

A GUIDE FOR PUBLIC HEALTH ADVOCACY:

**Tools and Lessons Learned from Successful Infant
and Young Child Feeding Advocacy in Southeast Asia**



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Introduction

Nutrition Advocacy in Southeast Asia

Advocacy is an essential component of any strategy to improve public health at scale. Decisions made at the highest levels of parliaments and governments can make it easier—or harder—for people to live longer, healthier lives. But when the right national laws, policies and programmes are enacted, they can support sustainable shifts in behavior—especially when paired with implementation of social services, mass media and communications, and social mobilization.

Regardless of the issue or country, this work requires active involvement from public health advocates to make the case for change, and to provide expert consultation throughout the process. Decision-makers depend on this involvement to help ensure that the policies they enact are as strong, effective and equitable as possible.

Over the past several years, advocacy for stronger nutrition policies and programmes in countries throughout Southeast Asia region have yielded significant outcomes. The efforts were the result of coordinated action on the part of numerous actors who united their resources and expertise to execute a sustained advocacy strategy. Results have included:

- Increased investments in nutrition policies, institutions and programmes
- Strengthened national maternity protection legislation, including extending paid maternity leave, provisions for lactation spaces and breastfeeding breaks
- Stronger regulations on the marketing of infant formulas, to ensure that mothers receive the best and most accurate information about how to feed their children
- Country-level budget tracking exercises for nutrition, including costed national nutrition strategic plans and increased government finance for nutrition
- Stronger criteria for breastfeeding within national health system guidelines

Ultimately, advocacy is key to unlocking the full potential of any public health initiative. As shown by efforts in Southeast Asia, it can address gaps that can't always be addressed through other interventions. And in the case of maternal and child nutrition, advocacy can create permanent shifts that forever change the type of support and opportunity a family has to choose the best feeding practices.

About this Guide

This guide draws from lessons learned and best practices from a multi-year regional nutrition advocacy initiative in Southeast Asia. The effort was focused on improving infant and young child feeding (IYCF) policies specifically, but the results and lessons learned are relevant for a broad range of public health advocacy efforts.

The approach to advocacy followed a four-part Process for Policy Change (shown at right). The approach is methodical and iterative, while also adaptive. This guide uses the Process for Policy Change, as well as specific tools established by the initiative in Southeast Asia, to illustrate a number of universal best practices for developing and implementing advocacy strategies for any issue or context. Each section provides a high-level overview of the approach and activities undertaken, followed by reference materials that can be adapted by advocates working on similar efforts in public health. While many of those tools are specific to child nutrition, they can be replicated for other issues.

For more information on and to find any of the tools referenced throughout this guide, please visit: AliveandThrive.org/AdvocacyGuide.



Formative Advocacy Work

Defining Your Advocacy Goals



Advocates from Myanmar collaborate to develop a shared advocacy strategy

The very first step in developing an advocacy strategy is defining success. Advocates often focus on major wins, like the adoption of a new national law or policy. But advocacy is about more than legislative procedures. It's also about policy and programme strategy setting, budget allocations, implementation, and issue visibility to build momentum, understanding and urgency among target audiences. Regardless of the advocacy issue or goal, this work is about more than just organizing awareness events and activities; all engagement tactics should be specifically linked to a broader policy change strategy.

Goals and strategies will change according to unique barriers, political systems and social contexts in different countries. In Southeast Asia, examples of IYCF advocacy goals include:

- National laws and policies (including enactment, implementation and enforcement)
 - Expanding maternity entitlements, including paid maternity leave and workplace provisions including breastfeeding breaks and lactation rooms
 - Strengthening regulations on the marketing of breastmilk substitutes, including advertising, labeling and promotion in health systems (e.g. The International Code of Marketing of Breast-milk Substitutes)
- Health systems strengthening
 - Establishing hospital quality standards and accreditation systems that includes criteria for nutrition examination, counselling and treatment—for example, standardizing infant and young child feeding services and providing guidelines for implementation
 - Establishing budget guidance that requires the health budget to allocate a certain amount of funding to IYCF support in the health system
- Budget tracking, including the development of costed national nutrition strategic plans, and increasing public finance for nutrition
- Adoption of national strategies and action plans that provide guidance on public health system interventions, social and behavior change communications, advocacy, monitoring and surveillance
- Securing national commitments to global and regional movements and declarations, like joining the Scaling Up Nutrition Movement and/or the Zero Hunger Challenge

- Workplace interventions, including working directly with employers to make their workplaces safer, healthier and more worker-friendly

No matter the issue or country, advocacy goals should be carefully considered at the start of any strategy-setting process.

Planning Your Advocacy Strategy

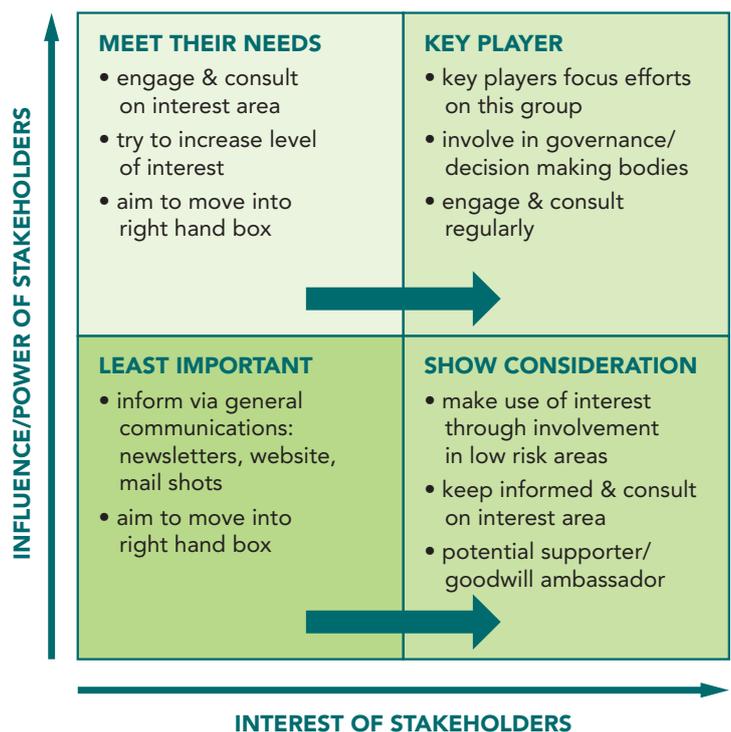
Advocacy relies on thoughtful and strategic planning to succeed, even while it is critical to take advantage of timely and sometimes unpredictable opportunities as they emerge.

The approach used for IYCF advocacy in Southeast Asia was methodical, comprehensive, and iterative. Early formative research informed goals and strategies. Stakeholders were engaged to support throughout the effort according to their unique assets and advantages. Early in the process, the evidence base was established to help articulate the need for stronger IYCF policies. This led to the development of messages and materials, and ultimately, a robust consensus-building process. All work was led and sustained largely by partnerships that spanned both governmental, multi-lateral and non-governmental organizations.

This “Process for Policy Change” continues to guide efforts today, and can be adapted to different advocacy issues and country contexts. This guide takes a detailed look at the four components of the process for policy change, and some of the tools that were instrumental in executing the work.

But even before the process for policy change can begin, a strategy must be developed and documented. To do that, a number of formative research and planning activities can be instrumental:

- **Issue landscape analysis** – This includes indicators and trends that illustrate the problem and the ultimate impact that will be addressed through advocacy (e.g. nutritional status, tobacco use rates, etc.) For nutrition, this can be informed by tools like the Global Nutrition Report and country-level data that is used to inform government decision-making.
- **Policy and advocacy desk reviews** – A rapid assessment of the current national laws, policies, strategies and action plans that govern nutrition programming, the challenges and bottlenecks faced in addressing gaps or rolling out policy plans at scale, and advocacy efforts undertaken to date.
- **Legal review of the policymaking process** – Understanding legislative and policymaking processes can be challenging, even when working in the same country or context for long periods of time. A legal review of the policymaking process can often be commissioned to



help identify key legislative procedures (e.g. how a bill becomes a law) and key advocacy targets (e.g. government and legislative committees).

- **Stakeholder mapping** – Stakeholder mapping is a process to identify key potential advocacy targets and partners, with a clear point of view about how they would be involved in or impacted by advocacy efforts. By measuring stakeholders according to their respective power and interest (Eden and Ackerman 1998), engagement strategies can be developed to increase each stakeholder’s respective impact on the advocacy process and outcomes. The more stakeholders that move into a position of high power and high interest on the issue, the stronger the stakeholder group is to deliver impact. But ultimately, a stakeholder map can clarify a path to strengthen partnerships overall. Even when the least impactful stakeholder—with limited interest and power—increases their interest and involvement, it adds volume to the coordinated effort of stakeholder raising a united voice.
- **Opinion leader assessments** – This is a qualitative research exercise undertaken directly with the target audience to identify:
 - Barriers to political and public support for the issue;
 - Identify possible solutions to these barriers;
 - Motivations in favor of supporting the issue; and
 - Channels of communication and points of engagement with opinion leaders, including potential issue champions.

This can require hiring an independent research agency to design and implement the project, including conducting interviews and focus groups with target audiences, analyzing key points and common themes, and developing a final report. Sometimes the organization conducting the work can be as influential as the outcome. For example, in some countries the research was conducted by an agency within the government (e.g. the National Institute of Public Health), which built commitment to the policies from a new champion within the government system.

The culmination of this formative work will be a clear point of view about the areas of greatest need and opportunity, along with a greater understanding of what is required to motivate target audiences to take action. These insights should be distilled into one consolidated advocacy strategy, which should include clearly identified advocacy goals, objectives and tactics, along with an accompanying budget and timeline. A more detailed work plan can identify specific activities with an identified lead implementing partner.

REFERENCE MATERIALS FOR PLANNING YOUR ADVOCACY STRATEGY ARE AVAILABLE AT [ALIVEANDTHRIVE.ORG/ADVOCACYGUIDE](https://www.aliveandthrive.org/advocacyguide)

- Sample IYCF Policy Desk Review (Timor Leste)
- Sample Stakeholder Analysis (Thailand)
- Sample Opinion Leader Research Summary (Lao PDR)
- Sample Legal review

Establishing and Sustaining Partnerships

It takes many committed individuals and organizations to undertake a successful advocacy effort—no one organization can do it alone. Potential partner organizations for any advocacy effort include:

- **Government** – Numerous offices, ministries and departments can be relevant to any one policy, and they should be identified at the outset of the process. For example, maternity protections can be influenced by the Ministry of Health and the Ministry of Labor, as well as the government body that manages insurance benefits. Start with a broad list of potential partners and then consolidate to those who are deemed most relevant through your stakeholder analysis.
- **Legislative bodies (e.g. Parliament, National Assembly)** – Legislative bodies are often the highest decision-making power for major national policy changes, and their members are a key audience for policy education efforts. Within these bodies are often committees dedicated to specific issues, such as social affairs, health, women and children. Legislative bodies also often have a specific unit dedicated to advising on policies, including researching and drafting legislation. It is important to work as closely with these units as possible throughout the advocacy process.
- **Multi-lateral and INGO partners** – Every country and issue has a different network of partners who are active on a given public health issue. UN agencies, including UNICEF and WHO, often play a critical role in convening partners and providing expert guidance on specific policy issues. Any INGO with the right mission and capacity to participate should be involved—and all partners should be engaged according to the comparative advantages and assets they bring to the work.
- **Local advocacy and non-traditional partners** – Local organizations with advocacy interest and capacity are also essential to build momentum and also to involve the voice of citizens in the advocacy process. These might include medical associations, women’s unions, labor unions, faith-based groups and beyond. They can be influential in opening doors to key government partners and contacts, and can also mobilize large groups and professional bodies to raise their voices in support of an issue. Sometimes, key decision-makers and champions are members of key associations and unions, and this can be another route to reach them with outreach tactics.
- **Regional and global advocacy platforms** – When appropriate, inter-governmental bodies can present additional opportunities to advocate and provide leadership with member countries. For example, the Association of Southeast Asian Nations is an organization of countries set up to promote cultural, economic and political development in the region. The Inter-Parliamentary Union (IPU) also served as an access point for country-level parliamentarians, with two different IPU meetings held in Hanoi and Laos.

Best practices for engaging partners include:

- **Develop MOUs and formal partnerships** – When multiple partners are fully committed to a long-term advocacy process, a memorandum of understanding (MOU) can be an effective way to formalize commitments at the outset. The MOU can outline the scope of the shared project and activities, key roles and responsibilities, and budget contributions (if relevant).
- **Identify an advocacy “moderator”** – Having one person or organization clearly defined in a leadership role can help ensure that the effort is well-coordinated. In Viet Nam, for example, the National Assembly’s Institute of Legislative Studies (ILS) has a legislated mandate to provide policy guidance to members of

the National Assembly. ILS took a lead role in providing counsel on proposed policies, and convened relevant government contacts in workshops and forums throughout the process.

- **Clearly define roles and responsibilities** – A clear division of responsibility for activities should be based on the comparative advantages within the partnership, including conducting research and establishing the evidence-base, conducting policy and legislative analyses, developing communications materials and engaging the media, liaising with relevant partners or legislative agencies, and building consensus through workshops and events.
- **Enlist government partners from the outset** – Though government decision-makers are ultimately a target of advocacy efforts, they can and should be engaged at the partnership level as soon as possible. Government co-sponsorship of events, participation in roundtable discussions, and broad input into advocacy activities will ensure that they are enrolled in the work and its goals early on.

STRATEGIC PARTNERSHIPS: RAPID ASSESSMENT		
Partner	WHY are they relevant to the advocacy goal? What decision-making authority, resources or expertise do they bring?	WHO and HOW can they be engaged? What individuals or organizations are able to influence this partner? How are they most likely to respond to information?
Government Partners		
Non-governmental Partners (e.g. NGOs, multi-laterals)		
Non-traditional Partners (e.g. medical, religious, women’s associations)		

REFERENCE MATERIALS FOR ESTABLISHING AND SUSTAINING PARTNERSHIPS ARE AVAILABLE AT ALIVEANDTHRIVE.ORG/ADVOCACYGUIDE

- Partnering with Women’s Associations to Advocate for Stronger Infant and Young Child Feeding Policies and Programs: Lessons Learned from Alive & Thrive
- Engaging Medical Associations to Support Optimal Infant and Young Child Feeding: Lessons Learned from Alive & Thrive

Developing the Evidence Base



David Clark from UNICEF HQ presents on the latest evidence and best practices in advocacy for maternity entitlements

Decision-making demands evidence that establishes the need and urgency of the issue—and the proof that a given intervention will be effective. In public health advocacy, the evidence base may be scientific, economic, sociocultural or original research to make the case for very specific points. Ultimately, it's essential that the evidence respond to decision-making needs.

Scientific evidence establishes the health problem, identifies the solution and makes the case for prioritizing the issue. For example, scientific evidence clearly establishes the role that IYCF plays in child nutrition; the causes and consequences of poor nutrition on life-long health and productivity; the greater impact on a country's social and economic development; and the role that national policies play in improving nutrition outcomes. This information can be gathered through desk research and literature reviews. Always aim to use the most recent available evidence, as well as the most credible source, when developing citations.

Economic data and information is a key driver of decision-making at the policymaker level—both the cost to undertake a policy change and the potential return on investment. For example, economic research has clearly established the financial costs of poor nutrition and feeding practices on individuals, families and nations. International costing data helped understand the net impact to a nation's GDP from poor nutrition. Evidence also helps establish the overall cost burden to health care systems from addressing severe acute malnutrition, and the cost to families from purchasing breastmilk substitutes. When economic data is not readily available, consider engaging a health economist to conduct original research on a given topic.

Sociocultural evidence establishes the current landscape for a given health behavior, or helps make the case that a policy shift can help address a health behavior in a specific context. For example, many Southeast Asian countries make effective use of the Demographic Health Survey, alongside national surveillance systems, to understand the current scope of poor child feeding practices and to identify those that need the greatest attention through policy support. Data can include health characteristics at the sub-national level, including child nutrition status (stunting, wasting, underweight), IYCF status (exclusive breastfeeding,

Global Evidence for Nutrition

- *The Lancet Breastfeeding Series*
- *The Lancet Maternal and Child Nutrition Series*
- *The Global Nutrition Report*
- *The Cost of Not Breastfeeding (regional)*

complementary feeding), health structure (number of hospitals, health workers), and maternal health status (anthropometry, iron consumption).

Original empirical research can also help build the case for very specific claims or points. Examples includes media scans, which can help capture the marketing and promotion of formula products that fall under marketing restrictions. This kind of research is especially critical to making the case with policymakers that specific programs can be successfully implemented in their own country. In Viet Nam, for example, workplace lactation programs were developed to help businesses create time, space and support for breastfeeding. The successful workplace model helped address policymaker concerns about their viability in Viet Nam, and made the case for including more protections in national laws and policies.

MATERNITY LEAVE: ORIGINAL RESEARCH CONDUCTED IN VIET NAM

Economic data: One of policymakers' most important questions was whether the Viet Nam Social Insurance could afford to expand paid coverage by two months for all mothers. When research revealed that extending paid leave was affordable, it was a major turning point in policy discussions.

Sociocultural evidence: The Viet Nam General Confederation for Labor led research to understand employer and employee attitudes toward six-month paid maternity leave. Results showed that 83 percent of mothers cited returning to work as a key barrier to breastfeeding. 92 percent of employers understood the importance of breastfeeding, and 73 percent supported longer paid maternity leave. The data helped policymakers quantify the demand for greater maternity leave, and its potential to impact breastfeeding practices, while also ensuring that the voice of the people most affected by the current and proposed policies were included in the policymaking process.

Checklist of IYCF Evidence Base

FORMATIVE RESEARCH

- ✓ Issue landscape and health indicators research
- ✓ Opinion leader research
- ✓ Desk review of national policies
- ✓ Country legal review of legislative processes

SCIENTIFIC RESEARCH

- ✓ Impacts of poor nutrition on health, social and economic outcomes
- ✓ Benefits of breastmilk on individual health and development
- ✓ Impacts of pro-IYCF policies and programmes on health

ECONOMIC RESEARCH

- ✓ Cost of Not Breastfeeding research (on individuals and countries)
- ✓ Economic impact of poor nutrition on individual earnings, productivity
- ✓ Economic impact of poor nutrition on national GDP
- ✓ Economic costs to health system for treating malnutrition
- ✓ Cost of formula feeding to families

SOCIOCULTURAL RESEARCH

- ✓ Child nutrition surveillance data (stunting, wasting, anemia, etc.)
- ✓ Comparative data between geographies (countries, provinces, etc.)

ORIGINAL AND EMPIRICAL RESEARCH TO MAKE THE CASE FOR SPECIFIC POLICIES

- ✓ Modeling and pilot activities to demonstrate viability of an intervention in a specific country or context
- ✓ Research on employer and employee attitudes toward longer paid maternity leave
- ✓ Monitoring research on the promotion of breastmilk substitutes in the healthcare settings, commercial settings, and the media

REFERENCE MATERIALS TO HELP GENERATE THE EVIDENCE BASE ARE AVAILABLE AT [ALIVEANDTHRIVE.ORG/ADVOCACYGUIDE](https://www.aliveandthrive.org/advocacyguide):

- Sample IYCF National Surveillance Data (Viet Nam)
- Sample Media Scan (Myanmar)
- Sample Social Insurance Costing Study Brief (Viet Nam)
- Sample Social Insurance Costing Study Presentation (Viet Nam)
- The Cost of Not Breastfeeding in Southeast Asia
- Sample BMS Code Monitoring Report (Viet Nam)
- Sample Study on the Breastfeeding Practices of Female Laborers (Viet Nam)

Creating Compelling Messages and Materials

Data and information is essential, but framing an issue is crucial to winning the hearts and minds of decision-makers. It's about delivering the evidence with compelling and emotional messages that appeal to the specific values and priorities of target audiences. Ultimately, this work is about adding some creativity to messages in order to ensure they are heard and remembered, and ultimately, repeated.

Examples of message frames from nutrition advocacy in Southeast Asia include:

- **Investing in human resources and human capital development** – Leaders understand the relationship between developing a healthy workforce and the growth of their country's economy. Rather than focusing only on the impacts on one individual, messages can demonstrate how individual health outcomes can limit the potential of an entire workforce and thus an entire nation.
- **Reinforcing civic, religious or cultural themes** – Referencing cultural themes, famous leaders and admired thinkers can take messages that apply to anyone and make them more relevant for specific audiences. For example, in countries with large Muslim populations, messages can reference how breastfeeding is encouraged in the Quran. Alternately, in Viet Nam, Ho Chi Minh remains a strong national and cultural icon. Because maternity leave was extended to six

Sample Message: Maternity Leave as a Smart Investment

"Most women in Viet Nam spend 30 to 35 years of their lives working and on average a woman has one or two children. Providing mothers 6 to 12 months off from their 30 years of working is an intelligent investment in the health and well-being of 50 percent of our nation's current workforce and 100 percent of our nation's future workforce."

months while he led the nation, the policy was made more compelling when put in the context of his leadership.

- **Using rights-based messaging** – In many countries, the Convention on the Rights of the Child is a signature document to guide policy-making decisions. The convention specifically calls out breastfeeding as a child’s inherent right, rather than a subjective decision. By putting messages in a rights-based frame, it shifts the conversation from what children “could have” to what they “must have.”
- **Referencing global commitments** – Most nations have made specific commitments to global instruments and commitments, such as World Health Assembly Resolutions and the Sustainable Development Goals. Adopting stronger national public health policies can demonstrate real dedication and a clear path to achieving those commitments—and messaging and materials should be framed accordingly.
- **Reinforcing growth and leadership status** – As countries grow and achieve stronger economic status, poor nutrition can be framed as a potential barrier to continued health, social, and economic development success.

Quick Tip:

Remember that communications tools are often developed by international organizations in ways that can be easily adapted by local actors. Start by researching existing presentations or policy briefs that can be adapted to more specific needs.

With a common set of messages in place, materials can be developed for distribution at partner meetings, workshops, and legislative briefings. Co-branding materials with the logos of relevant partners—and whenever possible, the government—is critical to demonstrating credibility and a unified voice. Materials may include:

- **Policy briefs** – Ideally no more than four pages long, a policy brief can summarize the evidence on one very specific topic in a concise and accessible way, especially for policy makers with limited time.
- **Q&A documents** – Lengthier than a policy brief, an in-depth Q&A can provide a summary of the policy issue by answering common questions that have arisen during the consensus building process.
- **Research reports and summaries** – When original research has been undertaken, a published report or summary can demonstrate the credibility of the research and its key findings.
- **PowerPoint presentations** – Inevitably, advocacy requires giving presentation to both large groups and smaller roundtables of key decision-makers. PowerPoints should be just as thoughtful and engaging as other materials, with ample graphics, limited text and consistent formatting to ensure the information is communicated as clearly as possible.
- **Social media toolkits** – Developing ready-to-use content for advocates to use throughout their efforts, and specifically during key moments and events, can be an effective way to build urgency and visibility. Toolkits should include sample posts and tweets, and shareable graphics that deliver the information in a visually compelling way.

BEST PRACTICES FOR DEVELOPING COMPELLING MESSAGES AND MATERIALS: ENGAGING THE MEDIA

Media engagement is a critical to generate visibility for issues that require greater attention and a sense of urgency. But rather than inviting reporters to the occasional event, they should be more deeply and consistently engaged. Examples of media engagement ideas include:

- **Journalist trainings** – hosting half-day workshops to provide a foundation of information on the public health issue, its urgency and its impact
- **Media fellowships and award programs** – providing funding and support to journalists to participate in a long-term program to conduct deeper investigation on an issue with the understanding that a certain number of news items will result
- **Study circles** – two-hour sessions to explore a specific sub-topic more deeply

When journalists are engaged in a two-way partnership that is designed to generate more effective stories, their reporting becomes more effective and they are more likely to participate when important events (e.g. World Breastfeeding Week) are being held.

REFERENCE MATERIALS FOR CREATING COMPELLING MESSAGES AND MATERIALS ARE AVAILABLE AT ALIVEANDTHRIVE.ORG/ADVOCACYGUIDE:

- Sample Policy Brief: Extending Paid Maternity Leave
- Sample Policy Brief: Strengthening the Code of Marketing of Breastmilk Substitutes
- Sample Policy Brief: The Benefits of Breastmilk vs. Breastmilk Substitutes
- The Power of Nutrition (video and Infographic)
- Sample Social Media Toolkit (World Breastfeeding Week 2016)
- Maternity Leave Advocacy Booklet (Viet Nam)
- Engaging the Media: A practical guide to meeting child nutrition advocacy goals through working with journalists



Indonesian Minister of Health Ibu Nila Moeloek receives a copy of the Lancet series from Dr. Susan Horton

Building Consensus

Building consensus requires both thoughtful engagement and the stamina to address the evolving information needs of key decision makers as they consider taking action. Consensus is typically built over the course of multiple engagements that give advocates the opportunity to present information and address questions.

Consensus building relies heavily on a collaborative process among partners to organize and execute advocacy meetings and events that drive knowledge, awareness, and eventually action. Ultimately, this work is about creating a steady drumbeat of information and visibility for key issues, using a variety of different forums and formats, so that audiences feel the issue's momentum and have the information they need to act.

Potential consensus-building activities include:

- **Workshops, meetings and desk-side briefings** – Workshops and meetings allow decision-makers to review the evidence base, engage in debate, and generate questions that need to be answered before action can be taken. Whenever possible, they should be co-sponsored with government participation. Desk-side briefings are one-on-one opportunities to meet with key decision-makers, with the potential to engage that individual more directly in efforts as a champion. Both formats are opportunities to deliver policy briefs and other materials that audiences can keep for more in-depth review.
- **Research report launches** – When original research is conducted, the results should be packaged into a professional report that can be disseminated. With participation from the primary investigators or researchers, the research can then be formally launched with target audiences at a dissemination workshop. A broad audience of stakeholders and target decision-makers should be invited to participate.
- **Scientific workshops** – When it comes to public health issues, medical practitioners themselves can sometimes like critical information to guide their own practices. Hosting scientific or medical workshops with keynote presentations by recognized experts, and supported by further visibility through earned social media, can be an important opportunity to engage with audiences.

Snapshot: Scientific Workshops on IYCF in Viet Nam

Doctors' practices and lack of commitment to WHO recommendations on child feeding are a barrier to exclusive breastfeeding in Viet Nam. To close gaps in both knowledge and practice, the Ministry of Health and key stakeholders hosted two scientific workshops on IYCF, with more than 200 participants in attendance. The workshops featured two international experts on child feeding, who presented the latest evidence and research on the short- and long-term benefits of optimal IYCF and the risks associated with sub-optimal feeding practices. An 'IYCF Pledge' asked participants to commit to not promoting breastmilk substitutes—unless medically necessary. Each medical association formally signed the pledge at a follow-up meeting to the workshop.

Best practices for making your consensus building efforts and events as impactful as possible include:

- **Find the right message—and the right messenger.** One of the most essential components of building consensus is identifying spokespeople that will capture the attention of target audiences, whether because they are well-known or because they are effective at delivering compelling presentations.
- **Provide spokesperson and champion trainings.** One of the most effective ways to ensure spokespeople deliver impactful presentations is to provide them with support to do so. Agenda items can include a review of key messages and talking points on the issue; how to address tough questions; and technical skills for strong delivery both on-camera and with in-person audiences.
- **Amplify with earned and social media.** Many events, even those with smaller audiences, can present an opportunity to broadcast information to larger audiences. Consider distributing a press release and inviting journalists to participate in any event that may have a newsworthy angle, especially if there is participation from high-profile individuals. Sharing key outcomes and even photographs by social media can also be an effective way to reach more people, more quickly.
- **Be opportunistic.** Ultimately, it is essential to be opportunistic throughout the process for policy change and consensus building in particular. New information emerges regularly, unpredictable events drive interest in specific issues, and windows for more direct policy dialogue and engagement can appear—even if only briefly. This approach is intended to be adaptable, to take advantages of new opportunities as they arise and prioritize activities accordingly.

REFERENCE MATERIALS FOR BUILDING CONSENSUS ARE AVAILABLE AT ALIVEANDTHRIVE.ORG/ADVOCACYGUIDE:

- The Cost of Not Breastfeeding in Southeast Asia – Presentation
- *The Lancet* Breastfeeding Series: Why invest, and what will it take to improve breastfeeding practices? – Presentation
- *The Lancet* Breastfeeding Series: Why invest, and what will it take to improve breastfeeding practices? – Presentation
- Breastfeeding: A Key to Sustainable Development – Presentation

Conclusion

THE IMPORTANCE OF ADVOCACY FROM THE PERSPECTIVE OF A GOVERNMENT PARTNER



Truong Quoc Hung

Truong Quoc Hung serves as the Assistant to the President of the Viet Nam National Assembly's Institute for Legislative Studies (ILS)—the nation's leading center for policy research, information and analysis. Hung was enlisted to help develop legislation to extend paid maternity leave in Viet Nam from four to six months, and to update restrictions on the marketing of breastmilk substitutes in the Advertisement Law.

Though it was a professional obligation to review and analyze the two bills, Hung acknowledges that it was personal experience that initially helped him understand their importance. After his first son was born, Hung's wife had to return to work after only four months of maternity leave, and as a result, discontinued exclusive breastfeeding. At that time, the new parents thought they were using the best formula available. As he says, "I had studied a lot about how to feed a newborn baby—but I still believed the formula companies, and thought formula could be a substitute for breastmilk."

By the time their second son was born, Hung's wife had spent two years saving annual leave so she could stay home to take care of the baby for only one more month—for a total of five months. Hung's experience with his own family ignited his passion to advocate for extended paid maternity leave and expanded restrictions on the marketing of breastmilk substitutes.

Reflecting on the multi-year policy process, Hung emphasized the importance of evidence. Well-documented data and information gave the National Assembly confidence that they were making "scientific, objective and evidence-based decisions about how to amend the Labor Code, and the Law on Advertisement."

Questions and concerns raised about the two laws were extensive. Would longer maternity leave actually support breastfeeding, and could it potentially hurt women in the workplace by causing employers to give preferential treatment to men? Was the Social Insurance Fund even able to cover the cost of two months of additional leave?

Questions about the Advertisement Law included concerns that restricting the advertising of breastmilk substitute products up to 24 months was a potential violation of international trade law or regulations. There were also concerns that there would be direct economic harm to producers and traders.

Underlying these discussions was a fundamental lack of understanding about the role that breastfeeding plays in a child's health and development—and the social and economic success of an entire nation.

The process was iterative. Every time new questions arose, governmental and non-governmental partners helped find the answers. Hung credits this process, guided by dozens of workshops to build consensus around key points, in changing minds and votes. He highlights several strategies that helped shape the discussion of each law.

Building support for maternity leave required:

- Demonstrating the challenges mothers face in providing optimal nutrition for their infants when they return to work.
- Conducting original research to show that employers will support and implement maternity leave when they understand the benefits to individuals and to their workforce.
- Demonstrating that the Social Insurance Fund had sufficient resources to cover increased costs.

Building support for the Advertisement Law required:

- Debunking the myth that restricting advertising would violate international trade law or regulations.
- Demonstrating the impact of unethical advertisements on reducing breastfeeding.
- Highlighting formula companies' marketing expenditures in Viet Nam, compared with the amount spent to promote breastfeeding.
- Showing that restricting advertising of breastmilk substitutes reduces their use, and promotes breastfeeding.

Over time, the National Assembly members grew to understand the challenges mothers face when making decisions about how to feed their child. They responded to the argument that these policies could help level the playing field and ensure that families are able to give their children the best possible nutrition. Ultimately, they voted overwhelmingly to extend maternity leave and expand advertising restrictions on breastmilk substitutes.

Hung sees a brighter future for Viet Nam as a result of these policy changes. In addition to improving the health and development of future generations, he believes the changes in maternity leave will benefit babies, mothers, employers and the general public. Women will not have to lose pay to practice six months of exclusive breastfeeding. Healthier babies will mean fewer days of missed work, and a more stable and loyal workforce. And thanks to the Advertisement Law, the public will have access to better and more accurate information about infant and young child feeding.

Hung extends his thanks to all the partners involved in passing these two laws—and especially to the leaders of the National Assembly who he believes made the right decision for Viet Nam. "I think this story has a very happy ending and a meaningful result.... This is a success for not only Vietnamese mothers and babies, but also the nation as a whole."