

“Stronger With Breastmilk Only” Initiative:

Evaluation in Four Countries in West and Central Africa and at Regional level

August 2022



**STRONGER WITH
BREASTMILK ONLY**

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LIST OF ACRONYMS AND ABBREVIATIONS

A&T	Alive & Thrive
BCC	Behavior Change and Communication
BFGM	Breast Feeding Gear Model
BFHI	Baby-friendly Hospital Initiative
BMS	Breastmilk Substitute
Code	Code of Marketing of Breastmilk Substitutes
CSO	Civil Society Organizations
DFN	<i>Direction de l'Alimentation et de la Nutrition</i> (Sierra Leone)
DHS	Demographic and Health Survey
DNTA	<i>Direction de la Nutrition et des Technologies Alimentaires</i> (Chad)
DSME	<i>Direction de la Santé de la Mère et de l'Enfant</i> (Senegal)
DRC	Democratic Republic of Congo
EBF	Exclusive Breastfeeding
EIBF	Early Initiation of Breastfeeding
IYCF	Infant and Young Child Feeding
IYCF-E	Infant and Young Child Feeding in Emergencies
KAPB	Knowledge, Attitude, Practices and Barriers
MICS	Multiple Indicator Cluster Survey
MIYCN	Maternal, Infant, and Young Child Nutrition
MoHS	Ministry of Health and Sanitation (Sierra Leone)
MSAS	<i>Ministère de la Santé et de l'Action Sociale</i> (Senegal)
NGO	Non-Governmental Organizations
NNS	National Nutrition Survey
NHIS	National Health Information System
PRO-FORT	<i>Production locale d'aliments de complément fortifiés</i> (Chad)
PRONANUT	<i>Programme National de Nutrition</i> (DRC)
REACH	Renewed Efforts Against Child Hunger and undernutrition
RJTN	<i>Réseau des journalistes tchadiens pour la nutrition</i> (Chad)
SBCC	Social and Behavior Change Communication
SMART	Standardized Monitoring and Assessment of Relief and Transitions (survey)
SUN	Scaling Up Nutrition
SWBO	Stronger with Breastmilk Only
TWG	Technical Working Group
UNICEF	United Nations Children's Fund
WBW	World Breastfeeding Week
WFP	World Food Programme
WHA	World Health Assembly
WHO	World Health Organization

EXECUTIVE SUMMARY

The international recommendation for optimal infant and young child feeding (IYCF) is: exclusive breastfeeding (EBF) up to 6 months of age and continued breastfeeding up to 2 years of age and beyond, with the introduction of adequate complementary foods from 6 months of age. The EBF rates in the West and Central Africa Region, and in many countries, are below World Health Assembly (WHA) target of 50%, and the practice of giving water before 6 months of age is one of the most significant barriers to EBF in several countries of the Region.

Actors from Alive & Thrive (A&T), the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) joined forces to design a regional initiative that would help countries overcome this obstacle and promote exclusive breastfeeding in this region. This gave rise to the Stronger with Breastmilk Only (SWBO) initiative, which has been implemented in several countries in the Region.

In 2022, an evaluation was conducted in four countries of the Region that had committed to the SWBO initiative. The purpose of this evaluation was to examine how the initiative had been set up and/or implemented and how it had contributed to strengthening the policy and programmatic environment for breastfeeding in these four countries.

For this evaluation, the "Outcome Harvesting" method was used. This approach involves identifying contextual changes and then looking back to determine if and how a project or an intervention contributed to those changes. An analytical lens, the Breastfeeding Gear Model (BFGM), was applied to provide insight into countries' advances in relation to the policy and programmatic environment for breastfeeding. The support for country actors provided by the Regional Team was also examined to identify what had most helped actors in countries.

The results of this evaluation are presented as a case study for each country, and at Regional level. With the constant support of the Regional Team, which took different forms, the four participating countries made significant progress in the setting up of the initiative. The support has generally helped to reinvigorate or galvanize country efforts around EBF, and several notable advances in the policy and programmatic environment around breastfeeding have been observed in each country.

Overall, an important success of the initiative has been to set or reset the agenda of governments and partners on the work on breastfeeding. Although several laws or policies, national strategies or budgeted operational plans were developed, validated and approved, there is a danger of assuming that their existence will necessarily lead to their implementation. This evaluation demonstrated that the process of implementing the SWBO initiative and all the strategies surrounding it is far from complete in many of the countries. Maintaining momentum is therefore critical for the continuation of the work undertaken. Now finding themselves in the crucial implementation phase of the initiative, the country actors look forward to continued support from the Regional Team. However, this evaluation also found that it is not necessary to have a large, locally based team available on a consistent basis to be able to support country teams in their efforts. The UNICEF and WHO teams that remain on the ground in those countries can play a significant role in continuing to catalyze these efforts in the Region, which is essential considering the aggressiveness of the marketing by the BMS industry.

INTRODUCTION

The World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) recommend exclusive breastfeeding (EBF) for the first 6 months of age and continued breastfeeding until 2 years of age and beyond, with the introduction of adequate complementary foods from 6 months of age [1]. The practice of giving water before 6 months of age is one of the most significant barriers to EBF for several countries in the West and Central Africa Region^[a]: in 2017, 40% of infants aged 0-5 months received water in addition to breastmilk [2].

In order to overcome this obstacle, optimize EBF practices and support countries to achieve the WHA target of 50% EBF rates by 2025, beginning in 2018, UNICEF and Alive & Thrive (A&T), joined shortly thereafter by WHO, developed a Regional initiative called "Stronger with Breastmilk Only" (SWBO). In order to tailor the initiative to country needs and realities, the 24 countries in the Region participated in its design through regional meetings, webinars, questionnaires, and exchanges.

The initiative calls for greater attention to the protection, promotion and support of EBF. It encourages the development of evidence-based social and behavioral change communication (SBCC) campaigns and strategic policy advocacy to promote the provision of breastmilk only - without water, other liquids, or foods - to infants during the first 6 months of life. It also encourages countries to strengthen their health system for optimal breastfeeding counseling during antenatal care, post-natal and other well-child visits.

The official launch of the initiative took place in Abidjan in November 2019 at a Regional technical consultation. Governments and partners were invited to adapt the initiative to their national context and integrate it into existing nutrition programs and platforms to facilitate scaling up and sustainability. Numerous resources and tools were developed by the Regional Team to assist them in this task.

This report synthesizes the results of a process of documenting the adaptation and implementation of the initiative in four countries of the Region: Senegal, Sierra Leone, the Democratic Republic of Congo (DRC) and Chad. It paints the picture of the initiative in these four countries, presents several advances in terms of the policy and programmatic environment for breastfeeding, and focuses on the contributions of the countries and of the Regional Team to achieving these advances in the context of the SWBO initiative. We recognize that the advances presented in this report cannot be attributed to any one organization or activity, but rather are the result of efforts built on the work of many actors over the years in these countries.

^[a] When the first letter of "Regional" is capitalized, it refers to that region of Africa (West and Central) and distinguishes it from "regional" at the sub-national level of a country.

METHODOLOGY

Objectives

The purpose of this evaluation was to examine how the SWBO initiative was set up and/or implemented and how it contributed to strengthening the policy and programmatic environment for breastfeeding in four West and Central African countries.

Specifically, the evaluation questions were as follows:

1. What changes in the policy and programmatic environment for breastfeeding have occurred since the implementation of the SWBO initiative?
2. What advocacy, partnership, and capacity building activities have been implemented by A&T, UNICEF, and WHO as part of the SWBO initiative?
3. To what extent and how have the advocacy, partnership and capacity building activities carried out by A&T, UNICEF and WHO under the SWBO initiative contributed to strengthening the policy and programmatic environment for breastfeeding?
4. How has the Regional Team supported countries and how has this support helped them, if at all, to strengthen the policy and programmatic environment for breastfeeding?

The Approach: Outcome Harvesting

The evaluation was based on “Outcome Harvesting”, an evaluation method developed since 2002. With this approach, effects are defined as changes in the "behavior" (such as actions, relationships, policies, practices) of one or more social actors influenced by an intervention [3]. Unlike other evaluation approaches, Outcome Harvesting does not examine progress toward predetermined goals or outcomes, but rather identifies changes and, by looking back, determines whether and how a project or intervention contributed to those changes. A [supporting brief](#) presents this evaluation method in more detail. Whilst there are usually six steps to outcome harvesting, an adaptation of the approach was necessary in the context of this evaluation.

The first step was to **design the harvest**. This was done in partnership with the regional offices of A&T and UNICEF, which validated the evaluation questions. The subsequent **document search** yielded more than 200 documents related to the initiative and allowed to draw initial outcome statements. However, more than half of these documents came from the Regional Team, and the majority of the documents received did not allowed for harvesting outcomes. **Sustained engagement with sources** in the form of interviews (23) conducted throughout the evaluation allowed for a better understanding of the form that the initiative took in each of the four countries, **corroboration** of data with different actors, and the formulation of additional outcomes. To **analyze and interpret** these outcomes, an analytical lens was used to better understand the elements related to the breastfeeding environment that were affected by the initiative. Finally, the results of the analysis for each country were validated by a majority of country sources.

The analytical lens: The Breastfeeding Gear Model

The Breastfeeding Gear Model (BFGM), developed by Pérez-Escamilla et al [4], is based on 8 gears that must work together to optimally support the advancement of breastfeeding efforts. This model is based on the fact that strong **advocacy** is required to generate **political will** and enable the adoption of **laws and policies** to protect, promote and support breastfeeding. Political will is also needed to generate the **resources** required for **training** of various actors for **service delivery**, and for breastfeeding **promotion**. **Research and evaluation** help to maintain effectiveness and monitor the quality of programs. Finally, a central gear is used for **coordination**. Strengthening any of these gears is therefore a step toward strengthening the breastfeeding environment.

Figure 1. The BFGM for scaling up and sustainability of breastfeeding programs [4].



RESULTS

The results of this evaluation are presented in the following section in the form of case studies.

- For each **country** studied (4 case studies), we summarize (i) how the SWBO initiative was set up and/or implemented and (ii) the most significant advances in the policy and programmatic environment for breastfeeding, illustrated through the BFGM.
- For the **Regional** level (1 case study), we describe (i) how the Regional Team has supported countries in the set up and/or implementation of the initiative, and (ii) the most significant advances that have taken place as a result of the Regional SWBO initiative to strengthen the policy and programmatic environment for breastfeeding, illustrated through the BFGM.



Democratic Republic of Congo

How did the SWBO initiative take place in this country?

In the Democratic Republic of Congo (DRC), the planning for the implementation of the SWBO initiative was done within a **technical committee composed of the National Nutrition Program (PRONANUT) and the Infant and Young Child Feeding in Emergencies (IYCF-E) Technical Working Group (TWG)**. PRONANUT provided leadership to this working group, with significant support from UNICEF and the participation of several partners, including ADRA, World Food Programme (WFP), Doctors of Africa and FONLIVE.

At the national level, the initiative was launched during the World Breastfeeding Week (WBW) 2020 and the work was intensified during WBW 2021. The initiative was also inaugurated in five of the country's 26 provinces in the months following the initial launch. As part of the 2021 relaunch, the "Stronger With Breastmilk Only" **breastfeeding promotion campaign** was also launched culminating in the posting of large publicity boards in four strategic locations in Kinshasa for two months, reaching a large pool of people. This was accompanied by a full media launch where journalists and reporters from different communication platforms (radio, television, print and online) were also informed and mobilized to convey messages in favor of EBF.

In 2021, a key activity for DRC was **participation in the blended learning program**, a virtual training program organized by the Regional Team and that was designed to build the capacity of countries to design breastfeeding programs using an SBC lens. This led the technical committee to conduct a **situational analysis for breastfeeding** in DRC with MICS 2001, 2010, and 2018 survey data, and DHS 2007 and 2013 survey data. The initiative highlighted the very heterogeneous rates of EIBF and EBF among the 26 provinces, which would require the use of a differentiated approach by partners working directly in the field with health structures and communities.

This activity also encouraged them to develop a **budgeted operational plan for EBF using an SBC lens**. The national actors who attended this regional training on SBC were thus able to share their learnings and accompany the other partners during a **workshop to develop and validate an action plan** in June 2022. The country actors, who also wanted to strengthen complementary feeding, decided, on the same model to develop a second plan in support of these activities.

Finally, particular emphasis was placed on the **sensitization about the BMS Code in DRC**. The latter had been formalized in 2006 in the form of an order signed by the Minister of Health. However, the work necessary for its application had not taken place and it was still unknown within the Government and among the many health partners. The approach taken to restart the work on the Code was to organize awareness sessions on the Congolese Code. Thus, nearly 30 PRONANUT executives, 50 executives from relevant ministries, and 60 journalists were sensitized and trained within the SWBO initiative, as well as several members of the SUN network and some technical and financial partners. Other sensitization activities are still planned, especially with health providers. Such sensitization is intended to advocate for an update of the Code.

What are the advances to strengthen the policy and programmatic environment for breastfeeding?

1. The initiative has delivered high-level commitment to nutrition.

For the first time in DRC, the First Lady was mobilized in favor of nutrition. During the WBW 2021, and after receiving the title of ‘Ambassador for the fight against malnutrition’, the First Lady launched the SWBO initiative. She also recorded messages that were broadcast on four channels over two months for the awareness campaign.

2. The initiative has reactivated the work on the Code.

First, numerous sensitization activities took place with a multitude of stakeholders to raise awareness on the Code. Second, following the situational analysis and during the reflection with the different partners for the creation of the budgeted operational plan for EBF, the actors agreed on the need to revisit the Code so that it could be endorsed not only by the Minister of Health, but also by other ministries concerned by its application. This work will ultimately strengthen the Code in the country. Finally, in parallel to these actions, the IYCF-E TWG is planning to set up a mechanism to monitor violations using the Kobo Collect application, and forms for recording Code violations have already been discussed.

3. The initiative has facilitated the development of a budgeted operational plan for breastfeeding and complementary feeding.

Work on IYCF is a priority for DRC, but the country remains plagued by numerous emergencies, including armed conflict with displaced populations and Ebola outbreaks. Nutrition actors at the national level are therefore frequently called upon for these emergencies, making it more difficult to develop plans and strategies. In such a context, the SWBO initiative has provided an enabling space for the development of a budgeted operational plan for EBF and complementary feeding, as well as delivering useful support, thus allowing for the updating of the DRC IYCF Strategic Communication Plan (which expired in 2015).





Senegal

How did the SWBO initiative take place in this country?

In Senegal, the entity responsible for implementing the SWBO initiative has been a subcommittee of the IYCF committee: the **technical steering committee of the initiative**. This subcommittee includes the National Nutrition Development Council (CNDN), the Ministry of Health and Social Action (MSAS) through the Directorate of Mother and Child Health (DSME), A&T, UNICEF, WHO, Helen Keller International, the Scaling Up Nutrition (SUN) civil society network and the SUN National Facilitator. From 2020 onwards, these actors have met regularly to set up the initiative, notably through the validation, execution and monitoring of the implementation of the roadmap for Senegal.

One of the key steps in setting up the initiative was the **situational analysis** that was to serve as the basis for conceptualizing the initiative and adapting the tools to the socio-cultural realities of the country. To do this, the Regional Team first proposed a basic methodological note to the subcommittee. As all the partners on this committee showed interest in contributing to this analysis, a joint methodological note was developed that included the necessary information and documents and divided the work among the different partners. This process not only provided access to a large number of resources for a more complete situational analysis, but also helped to bring the partners together and engage them. This **inclusive and participatory approach** has subsequently been adopted for other projects.

The situational analysis of the SWBO initiative also included a **mapping of stakeholders**, which made it possible to reach out to a multitude of actors beyond the IYCF committee. This has helped to strengthen the multisectoral dimension of the initiative, which is both necessary and vital when considering the multifactorial causes of malnutrition. The inclusive and participatory approach of the situational analysis facilitated contact and exchanges with the various stakeholders. To carry out this mapping, a questionnaire was prepared and validated by the initiative's technical steering committee. This questionnaire was shared with the various stakeholders by the Ministry of Health and Social Action through its Secretary General, with an invitation for its completion.

The inclusive and participatory approach made it possible to engage all stakeholders in the implementation of the initiative. They were first invited to a **workshop to validate the results of the situational analysis** in Thiès in July 2021 and, at the same workshop, **to reflect on the development of a national SWBO strategy**. The validation of the situational analysis allowed all the actors to consolidate opinion around the need to refocus the strategy on behavioral change i.e. to try to eliminate the practice of giving water to infants below 6 months. This was a reorientation of the efforts of actors who usually focus only on breastfeeding. The reflection on the strategy then provided a platform of concrete activities to be implemented, removing obstacles and facilitating better follow-up. All the actors who were present were therefore engaged in this reflective process, both at the central and regional levels.

After the successful launch of the initiative in October 2021, and a call to action for breastfeeding, the initiative's technical steering committee held several working sessions to develop a national operational plan. The various stakeholders were reconvened in April 2022 in a **workshop to validate the national SWBO strategy and to reflect on the development of the budgeted operational plan**. The reflection around the development of this plan led Senegal to encourage each medical region establish its own plan and then synthesize these plans and assemble them to produce a consolidated document to which partners could contribute. This will allow for ownership of the initiative by regional actors, in addition to taking into account their specific needs for its implementation.

What are the advances to strengthen the policy and programmatic environment for breastfeeding?

- 1. The initiative has allowed stakeholders to become aware of the power of using evidence to build action around the initiative effectively.**

The situational analysis identified barriers to optimal breastfeeding practices, specifically in relation to EBF and EIBF. This has led to a new understanding among many actors involved in IYCF programs as well as in the political sphere, allowing for focused efforts to move in the same direction.

- 2. The initiative has revitalized the IYCF committee and brought together many stakeholders.**

This committee had been created in the years 2013-14, but the actions of its members were somewhat scattered. The initiative therefore allowed the work to be done in unison and thus favored the coordination of the actions of the different partners through a reinforced complementarity.

- 3. The initiative has engaged policy makers in various activities and thus raised awareness of the importance of EBF.**

The national launch of the SWBO initiative was presided over by the Deputy Secretary General of the Government, in the presence of the Secretary General of MSAS. The Minister of Health and Social Action was the signatory of the National Strategy, as well as of a letter sent to the 14 regions of Senegal to encourage them to develop their regional operational plans.





Sierra Leone

How did the SWBO initiative take place in this country?

In Sierra Leone, work on the initiative was carried out within an existing group: **the Maternal, Infant, and Young Child Nutrition (MIYCN) SBCC TWG**, chaired by the head of the Directorate of Food and Nutrition (DFN) of the Ministry of Health and Sanitation (MoHS). The TWG includes the government, donors, UNICEF, WHO, the REACH facilitator, various international and national NGOs such as World Vision, Save the Children, Focus 1000 and the SUN Secretariat. For the implementation of the initiative, five working group teams were created (i) core national, ii) community engagement, iii) health facility staff, iv) information, education and communication and v) monitoring and evaluation, with terms of reference developed for each.

The initiative in Sierra Leone goes back to November 2019, when a few key nutrition actors attended the first regional meeting in Abidjan, during which the SWBO initiative was launched. This stimulated the work that was already taking place in the country with a strong support and leadership from the head of DFN. Earlier in 2019, a national mixed method **study to better understand knowledge, attitudes, practices, and barriers (KAPB) on MIYCN** had been conducted. A media analysis on MIYCN conducted in 2021 also provided information on the best ways to reach the population and foster behavior change. These two studies played a key role in the development of a MIYCN SBCC strategy and a budgeted operational plan, which were finalized in August 2021 in advance of the launch of the SWBO initiative, referred to as the "campaign" in the country. A **detailed district-level implementation plan** was also developed to roll out the SWBO campaign.

Due to limited funding, the minister agreed that implementation would begin in two pilot areas rather than nationwide directly, but would be expanded over a three-year period, with the exception of radio and social media, which would be rolled out nationwide immediately. Given the differences between rural and urban areas, the country has chosen to focus on an **urban strategy**, which involves more engagement with social media and activities with religious groups rather than mothers' groups.

In July 2022, **26 nutrition champions** (16 district champions and 10 national champions) were recognized at a high-level event attended by the Minister of Health and Sanitation. The champions are members of Parliament, religious leaders, civil society and community members. Once appointed, the champions will be able to use their voices and networks to raise awareness about the importance of EBF. This was the second time champions were appointed in the country, the first being in May 2022, when 30 Champions were appointed (including six members of Parliament).

What are the advances to strengthen the policy and programmatic environment for breastfeeding?

- 1. The initiative has built on the longstanding work around the Code that led to the enactment of the Breastmilk Substitute (BMS) Act in July 2021 and its signing by the President in August 2021.**

Many TWG members also serve on the Code Committee, which has been very active in working on the BMS law in the country under the leadership of DFN. Over the past decade, the committee has conducted several outreach and advocacy activities. Close engagement with parliamentarians, and technical legislative support (UNICEF and WHO), have been particularly helpful here in achieving enactment of the BMS law, and the SWBO initiative has provided a real momentum to this work. It also appears to be helping to operationalize the BMS law in order to achieve its implementation. A subgroup of the Code Committee has been formed and is planning the next steps in establishing a high-level BMS advisory committee.



- 2. The initiative has developed a set of common communication resources for the SBC on MIYCN.**

In the past, it was common for NGOs to develop their own materials for their activities. Over time, some donors had noticed a duplication of resources and a great deal of heterogeneity in these resources. In order to roll out the MIYCN strategy nationwide, the Ministry of Health moved toward developing a set of common, pre-tested resources for use by all partners. The initiative was a timely opportunity to begin using them. As a result, some of these resources have already been adopted at the regional level, new resources have been created, and others will be developed based on the results of the KAPB study.

- 3. The initiative has strengthened breastfeeding advocacy efforts by engaging diverse groups in a wide range of activities.**

High-level decision-makers participated in major events such as the National Stakeholder Consultative Meeting of SWBO Stakeholders and the ceremony to recognize nutrition champions. Parliamentarians, already involved in the past, took a more active role for the Code. Religious networks were engaged in discussions to integrate breastfeeding promotion messages into their religious activities. The media has been involved in participating in and covering major events. Communities were engaged by mobilizing community leaders and groups, such as mother and father support groups, to promote and protect EBF.



Chad

How did the SWBO initiative take place in this country?

It is within Chad's **IYCF technical working group** that the planning of activities was done for the SWBO initiative. The IYCF group includes the Directorate of Nutrition and Food Technology (DNFTA) of the Ministry of Public Health, which provides leadership, UNICEF, WHO, the WFP, the REACH facilitator and the Chadian Journalists' Network for Nutrition (RJTN).

The results of a 2017 socio-anthropological study on IYCF practices (as part of the PRO-FORT program) provided the IYCF group with a picture of the fragmented breastfeeding situation in the implementation area of the said project (2 southern provinces, Mayo Kebbi East and Mayo Kebbi West). This study, and the results of the SMART and EDS-MICS 2019 surveys provided sufficient information to allow the SWBO initiative to be launched without having to wait for an in-depth situational analysis. The initiative was launched during WBW (December 2020), under the **patronage of the First Lady**. The launch and the activities surrounding it mobilized several high-level stakeholders as well as many partners.

Substantial effort was invested in a media campaign to (television, community radio, large posters) **raise awareness among the population**. Two cell phone companies have also committed to broadcasting free awareness messages to their subscribers, reaching nearly 5 million subscribers. In order to foster direct engagement with the population, the IYCF committee has also carried out **various activities in the districts** of N'Djamena and in 4 other provinces. Another important activity was the participation in **breastfeeding support groups of grandmothers**, who are recognized as very influential in the choice of infant feeding in a household and were trained to deliver key campaign messages. Together, these activities reached a wide range of the population.

The problems of undernutrition and food insecurity have made nutrition a high priority for the Chadian government. Thus, in the last decade alone, about fifteen normative or policy documents related to nutrition and food have been developed. As a result, a large number of initiatives and programs have been put in place in the country. In this context, and unlike other countries where the "umbrella branding" of the SWBO initiative has allowed for the insertion of several strategies or programs, the initiative in Chad seems to have taken the form of an **enhancement of the messages around breastfeeding within the existing initiatives and programs**. It seems that breastfeeding actions were not optimal, and that the initiative has helped to intensify the breastfeeding component in the activities of the IYCF working group and to amplify the work underway in the country, notably around the Code of Marketing of Breastmilk Substitutes (the Code) and the Baby-Friendly Hospital Initiative (BFHI).

What are the advances to strengthen the policy and programmatic environment for breastfeeding?

1. The initiative has helped to strengthen training related to EBF in existing programs.

By 2020, a toolbox with visual teaching aids had been produced in collaboration with DNTA to support child health outreach and made available to various partners for their fieldwork. The toolbox was revised in 2021 and, as part of the SWBO initiative, two key messages were added to emphasize IYCF, EBF up to 6 months and complementary foods from 6 months. The contents of this toolbox are used in health centers to conduct sensitization sessions with health personnel (doctors, nurses, midwives and technical health workers) to reinforce the implementation of the BFHI and the sensitization about the Code. This toolbox is also used to raise awareness in the communities.

2. The initiative has allowed revisiting and galvanizing the work on the Code.

This work was spread over many years with significant progress achieved in 2019 when a law was enacted by the National Assembly and subsequently signed by the President of the Republic on December 31 of the same year. In 2020, a subgroup was formed to advance the publication of an implementing order, but political instability delayed the work. In 2021, with the participation of national actors in the blended learning program provided by the Regional Team, this subgroup was inspired from the examples of other countries and revisited its choice to work on orders, changing it to articulate decrees instead, which would give them a higher level of anchoring and greater enforcement power. At the same time, advocacy actions were pursued with parliamentarians and other higher authorities to support this work.



3. The initiative has allowed to redirect funding to carry out activities related to breastfeeding.

In a country such as Chad, where emergency situations are prevalent, donors prioritize those emergencies and the management of undernutrition to the detriment of prevention activities. Hence, although breastfeeding is part of the IYCF-E, it is not always a priority. Thus, by strengthening breastfeeding activities in existing maternal and child health care programs and helping to scale up IYCF activities, this has helped to mobilize additional funds for breastfeeding.



Regional Level

How did the Regional team support the countries?

The support provided to the country by the Regional team took many forms (see Box 1). Five elements in particular seem to stand out as having facilitated the set up and the implementation of the SWBO initiative at the country level, as discussed below.

Two of the four countries studied were part of the first cohort of a **blended learning program** offered by the Regional Team. This training provided them with tools and methods and helped them structure their process through a systematic approach, in addition to strengthening their knowledge of SBCC.

Monitoring meetings, organized by the Regional Team for countries share their experiences, proved to be of great value. The meetings allowed them to compare their activities with what was being done in other countries and to learn from the experience of others. They were also valuable in motivating participants, encouraging them to take stock of their own progress and adapt their own strategies, or to re-launch activities that were sometimes on pause or less advanced.

The Regional Team provided countries with a number of resources that were used extensively. These **toolboxes** included strong, contextualized materials that were used extensively, especially for advocacy and launches. The fact that there were harmonized materials used throughout the Region was an asset.

Workshops and webinars organized by the Regional Team have allowed stakeholders in the various countries to gain a better understanding of the issues, as well as a better overview of the initiative and its benefits.

Finally, technical support has sometimes taken the form of more **ad hoc assistance** that has allowed countries to strengthen their strategies or improve their materials. This support has been invaluable in helping them contextualize documents or develop a national strategy.

Box 1: Some forms of Regional support

- Initiative website
- Toolkits and resources for the initiative
- Regional events
- Workshops and webinars
- Ad hoc technical support
- Blended learning program
- WhatsApp group dedicated to the initiative

What are the advances that were achieved as a result of the Regional SWBO initiative to strengthen the policy and programmatic environment for breastfeeding?

1. The initiative has strengthened advocacy around breastfeeding in the Region, primarily around EBF and EIBF.

Supported by the Regional Team, several countries developed a national strategy, linked to the initiative or to IYCF, which included an advocacy component. Regional support to country teams also facilitated the development of new evidence and its strategic use, including through the contextual adaptation of strong advocacy materials prepared at the Regional level. Thus, Countries had strong arguments that served as a basis for anchoring the demands made to policy makers or other relevant stakeholders. Several high-profile events were organized, including national and regional launches of the SWBO initiative, which helped build consensus on the importance of taking action on breastfeeding and how to do so. In the countries that have committed to the SWBO initiative, a wide range of actors have been mobilized through effective advocacy for EBF, with the impetus of the Regional initiative.



2. During the course of the SWBO initiative, most countries have made progress on the Code.

The momentum provided by the initiative has, at times, put the work on the Code back on the table when it had not been a focus or given it renewed impetus. UNICEF's expertise on the Code and the technical support provided by the Regional Team, for example by providing tools or even a "model law", were very helpful. Influenced by the Regional Team, other countries have revisited their strategies. For example, to focus on higher-level anchoring to anticipate the work on implementation that seems to be facilitated when the Code is signed not only by the Minister of Health but by several Ministers or even the President.

3. For this initiative, the Regional team brought key stakeholders together, ensuring alignment between the work of nutrition actors with that of communication specialists for SBCC.

These key actors therefore worked collaboratively in support of the initiative. For the SBCC, the Regional support to the country teams allowed them to realize the importance of understanding the barriers to EBF and EIBF in order to be able to help mothers overcome them. Supported by the Regional Team, several countries then developed a national strategy related to the initiative or to IYCF that included an SBCC component based on this data. A blended learning program on SBCC provided by the Regional Team subsequently strengthened the capacity and work of several countries on these aspects.

ADDITIONAL INSIGHTS AND TOP TAKE AWAYS

In this section, some additional and/or overarching findings from this evaluation are shared.

1. The SWBO initiative has allowed countries to "re-invigorate" the EBF work by giving it a fresh touch.

Several breastfeeding-related initiatives have already taken place in all countries, which can lead to a certain "fatigue" among several programmatic, political or public actors. The branding of the SWBO initiative, with its logo previously tested in several countries, has given a new impetus to EBF and caught the attention of many actors in the countries. This has provided an opportunity to repackage and rebrand EBF and send messages in a new way. Several study participants mentioned this as an important added value of the initiative, noting further that since the arrival of the SWBO initiative, they have been doing activities before and after the WBW, not just during it. It is important to recognize this contribution of the initiative, considering that the work around breastfeeding must be regular, especially in a context where the artificial milk industry is increasingly present and lucrative in the countries

2. The countries embarked on the initiative's journey with great enthusiasm and appreciated it.

One of the concerns expressed by the Regional Team in this evaluation was that the initiative could have been perceived by countries as something that was coming from outside, on top of everything else they were already doing. However, in the interviews, no participant ever expressed such a perception, instead praising the merits of such an initiative. The only challenge mentioned was the modalities of the blended learning program, which took place intensively during 6 months. Some participants were unable to complete the training because they had to leave for the field. Others found the frequency of the meetings too intense and suggested a shorter format. On the other hand, the participants interviewed all agreed on the usefulness of this training and stressed that it led to concrete products for their country.

3. As a whole, the SWBO initiative has taken several steps toward strengthening the programmatic and policy environment for breastfeeding in the Region.

The application of the BFGM lens highlighted a major strength of the SWBO initiative: all the necessary gears for advancing breastfeeding efforts were strengthened by the presence of a single initiative. Nonetheless, the gear related to funding and resources seems to have benefited the least from the initiative. Since the implementation of the activities of the budgeted operational plans for EBF depends on securing additional financial resources or reallocating existing funding for the EBF, funding efforts need to be further intensified.

4. The SWBO initiative has made some policy progress, particularly with respect to the Code of Marketing of Breastmilk Substitutes, but work on maternity leave has been limited.

While there was some support for work around maternity leave, the intensity of that support was less than for the Code. It should be noted, however, that the absence of maternity leave can undermine the gains made through work on the Code. Indeed, a significant number of women must return to work by three months, especially in urban areas. Although these women can be sensitized to the importance of EBF through the SWBO initiative, and even if exclusive breastfeeding is well protected through the Code, without maternity leave it will be difficult for them to practice it.

5. The commitment to the initiative and the work for its setting up is considerable, but there is still work to be done for its implementation.

Most country actors expressed appreciation for all the support they have received from the Regional Team, but some also expressed concern that the A&T project is coming to an end and that their work in, or with, countries is coming to an end. Many of them are at the crucial stage of implementation of the initiative and the momentum created so far could suffer if the support received is reduced. As a recall, the implementation process writ large includes the following processes: initiation, planning, implementation and sustaining. More specifically for the SWBO initiative, many countries have developed plans, but the activities contained in those plans are still at a planning stage. Therefore, further efforts are required to advance through these processes.

CONCLUSIONS

This report presented the evaluation of the SWBO initiative in four countries. It comes in addition to an evaluation that was conducted in Burkina Faso (2020-22) by members of the same SISN research team. About 20 other countries have also committed to carry out the SWBO initiative in their context. **Therefore, the scope of the SWBO initiative in the region is remarkable.**

A diversity of themes from the initiative, in context, have been presented in this report. One of the successes of the initiative has been to set or reset, the agenda of governments and various partners on the work on breastfeeding or IYCF. However, an important finding was that **the process of implementing the SWBO initiative and all the strategies surrounding it is far from complete in many of the countries.** SISN is well placed to warn of the danger of assuming that the existence of laws or policies, national strategies or budgeted operational plans related to EBF and IYCF will necessarily lead to their implementation. Indeed, many of these documents will be set aside and will not lead to concrete actions or expected results on the ground. **Maintaining momentum and keeping breastfeeding and IYCF at the agenda is therefore crucial for the continuation of the work undertaken.**

It is the responsibility of decision-makers and partners on the ground to carefully consider the support needs for the implementation of strategies, action plans, and policies that have been recently developed, validated and approved. On the other hand, the evaluation found that **it is not necessary to have a large, locally based team on a consistent basis to be able to support country teams in their efforts.** A&T in particular has deployed a variety of technical support: country team, focal point, remote assistance. But progress has been made in all countries, regardless of the support model. While country actors have expressed that they continue to require support, what happens next may be critical. Although the A&T initiative is coming to an end in several countries of francophone West Africa, the UNICEF and WHO teams remain on the ground and can play a crucial role in continuing to catalyze these efforts in the Region.

In fact, the recent report by these two United Nations agencies on the considerable leverage of the BMS industry warns of the industry's aggressiveness and the importance of galvanizing efforts around the Code [5]. The SWBO initiative has made major strides on this issue, often building on the work of many stakeholders over many years. As one participant noted in this context, crucial investment is needed to ensure that efforts made to date can be continued until they reach fruition.

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