

## Tasmanian Breastfeeding Coalition

# Planning to breastfeed? Prepare to Succeed.



## PROJECT EVALUATION AND REPORT



## ACKNOWLEDGEMENTS

This project has been the result of collaborative effort and initiative from the Tasmanian Breastfeeding Coalition. In particular, Elisabeth Wilson from the Australian Breastfeeding Association has played a key role in liaising with national and state representatives. ABA has also managed the finances for this project in its usual accountable manner.

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Julie Williams (Community Nutrition Unit, DHHS) has compiled this report on behalf of the Tasmanian Breastfeeding Coalition.

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### **FOR FURTHER COPIES OF THIS REPORT CONTACT COMMUNITY NUTRITION UNIT**

**3<sup>rd</sup> Floor, 90 Davey St  
HOBART TAS 7000**

**Direct enquiries:  
ph. (03) 6222 7222**

[community.nutrition@dhhs.tas.gov.au](mailto:community.nutrition@dhhs.tas.gov.au)

## INTRODUCTION

The physical, social, economic and environmental benefits of breastfeeding infants to at least 6 months of age is widely acknowledged, supported by a wealth of international research and policy at all levels of government. In Tasmania, breastfeeding promotion features as a primary recommendation of the Tasmanian Food and Nutrition Policy<sup>1</sup> and in the National Public Health Nutrition Strategy<sup>2</sup>.

Stickney and Webb<sup>3</sup> completed a review of breastfeeding promotion strategies in Australia in 1995. This review identified a number of features that help define best practice in breastfeeding promotion; including:

- The need for a public health context and coordination of individual activities
- A multi-strategy approach is needed- no single strategy for the promotion of breastfeeding is likely to make a significant impact.
- An intersectoral approach is desirable- this demonstrates an understanding of the different levels at which a program must operate in order to bring about permanent change.
- In designing a plan, and selecting strategies for the promotion of breastfeeding, it is important to consider all factors that may undermine breastfeeding (ie. The need for formative research).
- Special consideration should be given to the characteristics of the media environment and target audiences.

Tasmania has the lowest breastfeeding initiation rates of all Australian states, and breastfeeding duration declines rapidly in the first 8 weeks after hospital discharge. Recent data from Family Child Health in DHHS indicates the rates in Tasmania are even lower than previously thought.

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Common reasons given for ceasing breastfeeding prematurely are a perception of insufficient milk, difficulties sucking, sore nipples and convenience. This suggests that mothers are inadequately prepared for the inevitable challenges of breastfeeding and need practical help and advice. Furthermore research suggests that the earlier a woman begins the decision making process in relation to breastfeeding, the more likely she is to choose to breastfeed<sup>4</sup>.

Breastfeeding initiation and duration is less in "at risk" women (lower socio-economic groups, lower education, younger women) and it is postulated that a multimedia campaigns may be an effective way to reach these at risk groups with targeted messages. This is backed by Tasmanian research<sup>5</sup> that has shown advertising in buses is an effective way to communicate a health message.

## THE PROJECT

The **Prepare to Succeed** project was funded to provide a high impact, time-limited promotional campaign, targeting potential and new mothers, especially those in at risk groups, aimed at increasing the initiation and duration of breastfeeding in Tasmania. The promotional tools used were poster displays and bus posters (internal and external) across the state.

**Project Goal:** To increase breastfeeding rates

### Objectives:

1. Increase the confidence, skills and knowledge of women in Tasmania (especially in the at risk groups) to start and to continue breastfeeding until at least 6 months.

### Project Strategies:

1. Promote the ABA website through the *Prepare to succeed* message on bus posters (internal and external). Bus advertising on Tasmania's Metro Bus service was considered as a potentially viable advertising medium for a budget limited campaign. Metro statistics indicated that advertising in all Metro buses over a two month period would reach an estimated 1.8 million passengers, representing a mass reach and multiple exposure advertising /social marketing medium.
2. Information, help line and link to local groups to be provided on line at ABA's website (as per core business).

### Target Group:

- This strategy will be a good way to target those women in Tasmania who are at risk of not breastfeeding their babies. This includes young women, women living on lower incomes and those with less educational opportunities.

## EVALUATION

All of the resources for this project were used to maximize the promotional strategies. As there was no resource set aside specifically for evaluation we were not able to measure the project objective, only the project strategies were measured. This was all done using the volunteer capacity of Breastfeeding Coalition member organizations.

- Progress towards achieving project plan was monitored at each Breastfeeding Coalition meeting. All milestones were met according to plan.
- Project reach: We measured this by monitoring the number of visits to the ABA website, that that occurred during the campaign period (6 months) and those reporting they had seen the campaign message. Results show that of the 129 people who visited the ABA website from Tasmania, 60 (46.5%) had seen the advertisement.
- Project recall – was evaluated using focus groups (see below)
- Satisfaction with project message – was evaluated using focus groups (see below).

### Results from focus groups

See appendix 1 for a copy of focus group questions.

At this stage 2 focus groups have been run across the state. It is hoped that in the next couple of months more results will come in from focus groups.

Focus group 1: involved 5 mothers with babies less than 6 months, plus one grandmother.

(Note: it is unknown how many of this group were breastfeeding).

- Awareness of poster was low at only 2 out of 5 mothers being aware of the poster, and then it was not the same poster for 1 of these mothers.
- Poster message – this group was negative about the message content. Discussion revealed they thought that the poster would have only confirmed their decision to breastfeed, and they thought seeing the campaign would not have made a difference anyway in relation to their decision to breastfeed.
- Poster message – this group was also negative about the visual message / style of the poster. That is, didn't like the photograph ("the shape of the belly is odd"; "hated the clothes") and they didn't like the message. For example, they thought the word "succeed" was offensive to those who were not able to 'succeed' at breastfeeding.
- Ways to improve the poster. This group suggested removing the word "succeed" and emphasise that breastfeeding is a "learned art". They would also replace the photograph of the mothers stomach with a baby.
- Overall this group felt the poster increased the amount of guilt associated with not being able to breastfeed.

Focus group 2: involved 8 mothers with babies less than 6 months.

*"Planning to Breastfeeding" Project Evaluation and Report.*

- Most of this group were aware of a poster to promote breastfeeding, however, it was not explored if it was the Prepare to Succeed poster they were aware of. Most of the group, once shown the poster felt it had no impact on them.
- Poster message – this group was negative about the message content. Discussion revealed they thought the poster created guilt feelings for someone not able to breastfeed. The suggestion to change the message was to "Planning to breastfeed? We are here to help!"
- Poster message – this group was also negative about the visual message / style of the poster. That is, didn't like the photograph ("the image would be hard to live up to"). The comment was also made that the poster wasn't eye catching.
- Ways to improve the poster. This group suggested the message was offensive by implying that everyone can breastfeed as long as they work hard enough. The group suggested using a picture of a baby, or mother and baby discretely breastfeeding, instead.
- Finally the group made the comment that the poster campaign needed to be backed up with more support services.

### **Limitations of our evaluation results**

Due to resource limitations focus groups were only conducted on women who have babies and were at a point of deciding to breastfeed at some stage during the campaign. This means that we rely on recall data to assess the impact of the campaign material. Additionally, one or two people with negative experiences when trying to breastfeed could affect the opinions on others in the same focus groups.

Ideally, it would have been good to run a focus group early on in the campaign with women who had not yet had their babies, to determine the impact of the campaign message, however resources didn't allow for this.

### **Summary**

Statistics on visits to the ABA website showed that there about ½ of the Tasmanians who visited the ABA website during the campaign period had seen the poster, highlighting a positive impact from the campaign in being a promoting factor in use of the ABA website.

Although we are still awaiting results from more focus groups and there are limitations with the data collected, preliminary analysis shows that the poster message may have not been well received by some of our target group.

Recommendations have been made for future breastfeeding campaigns in Tasmania.

## RECOMMENDATIONS FOR FUTURE BREASTFEEDING PROMOTION STRATEGIES

- Dedicate resources to test the campaign message prior to development of materials, even if the campaign has shown success elsewhere.
- Build into the campaign resources to independently assess campaign message and reach. Also aim to assess change in attitudes by a pre and post intervention assessment. This would be approximately 20% of the budget devoted to evaluation.
- Evaluation should also occur with pregnant women, rather than women who have already had their babies, as this will ensure that the appropriate target group is evaluated.
- Random siting of posters on buses is recommended to limit the effect of 'habitual seat preferences' on poster exposure. (I.e. Posters confined to front section may limit exposure to elderly people).
- This poster message and visuals should continue to be tested, but at first preliminary evaluation, could be improved by changing the message to a more collaborative approach, and to use a different graphic, perhaps one involving a baby.

## REFERENCES

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<sup>1</sup> DCHS. Tasmanian Food and Nutrition Policy. 1994.

<sup>2</sup> SIGNAL (Strategic InterGovernmental Nutrition Alliance. Eat Well Australia. An Agenda for Action for Public Health Nutrition 2000-2010. 2000.

<sup>3</sup> Stickney B, Webb K. *Strategies to promote breastfeeding; An overview*. 1995. Health Promotion Branch, NSW Health.

<sup>4</sup> Colin Binns. Curtin University of WA. Personal Communication. 2002.

<sup>5</sup> Community Nutrition Unit, DHHS. Breastfeeding is OK in Public. Project Evaluation Report. 1998.