

# **Funding & Resources Gear**

Key question: Is there adequate funding and other resources to scale up breastfeeding programs and interventions?

## **Background**

Scaling-up breastfeeding programs requires adequate funding and other resources. The Breastfeeding Gear Model (BFGM) posits that, as breastfeeding legislation and policy is adopted, this should generate the allotment of adequate funding and resources to support implementation of those policies. Funding strategies that demonstrate country-level commitment to scaling up breastfeeding programs can include: specifying line-item funding for breastfeeding policies and programs in national budgets, ensuring funding is adequate for breastfeeding programs, and provide a formal mechanism to publicly fund maternity entitlements. Funding of human resources to support breastfeeding programs and initiatives is also a key step to ensuring breastfeeding legislation and policies are implemented at the national, subnational and local levels.

#### Themes and Benchmarks

Benchmarks for this gear assess the availability and adequacy of country-level funding and other resources necessary to scale up national breastfeeding programs and initiatives. There is one theme for this gear entitled, Government Budgetary Commitment. This theme is assessed by four benchmarks. <u>All benchmarks reference "the past year" unless otherwise</u> noted.

### 1. Government Budgetary Commitment Theme

<u>Benchmark FRG1:</u> There is a national budget line(s) for breastfeeding protection, promotion and support activities.

**Description:** This benchmark examines the presence or absence of a budget line(s) in the national budget specifically designating funds for breastfeeding scaling up activities. **Annex** 2 describes the items that should be covered in the budget through individual line item designations.



*Example:* In the US, the President's Budget for Fiscal Year 2017 includes funding of \$8 million for the Centers for Disease Control (CDC) Baby-Friendly Hospitals/Breastfeeding programs.

**Possible data sources:** Interviews with national level government officials, especially within the health sector or infant/young child feeding area, may reveal the existence of a budget line for breastfeeding protection, promotion and support activities. Examining the budget for this budget line as well as additional line items from **Annex 2** is essential to being able to score this benchmark.

How to score: The scoring for this benchmark specifies the existence of a budget line item specifically for breastfeeding protection, promotion and support activities in the national budget. If there is a budget line(s) item, the scoring accounts for the inclusion of specific breastfeeding activities funded by the national budget.

<b>No progress</b> has been made if there is no line in the national budget for breastfeeding protection, promotion and support activities.
Minimal progress has been made if there is a national budget line(s) for breastfeeding protection, promotion and support activities but it does not include more than two items in Annex 2.
Partial progress has been made if there is a national budget line(s) for breastfeeding protection, promotion and support activities and it does include most line items in Annex 2.
<b>Major progress</b> has been made if there is a national budget line(s) for breastfeeding protection, promotion and support activities and it includes all items in <b>Annex 2</b> .

<u>Benchmark FRG2:</u> The budget is adequate for breastfeeding protection, promotion and support activities.

**Description:** This benchmark is based on the existence of a line in the national budget for breastfeeding protection, promotion, and support activities. This benchmark relies on the assessment of the amount of national funding set aside for scaling up breastfeeding protection, promotion, and support activities (see **Annex 2**) as being adequate or inadequate.

**Possible data sources:** Interviews with national level government officials, especially within the health sector or infant/young child feeding area, may reveal the existence of a budget line for breastfeeding protection, promotion, and support activities. Examining the budget (and the budget items if available) for the amounts set aside for breastfeeding protection, promotion, and support activities will be essential to being able to score this benchmark.



How to score: The scoring for this benchmark reflects existence of a line in the national budget for breastfeeding protection, promotion, and support activities as well as the adequacy and coverage of budget for key breastfeeding scaling up activities. Adequate means that the funding is sufficient to cover the key components of the breastfeeding protection, promotion and support activities at the national, subnational and local levels.

	No progress has been made if there is no line in the national budget for breastfeeding
	protection, promotion and support activities.
	<b>Minimal progress</b> has been made if there is a national budget line(s) for breastfeeding protection, promotion and support activities or there is not a specific budget line but
	funding is provided for breastfeeding resources and it is adequate to cover some but
	not the great majority of the activities in Annex 2 at the national level.
	Partial progress has been made if there is a national budget line(s) for breastfeeding protection, promotion and support activities or there is not a specific budget line but
	funding is provided for breastfeeding resources and it is adequate to cover all of the activities in Annex 2 at the national level.
	<b>Major progress</b> has been made if there is a national budget line(s) for breastfeeding protection, promotion and support activities and it is adequate to cover all activities in Annex 2 at the national level.

<u>Benchmark FRG3:</u> There is at least one fully funded government position to primarily work on breastfeeding protection, promotion and support at the national level.

*Description:* This benchmark assesses if there is there is at least one fully funded government position to primarily work on breastfeeding protection, promotion and support at the national level. This position has to be a government funded position for 100% of a person's time. The position description for that person should specify that at least 75% of that person's time must be spent working on breastfeeding protection, promotion and support activities specific to each country. That person should be at the supervisor or higher level and have the authority/ability to manage the coordination and implementation of substantive breastfeeding protection, promotion and support activities at the national level.

*Example:* In Brazil, the Coordinator of Breastfeeding and the Child Health Technical Office (within the Ministry of Health) is a completely government funded position. The primary focus of the position is to promote breastfeeding, complementary feeding, and health for children under 9 years old in the whole country, including States and municipalities.

**Possible data sources:** Interviews with national level government officials, especially within the health sector or infant/young child feeding area, may reveal the existence of a



government position dedicated primarily to breastfeeding protection, promotion and support work at the national level. If this position exists, a detailed interview with the person in the position would assess the duties and percent time of this position. Additional resources can include looking at the position description used for hiring and examination of the budget to see if and at what level this position is funded.

*How to score:* The scoring for this benchmark reflects the existence of this position, the level of funding of the position, as well as the level of focus of the position on breastfeeding.

•	No progress has been made if there is no government funded position to primarily
	work (i.e. 75% of time) on breastfeeding protection, promotion and support.
	Minimal progress if there is at least one government funded position to work on
	breastfeeding protection, promotion and support but it is not fully funded and the
	focus is not primarily breastfeeding.
	Partial progress has been made if there is at least one government funded position to work on breastfeeding protection, promotion and support and it is fully funded or the
	focus is primarily breastfeeding.
	Major progress has been made if there is at least one government funded position to
	work on breastfeeding protection, promotion and support and it is fully funded and
	the focus is primarily breastfeeding.

<u>Benchmark FRG4:</u> There is a formal mechanism through which maternity entitlements are funded using public sector funds.

**Description:** This benchmark assesses whether there is a formal mechanism that funds maternity entitlements using public funds. A *formal mechanism* refers to a designated entity or process by which funds are earmarked for maternity entitlements. *Maternity entitlements* refer to legislated government programs that provide benefits to pregnant and breastfeeding women.

#### **Examples:**

• The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a US based federally funded national program that provides assistance to nutritionally at-risk pregnant and breastfeeding women as well as children up to 5 years of age. Unlike entitlement funded programs, WIC relies on discretionary funds being appropriated annually by Congress. Thus each year, Congress decides whether it will fund WIC and if so, by how much. In contrast, an entitlement program must be funded completely by public funds; thus it must fund as many individuals as meet the eligibility criteria. The number of individuals that are eligible for an entitlement



program may fluctuate each year but under the legislation, the government is required to provide the funds needed for the program benefits. Since the WIC program is not an entitlement program, major progress hasn't been made within the US regarding this benchmark.

• The Austrian maternity benefit system is funded at 70% from the Family Burdens Equalisation Fund (financed by contributions from employers- 4.5% of their salary bill and from general taxes) and 30% from public health insurance.

**Possible data sources:** Interviews with national level government officials, especially within the health sector or infant/young child feeding area, may reveal the existence of a formal mechanism through which maternity entitlements are funded using public sector funds. Government reports, budgets, and policies should also be key resources to determine if this mechanism exists and the level of coverage it reaches.

**How to score:** The scoring for this benchmark reflects the existence and coverage of a formal mechanism through which maternity entitlements are funded using public funds.

	No progress has been made if there is no formal mechanism through which maternity
	entitlements are funded using public sector funds.
	Minimal progress has been made if there is a formal mechanism through which
	maternity entitlements are funded using public sector funds but the national coverage
	is minimal (i.e. less than 50% coverage nationally).
	Partial progress has been made if there is a formal mechanism through which
	maternity entitlements are funded using public sector funds with partial (i.e. 50%)
	national coverage.
	Major progress has been made if there is a formal mechanism through which
	maternity entitlements are funded using public sector funds with full national
	coverage.