



Evaluation of the Feed Your Way Campaign - workforce focused

Final report

March 2025

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Background

The Feed Your Way campaign, launched in 2022, aims to make Nottingham a breastfeeding-friendly city by promoting informed, inclusive, and supportive environments for families. Co-produced with local families and professionals, it empowers parents in their infant feeding choices and encourages community support for breastfeeding.

Methods and findings

Developed by Small Steps Big Changes (SSBC) and delivered by Hitch Marketing, the campaign provides resources to help families make informed choices. Apteligen conducted an independent evaluation of workforce engagement, using a combination of surveys and interviews, while Hitch Marketing assessed public reach and impact. Hitch carried out a midpoint evaluation through a survey and focus groups. For the evaluation summary, please search for “Feed Your Way” on smallstepsbigchanges.org. These findings guided the expansion of campaign resources and the second phase of promotion. This summary presents key insights from both evaluations and recommendations for ensuring the campaign’s long-term sustainability and impact.

Campaign reach and public engagement

The campaign engaged a significant portion of its target audience through social media, community events, and traditional advertising. Digital platforms reached 99,030 accounts and generated 2,459 website sessions.

Hitch Marketing’s evaluation found 25.5% of survey respondents recalled the campaign unprompted, rising to 43% when prompted. Its inclusive, non-judgmental messaging was well received, particularly among younger parents (35.5% recall among 18-24s) and expectant families, who showed the highest recognition.

Among parents who engaged, 52% felt encouraged to breastfeed, 53% felt better equipped to seek support, and 78% were more motivated to support breastfeeding in their community, suggesting the campaign helped foster a more supportive breastfeeding culture in Nottingham.

Workforce engagement

Apteligen’s evaluation found professionals valued Feed Your Way’s case studies, social media content, and printed materials, such as postcards, as practical tools for conversations with families. Case studies were especially valued for their real-world relevance and relatability. The campaign’s inclusivity also helped professionals provide tailored support, ensuring families saw their own experiences reflected in the materials.

However, workforce awareness and engagement varied significantly. While some professionals fully integrated the campaign into their practice, 40% were unaware of its existence, highlighting communication gaps. Among those aware, most found it valuable, but engagement remained inconsistent. Many learned about the campaign informally, typically through colleagues (33%) or team meetings (20%), rather than formal training. This suggests awareness has spread informally rather than being systematically embedded into professional practice.

A key issue was the lack of a formal introduction to Feed Your Way in many professional settings, with some practitioners only learning about it through this evaluation. Engagement varied widely across healthcare settings; community-based practitioners, such as health visitors

and breastfeeding support workers, were more likely to use the campaign, whereas midwives and hospital staff were often unaware of its resources. This highlights the need for targeted engagement strategies to ensure clinical staff, who are often the first point of contact for infant feeding advice, can access and use the campaign effectively.

Time constraints were another major barrier. Many professionals lacked the capacity to explore or integrate new resources, even when they recognised their value. In overstretched services, staff tended to rely on familiar materials, meaning Feed Your Way was sometimes seen as an optional extra rather than an essential tool.

Recommendations

As Feed Your Way transitions to Public Health, its long-term success will depend on embedding it within workforce practice, expanding its reach, and maintaining an evidence-based approach to evaluation and development. While the campaign has been positively received by those who engage with it, sustainability will require stronger integration into existing systems, deeper professional engagement, and ongoing resource updates. Our recommendations for sustainability are set out below.

Extend the campaign beyond Nottingham City while maintaining a local identity

- Originally designed for Nottingham City, update the branding to include both Nottingham City and Nottinghamshire, as the workforce sees potential for better engagement in rural areas.
- Expanding distribution of printed resources in county-based healthcare settings to improve visibility.
- Strengthening partnerships with county councils, rural maternity teams, and community hubs to increase uptake.
- To maintain local relevance while expanding reach, the campaign could evolve its tagline from “Making Nottingham a Breastfeeding-Friendly City” to “Making Nottingham and Nottinghamshire Breastfeeding-Friendly.”

Streamline website navigation and improve accessibility

- Improve website navigation with clearer pathways for different user groups (e.g., professionals, parents) to make key resources easy to find.
- Use QR codes and printed guides to direct users to key resources and review mobile accessibility for ease of use across devices.
- A review of mobile accessibility should be carried out to ensure ease of use across different devices.

Tailor resources more clearly to different audiences

- Reposition case studies on the forefront of the website to improve accessibility and address workforce challenges in signposting users to relevant resources.
- Expand audience-specific content (e.g., materials for fathers, grandparents, and neurodiverse parents) to increase relevance and engagement.

Strengthen workforce awareness and integration through relationship building

- Leadership engagement is critical, and senior professionals must actively endorse and promote the campaign.

- Targeted workforce engagement strategies should be developed for hospital midwives, rural healthcare teams, and frontline staff who have had lower engagement with the campaign.

Expand workforce training and professional development

- Develop structured role specific training modules including practical guidance to help professionals integrate campaign materials into their daily practice.
- Use blended learning approaches, such as in-person workshops, webinars, and online resources, to meet various professional needs.
- Promote peer-to-peer knowledge sharing, supporting champions within teams to drive adoption.

Consider expanding the campaign to include wider infant feeding topics

Feed Your Way promotes breastfeeding, but some professionals suggest expanding it into a broader infant feeding campaign to align with public health priorities and engage more professionals.

- The campaign should continue to centre breastfeeding, while also considering expanding content on safe bottle-feeding, expressing milk, and responsive feeding.
- Any changes should be co-produced with families and professionals to ensure that the campaign remains true to its original values.

Continue to refresh and update resources

- In collaboration with staff and families, regularly refresh imagery, case studies, and materials to ensure they remain relevant and continue to meet user needs.
- Introduce further visual and interactive formats, such as short videos and animations, to enhance engagement.
- Maintain regular engagement with professionals and families to ensure materials continue to meet their needs.

Develop a structured evaluation framework

- Annual workforce surveys should track awareness, usage, and barriers over time.
- Parent engagement data should be collected, ensuring materials are accessible.
- A long-term evaluation strategy should be developed, allowing the campaign to demonstrate its effectiveness and justify continued investment.

Conclusion

The Feed Your Way campaign has helped shift public perceptions of breastfeeding in Nottingham by providing practical, evidence-based, and non-judgmental support. While it has made progress, inconsistent workforce engagement and limited healthcare integration remain challenges. The transition to Public Health presents an opportunity to strengthen partnerships, expand reach, and secure sustainable funding. By addressing gaps in awareness and training, the campaign can become a long-term resource supporting infant feeding choices across Nottingham and beyond.

1 Background and context

The Feed Your Way campaign was initiated in April 2022 and officially launched 6 months later, with the aim of establishing Nottingham as a breastfeeding-friendly city by supporting families in achieving their breastfeeding goals. Collaboratively commissioned by Small Steps Big Changes (SSBC) whose staff supported Hitch Marketing to develop the £150,000 campaign. This was co-created with local families, residents, health professionals, and business owners to ensure it reflected the community's needs and values. Extensive research, including the Big Nottingham Breastfeeding Survey, which received 1,800 responses, revealed families' desire for empowerment in their feeding choices, honest conversations about the realities of breastfeeding, and access to tailored support.

The campaign promotes informed, inclusive, and supportive environments for families, emphasising choice, community, and confidence. It features real Nottinghamshire families sharing diverse feeding experiences through videos, interviews, and photos to normalise breastfeeding and foster a positive cultural shift. Materials were distributed through digital platforms such as Facebook, Instagram, and YouTube, alongside a dedicated website offering resources for partners, pregnant families, breastfeeding families, and their support networks. In Phase 1, campaign materials were also displayed at bus stops and on the Nottingham Council House.



Figure 1: Examples of marketing displayed at a bus stop and Nottingham Council House

Hitch Marketing, a specialist behaviour-change marketing agency, developed and delivered the campaign, combining research-driven strategies with community input to create an impactful initiative. Hitch Marketing also conducted part of the campaign's evaluation, measuring its reach among the public and effectiveness in influencing attitudes and behaviours while identifying opportunities for further development.

1.1 Campaign design

The key phases of the campaign design are set out below.

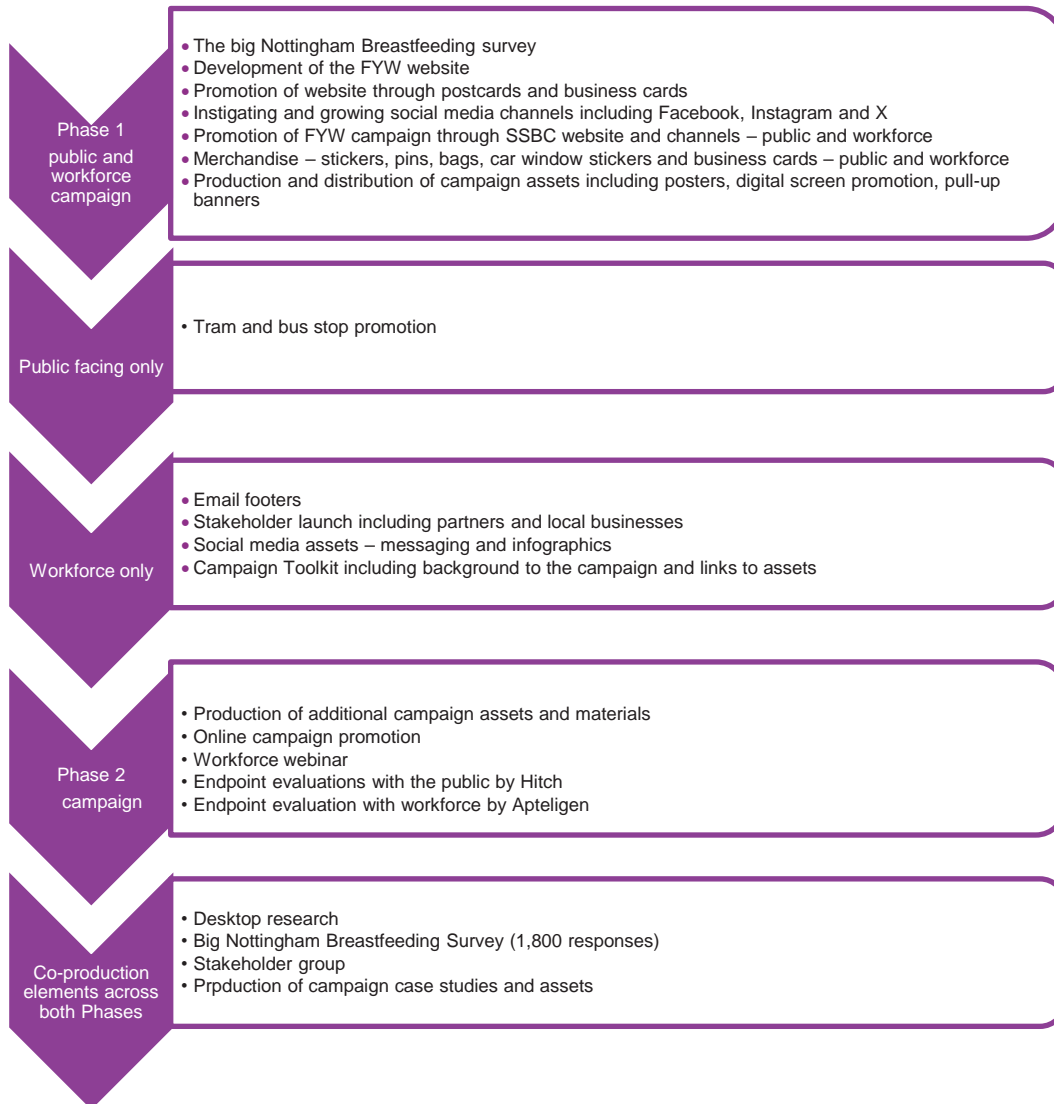


Figure 2: Phases of the campaign design

Hitch Marketing’s development of the “Feed Your Way” campaign for Small Steps Big Changes was a structured, research-driven effort designed to promote inclusivity and support breastfeeding. The Nottingham-centric campaign development began with comprehensive desk research and audience engagement to identify barriers to breastfeeding, such as limited peer networks, challenges faced by underrepresented groups, and the need for better support narratives. A variety of materials were developed including case studies, and a launch event took place in October 2022. Alongside this, paid social media advertising and out of home advertising, such as bus stops took place. Hitch Marketing undertook an interim evaluation which explored recall of the campaign and how people perceived the campaign. There was generally a positive response to the campaign and its inclusive design. They also identified the need for more diverse stories and greater representation of partners and grandparents, in order to build on the existing inclusive nature of the campaign.

In the second phase, the campaign was refreshed to address these gaps, introducing new case studies that reflected the diverse realities of breastfeeding families. These included stories from

neurodiverse parents, couples with younger babies, fathers, and grandparents providing support. Paid social media advertising was also undertaken to increase the levels of awareness of the campaign.

The campaign was underpinned by Self-Determination Theory¹, addressing core psychological needs: autonomy, by promoting informed choices without pressure; relatedness, by emphasising family and community support; and competence, by building confidence through practical information and relatable narratives. It emphasised autonomy and choice in breastfeeding. It sought to normalise breastfeeding through clear, inclusive messaging that reflected diverse family structures and experiences. Key messages included:

- Empowerment: Encouraging parents to feel empowered to feed their baby in the way that works best for them, for as long as they want.
- Open Conversations: Promoting honest and open conversations about the realities of breastfeeding to reduce stigma and increase support.
- Tailored Support: Ensuring that families have access to tailored support to understand and overcome the challenges of breastfeeding

A key feature of the campaign was its co-production approach, which involved collaborating with families and community members to ensure the campaign represented Nottingham families in an authentic manner and was relatable for its target audience. The campaign also utilised digital platforms strategically, targeting parents, co-parents, and grandparents with tailored content that recognised their unique roles in the breastfeeding journey.

Main audiences:

1. Those who are making infant feedings decisions now or in the future.
2. Their support network and wider community (partners/workforce)

The campaign specifically targeted:

- Pregnant families: Providing information and support to expectant parents about breastfeeding.
- Breastfeeding families: Offering tailored support and resources to families who are currently breastfeeding.
- Expressing families: Assisting families who are expressing breast milk for their babies.
- Partners and co-parents: Engaging partners and co-parents to support breastfeeding mothers.
- Grandparents: Individuals aged 40-70 who can influence breastfeeding practices within families.
- Wider family and friends: Educating family and friends on how they can support breastfeeding.
- Healthcare professionals: Collaborating with healthcare providers to ensure consistent and accurate breastfeeding support.
- Community members: Encouraging the broader community to create a breastfeeding-friendly environment.

¹ Deci, E.L. and Ryan, R.M., 1985. Self-determination theory. Intrinsic motivation and self-determination in human behavior. Springer, Boston, MA, pp. 3-36. Self-determination theory (SDT) posits that people achieve higher motivation and well-being when their psychological needs for autonomy, competence, and relatedness are fulfilled.

The campaign represents Nottingham's diverse population, featuring families from various ethnic backgrounds and highlighting a range of breastfeeding experiences. It includes narratives on topics such as returning to work, breastfeeding as a neurodiverse parent, and supporting a breastfeeding family member.

The campaign was primarily focused on Nottingham City and its residents. The resources and support have been tailored to the city's unique cultural and demographic needs, with the goal of making Nottingham a breastfeeding-friendly city. Due to increasing momentum amongst unintended County audiences, the campaign has incorporated some county-wide imagery and locations over time in order to support it to resonate more widely, its main emphasis remains on Nottingham City.

1.2 Feed Your Way and the workforce

There were two stages to the campaign:

- Phase 1: Public facing to raise awareness about breastfeeding for families and the wider Nottingham community
- Phase 2: The original focus was intended to be on Nottingham businesses and workplaces, ensuring their venues were breastfeeding-friendly. However, efforts instead shifted towards continuing to raise public awareness of the campaign both in Nottingham and beyond, as well as promoting it among the workforce.

Phase one involved the following activities:

Public and workforce:

- The big Nottingham Breastfeeding survey
- Development of the FYW website
- Promotion of website through postcards and business cards
- Instigating and growing social media channels including Facebook, Instagram and X
- Promotion of FYW campaign through SSBC website and channels – public and workforce
- Merchandise – stickers, pins, bags, car window stickers and business cards – public and workforce
- Production and distribution of campaign assets including posters, digital screen promotion, pull-up banners

Public Facing:

- Tram and bus stop promotion

Workforce:

- Email footers
- Stakeholder launch including partners and local businesses
- Social media assets – messaging and infographics
- Campaign Toolkit including background to the campaign and links to assets

For Phase two, the focus was on promoting and growing awareness of the Feed Your Way campaign and available assets with the workforce. As a follow on from the previously shared campaign toolkit, a further communication was produced which highlighted the availability of assets, along with information about, and background to the campaign. This was shared with

the following: 0-19 Public Health Nursing team, SSBC Family Mentors, Nottingham CityCare Partnership, Nottingham City Council Public Health and Nottingham University Hospitals NHS Trust Midwifery team. It was also shared through partner newsletters and internal communications across the partnership. Additionally, a training webinar 'Making 'Feed Your Way' Your Business' focusing on the campaign and how this could bring additionality to the workforce's engagement with families prenatally and early postnatally was held in July 2024 and was attended by 78 workforce colleagues.

The campaign's impact was evaluated using the RE-AIM framework², which examines a campaign by looking at the Reach, Effectiveness, Adoption, Implementation, and Maintenance (sustainability). Hitch Marketing assessed the campaign's reach and effectiveness among mothers and the broader community in an evaluation of the campaign focused on people's (not necessarily families) interactions with it. Apteligen conducted a workforce evaluation to explore awareness, engagement, and strategies for sustaining the campaign beyond March 2025. These evaluations contribute to Nottingham's goal of becoming a breastfeeding-friendly city.

This report focuses on the findings from the workforce evaluation, specifically examining the engagement, awareness, and sustainability of the Feed Your Way campaign among professionals. By addressing these aspects, we aim to identify key challenges and opportunities for enhancing the campaign's impact. To provide a comprehensive understanding of the campaign's success and areas for improvement, this report also incorporates insights from Hitch Marketing's evaluation, which focussed particularly on the campaign's reach and effectiveness, and explored only the impact for local residents. For detailed information on Hitch Marketing's evaluation, please refer to the Hitch Marketing Feed Your Way midpoint evaluation summary and Feed Your Way Endpoint evaluation which are both available on the Small Steps Big Changes website³.

2 Evaluation approach

Both Apteligen and Hitch Marketing have undertaken evaluations. In the second campaign phase, Hitch Marketing evaluated the campaign through survey distributed to 430 participants across both City and County by a third-party agency. More details on the survey design and distribution can be found in their final report, whilst details of the approach to the workforce evaluation we undertook is detailed below.

Apteligen was commissioned specifically to investigate the workforce perspective. This evaluation was structured in two phases of research and reporting, with an interim report delivered in March 2024 to present findings from the initial phase. This phased approach ensured that insights generated during the first phase could inform the refinement and development of subsequent campaign activities and materials.

The process began with a design workshop in September 2023, which defined the evaluation priorities and identified key stakeholders. Based on this workshop, an evaluation plan and set of research questions were developed to guide the first phase of fieldwork. The primary research methods included:

² Glasgow, R.E., Vogt, T.M. and Boles, S.M., 1999. Evaluating the public health impact of health promotion interventions: the RE-AIM framework. *American journal of public health*, 89(9), pp.1322-1327.

³ The website is www.smallstepsbigchanges.org.uk and all reports can be found by searching directly here.

- A survey distributed to a wide range of stakeholders involved in infant feeding across Nottingham.
- Interviews with professionals engaged in infant feeding to gather more detailed, qualitative insights.

To maximise survey reach, SSBC directly shared the survey with key stakeholders, circulated it through newsletters and mailing lists, and encouraged recipients to share it within their professional networks. These efforts yielded 72 responses from a diverse group of participants, including those unaware of the campaign, those aware but not using its materials, and those actively engaging with its resources.

The survey findings were complemented by interviews with 10 professionals. Nine of these interviewees were selected from survey respondents who had indicated willingness to participate in follow-up discussions, while one interviewee was directly approached by SSBC to ensure a balanced sample. Additional interviews were sought; however, limited capacity within professional groups presented challenges in securing broader participation.

Following the initial phase of data collection, findings were analysed and compiled into an interim report⁴. This report provided recommendations to inform future campaign development and promotional activities for phase 2 of the campaign. Six months later, the second phase of fieldwork was conducted. This phase employed the same research methods, including a follow-up survey, which received 65 responses, and a further 10 interviews with professionals. This is summarised in the table below.

Phase	Survey respondents	Interviews
Phase 1	72	9
Phase 2	65	10

Figure 3: Summary of fieldworks participants

One challenge during the evaluation was achieving strong participation from relevant stakeholders. Despite SSBC's comprehensive outreach efforts, including networks, newsletters, meetings, and promotional tools like QR codes, greater workforce engagement would have further enhanced the evaluation. This should be considered in the context of stretched resources and many staff having very limited capacity. While this might suggest a lack of enthusiasm for the campaign, it does not necessarily mean that this is the case. In fact, the level of engagement, which could have been far lower could be demonstrating commitment to infant feeding or the campaign, despite limited resources. Nevertheless, the responses reflected a broad cross-section of roles and organisations across Nottingham City and County, providing a representative and reliable sample for analysis.

2.1 Workforce engagement profile

Both surveys were completed by a diverse range of stakeholders, as detailed below. Based on feedback regarding how respondents identified their roles and organisations in the first survey, we refined the response categories for the second survey. Consequently, the categories below are not entirely comparable and have some overlap.

⁴ This is found by search on the website www.smallstepsbigchanges.org.uk

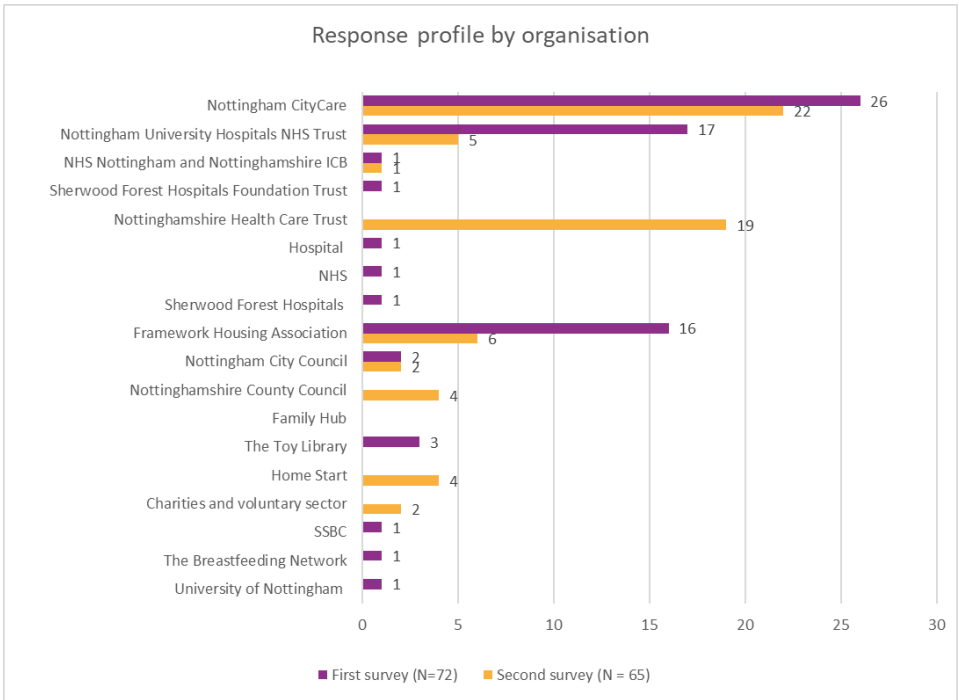


Figure 4: Organisational response profile⁵

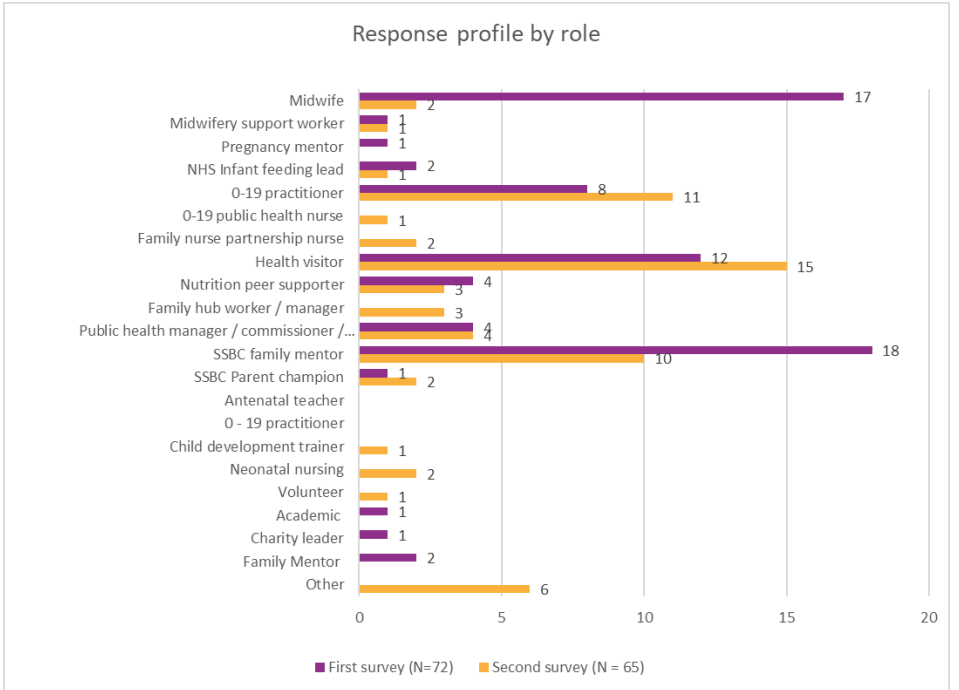


Figure 5: Role profile

Meanwhile, the interviewees across both rounds of fieldwork represented a diverse range of roles and experiences, which included midwives, health visitors, breastfeeding support workers, and community engagement professionals. Their roles varied from direct support of families to workforce training and strategic planning.

⁵ Note that due to refinements around how the response categories over the two surveys the organisational categorisations are not directly comparable between the two surveys and this should be seen as indicative.

3 Introduction to the findings

This section presents the key findings from all the evaluation activities, focusing on three main areas: families' engagement and experience, workforce engagement and experience, and learning and sustainability considerations.

The families' engagement and experience are explored in greater depth in the Hitch Marketing report. In this section, we provide a summary of the key insights gathered, alongside a more detailed overview of workforce engagement and experience, examining the involvement and feedback of the professionals' use of the campaign.

Finally, we reflect on the learning from the campaign, considering the sustainability of its approach and outcomes. These findings aim to provide a comprehensive understanding of the campaign's impact and inform future efforts in creating lasting change within the community.

4 Families' and residents' engagement and experience

From the research undertaken by Hitch Marketing, it is clear the "Feed Your Way" campaign has had a considerable impact on attitudes and behaviours around breastfeeding in Nottingham and Nottinghamshire across those who have engaged with the campaign. Through a combination of evidence-based strategies, inclusive messaging, and a focus on community-wide support, the campaign has demonstrated the potential of public health initiatives to create meaningful change. Guided by Self-Determination Theory⁶, the campaign addressed autonomy, relatedness, and competence, empowering families while embedding breastfeeding as a shared responsibility across society.

4.1 Reach and visibility

Hitch Marketing's Reach and Efficacy mid-point evaluation revealed that the campaign was well received, with most respondents responding positively. The campaign was clearly identified as a breastfeeding campaign and described as non-judgemental. Individuals who had faced breastfeeding challenges or opted for formula feeding did not feel excluded by the Feed Your Way name. The evaluation recommended increasing the campaign's reach and exploring creative, cost-effective ways to communicate with a larger audience. While diversity was appreciated, additional case studies were suggested as beneficial. Fathers requested more content showcasing positive breastfeeding experiences to complement the existing stories of overcoming challenges.

In its second phase, the campaign achieved significant reach, engaging a wide cross-section of its target demographic. According to the Hitch Marketing endpoint evaluation, 25.5% of survey respondents recalled the campaign unprompted, while an additional 17.4% recognised it when prompted, resulting in a total recall rate of 43%. Digital platforms played a crucial role in extending the campaign's reach, engaging 99,030 accounts and generating 2,459 website sessions. These figures highlight the campaign's ability to connect effectively with a large audience, though opportunities remain to convert this visibility into deeper engagement. SSBC

⁶ Self-Determination Theory posits that people are most motivated and perform best when their needs for autonomy, competence, and relatedness are fulfilled. Deci, E. L., & Ryan, R. M. (1985). *Intrinsic motivation and self-determination in human behavior*. Plenum Press.

believed that promoting deeper engagement could be driven by the workforce actively promoting the campaign, especially to families who are undecided about breastfeeding. This includes expectant parents or those planning to have a baby, as well as their support networks.

The campaign's focus on inclusivity helped it connect with key groups. Notably, Hitch Marketing's research found that:

- 64.7% of pregnant individuals and their partners recalled the campaign unprompted.
- Parents of children under five demonstrated a 40.5% recall rate, highlighting the campaign's relevance to families with young children.
- Younger audiences aged 18–24 showed high levels of engagement, with a 35.5% recall rate.

The use of recognisable locations within Nottingham and Nottinghamshire further strengthened the campaign's relatability, creating a sense of connection that resonated with participants. Respondents often commented on how these familiar settings made the campaign feel authentic and rooted in their community, enhancing its impact, a consideration that was also reflected in the feedback from the workforce.

4.2 Behavioural influence and inclusivity

Survey responses indicated that the campaign successfully influenced positive behaviours around breastfeeding, addressing both societal perceptions and personal actions. Over half (52%) of survey respondents felt encouraged to breastfeed or support a partner in breastfeeding due to the campaign. Additionally, 53% of parent respondents agreed that the campaign provided them and their partners with the resources to seek breastfeeding support. Notably, Hitch Marketing survey respondents were only shown still imagery from the "Feed Your Way" campaign, which informed this feedback. An impressive 78% felt motivated to support breastfeeding women, including friends and family members.

A hallmark of the campaign's success was its inclusivity. By recognising and addressing the roles of partners, grandparents, and broader community networks, the campaign fostered collective responsibility. This approach was praised by participants, with 78% agreeing the campaign was inclusive of diverse ethnic groups and family types, while 76% noted its emphasis on involving fathers.

Apteligen's workforce evaluation supports Hitch Marketing's findings, and one **midwife** observed:

"By including partners and families in the conversation, the campaign helped shift perceptions - it's not just a mother's responsibility anymore."

4.3 Learning and adaptations from Phase 1

According to Hitch Marketing's report, the insights from Phase 1 of the campaign informed several key adaptations for Phase 2. In order to create initial materials, Phase 1 recruited families around different experience of breastfeeding challenges (e.g. neonatal stay, going back to work, going out and about while breastfeeding, how partners can support breastfeeding) following their engagement in the Big Nottingham breastfeeding survey.

Phase 2 set out recruitment criteria for additional case studies based on the opportunities for campaign theme expansion which were identified in Hitch' midpoint evaluation and SSBC's continued partnership working with infant feeding stakeholders. For example, younger babies, fathers and a neurodiverse mother were recruited by a recruitment agency.

Newly recruited narratives included stories such as Temi's and Halimah's, which highlight the roles of fathers and grandparents in supporting breastfeeding.⁷



Figure 6: Images from Temi and Halimah's case studies

Temi's story centred on a father's active involvement, demonstrating the importance of partner engagement and achieving a click-through rate (CTR) of 1.80% at a cost of £0.36 per click. Halimah's story focused on a grandparent's role in encouraging breastfeeding, resonating strongly with older audiences and achieving a CTR of 1.75% at £0.33 per click. These adaptations expanded the campaign's appeal and underscored its commitment to shared responsibility.

4.4 Insights and key learnings

The campaign's digital strategies provided valuable insights into audience engagement and the importance of inclusive messaging. Social media emerged as a cornerstone of the campaign, enabling precise targeting and fostering engagement. Facebook proved particularly impactful, accounting for 67% of unprompted recall, while Instagram connected effectively with younger demographics. However, while digital reach was strong, website engagement metrics, such as an average session duration of 23 seconds and a return visit rate of 3.64%, suggested room for improvement in sustaining user interest.

Targeted advertisements played a crucial role in driving engagement, with specific case studies targeted so that specific audiences would be able to recognise themselves in the stories shared. The relatedness element of the campaign, emphasising that "support is available," required an inclusive approach, not only addressing the breastfeeding parent but also their support networks and wider society.

⁷ These case studies contain videos as part of their stories. However, some images are shown below to illustrate the imagery included.

Apteligen's workforce evaluation supports Hitch Marketing's findings, with one **health visitor** shared:

"I used the resources to help a new mum navigate her breastfeeding challenges, and she said seeing diverse families represented gave her confidence."

The Hitch Marketing report highlights the success of the Feed Your Way campaign in advancing breastfeeding promotion, positively influencing attitudes, and fostering a culture of support. Its emphasis on inclusivity and community engagement has empowered families, making breastfeeding a shared responsibility rather than solely a maternal one. However, Apteligen's workforce evaluation found that the workforce does not routinely gather information on family engagement with the materials, resulting in limited knowledge about how families use the resources. Gathering this insight in the future would be valuable to truly understand the long-term family experience.

The Hitch marketing's evaluation also emphasised the need for promotion to drive traffic to the website, finding that paid social media advertisements were effective in generating visits. Future resourcing should include a budget for paid advertisements, capacity for organic promotion of Feed Your Way, and collaboration with the workforce to gather feedback on family engagement with the campaign. This feedback will help refine promotional efforts.

5 Apteligen evaluation of workforce engagement and experience

In this section we explore the feedback from our engagement with the workforce regarding the campaign. The section details how, on the whole, those who have engaged with the campaign have valued its materials and content, but that there remains a large proportion of the workforce who are not aware of the campaign, or who have not explored how it could be of value.

5.1 Campaign awareness

We explored the workforce awareness of the campaign through both the initial and final surveys. The final survey reached 65 respondents over diverse roles with different levels of involvement with infant feeding as part of their role. As is shown in the chart below, 40% of respondents were unaware of the campaign. This level is comparable to the first survey undertaken almost a year earlier and may reflect the fact that one of the main promotional activities to the workforce was through a webinar in July 2024. ⁸

⁸ These proportions remained consistent as different types of workforce received the email link for the survey. Therefore, despite the potential for a natural bias around self-selection, we do believe that these percentages are relatively reflective of the true picture around awareness of the campaign.

Awareness and use of the campaign materials

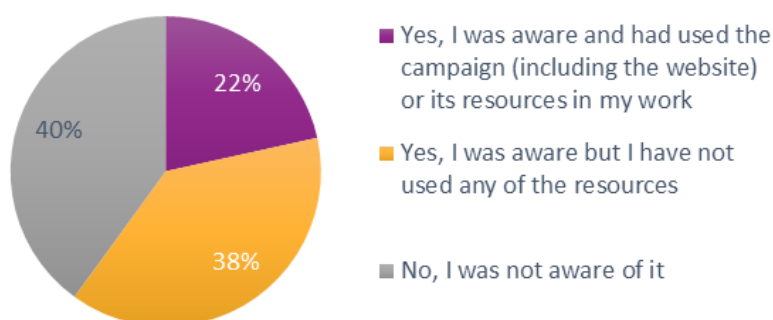


Figure 7: Awareness and use of the campaign materials

Even where the workforce was aware of the campaign, there were a similar percentage who were aware of the campaign but had not yet made use of the resources.

Those who were aware of the campaign had heard about it through a colleague (33%), at a team meeting (20%) or through being part of the initial stakeholder group (12%).

Whilst a **maternity nurse** noted:

“I didn’t even know about it until I received the survey. That was the first I heard of it.”

5.2 How the workforce engages with the campaign

For those that were aware of and using the campaign, we explored how they used it to understand the benefits and the extent to which it embedded into day to practice.

5.2.1 Usage patterns

In the survey, nearly two-thirds of those using the Feed Your Way materials had been aware of them for over a year. Workforce members reported various ways they engage with the campaign, often using its resources during initial visits or to address specific infant feeding questions. This is typically done by signposting parents to the website, sharing digital links, or distributing physical materials like postcards. The campaign’s emphasis on informed choice was particularly valued, enabling staff to provide non-judgmental support to parents.

Interviews highlighted case studies as a commonly used resource due to their relatability, simplicity, and accessibility, making them appealing to both parents and professionals. The resources were noted for their inclusivity, accommodating diverse cultural needs, which is especially important in Nottingham City and the SSBC priority wards⁹.

Survey findings also revealed that tangible materials like banners and posters were slightly more frequently used. While one respondent used all the resources on a weekly basis, the majority tended to use them monthly.

⁹ Priority wards for SSBC are Aspley, Bulwell, Hyson Green & Arboretum, and St Ann’s.

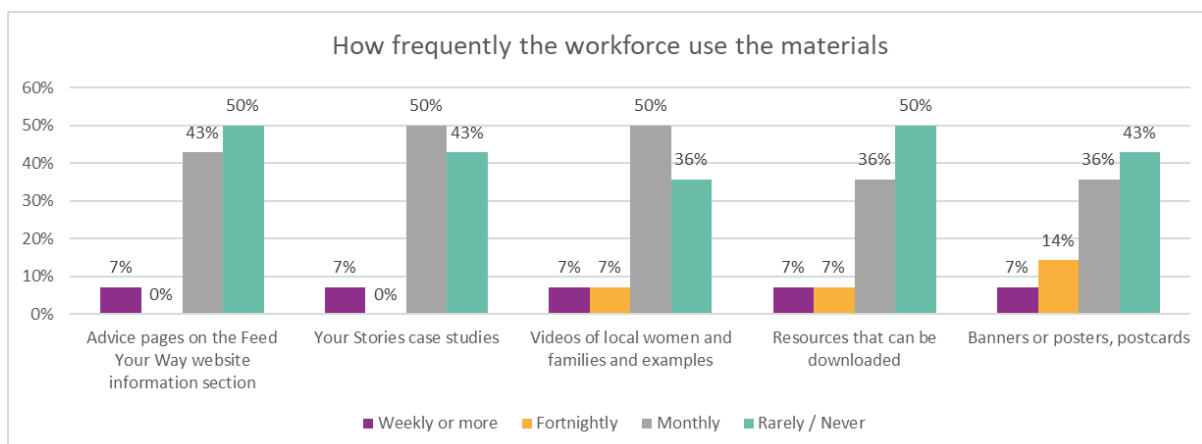


Figure 8: How the workforce uses the materials

Survey respondents were asked about the extent to which they felt the campaign was embedded in their organisation's approach. Half of the respondents either agreed (43%) or strongly agreed (7%). Only 14% of those using the campaign felt it was not embedded within their organisation. Interviews supported this finding, with several people noting that although they used the campaign materials, they were unsure about their colleagues' practices.

Many interviewees highlighted the importance of clear and consistent messaging to embed the campaign more firmly within the workforce. A **health visitor** noted:

“The campaign has some brilliant resources, but they’re not reaching everyone who needs them.”

Another **breastfeeding support worker** observed:

“We’ve started to see it being mentioned more during team meetings, but it’s not something that’s been fully integrated into what we do daily.”

5.2.2 Usage profile and practice

The Feed Your Way campaign has seen varying levels of adoption among the workforce across Nottingham City. While some professionals have integrated the campaign into their daily practices, others remain marginally engaged. Adoption was notably higher among practitioners directly involved in the campaign’s co-production or those with a professional focus on infant feeding, such as breastfeeding support workers and family mentors¹⁰. Several participants also shared personal experiences, reflecting on how the campaign resonated with their own parenting journeys or how they had signposted resources to friends and family. This blend of professional and personal engagement provided a holistic understanding of the campaign’s overall impact. A **family mentor** shared:

“My daughter had her baby recently, and I shared the campaign materials with her. She found them incredibly useful, especially the resources on combination feeding. It made me realise how practical and relatable these tools are, not just professionally but personally too. I actively promote the

¹⁰ Exclusive to Nottingham, the Family Mentor Service was developed through Small Steps Big Changes (SSBC) and funded by The National Lottery Community Fund’s 10-year A Better Start programme (2015–25). Delivered by three Nottingham community and voluntary sector organisations, it supports families, improves children’s outcomes, and generates social value by recruiting and employing local people.

campaign in our workshops. The materials are easy to use and align with what we teach.”

However, the extent of adoption often depended on the professional's role and familiarity with the campaign. Midwives and health visitors were sometimes unaware of the campaign's resources, with one **midwife** admitting:

“I didn't know about it until I heard of the survey - it's not something we've been directed to use”.

This uneven uptake underscores the need for a more targeted dissemination strategy to ensure that all relevant professionals are aware of and equipped to use the resources. Interviews revealed limited sharing between colleagues about the campaign and its usage. While some mentioned it informally to colleagues, others noted a lack of formal mechanisms within their organisations to promote and share the campaign. Engaging specific leaders to endorse the use of Feed Your Way resources in infant feeding conversations could be effective, as it has been in some organisations.

Comments about the campaign offer valuable insights into what full integration might look like, highlighting key areas for improvement and sustainability. Staff engagement and resource familiarisation are essential components. Ensuring staff are well-versed in the available resources and capable of effectively signposting parents to websites and materials is crucial. This underscores the need for comprehensive workforce training to build confidence and competence in supporting parents.

5.3 Strengths and limitations

The fieldwork identified elements of the campaign that the workforce valued, as well as areas where barriers to its use or potential improvements were noted.

5.3.1 Evidence-based and unbiased messaging

The campaign's tone was repeatedly praised as evidence-based, neutral, and trustworthy. Stakeholders valued its reliance on credible external sources, such as NHS and UNICEF materials, and its co-production approach, which ensured that it reflected the lived experiences of Nottingham's families. This collaboration was seen as a critical element in establishing authenticity and trust. As one **midwife** explained:

“Co-production ensured that the campaign didn't just speak to families, it spoke with them.”

This inclusive tone extended to the campaign's support for parents to “feed their way,” with no sense of judgment or pressure. A **workforce member** highlighted that this approach made the campaign feel accessible and aligned with the realities of parenting:

“It clearly supported parents feeding the way they want to feed, without feeling that it was pushing an agenda.”

5.3.2 Accessibility and inclusivity

The campaign's accessibility has been a notable strength. The survey asked respondents to what extent they agreed with several statements about the campaign materials. The responses to these statements are shown below¹¹.

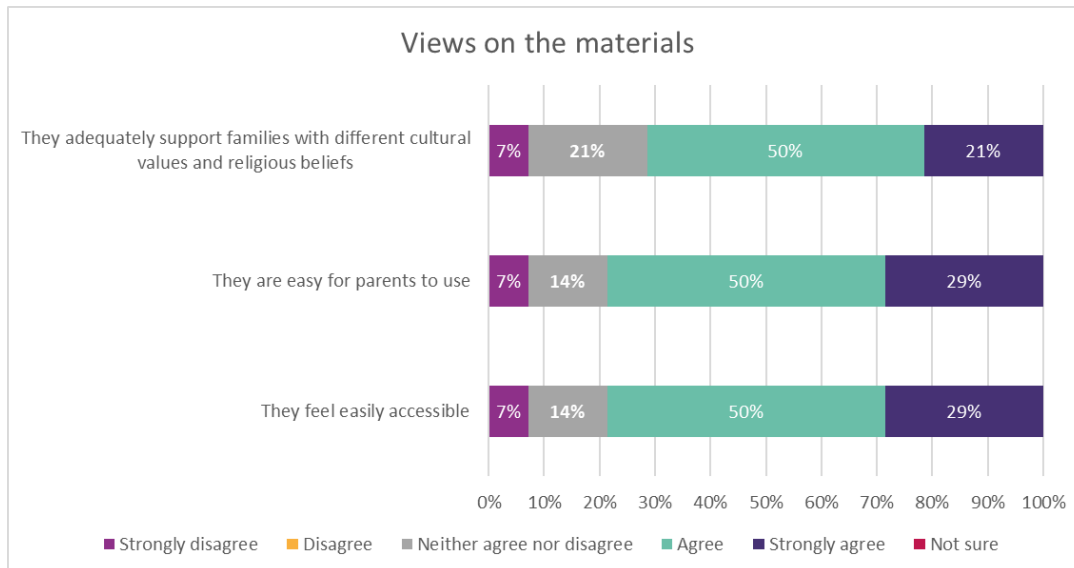


Figure 9: Workforce views on the accessibility and inclusivity of the campaign

Around 80% of survey respondents either agreed (50%) or strongly agreed (29%) that the materials were easy for parents to use. Although many of the workforce had not specifically gathered feedback on how families were using the materials, some interviewees reported successful use with families. Others felt confident based on their experience and the fact that individuals directed to the resources did not return with further questions. A similar proportion of survey respondents found the materials accessible and easy to digest. Interviewees supported this consensus, noting that the length and tone of the resources made them suitable for the families they work with.

Nearly three-quarters believed the campaign adequately supported families with different cultural and religious beliefs. The use of diverse imagery and relatable case studies was pivotal in fostering inclusivity. A **family mentor** commented:

“It feels like the campaign represents the families we work with, not just in words, but in visuals and the stories shared.”

Printed materials, such as postcards, have proven particularly helpful in guiding conversations between professionals and parents. One **health visitor** shared:

“The postcards are great; they’re a quick, tangible tool I can hand to parents during our sessions.”

However, concerns about accessibility remain. While interviewees praised the campaign's cultural awareness, evidenced by targeted content such as Ramadan feeding guidance and informative videos, several barriers to engagement were identified for specific demographic

¹¹ Note that whilst there is one response where all the responses are 'strongly disagree', these responses are not especially in line with the individual's other survey responses.

groups. Key accessibility issues were noted for non-English speakers, individuals with low literacy skills, and neurodivergent people. One contributing factor may be the workforce's limited awareness that the Feed Your Way website is available in five languages. Similarly, while case study videos on YouTube offer English captions and an auto-translate feature, this functionality is not widely known or promoted among professionals.

The text-heavy nature of existing materials can be a challenge for all users as it can be difficult to digest text heavy pieces but presents a significant obstacle for these groups. Consequently, several professionals suggested expanding the campaign's visual resources to include instructional videos or graphics. A **community worker** noted:

“We need something parents can quickly grasp, like a video showing the basics of feeding. It would bridge the gap for those who struggle with text-heavy resources.”

It should be noted that some resources are already available in formats that may satisfy this need, but staff may not be aware of them. Additionally, there is potential to expand the range of visual explanations and videos available.

5.3.3 Breadth and quality of the materials

The campaign materials offer various ways to engage with the campaign, which users saw as a key strength. Many reported no notable gaps in the materials. Survey respondents were also asked about the extent and breadth of resources available within the campaign.

The chart below shows the survey respondents collective views on the breadth of the materials.¹²

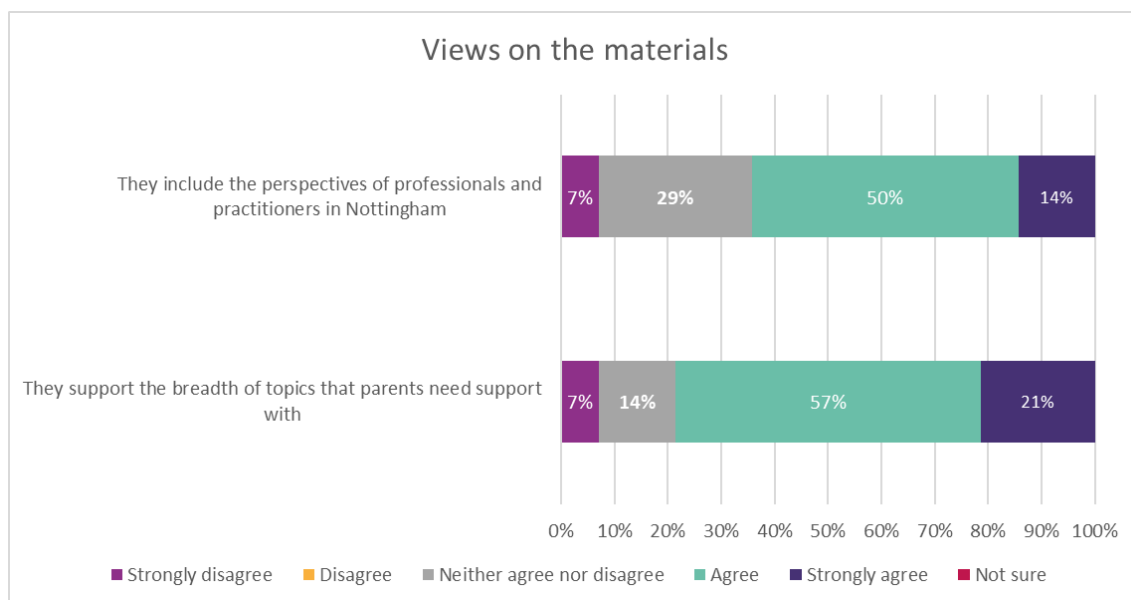


Figure 10: Workforce views on the breadth and quality of the campaign materials

¹² As above, one of the respondents gave two 'strongly disagree' responses which were not in entirely in keeping with the other responses they gave in the survey.

As can be seen above, approximately 80% of survey respondents agreed that the variety of materials, such as QR codes and online links, meant that the campaign was able to offer support for the breadth of topics that parents need support with. As one **health visitor** commented:

“The range of materials is excellent, from the postcards to the digital resources. They make it easy to engage families in different ways, depending on their needs.”

Throughout the research, we found that the materials aligned well with the workforce's views and perspectives, which is key to staff being willing to share the resources. 64% of survey respondents agreed that the materials included the perspectives of local professionals and practitioners. Nearly 30% gave a neutral response, possibly reflecting insufficient discussion about the campaign among colleagues, making it difficult for respondents to comment on others' views.

5.3.4 Nottingham-specific Branding

The campaign's Nottingham-specific branding resonated strongly with both families and practitioners. Featuring recognisable landmarks and diverse imagery fostered a sense of representation and local pride, and helped families and professionals connect with the campaign, making it feel tailored to their needs. A **midwife** commented:

“Seeing Nottingham-specific imagery in the campaign materials validates its importance and makes it feel more aligned with our daily work.”

Furthermore, seeing Nottingham-specific imagery in campaign materials reassured both the workforce and families. It conveyed that the campaign was tailored to their unique cultural and demographic needs rather than being a generic public health initiative.



Figure 11: Campaign images showing recognisable, local backgrounds

However, this localisation posed challenges for practitioners and families in rural or county settings, where the campaign seemed less relevant. Despite the availability and promotion of printable posters and postcards across the workforce, some respondents felt the campaign was too city-focused, with fewer resources visible in community hubs. This was seen as a missed opportunity for targeted outreach to engage more families in rural areas.

5.4 Barriers to campaign use

Analysis of survey and interview data revealed several significant barriers to campaign implementation, which can be broadly categorised into understanding of the concept and purpose of the campaign, awareness issues, time constraints, and practical challenges.

Barrier category	Key issues
Awareness and communication	40% of workforce unaware of the campaign; selective use of materials; need for better practitioner education.
Time and resource constraints	61% of professionals cited lack of time as a key barrier; reliance on existing resources; campaign seen as an 'add-on' rather than integrated.
Geographic considerations	Perceived as city-focused; county professionals felt engagement was lower; need to promote and potentially expand county representation within campaign assets.
Digital format barriers	Preference for physical resources over digital; no system for ordering printed materials; limited digital access for some families.
Training and integration	Lack of structured training linked to campaign adoption; need for professional development integration.
Systemic challenges	Difficulties integrating campaign into workflows; lack of consistent reminders; preference for more visual and interactive materials.

Figure 12: Summary of the main barriers to use

5.4.1 Awareness and communication

A notable 40% of final survey respondents had no knowledge of the campaign at all. As one breastfeeding support worker observed:

"It's clear that the campaign was designed with great care, but there's been no formal introduction for many of us, which makes it hard to implement consistently."

Extensive efforts were made to raise workforce awareness of the campaign. However, some second-phase engagement activities did not proceed as planned which may have limited the levels of awareness and understanding of the campaign. Additional methods of engaging the workforce, such as attending team meetings of infant feeding workforce, could build on the existing awareness.

A significant portion of the workforce who did not engage with the campaign materials also failed to recognise the need for a fresh approach to infant feeding discussions. This meant they overlooked the core behaviour change approach of Feed Your Way, of moving away from

traditional health benefit messaging and instead focusing on building motivation for breastfeeding and the encouragement of open dialogue about challenges and potential solutions. This misalignment suggests a need for better practitioner education about the campaign's fundamental principles and the intentional design of its comprehensive resource suite alongside recognition of established good practice already out there.

The research identified varying levels of engagement across different settings:

- Lower awareness in hospital settings compared to community-based roles
- Different experiences between City and County settings
- Differences in awareness and uptake of available resources and training across geographical areas.
- Questions about visibility in community hubs where face-to-face family interactions occur

While Phase 1 included high-visibility advertisements in Nottingham city centre, these were temporary and not repeated in Phase 2 due to cost constraints. However, SSBC did adopt a segmented approach to promotion of the campaign that continued through the second phase and PDF posters were also available. Future iterations may need to consider distribution of physical materials to workforce settings, or more work with the workforce to support them to consider how they could print materials themselves and make use of them in different ways.

It should be noted that there are large posters at both maternity units in Nottingham. The lack of engagement and awareness might be more reflective of the fact that those in hospitals felt that they already had the resources they needed and did not actively take the time to find out more about the campaign. To support this claim, one **midwife** told us:

“Generally, I don’t [use resources], I’ve been a midwife for a long time and am experienced in giving breastfeeding advice, so I rarely seek resources.”

5.4.2 Time and resource constraints

The most prominent barrier was lack of time and capacity, with 61% of survey respondents reporting they had not had time to explore the available materials. This reflects the current pressures on healthcare services, and therefore where existing resources are often considered adequate, exploring new tools, however promising, remains challenging. As one **health visitor** powerfully noted:

“The service is on its knees. We’re doing what we can, but there’s only so much time in the day for non-urgent initiatives.”

Many practitioners reported relying on established resources from organisations such as UNICEF, NHS websites, the British Nutrition Foundation, First Steps Nutrition, and ABM breastfeeding, alongside their professional experience. These practitioners viewed the campaign as an "add-on" rather than an integrated part of their role. As well as working with those these professionals to understand how the campaign could be useful for them, they may be value in working with them to map/understand what already exists and works well and what value can this campaign add?

5.4.3 Geographic considerations

The campaign's initial focus on Nottingham has created some challenges for wider implementation. Some county-based practitioners indicated that they felt unable to fully engage with the materials due to the Nottingham-centric branding. However, it should be noted that a number of the images used did include county-based images. A decision needs to be made whether to expand the campaign to include Nottinghamshire and to step away from the campaign's initial focus as a local initiative for families in Nottingham.

5.4.4 Digital format barriers

The campaign's primarily online format presented specific challenges for practical implementation. Healthcare professionals expressed a preference for having physical materials that families could take home, rather than simply directing them to a website. This suggests that while digital resources are valuable, the lack of tangible materials may limit engagement in certain contexts. However, in some cases as with several other observations, some of these were perceived as barriers or challenges rather than actual limitations or restrictions within the campaign.

Key issues include:

- Limited options for sharing physical guidance with parents
- Reliance on signposting to websites rather than providing immediate resources
- A perceived lack of a system for practitioners to order physical campaign materials, although teams were provided with contact details to print further materials.
- Potential barriers for families with limited digital access

The workforce expressed a need for better access to, and a greater variety of, hardcopy campaign materials. To improve access, developing an order option through the Feed Your Way website could be beneficial. Additionally, providing more take-home resources for families would increase the diversity of campaign materials. Hitch's social media promotion of Feed Your Way has shown that targeted promotion of case studies effectively drives people to the website. This strategy could be applied to the design of postcards, featuring relevant case studies for specific audiences, such as co-parents, fathers, or neurodiverse parents. Postcards with diverse case studies might also enhance workforce awareness of the existing resources.

The evidence suggests that while online resources are important, they should complement rather than replace physical materials, particularly in face-to-face healthcare settings. It is also possible that although printable resources were available, it was simply not practical or too costly, for these to be printed.

5.4.5 Training and Integration

A **midwife** highlighted the need for better integration with existing practices:

"We need structured training sessions that link the campaign to our everyday work."

Practitioners emphasised that structured training sessions, which help them understand how they could really use the campaign, could increase awareness and adoption. It was suggested that a more comprehensive toolkit or briefing document could help bridge knowledge gaps. The

absence of training was seen as a missed opportunity to align the campaign with other professional development activities.

5.4.6 Systemic Challenges

Our evaluation identified several systemic barriers that emerged. Some healthcare professionals noted challenges with workflow integration, indicating that campaign materials were not always easily incorporated into existing clinical pathways and documentation systems.

- Limited integration into professional routines and a need for consistent reminders and updates: Some practitioners observed that the campaign's visibility diminished over time. Without regular prompts, they tended to revert to familiar approaches rather than incorporating new resources.
- High workloads and competing priorities: Workload pressures were mentioned as a consideration across different healthcare settings. Some staff noted that while they saw value in the resources, time constraints could make it challenging to fully explore and implement new approaches alongside other priorities.
- Need for more accessible formats (e.g., videos or graphics beyond those in the case studies): The format of materials was discussed, with suggestions from healthcare professionals about diversifying to include more non-text-based resources. There were specific mentions of the potential value of visual aids, instructional videos, and quick-reference guides for consultations.

To ensure future success, these barriers must be addressed through systematic changes, including the development of comprehensive toolkits, and better integration with existing professional development activities. For example, there could be value in implementation guidance that addresses workflow integration with practical examples for different clinical settings.

6 Co-production

The co-production model has been central to the success of the Feed Your Way campaign, enabling it to resonate deeply with the community it serves. By involving local families, community leaders, and professionals in its design, the campaign established a foundation for trust and relevance. A **community health worker** shared:

“The stories and examples used in the campaign feel real, like they’re from families we know. This makes it much easier to engage parents and encourage them to explore the resources.”

6.1 Examples of co-production in action

The campaign’s case studies were developed using feedback and lived experiences shared by parents during focus groups and surveys. These stories were selected to represent the diverse realities of Nottingham families, from single parents to those navigating through cultural and linguistic barriers. A **family mentor** reflected:

“We worked to include stories that reflected real struggles and successes, so everyone could see themselves in the campaign.”

Local families contributed to the visual identity of the campaign, including selecting imagery and phrasing for posters and digital resources. One participant highlighted the impact of such involvement. One **campaign contributor** highlighted the impact of such involvement:

“We made sure the campaign didn’t just look good but also felt approachable. It’s why the language is inclusive and simple, and why the images don’t feel staged.”

Professionals who were part of the early co-production workshops reported feeling more connected to the campaign. A **breastfeeding support worker** noted:

“It wasn’t just about telling families what to do—it was about showing them we understood their challenges because we heard directly from them during the design phase.”

6.2 Strengthening professional buy-in

The role of co-production extended beyond families to include healthcare workers and community leaders. Many professionals shared that being consulted in the early stages increased their sense of ownership over the campaign. A **midwife** observed:

“When we were asked about what resources we needed, it was the first time I felt the campaign was for us as much as for the parents”.

This collaborative approach also translated into better alignment with workforce needs. For example:

- The potential inclusion of tools like postcards and QR codes was driven by suggestions from midwives and community nurses who identified these as practical for use during consultations.
- Role of co-production

The success of the Feed Your Way campaign can be largely attributed to its co-production model, which brought together local families, community leaders, and professionals to create a campaign that truly resonated with the community.

6.3 Challenges and areas for improvement

While the co-production process was a strength, it also came with challenges. Some voices, particularly from smaller communities, felt excluded. As one **community health worker** pointed out:

“The co-production process was amazing, but it didn’t reach everyone equally. Some voices, particularly in smaller communities, felt overlooked.”

Participants also emphasised the importance of keeping the campaign dynamic and relevant. A **family mentor** suggested:

“We need to keep updating the campaign with new case studies and fresh visuals to reflect how families’ needs are changing.”

It should be noted that new case studies have been developed as part of Phase 2, it highlights the importance of the campaign continuing to evolve and develop over time, and the need to publicise these developments.

The time-intensive nature of co-production meant that not all ideas could be implemented before the campaign launch, leaving some contributors feeling undervalued. One **community health worker** remarked:

“I made suggestions about including specific breastfeeding scenarios, but I didn’t see them in the final materials. That was a bit disappointing.”

The table below summarises some of these challenges and considers potential solutions.

Challenge	Description	Proposed Solution
Exclusion of voices	Some smaller communities felt overlooked in the co-production process.	Expand outreach efforts to ensure broader representation and inclusivity.
Maintaining relevance	The campaign needs to evolve continuously to reflect changing family needs.	Regular updates, new case studies, and fresh visuals to maintain engagement.
Inclusive representation of diversity in breastfeeding families and experiences	Some co-production contributors did not feel their priority themes around breastfeeding were reflected in the campaign.	Increase awareness of the nine existing case studies and continue to identify opportunities to improve representation of different experiences and families within the campaign materials.

Figure 13: Challenges of ensuring co-produced outputs

6.4 The value of co-production for future campaigns

The Feed Your Way campaign demonstrates the transformative potential of co-production. To ensure inclusive co-production, targeted engagement with fathers was sought via focus groups, as part of Hitch Marketing’s midpoint evaluation. Furthermore, a recruitment agency was used to ensure fair sampling for their midpoint and endpoint evaluations - including gender, ethnicity and age groups as variables.

By reflecting the real experiences of its audience, the campaign built trust and authenticity. Families and professionals felt a collective responsibility for its success, turning them into advocates for the campaign.

Looking forward, these insights underscore the importance of co-production not just as a design tool, but as a way to ensure future campaigns remain relevant, inclusive, and impactful.

7 Fully embedded practice

A comprehensive vision for the Feed Your Way campaign would see it become an integrated, essential resource for both healthcare professionals and families across Nottingham and Nottinghamshire. Based on stakeholder feedback and current practice, this section outlines what successful embedding could look like.

7.1 Integrated information hub

It was suggested that the campaign should evolve into a comprehensive resource hub. As one practitioner explained:

"It needs to be kind of a one stop shop for literally everything, because that's where people go, if they're already accessing it for information about mastitis, they might have to click something else and go, oh, do you know what...and that's quite hard, because like tongue tie, there isn't a wealth of information about it."

This vision is already being realised by some practitioners who have successfully integrated the campaign into their routine practice:

"At the point where we start talking about infant feeding, I always give them [parents] the postcard with the campaign, and signpost them to the website for them just to have a look, and if they had questions from that, then we could talk about it at the next visit."

7.2 Professional integration and support

The campaign's role as a curator of reliable information is particularly valued:

"And I always signpost it and say that it's where I would recommend going, if I wanted to find infant feeding information, because it has links to all of the places on the internet that we agree are evidence based, trusted sources."

When fully embedded, the campaign would seamlessly integrate into professional practice through structured training and clear implementation protocols.

As one **midwife** noted:

"We need structured training sessions that link the campaign to our everyday work."

The fully embedded campaign would support practitioners through a blended approach of digital and physical resources, ensuring materials are accessible across all settings and communities. This would be underpinned by sustainable funding streams and regular evaluation, allowing the campaign to evolve and respond to changing needs while maintaining its position as a trusted, comprehensive resource for infant feeding support across the region.

8 Sustainability recommendations

The Feed Your Way campaign has been adopted by some workforce members on an individual level, with those who engage with it finding it valuable for supporting families. However, its integration into broader team practices remains somewhat inconsistent. Based on the research undertaken by both Apteligen and Hitch Marketing, we have identified several key recommendations to support the sustainability and longer-term development of the campaign. As the campaign transitions to sit under public health at the end of the programme, it will be important to embed sustainable processes, strengthen engagement with key partners, and ensure its core values continue to shape its future direction.

We strongly recommend that all future developments are undertaken using the values of co-production, which have been central to the campaign's success to date. By working collaboratively with the workforce, families, and other stakeholders, the campaign can ensure that any changes or new materials remain meaningful, inclusive, and impactful. Our final recommendations are:

1. Extend the campaign to county while maintaining a local feel
2. Streamlining website navigation and access
3. Tailoring resources more clearly to different audiences
4. Strengthen awareness and use of campaign through relationship building and embedding
5. Professional development and training
6. Consider expanding the campaign into a wider infant feeding campaign
7. Continue to update and refresh resources
8. Develop a structured evaluation framework

More detail on each of these recommendations can be found below.

8.1 Extend the campaign to county while maintaining a local feel

While the campaign was originally designed for Nottingham City, there is clear value in extending its reach more widely across the county. Many families who live outside the city still engage with maternity services within Nottingham, particularly as hospitals serve a broader catchment area. Furthermore, some workforce from Nottinghamshire County mentioned that they felt excluded by the campaign and that families might feel the same. For example, one **breastfeeding support** worker noted:

"It felt like the campaign was happening in the city centre, but not in the communities where it's really needed."

As such, proactively expanding the campaign beyond the city boundary could enhance its impact and accessibility. However, it is essential that any expansion does not come at the expense of the campaign's strong local identity, which has been a key factor in its success. The campaign should retain a sense of locality by ensuring that:

- The branding and messaging continue to feel relevant to Nottingham's communities, potentially positioning the city as a leader in breastfeeding-friendly initiatives.

- The campaign maintains flexibility to adapt to different local contexts while preserving its core values.
- Visual materials reflect the diversity of Nottingham and surrounding areas, ensuring that families can see themselves represented in the campaign.
- Any identified challenges and solutions remain locally relevant, aligning with the lived experiences of families across the region.
- Consider adapting from a focus of "Making Nottingham a Breastfeeding-Friendly City" to "Making Notts Breastfeeding-Friendly." This would help broaden its appeal to those living beyond the city while maintaining its recognisable local identity.

A careful balance between expansion and localisation will ensure that the campaign remains both scalable and meaningful to the communities it serves.

8.2 Streamlining website navigation and access

Although the resources are available, feedback suggests that finding them is not always straightforward. Issues around website navigation, signposting, and overall accessibility can make it difficult for users to locate and utilise the information effectively. To improve this:

- The structure and layout of the website should be reviewed to ensure key resources are easy to find and logically organised.
- Signposting should be enhanced both online and offline, ensuring that users are directed to the right information quickly.
- Alternative access points should be considered, such as printed guides, postcards, or QR codes leading directly to key resources.
- User testing should be conducted to identify specific pain points in navigation and make iterative improvements based on feedback.

8.3 Tailoring resources more clearly to different audiences

While some high-quality materials are already tailored to specific audiences, the way they are presented and communicated could be improved to ensure they reach and resonate with the intended audience. For example, case studies are named after the person they are about, which does not make it clear that they are aimed at specific groups, such as fathers, or grandparents. Rather than simply creating more resources, efforts should focus on refining and tailoring existing materials to make them more relevant and accessible. Equally, navigation around the website should be made easier. For instance, case studies could be moved to the front page with priority wards, rather than under 'Our People' tab. Other recommendations include:

- Identifying key messaging that will appeal to different user groups and ensuring the resources highlight these clearly.
- Developing concise and compelling 'hooks' that immediately capture interest and explain why the content is relevant to the audience.
- Using targeted marketing approaches, such as segmenting materials for different demographics, needs, or experiences, to improve engagement.
- Exploring innovative formats (such as promoting the short-form content which has already been created for the social media advertisement, infographics, or interactive tools) to make materials more engaging and accessible.

8.4 Strengthen awareness and use of campaign through relationship building and embedding

The campaign has achieved strong awareness through successful marketing efforts, particularly in promoting its core messages to a wide audience. While effective as a first step and within the funding constraints, there are indications that general awareness within the workforce has gone as far as it can go with existing engagement methods and approaches. There is now the challenge identified within the research of converting campaign awareness into active engagement, which in turn would hopefully not only bring about wider behaviour change, but also extend the awareness of the campaign.

To deepen engagement and ensure the campaign is actively used in practice, the focus now needs to shift towards relationship building as a key mechanism for embedding the campaign across different roles connected to infant feeding. This approach builds on research findings that suggest sustained engagement requires more than just visibility; it needs active relationship building and direct support to help integrate the campaign into everyday practice. With a workforce with stretched capacity, it is necessary to go to them and talk in terms that are meaningful to them. As one **midwife** observed:

"I think the campaign is fantastic, but in a service stretched so thin, finding time to familiarise ourselves with it fully can be challenging."

By working closely with key teams and individuals, the campaign can be fully embedded into relevant roles and settings, ensuring its messages continue to be impactful and widely adopted.

Moving beyond traditional marketing efforts, it will be important to:

- Work with workforce to improve managerial support for the FYW campaign to be implemented as part of infant feeding conversations, e.g. in the one-to-one conversation between midwives and families, and during antenatal classes.
- Offer practical, role-specific guidance to help professionals embed campaign materials into their daily practice, moving beyond basic awareness to meaningful application. Tailored support can help overcome workforce time and capacity constraints, fostering greater engagement and more consistent use of the campaign
- Take a proactive approach to enhance campaign visibility by strategically placing marketing materials in key locations and actively engaging staff through meetings and outreach, ensuring they understand and utilise the resources effectively.

To ensure sustainability, those in Nottingham City Council Public Health with responsibility for Feed Your Way, should deepen its collaboration with key organisations, including NHS trusts, local authorities, and community support networks. By embedding campaign principles within wider maternal and infant health strategies, Feed Your Way can become an integral part of professional practice. Partnerships can also provide opportunities for shared funding models, allowing for continued resource development and workforce engagement beyond the initial campaign period.

8.5 Professional development and training

Linked to the above, stakeholder engagement revealed a widespread need for enhanced workforce training and support to effectively implement campaign materials. While campaign ambassadors received initial training, there was limited awareness of broader workforce development opportunities, leaving many professionals uncertain about how to integrate resources into their roles effectively.

As one **breastfeeding support worker** noted:

"I would have loved more training to understand how to use the website and postcards effectively."

To address these identified gaps, a comprehensive workforce toolkit that builds on existing materials and which acknowledges existing practices while introducing new resources could be valuable. This approach should recognise current workforce barriers and challenges, providing practical solutions for integration into daily practice. The toolkit should be complemented by systematic professional development programmes for midwives, health visitors, and community workers, covering both technical knowledge and practical application.

Key elements of the proposed training framework include:

- The development of visual aids and video-based learning materials to demonstrate practical implementation strategies.
- Implementation of systematic feedback mechanisms to understand how materials are being used and make iterative improvements.
- The creation of case studies showcasing successful implementation strategies to promote consistent messaging across services.
- Ensuring training is accessible and embedded within existing professional development structures.

8.6 Give consideration to expanding the campaign into a wider infant feeding campaign

We acknowledge that the original focus of the campaign has been on breastfeeding and supporting families to facilitate this, in line with the co-produced design. This remains a crucial element of the campaign. However, we also recognise the importance of ensuring that the campaign continues to evolve in response to wider developments in infant feeding strategy. With this in mind, any consideration of bottle-feeding content should be particularly shaped by the following:

- Ensuring that the campaign remains aligned with current infant feeding policies and best practices while continuing to centre the needs of families.
- Staying true to the co-production values of Feed Your Way, which have been fundamental to its success, by involving communities and key stakeholders in shaping any updates.
- Exploring whether additional content, such as guidance on sterilisation and safe bottle-feeding practices, would enhance the campaign's reach and accessibility without detracting from its core purpose.

- Taking a balanced approach that supports informed choice while maintaining the campaign's original intent and objectives.

8.7 Continue to update and refresh resources

Although the campaign has a limited life for the families it works with and there are new audiences and users all the time, it is essential to ensure that materials do not get stale and that they remain relevant and reflective of changes in practice. Key considerations include:

- Ensure greater workforce awareness by strengthening targeted promotion and integrating resources into training programmes.
- Develop structured training materials to support professionals in embedding Feed Your Way principles into their practice.
- Expand the availability of printed resources and establish a structured system for professionals to request them, ensuring consistent distribution.
- Address geographical disparities in engagement by enhancing outreach and tailoring strategies for county-based professionals.
- Broaden representation within campaign materials to include more diverse stories from underrepresented groups such as young parents, teenage mothers, neurodiverse individuals, and families from minority backgrounds.
- Introduce more interactive and visual formats, such as instructional videos and infographics, to improve engagement and usability.
- Enhance the organisation and visibility of digital resources while periodically updating design elements to maintain relevance and accessibility.
- Regularly refresh campaign materials—such as images, design elements, and case studies—while maintaining consistency in messaging to ensure long-term engagement.
- Strengthen alignment between Feed Your Way and other widely used resources, such as those from UNICEF and NHS, to encourage adoption within existing professional frameworks.
- Co-produce any new materials with those who engage with the campaign, ensuring they reflect real needs and experiences.

8.8 Develop a structured evaluation framework

Establishing a clear and ongoing evaluation framework will help assess the campaign's long-term impact and effectiveness. Regular data collection, including workforce surveys, parent feedback, and engagement metrics, will allow for continual refinement of materials and strategies. This will also help demonstrate the value of the campaign to funders and stakeholders, strengthening the case for sustained investment in Feed Your Way.

These recommendations aim to ensure that Feed Your Way remains an enduring and impactful resource for families and professionals alike. It is important to note that while gaps in content have been identified, the primary focus should be on removing barriers to engagement rather than producing new resources.

9 Conclusions

The Feed Your Way campaign has demonstrated significant impact and potential, particularly among those who regularly engage with its resources. The evaluation has highlighted several key strengths and areas for development, which will be crucial for the campaign's long-term sustainability and success.

A major strength of the campaign lies in its co-production approach, which has helped create authentic, community-informed content that resonates with both families and professionals. This approach has significantly enhanced the campaign's credibility and relevance across different communities. Among practitioners who use the resources regularly, the campaign is regarded as a trusted one-stop shop for breastfeeding information, offering comprehensive guidance and practical tools. Its emphasis on inclusivity and community representation has further reinforced its credibility, ensuring it remains relevant to Nottingham's diverse population.

While the campaign has become embedded in some areas of practice, with practitioners incorporating resources into their routine work, awareness and adoption remain inconsistent across the workforce. Several factors influence this, including role-specific interests, workload pressures, and varying levels of awareness. Barriers to adoption include inconsistent dissemination of materials, a lack of targeted training, and limited visibility in rural and community-based settings. Nevertheless, the campaign has been particularly effective in promoting breastfeeding as a shared responsibility and fostering inclusive messaging, especially through social media and visual resources such as posters and postcards.

Stakeholders noted that while the campaign included high-visibility elements such as bus stop posters, there were opportunities to strengthen its multifaceted approach, particularly around community engagement and workforce training. The branding was sometimes viewed as too city-centric, which some felt created engagement challenges across the wider county. Professionals particularly valued the relatability of the case studies, especially for young parents, but noted the need for broader representation across the county. As the campaign transitions to the local authority's public health team, addressing these elements through rebranding and ensuring suitability for both city and county will be important.

By addressing these challenges and implementing the recommended strategies, the campaign can continue to promote equitable and inclusive infant feeding practices across Nottingham City and Nottinghamshire. The positive feedback from professionals on the campaign's role in normalising breastfeeding discussions and supporting parental confidence provides a strong foundation for future development.

As the campaign transitions into local public health structures, securing funding and expanding its scope will be vital to ensuring it remains a valuable and sustainable resource for families and professionals alike. This next phase presents an opportunity to build on the campaign's existing strengths while adapting to meet the diverse needs of communities across both city and county settings.

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