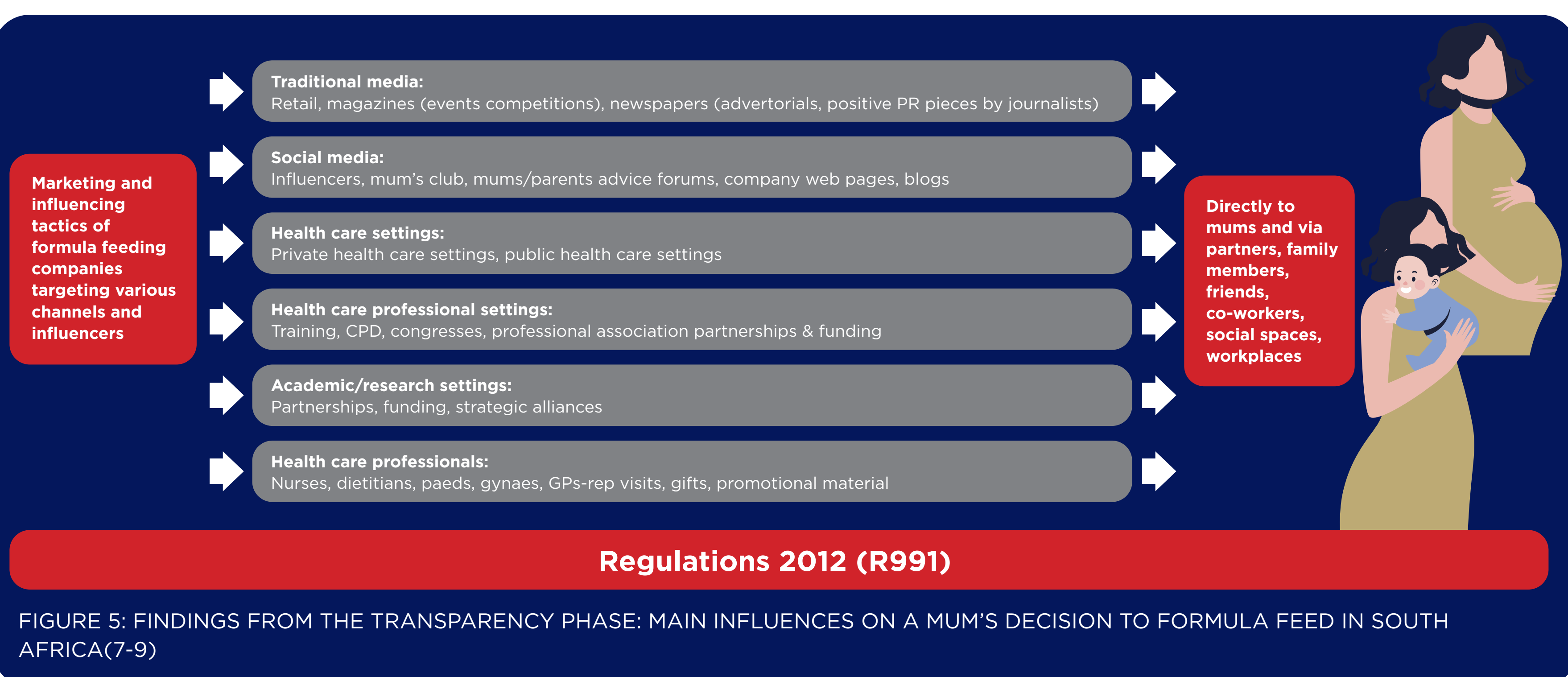


FIGURE 5: FINDINGS FROM THE TRANSPARENCY PHASE: MAIN INFLUENCES ON A MUM'S DECISION TO FORMULA FEED IN SOUTH AFRICA(7-9)

