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Summary of interim findings

The purpose of this evaluation is to explore the implementation of the public health breastfeeding campaign 'Feed Your Way' in Nottingham City, with a particular focus on the workforce. The evaluation will inform improvements to the delivery of the campaign and put forward findings related to its ongoing maintenance.

Key interim findings:

- Members of the workforce who have engaged with the campaign think highly of it. It is viewed as inclusive, empowering, and evidence-based.
- Members of the workforce find that they can use the campaign and its resources to support their work with families. The campaign covers a good range of topics, however, there are some gaps in the types of resources and topics covered.
- Overall awareness of the campaign among the workforce is limited. However, it is noted that there is further work planned on promoting the campaign and engaging professionals who support infant-feeding in Nottingham.
- The campaign is viewed as being important for making Nottingham a breastfeeding friendly city, and its different approach to encouraging informed-decision making around breastfeeding is valued.
- Future responsibility for the campaign could lie with Nottingham City Council's Public Health team, although work needs to be done to diversify the campaigns offering to appeal a broader range of funding bodies.

Key recommendations for the campaign:

- Further engage with members of the workforce that support parents early on in their feeding journey, or antenatally.
- Further engage with businesses, who are a key stakeholder group for making Nottingham a breastfeeding friendly city.
- Develop or refer to visual resources, as well as resources that cover topics such as stopping / starting breastfeeding, overcoming common challenges when breastfeeding, and the nutritional benefits of breastfeeding.
- As the campaign is in its final year of delivery, consideration should be given to future funding streams, host location, and geographic area of operation.



1. About the evaluation

1.1 Introduction

The Feed Your Way campaign is a public health breastfeeding campaign commissioned by Small Steps Big Changes (SSBC) and designed and implemented by Hitch Marketing. The campaign is designed to support the needs of not just the breastfeeding mother and child, but also the communities that exist around them, such as breastfeeding allies, partners, families and friends. In Nottingham, the SSBC programme operates predominantly across four communities: Aspley, Bulwell, Hyson Green & Arboretum, and St Ann's. However, the reality of a campaign of this nature is that the campaign is of relevance to, and shared with professionals who work across Nottingham.

This evaluation is being carried out between September 2023 and March 2025. It is designed around the **RE-AIM** framework, which aims to assess the **reach** of the campaign, its **effectiveness**, its **adoption** and **implementation**, and how it could be **maintained** over time. Hitch Marketing (who are leading the delivery of the campaign and are contracted until March 2025) have produced an interim evaluation of the 'reach' and 'effectiveness' of the campaign for breastfeeding mothers and infants, and the wider communities around them.

This evaluation of Feed Your Way places an emphasis on the campaign's engagement with healthcare professionals (rather than families and the wider community), and while it aligns with the RE-AIM framework, the topics covered in this evaluation respond to a broader set of questions. This evaluation aims to:

- Develop an understanding of the levels of awareness about the campaign among the workforce, and both the extent to which and the ways in which members of the workforce are using the campaign and its materials.
- Explore how awareness of the campaign and levels of engagement with it among the workforce could be improved.
- Explore how the campaign could be maintained and updated beyond the funded period, which runs until March 2025.
- Support a wider understanding of how the campaign affects the city's ambitions around becoming a breastfeeding-friendly city.

1.2 Evaluation approach

The evaluation has been designed around two phases of research and reporting. This interim report shares findings from the first round of fieldwork. This fieldwork was undertaken using a combination of surveys and interviews to capture a diverse range of perspectives as the campaign develops.

Our work commenced with a design workshop in September 2023. We used this workshop to inform the priorities for the evaluation, as well as to identify key stakeholders. We then developed an evaluation plan and set of research questions. These questions were used to inform the research tools for the first phase of fieldwork which were:

- A survey, which was sent to a wide range of stakeholders who have any role with infant feeding in Nottingham, and
- Interviews with those involved in infant feeding in any capacity to gather more in-depth information.

The audience for the survey was wide, with it being open and shared with anyone who had a role in infant feeding. In order to share the survey as widely as possible, it was shared directly with key stakeholders by SSBC, as well as being shared in newsletters and on other mailing lists targeted at those who may have a role in infant feeding. Those receiving the invite to participate were also asked to share the link to the survey across their own relevant professional contacts. As a result of these approaches, 72 staff and volunteers completed the survey.

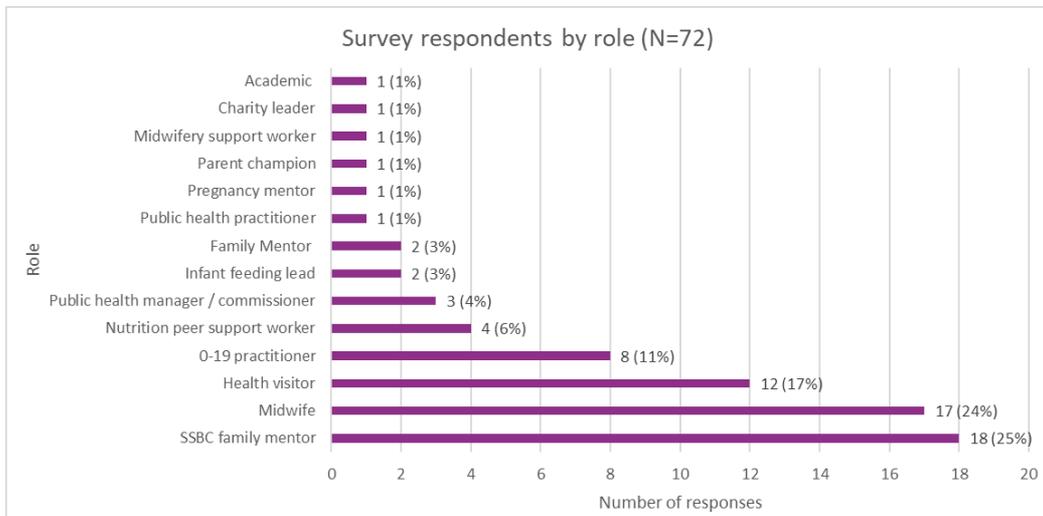
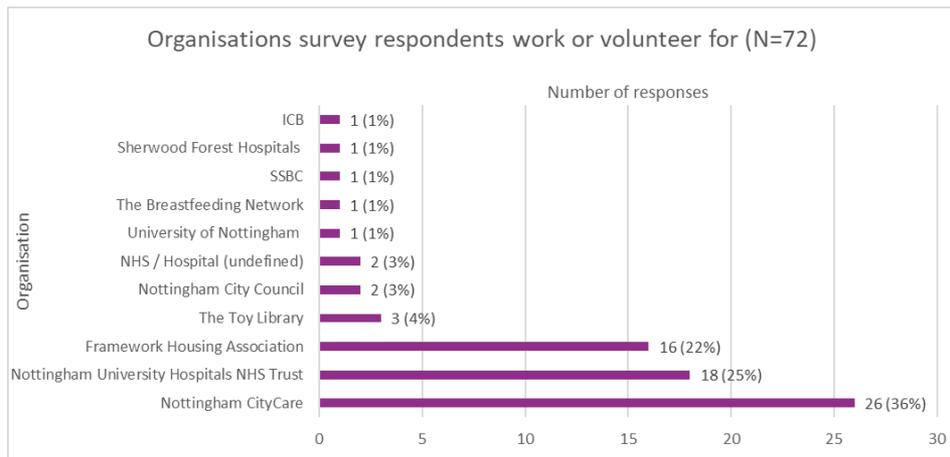
In addition to the survey, which provided a wider perspective on the campaign, we also undertook interviews with 10 people with a professional interest in infant feeding. Nine of these interviews were with people who had also completed the survey and had indicated that they would be happy to speak about the campaign in more detail, while one person was directly contacted by SSBC. Although we contacted a number of other people to request interviews, a general lack of capacity across all professional groups proved to be a limiting factor in enabling more people to be involved.

Following this report, we will review the implications for the campaign development over the coming months, refine the focus for the remainder of the evaluation, and explore the appropriate methods for doing this.

1.3 Who we've engaged through the evaluation

The charts pictured show the profile of survey respondents. The largest number of respondents were from Nottingham CityCare (36%), with a further 29% indicating that they are employees of Nottingham University Hospitals NHS Trust. Many other organisations where there is an infant feeding element to their role were also represented in some way.

We also explored the roles of the respondents. This identified a good breadth of roles, with 24% of the respondents being midwives, and a further 17% being health visitors. As these are the larger groups of staff, this feels like a reasonable profile of responses for this stage of the evaluation.



Through the interviews we spoke with:

- Four staff from Nottingham CityCare, including three Health Visitors and one 0-19 Practitioner
- Three SSBC Family Mentors from Framework Housing Association
- One Pregnancy Mentor from Nottingham University Hospitals NHS Trust
- One Parent Champion volunteer from Nottingham CityCare
- One Nottingham City Council Public Health professional

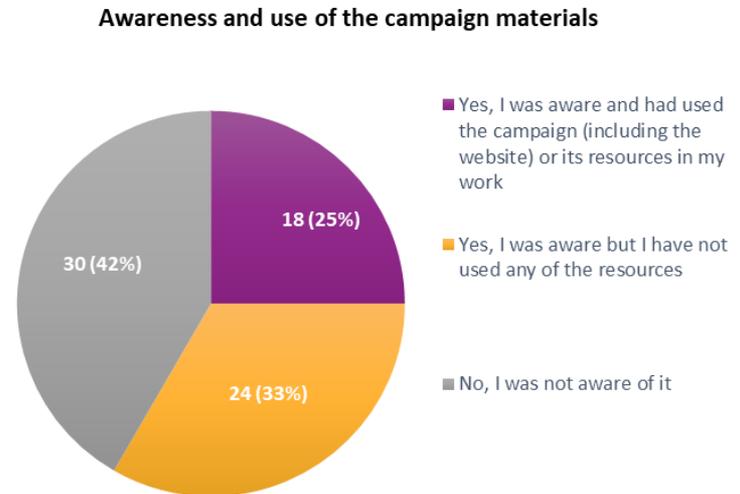


2. Interim findings

2.1 Awareness and reach of the campaign

Over the survey responses 42% indicated that they were not aware of the campaign. A further 33% indicated that they were aware of the campaign but had not made use of any of the resources. However, a quarter of the survey respondents were both aware of, and had made use of the campaign materials. These proportions remained consistent as different types of workforce received the email link. 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. Our findings regarding the reach of the campaign are in line with Hitch Marketing's midpoint evaluation of the campaign (published September 2023). Although a variety of contextual factors influence exactly what level of awareness and use among the workforce is needed to bring about behavioural change, Diffusion of Innovations Theory by Everett Rogers suggests that 10 – 20% is often considered the critical mass needed to initiate widespread adoption.

- Participants commented that whilst some of their colleagues were aware of the campaign (particularly Nottingham CityCare employees), they felt that wider promotion across the workforce generally is needed. Some indicated that they had promoted it themselves to colleagues. This was not always easy through formal organisational channels, but it appears to have been done more informally by some. However, this was often in a more reactive way when information was requested, rather than being shared proactively.
- Participants identified a wide range of methods through which they had first become aware of the campaign. Most commonly, respondents mentioned that a colleague had shared the campaign with them. Other mechanisms particularly included attendance at the Feed Your Way launch event, social media, or through reading about it on a mailing list.
- Some participants had seen campaign materials in public places, such as a banner in a hospital, or a poster in a community centre. One participant commented that the campaign had been advertised in a good number of different ways.



2.1 Awareness and reach of the campaign

We explored (in both the survey and the interviews) the primary reasons behind lack of engagement by those who were aware of the campaign but had not used the materials. It is reassuring that we did not hear that lack of engagement is due to the quality of the materials or the campaign, but rather:

- The majority of survey respondents simply had not had the time to engage with the resources to understand what is available (18 out of 24 of the survey respondents).
- Respondents did not feel that the campaign was relevant for their work (5 out of 24 respondents).
- They had other resources that they used and which worked better for them (1 out of 24 respondents).

Our interviews with members of the workforce confirmed these findings by reiterating how time-poor many healthcare professionals are, or indicating that they make use of other resources (discussed further in section 2.5), or that they were not aware that Feed Your Way had a website and resources attached to it.

2.1 Awareness and reach of the campaign

It should be noted that there are further plans to engage members of the workforce through the campaign in 2024. Participants suggested that during this time the campaign delivery team prioritises:

- Engagement with midwives, midwifery support workers, antenatal practitioners, and health visitors. They are a key target population for influencing parental attitudes and approaches to breastfeeding, particularly at an early stage in parenthood. It is viewed that early engagement with parents and families is crucial to increasing long-term breastfeeding rates (that is, beyond 6-8 weeks after birth).
- Attending pre-existing team meetings (in-person or online) to promote Feed Your Way; a physical presence is important. Suggestions include attending community team meetings, and meetings at the Family Hub.
- Frequent promotion of the campaign through internal communication channels and newsletters, as staff report that they are often overwhelmed with communications about service updates and campaigns. Staff also report that they are often unable to use mass-communication channels (such as internal mailing lists) themselves, therefore a request coming from outside the organisation can be acted on more quickly.
- Developing resources that respond to the needs of the workforce. This is discussed further in section 2.6.



I would suggest that midwives and midwifery support workers are a key population. How do we have conversations with women who are on their pregnancy journey as early as possible to get them thinking about breastfeeding, or you know, all those people who do not just do NCT but education classes for new parents, all those sorts of things, I think they are probably a key group to engage with.

2.2 Branding, message and imagery

As the Feed Your Way campaign has a distinct brand that was co-designed with parents and professionals, and aims to influence both attitudes and behaviours, we considered the campaign's branding, message, and use of imagery in our engagement with members of the workforce. Our key findings are that:

- Participants felt that the campaign has a strong brand identity, and that the meaning of 'Feed Your Way' is very clear for members of the workforce and families.
- The campaign is viewed as being *unbiased* and *evidence-based* in its messaging, promoting informed-choice, as compared to some of the other sources of information where it felt like there is a biased opinion, based on the organisation's values.
- Participants valued being able to use the campaign branding in their work, such as including it in their email signature. It is viewed as *polished* and *professional*.
- The language used in the campaign is seen to be *inclusive*, *positive*, and *authentic*. It reflects the opinions of real families and not simply a *public health message*.
- Parental involvement in the co-design of the campaign is important for giving it legitimacy among the workforce.
- The campaign was widely praised for using images of real breastfeeding mothers, families, and groups in public and private places. The images are seen to be *inclusive*, *attractive*, and *relatable* to both members of the workforce and breastfeeding mothers and families. However, it was noted that some of the workforce felt that the images were too heavily weighted towards slightly older babies, therefore feeling less relevant for parents of newborns or younger babies (particularly with reference to positioning).
- The Nottingham-specific branding is important for engaging members of the workforce and distinguishing it from other (sometimes national) campaigns that are *soulless*.



I thought it was fantastic, the logo was very eye catching. I thought that it was very well thought through, and very factual.

Finally, a breastfeeding campaign done right.

Local mums giving their stories, encouragement and positivity rather than trying to push a public health message across.

2.3 How the workforce engages with the campaign

A primary aim of this evaluation is to understand if, and how, members of the workforce use the campaign in their work. Whilst greater promotion of the campaign among the workforce is required (see section 2.1), our interim findings are that members of the workforce who engage with the campaign do so by:

- Sharing the campaign and its resources with families. This is often done so at a first visit, or when a parent has a particular question. Staff feel comfortable signposting parents to the website, and normally do so by sharing the link digitally or by passing them Feed Your Way promotional material (e.g. a postcard). Staff report that the resources are helpful for responding to questions, and that they value being able to present the campaign's 'informed-choice' approach to parents.
- Sharing the campaign with colleagues, either so that they can engage with the resources, or share it with families themselves.
- Sharing the campaign on social media so that it reaches a wider audience. In particular, the case studies and videos of parents are viewed as important to share more widely as they are relatable.
- Using the campaign and its resources in training other staff, therefore making staff aware of the campaign.
- Using it as a way to begin more strategic discussions and planning around breastfeeding support and infant feeding. The existence of the campaign raises the profile of breastfeeding and is an important backdrop to longer term or strategic decision making.

However, we found that a barrier to members of the workforce engaging with the campaign is that if they find that the website doesn't have the resources they require at first instance, they are less likely to return again. In addition, some comments indicated that members of the workforce didn't feel the need to consult resources due to their experience, or make use of other resources. Further considerations regarding resources are discussed in section 2.6.



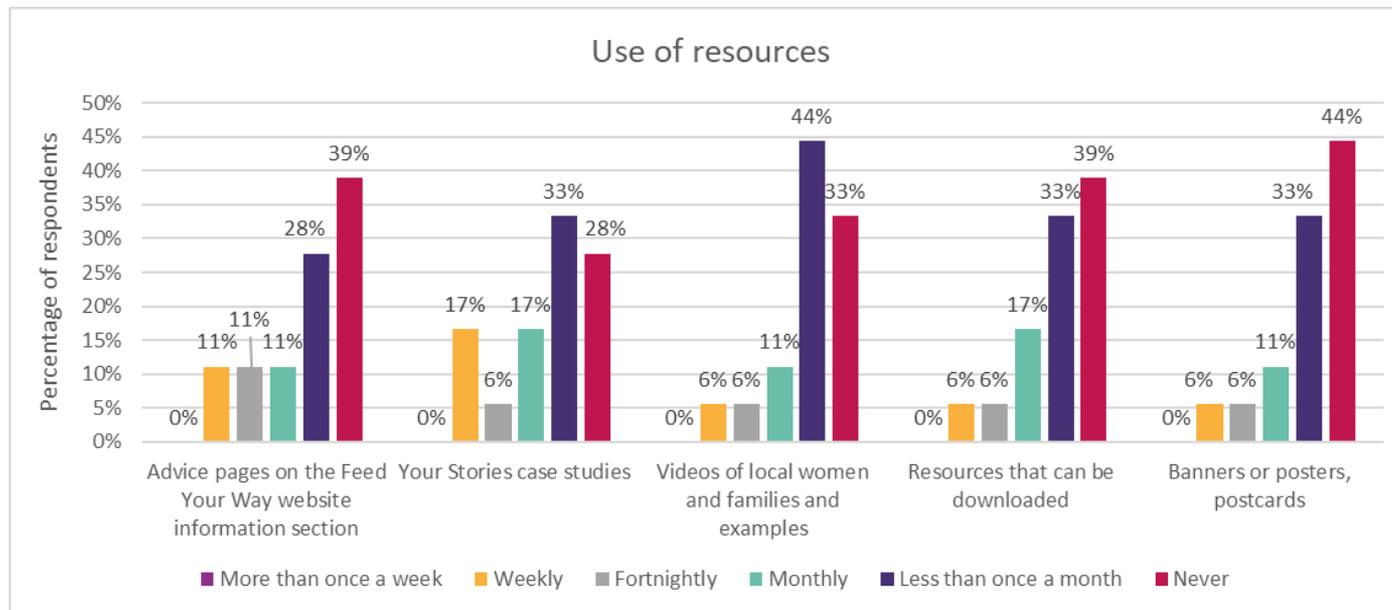
Generally, I don't [use resources], I've been a midwife for a long time and am experienced in giving breastfeeding advice so I rarely seek resources.

2.3 How the workforce engages with the campaign

The chart below shows the survey responses when participants were asked how frequently they make use of the different types of campaign materials. Care should be taken in interpreting these figures given the relatively small sample size (N=18), however it does suggest that:

- There is not a huge variation in the frequency with which the different materials are used. However, the Your Stories case studies are slightly more frequently used than other resources, with the possible exception of the advice pages in the information section.
- Despite the feedback elsewhere that tangible physical resources are important, the banners, posters and postcards are never used by nearly half of the respondents.

It should be noted that the profile of the respondents and the point at which they interact with mothers and infant feeding may impact on the data seen here. For example, in some roles, they would not interact with breastfeeding mothers (or mothers who might potentially breastfeed) very often or may only share resources at the first visit, when the impact of the information is greatest for informing discussions.



2.3 How the workforce engages with the campaign

I find this campaign a great resource on antenatal home visit when I first find out if a family I mentor is going to breastfeed.



It's helped us in terms of our eating and moving for good health strategy, because there's a willingness and a strength that's already identified as part of that breastfeeding work that's there to build on and take forward. So there's a lot of open conversation there, which is great.

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.

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.

I love how user friendly the website is - it's easy to find what you're looking for. I think the words "FEED YOUR WAY" are extremely powerful, and each time I discuss this with a family - I will explain about the campaign and tell them it's not about anybody else it's about feeding your way and what's right for you - it makes delivering breastfeeding information easy and natural.

2.4 Use of Feed Your Way resources

Alongside understanding how members of the workforce engage with the campaign, we looked specifically at how resources that are hosted by Feed Your Way or developed as part of the campaign are viewed and used by members of the workforce.

- Overall, it was felt that there are a good range of resources on the website, and that the resources are from reputable and trustworthy sources. Across evaluation participants, there was a spectrum of views concerning which topics the website needed to address. Whilst a few participants felt that it is currently broadly a *one-stop shop*, the majority felt that there were some gaps in resources (addressed in section 2.6). The resources are viewed as important for giving weight to the campaign and making it more than just a campaign to change attitudes but changing long-term practice and knowledge.
- Participants commented that the resources were broadly able to be used with different cultures and are accessible to the diverse population in Nottingham City, and particularly in the SSBC priority wards.
- Whilst members of the workforce shared Feed Your Way campaign materials with parents, it is unclear whether those parents actually engaged with the materials. In part, this is because members of the workforce have had limited conversations with parents or only interact with parents at specific moments along the infant feeding journey.
- The digital nature of the campaign and resources is helpful for providing 'out of hours' access to guidance. However, members of the workforce would value having access to physical resources (e.g. leaflets), as they find that these are the best way of providing information that is digested after the visit or point of interaction.

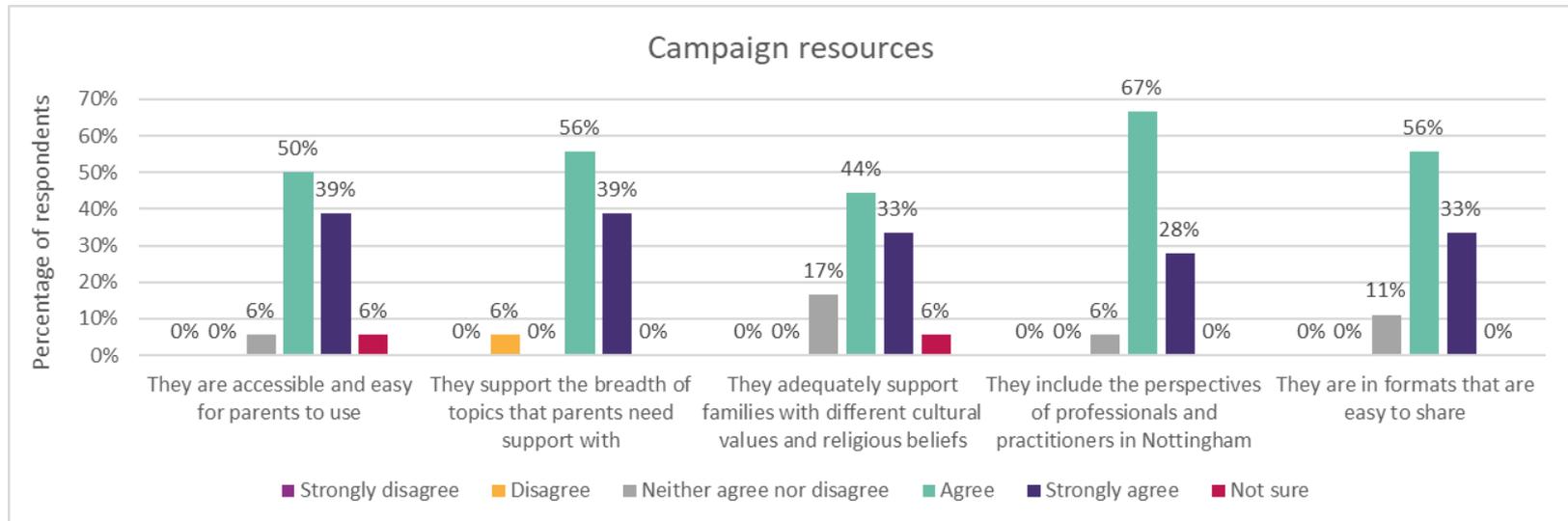


It needs to be kind of a one stop shop for literally everything, because that's where people go, if they're already accessing it for information about mastitis, they might have to click something else and go, oh, do you know what...and that's quite hard, because like tongue tie, there isn't a wealth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

2.4 Use of Feed Your Way resources

When looking at specific qualities of the campaign and the campaign resources, there was very positive feedback from those who had used the campaign materials (n=18):

- **94%** agreed or strongly agreed that:
 - The resources include the perspectives of professionals and practitioners in Nottingham
 - They support the breadth of topics that parents need support with
- **89%** agreed or strongly agreed that:
 - They are accessible and easy for parents to use
 - They are in formats that are easy to share
- **78%** agreed or strongly agreed that:
 - They adequately support families with different cultural values and religious beliefs



2.5 Use of other breastfeeding resources

Members of the workforce tend to use resources from a wide range of sources, sometimes alongside resources found on the Feed Your Way website. In general, they value resources that are evidence-based, visual, and can be shared easily with families and colleagues. Other sources of information and guidance include (listed in order of frequency mentioned by evaluation respondents):

- NUH intranet materials and guidelines
- Work handbook
- Through specific training
- NHS Start4Life / NHS leaflets
- Advice from colleagues
- SSBC leaflets
- UNICEF Baby Friendly Initiative
- The Breastfeeding Network
- Association of Breastfeeding Mothers
- La Leche League
- Blogs (general)

In the interviews, individuals told us that they had gone back to some of the training they had done around breastfeeding when looking for information. Others also suggested that over time they had used the 'Red book' or videos or other information from other more ad hoc sources, such as information from another hospital.

2.6 Desired resources for use by members of the workforce

Whilst evaluation respondents value the resources currently provided, some gaps and suggestions for additional resource topics and formats were also noted. It should be recognised that the Feed Your Way campaign will not be able to provide everything, for everyone, however consideration should be given to:

- Providing a clear signpost to local breastfeeding support groups in Nottingham, including emerging local breastfeeding support drop-in sessions.
- Resources in different languages, particularly for use in SSBC priority wards. Languages include: Kurdish Sorani, Dari, Farsi, Arabic, Urdu, Tigrinya, and Amharic. In particular, basic information sheets on how to breastfeed, the main benefits, and challenges that parents may face would be valuable if translated into multiple languages. The SSBC Dad's Pack is available in different languages and this received positive feedback from families who were able to use it without the need for translation.
- In slight contrast with the above point, it was also suggested that actually it was not practical to develop resources in all the languages that might realistically be useful for the local population. As such, it was suggested by one respondent that a more inclusive approach would be to provide more visual resources, including resources that include pictures or diagrams as these are important for cross-language or cross-cultural communication. These would make it easier for families to digest and interact with the information. Suggested topics include: demonstrating a good latch, engorgement, a shallow latch, milk bleb/blister, and Raynaud's disease. Another respondent suggested that physical resources such as knitted breasts or dolls would be valuable.
- Resources that can be given to families at 38/40 weeks of gestation. This relates to the importance of early engagement in the parental journey to encourage breastfeeding and promote an informed choice.
- Resources that provide honest guidance regarding challenges that parents may face, and how to overcome those challenges.



Adding QR codes and video resources to the development review packs.

More picture leaflets and videos. Information for problem solving, i.e. engorgement, shallow latch, milk bleb, Raynaud's etc.

2.6 Desired resources for use by members of the workforce

Members of the workforce told us that they would value specific resources that offer practical guidance as well as what to expect regarding:

- Stopping, starting or reducing breastfeeding. This was the most requested topic, particularly regarding advice on some of the 'normal' symptoms or challenges when stopping, starting or reducing breastfeeding frequency / supply at different stages and ages of the child.
- The nutritional benefits of breastfeeding
- The evidence base around formula use
- Tandem feeding
- Hand expressing / pumping (and associated sterilising)
- Mixed-feeding
- Positioning and latching / attachment (notably visual diagrams of a 'a good latch')
- Recognising and responding to different allergies
- Tongue-tie
- Nipple shields
- Sterilising bottles for expressed milk
(the best resources are often on formula feeding websites, meaning parents are directed there)



Not relevant for my families, get more questions regarding reducing breastfeeding or increasing expressed milk when returning to work and there are no resources on the webpage that support these messages.

There isn't a lot of information about weaning from breastfeeding, whether that's onto a bottle, whether that's a three-year-old, going back to work, introducing express breast milk.

Resources [around] reducing or increasing food to go alongside breastfeeding..and I've certainly found that in my job, that they found it more difficult to reduce milk than perhaps bottle-fed parents do, because of the loving bond and the other reasons why babies might cry. And you know, resources around that would be lovely.

2.7 Role in making Nottingham a Breastfeeding Friendly City

The Feed Your Way campaign aims support a wider city goal of making Nottingham a breastfeeding friendly city. Throughout the evaluation we have consulted with participants to understand if they feel that Nottingham is a breastfeeding friendly city, and how the Feed Your Way campaign supports breastfeeding mothers and families in Nottingham. Through engaging with the workforce, we find that the campaign:

- Is important for making mothers and families feel comfortable to breastfeed in public places, knowing that they are not alone, and that breastfeeding is accepted.
- Empowers families to seek support for themselves, particularly out of hours when individual services are not open.
- Sets Nottingham apart as an area that supports breastfeeding, *an issue which so many public bodies / representatives shy away from (but should not)*. The Feed Your Way campaign is viewed outside Nottingham as something which can be replicated in other areas.
- Has had some impact on increasing breastfeeding rates through practitioners using the materials with parents. Whilst we are aware of only a few individual examples of this, it is notable that the campaign is being used to directly support breastfeeding mothers and families.



I've had a few mums where they have struggled when they breastfeed their children. But when I give them advice and get the information, then [it transpires that] they've misunderstood a lot of things. And I clarified a lot of things with the support of your website and the resources. I've had a lot of different positive feedback on them. And many of them are still exclusively breastfeeding, thanks to the useful links and to the useful information that I've shared with them.

2.7 Role in making Nottingham a Breastfeeding Friendly City

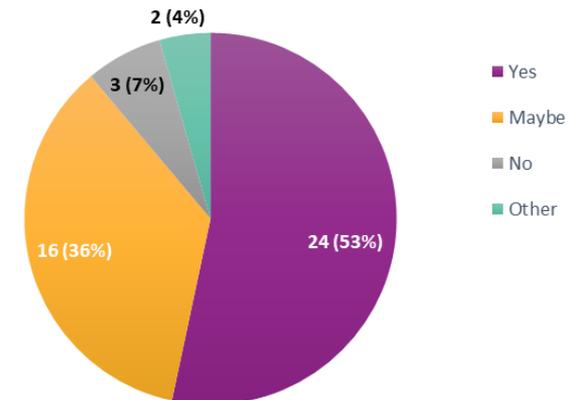
The pie chart below shows that over half of survey respondents felt that Nottingham is a breastfeeding friendly city, with a further 36% saying 'maybe', and 7% feeling it is not. In order to continue supporting this wider ambition, the campaign may consider:

- How to continue or increase its multi-channel presence. The campaign is impactful due to its presence in pertinent locations in Nottingham, and online. Maintaining this city-wide reach is important for reinforcing the key themes and reminding parents and members of the workforce that it exists.
- Supporting key organisations and services to become UNICEF Baby Friendly accredited. The accreditation is seen as important for signalling a welcoming environment for breastfeeding and infant care.
- Developing further relationships with businesses, who are key stakeholders in ensuring that people feel comfortable breastfeeding in Nottingham.



It's nice to be able to signpost parents to this and say actually, it's Nottingham based, so it's worth looking out for because it's a Nottingham resource, and then that makes it feel more personal than the national breastfeeding helpline. So, and then if we say it, and then they see the billboard on the bus stop, then that reinforces that message. If you have no clue what feed your way is, and then they see that billboard, there's no connecting the dots, and then that's just almost a waste of time.

Do you think that Nottingham is a breastfeeding friendly city



2.8 The maintenance and future development of the campaign

As a Small Steps Big Changes (SSBC) project, the Feed Your Way campaign will run until March 2025. In interviews with members of the workforce we have explored considerations for how the campaign may be maintained towards the end of the funded period and sustained beyond March 2025. Findings and considerations regarding the maintenance of the campaign are:

- That members of the workforce would like Feed Your Way to be supported beyond March 2025. It is a valued campaign and does not replicate the work of other initiatives.
- As the campaign is addressing a public health concern, Nottingham City Council's Public Health Team are viewed as the most likely 'host' for the campaign. Nottingham CityCare, or the Family Hubs Network are alternative suggestions.
- For the campaign to attract continued funding, it may consider working towards becoming a 'one-stop shop' or offer training and support packages for midwives and other healthcare professionals. This could make the campaign more attractive from an NHS Trust and local authority perspective.
- The geography of the campaign, and which geographic areas or population groups it targets. At present, the campaign is targeted at Nottingham City, however, there may be greater funding opportunities should it expand its approach and become a collaborative initiative across the wider Nottingham and Nottinghamshire ICB footprint.
- Whether other infant-feeding related campaigns are attached to the Feed Your Way brand, so that Feed Your Way becomes an 'umbrella' initiative.

2.8 The maintenance and future development of the campaign

With regard to strategic considerations for the campaign, it was suggested that it is important to think about the campaign beyond just being a campaign for awareness, but also consider the training offer for professionals that is associated with the campaign. The following quotes give further insight concerning the development of the campaign to attract a diverse range of potential funding:

- *Feed Your Way could be more than just a campaign and a website where resources are hosted, it could be...what's the Feed Your Way training package for midwives and others to get them skilled in having conversations about this and understanding it...and what about businesses and what breastfeeding means to venues, with charters or schemes like that. So I think it has to evolve from just being a promotional campaign to a more in-depth campaign that provides more and more of the different types of resources that are available.*
- *..I think it's the health aspect of how do you win over health to get investment. And I think that comes from potentially, where does training fit? Where do conversation cards fit? Where do all those packages for healthcare professionals, translated materials, etc, that get handed over by midwives? Where do they fit in the picture of Feed Your Way going forward?*





3. Implications of these findings

3.1 Implications for the campaign delivery

The following are implications for the delivery of the campaign that have arisen from the evaluation so far. They are aggregated from the more detailed slides earlier in the report.

To improve awareness and reach amongst the workforce (pg. 11)

- Further engage with key members of the workforce, such as midwives, midwifery support workers, antenatal practitioners and health visitors.
- Be a physical presence in teams and offices, through, for example, attending pre-existing team meetings.
- Continue the frequent promotion of the campaign through internal communication channels and newsletters.

Develop additional resources to meet the resource and information needs of the workforce (pp. 19 - 20)

- Clear signposting to local breastfeeding support groups.
- Resources in different languages, and resources that make use of graphic or visual illustrations, such as 'a good latch'.
- Resources to be given to parents at the 38-40 week point of pregnancy.
- Specific resources on stopping / starting breastfeeding, the nutritional benefits of breastfeeding, the evidence base around formula use, and tandem-feeding (among other topics).

Making Nottingham a breastfeeding friendly city (pg. 22)

- Continue the campaign's multi-channel presence to reinforce campaign messaging.
- Consider whether there are any other ways the campaign can support Nottingham's ambitions around working towards Baby Friendly principles.

3.1 Implications for the campaign delivery

To maintain the campaign and its impact beyond the currently funded period (post March 2025) (pp. 23 – 24)

- Consider which organisation could 'host' Feed Your Way, with Nottingham City Council's Public Health Team being the most frequently suggested.
- Consider working towards the campaign being seen as a 'one-stop' shop for resources.
- Consider developing training and support packages for midwives and other healthcare professionals as an alternative revenue stream / fundable activity.
- Consider the future geography of the campaign and whether it could be expanded beyond Nottingham City.
- Consider whether other infant-feeding related campaigns are attached to the Feed Your Way brand, so that Feed Your Way becomes an 'umbrella' initiative.

3.2 Implications for the evaluation

Implications for the evaluation questions and lines of enquiry

- Increase our understanding of how, through members of the workforce, the campaign has reached mothers and families in SSBC's priority wards (Aspley, Bulwell, Hyson Green and Arboretum, and St Ann's).
- Increase our understanding of the potential training needs and alternative offerings that the campaign could provide.
- Consider how, as engagement with the workforce increases through campaign delivery, different members of the workforce may have different requirements from the Feed Your Way campaign.

The findings from this stage of the research and the learning from the process of engaging the workforce, will be used to inform the second phase of the evaluation.

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