

‘Bump to Breast’ Breastfeeding Support Group

Summary Report January 2024

University of Essex, ABSS Programme Evaluation

Authors: Dr Aaron Wyllie, Dr Kathryn Chard, Sanjaya Aryal,
Liliane Silva

Publication date: 22 January 2024

Version:1.6

1. Project overview

This document is a summary of findings from the formative evaluation undertaken by the research and evaluation team at the University of Essex. The report presents thematised findings from four rounds of evaluation reports. It covers the time period from the 1st of October 2020 to the 30th of September 2023. The purpose of this summary report is to provide a snapshot view of the project's journey through key qualitative and quantitative insights and its impact on beneficiaries' lives. This report integrates analysis of Key Performance Indicators (KPI), interview and survey data across all previous reports and including the current period.

Bump to Breast began delivery of its services in 2018. The project aims to increase both initial uptake and continuation of breastfeeding rates in ABSS wards. The project is a group-based breastfeeding service which provides both antenatal and post-natal support. The target cohort for the groups are mothers deemed to be at risk of not starting breastfeeding and/or continuing to breastfeed. The service is available to all mothers within the ABSS wards, with particular focus on those seeking ongoing breastfeeding support and advice, including referrals to appropriate services, as necessary.

The main objectives of the Bump to Breast service are to:

- Support more mothers to initiate and sustain breastfeeding to at least 6 months and beyond in Southend.
- Support more mothers with the knowledge and confidence to initiate and sustain breastfeeding, especially amongst those from hard-to-reach populations.
- Facilitate environments supportive of breastfeeding families within the community.
- Working towards long-term continuity and sustainability, the project also trains mothers to become peer breastfeeding supporters. Volunteers undertake a 10-week training course

2. Project's impact snapshot

Our qualitative and quantitative evaluation data highlights several areas of significant impact for the Bump to Breast project over the course of its inclusion within our evaluation. Taken together, our evaluation has demonstrated that the Bump to Breast support group has nurtured a supportive community characterised by strong social connections and peer support for women wishing to sustain breastfeeding.

Our findings suggest that the project is meeting its aim to foster an environment that is supportive of breastfeeding, and through this, is improving breastfeeding knowledge and confidence. Moreover, the project has been effective in its outreach activities through facilitating social events and infant feeding information sessions. As with the one-to-one breastfeeding support service, evidence from our evaluation highlights the important role that community-based services can have in supporting the initiation and maintenance of breastfeeding. Distinctly, our evaluation of Bump to Breast highlights how peer support and supportive social environments can work conjunctively with specialist input, advice and education to sustain breastfeeding and build confidence.

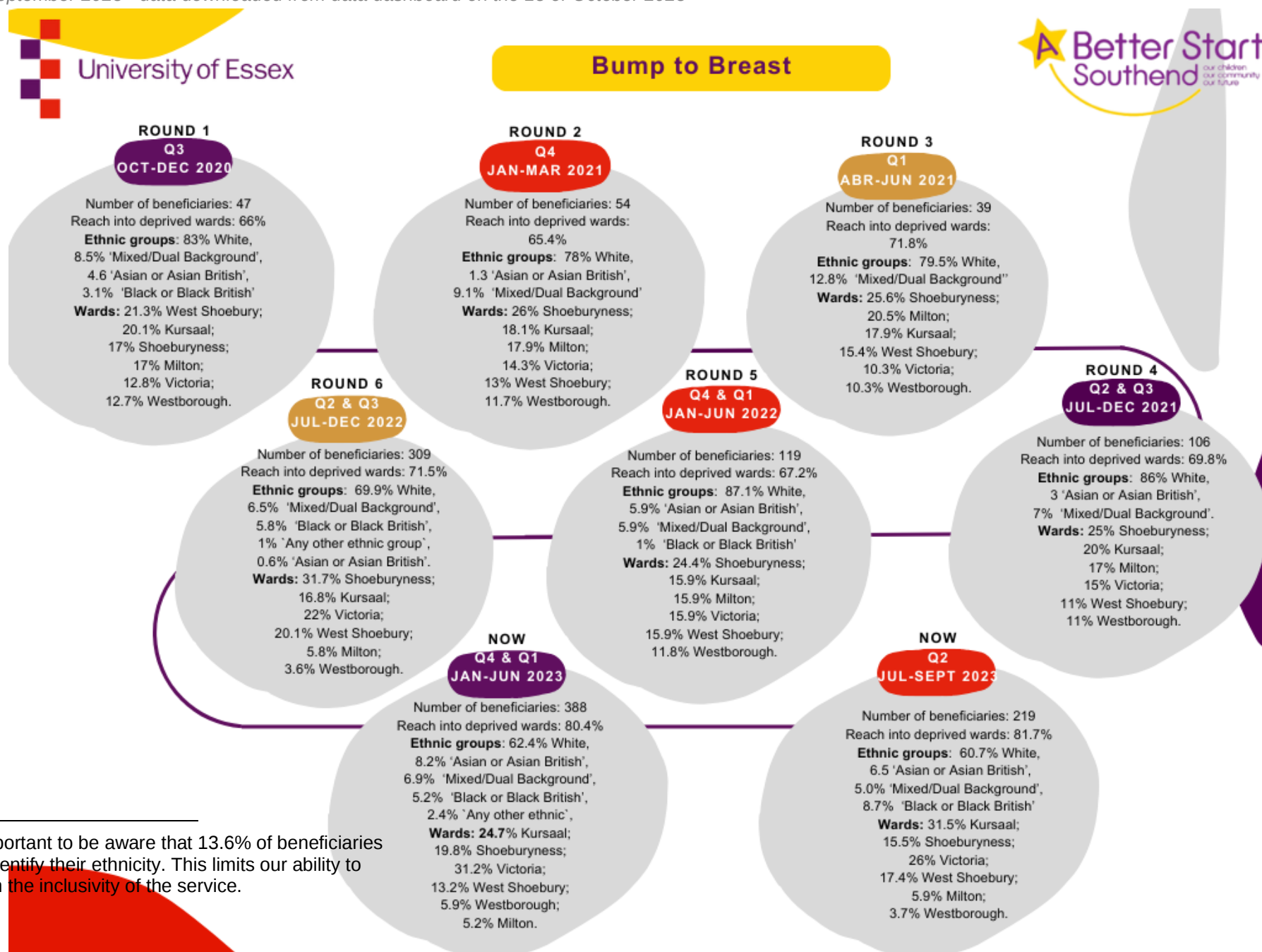
The graphics overleaf provide a high-level visual overview of the journey of the Bump to Breast project over the period of their inclusion within our evaluation across three key areas:

- **Figure 1: Beneficiary¹ engagement and reach**, comprising total number of beneficiaries, beneficiary ethnicity, and reach of the project into wards of higher deprivation. This figure visualises the change over time by tracing each of these data points across each of the project reporting periods.
- **Figure 2: Performance against target outcomes**, comprising percentage achievement against established targets for the project, within and across each of the reporting periods of the project's inclusion in our evaluation.
- **Figure 3: Qualitative interview data**, comprising representative accounts from qualitative interviews with beneficiaries undertaken over the period of evaluation, linked with the project outcomes areas established for all ABSS Southend projects.

A deeper analysis of each of these elements is included within this report, however, these graphics capture key details which illustrate the journey of the project across the period of their involvement in our evaluation.

¹ A beneficiary is defined as a child under the age of four or a pregnant mother. Where we describe beneficiary reach, we are referring to the child, and not the breastfeeding mother (unless they are pregnant). Breastfeeding mothers are therefore project participants and not beneficiaries of the service.

Figure 1. Summary of number of beneficiaries, project's reach into deprived wards, beneficiaries' ethnic groups and wards around the six reporting rounds – 1st October 2020 to 30th September 2023 - data downloaded from data dashboard on the 13 of October 2023²



² It is important to be aware that 13.6% of beneficiaries do not identify their ethnicity. This limits our ability to report on the inclusivity of the service.

Figure 2. Summary of project's targets and actual performance – 1st October 2020 to 30st September 2023 – Self-monitoring pack data provided on the 10 of October 2023³

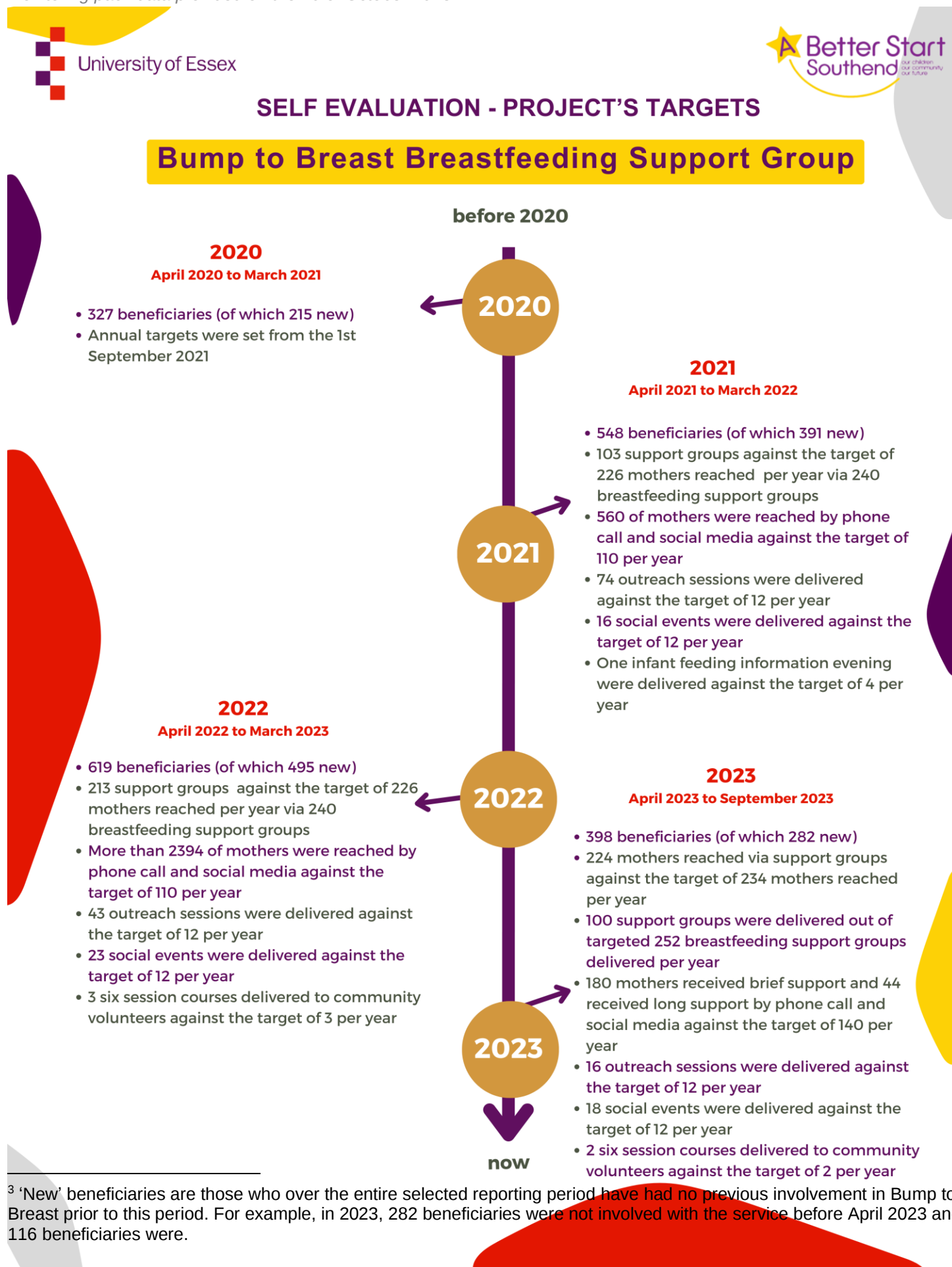
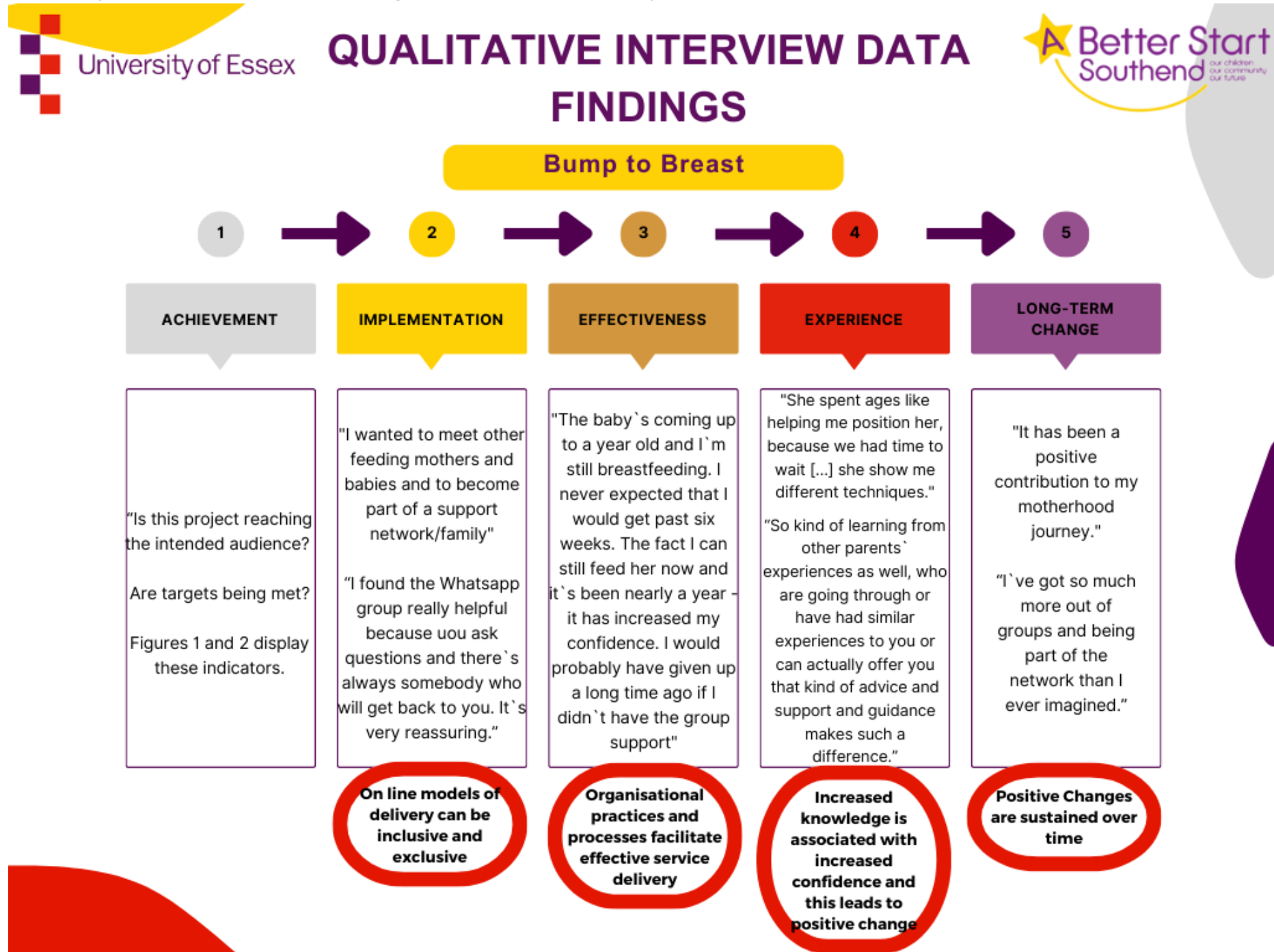


Figure 3. Summary of semi-structured interviews findings – 1st October 2020 to 30st September 2023.



3. Project impact (1st of October 2020 to 31st of September 2023)

The remainder of this summary report provides an overview of project impact, drawing from KPI, online survey and interview data. Analysis of findings is reported on in relation to the five aspects of ABSS services (outlined in figure three above). Findings are based on 137 survey responses to the University of Essex evaluation survey, and eight one-to-one semi-structured qualitative interviews, six with beneficiaries and two project staff members, collected by the University of Essex research and evaluation team between October 2020 and September 2023.

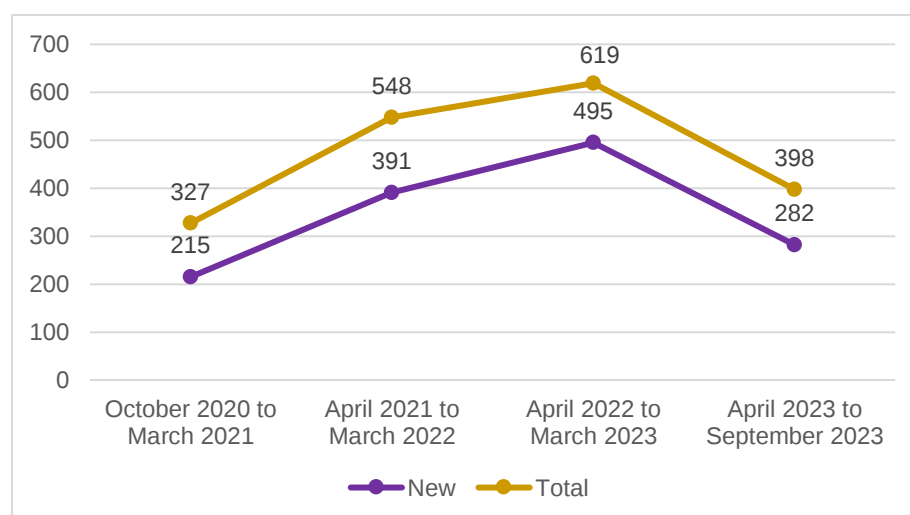
3.1 Achievement: Is the Project reaching the intended audience? Are targets being met?

The Dashboard data and the project's self-monitoring data are used to evaluate this aspect of ABSS services. These data show that the service has built and sustained a significant community of beneficiaries over the evaluation period. However, the project has not consistently met targets with respect to reach into deprived areas of Southend, or number of support groups facilitated. Please note, due to the changes in the nature of self-report data provided to the University of Essex team across the evaluation period, target achievement is not available for all targets across all time periods. These considerations are stipulated in the relevant target areas overleaf.

Across the reporting period, Bump to Breast has reached 1,573 primary beneficiaries, equating to an average of 47.7 monthly or 572 annually. As illustrated in Figure 4, the number of beneficiaries, and new beneficiaries, has steadily grown over time. A primary beneficiary is defined as a child under the age of 4 and pregnant mothers.

3.1.1 Secondary data findings (Dashboard data findings – data covering 1st of October 2020 to 31st of September 2023)

Figure 4. Number of beneficiaries per year - 1st October 2020 to 30th September 2023



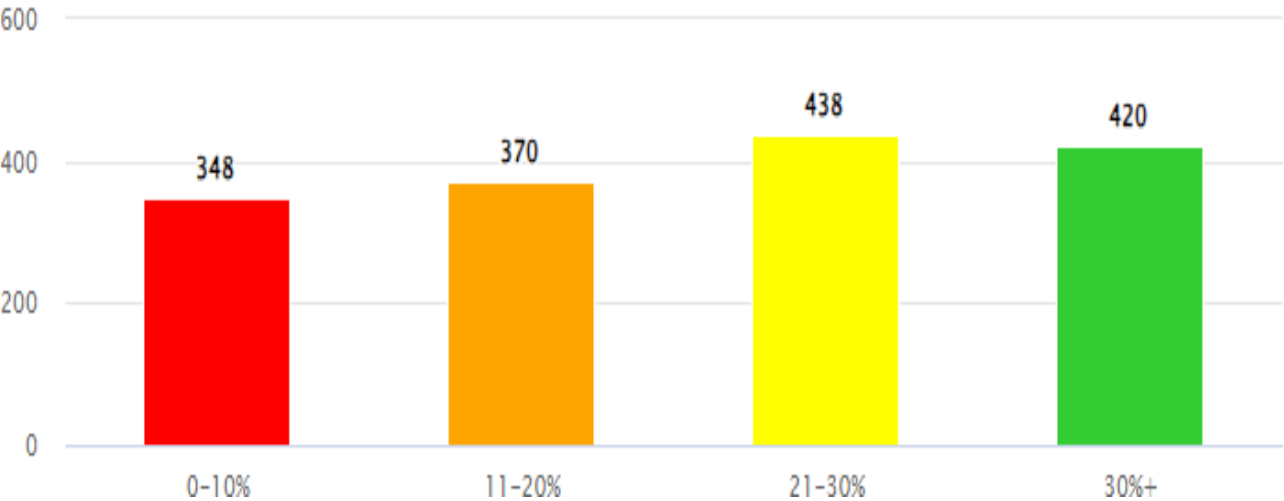
Source: Southend Borough Council Project Activity Dashboard

Overall reach into deprived wards was slightly below target, with 73.4% of families living in the top 30% deprivation areas of ABSS wards, against a target of 80.3%. Figure five and Table 1 below show primary beneficiaries reached by indices of multiple deprivation, and as a percentage by wards. Kursaal Ward is subject to the highest levels of multiple deprivation in Southend, with every super output area being affected by multiple deprivation that is in the highest 20% in the region. There are three wards in which all super output areas fall in

the highest 20% regionally – Kursaal, Milton and Victoria. Figure five also shows that 22.1% or 348 (of 1,573) beneficiaries of the Bump to Breast project live in an ABSS ward that falls within the 10% most deprived areas of England.

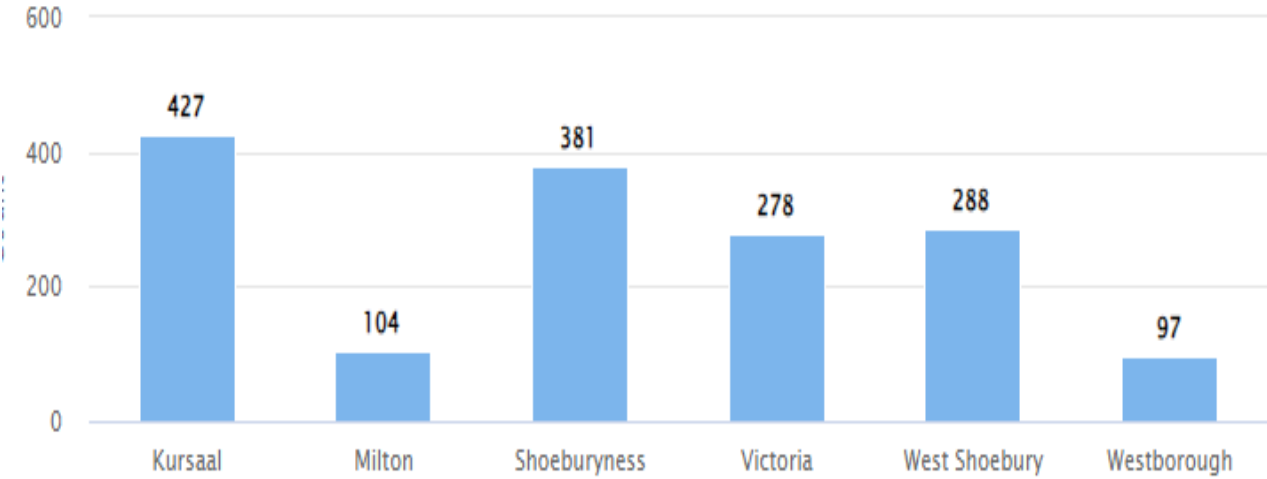
The highest concentration of beneficiaries is in Kursaal ward followed by Shoeburyness and West Shoebury and Victoria wards, as shown by the Figure six and Table one.

Figure 5. Primary beneficiaries by deprivation – 1st October 2020 to 30th September 2023



Source: Southend Borough Council Project Activity Dashboard

Figure 6. Primary beneficiaries by ward – 1st October 2020 to 30st September 2023



Source: Southend Borough Council Project Activity Dashboad

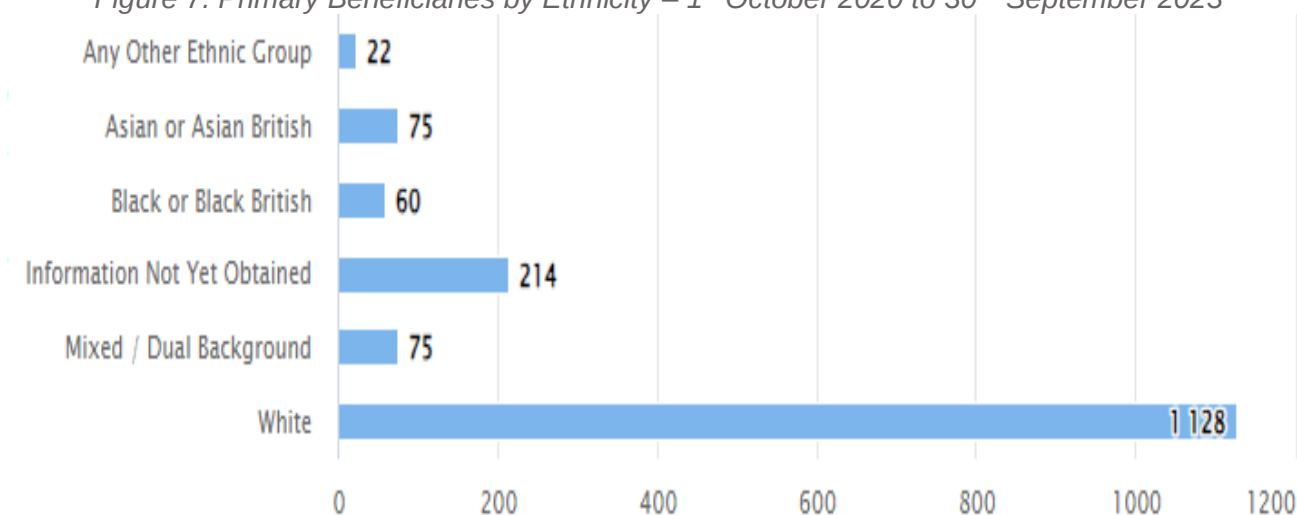
Table 1. Primary beneficiaries by ward as percentage – 1st October 2020 to 30th September 2023

Ward	Count of Direct Beneficiaries	Count of beneficiaries as a %
Kursaal	427	27.1%
Shoeburyness	381	24.2%
Victoria	278	17.7%
West Shoebury	288	18.3%
Westborough	97	6.2%
Milton	104	6.6%
Total	1575⁴	100%

Source: Southend Borough Council Project Activity Dashboard

A relatively small number of beneficiaries from ethnically minoritized communities have been reached by the Bump to Breast project over the course of the evaluation period. Figure seven and table two show that the majority of primary beneficiaries (71.7% or 1128 out of 1574 beneficiaries total) identify as 'White', followed by 4.8% (75) 'Asian or Asian British', 3.8% (60) 'Black or Black British', and 4.8% (75) 'Mixed/Dual Background'. A further 13.6% (214) beneficiaries did not provide information about their ethnic identity.

Figure 7. Primary Beneficiaries by Ethnicity – 1st October 2020 to 30th September 2023



Source: Southend Borough Council Project Activity Dashboard

⁴The number of beneficiaries recorded per ward is larger (by two) than the number of beneficiaries reached as reported by the data dashboard. This is a known anomaly of unknown cause but may be the result of beneficiaries moving from one ABSS ward to another.

Table 2. Number of beneficiaries by ethnicity - 1st July 2020 to 30th September 2023

Ethnic group	Count of Direct Beneficiaries	Count of beneficiaries as a % of information provided
Any Other Ethnic Group	22	1.4%
Asian or Asian British	75	4.8%
Black or Black British	60	3.8%
Information Not Yet Obtained	214	13.6%
Mixed/Dual Background	75	4.8%
White	1128	71.7%
Total number providing information	1574²	100%

Source: Southend Borough Council Project Activity Dashboard

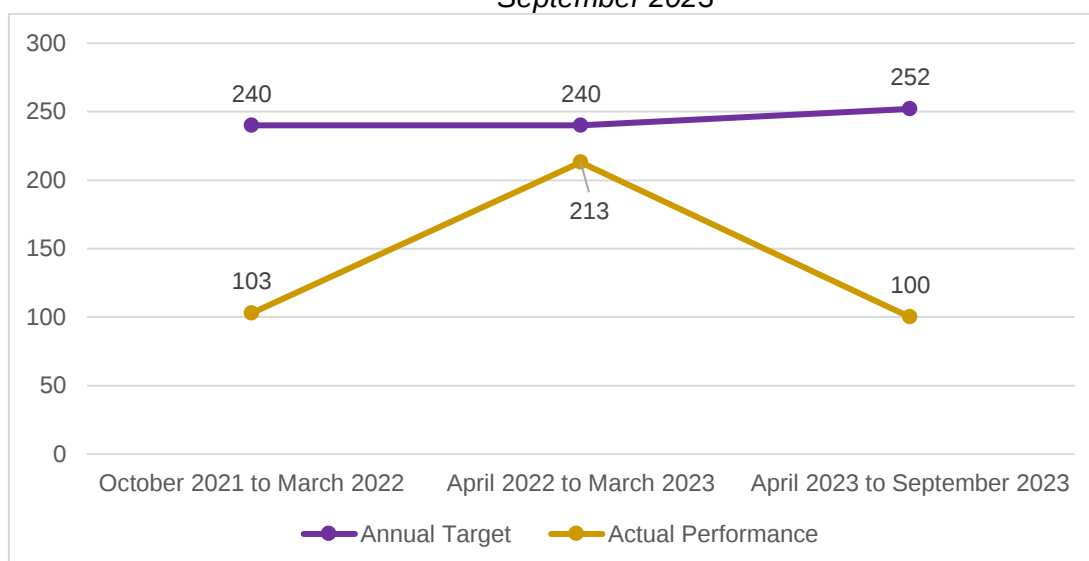
3.1.2 Secondary data findings (Findings from the Project's self-monitoring reports - data covering 1st of October 2020 to 30th of September 2023)

The project's self-monitoring data show the performance of the project against a series of key performance indicators (KPI) established at the commencement of the project and adjusted slightly across evaluation periods as described below.

Target one: To reach 234 mothers per year via breastfeeding support groups. This target was introduced in the most recent reporting period (since April 2023), and we are therefore unable to report on achievement of this target in prior years. Within the six-monthly report period of April – September 2023, a total of 224 mothers have been reached via breastfeeding support groups, suggesting the project is on track to achieve the target of 234 mothers.

Target two: To reach 226 mothers per year via 240 support groups. While the number of mothers reached and support groups facilitated has changed significantly over the period of evaluation, this target has not been met. This is illustrated by Figure 8, where a total of 416 support group sessions have been facilitated between January 2021 and September 2023, with an increase from 103 (October 2021 – March 2022) to 213 (April 2022 – March 2023), and a further 100 groups facilitated in the most recent period of April – September 2023.

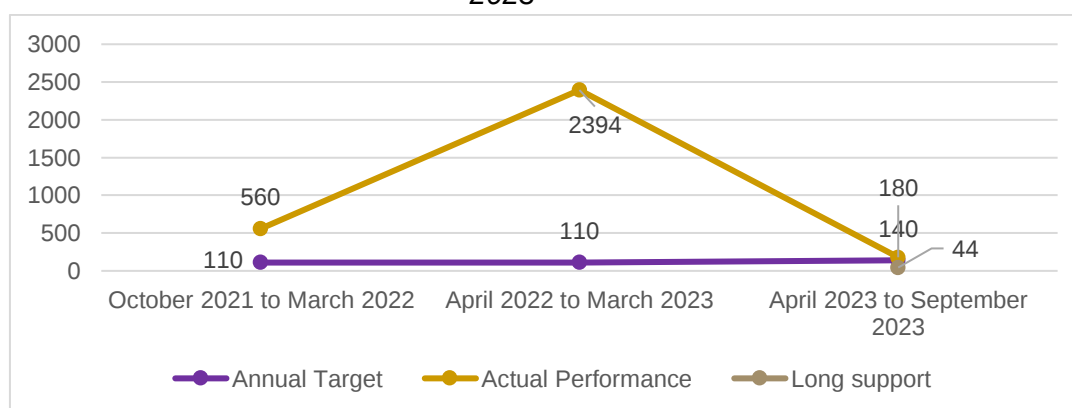
Figure 8. Number of delivered Breastfeeding Support Group sessions – 1st October 2020 to 30th September 2023



Source: Bump to Breast – Breastfeeding Support Group self-monitoring data

Target three: To reach 140 mothers for brief or long-term support via phone call or social media. Prior to April 2023, this target was to reach 110 mothers for brief or long-term support. Interpretation of figures against this target is difficult owing to changes in how the project self-reported 'engagement', in particular, the figure of 2394 between April 2022 – March 2023 encompasses all 'followers' on Facebook and Instagram, whereas other periods report only on those with a direct interaction. Within this target, 'brief support' is defined as less than 4 contacts with the Bump to Breast team, whereas 'long-term support' is recorded where there have been 4 or more contacts with the project team. While noting the caveats with respect to data available for this target, actual performance has consistently exceeded target over the reporting period.

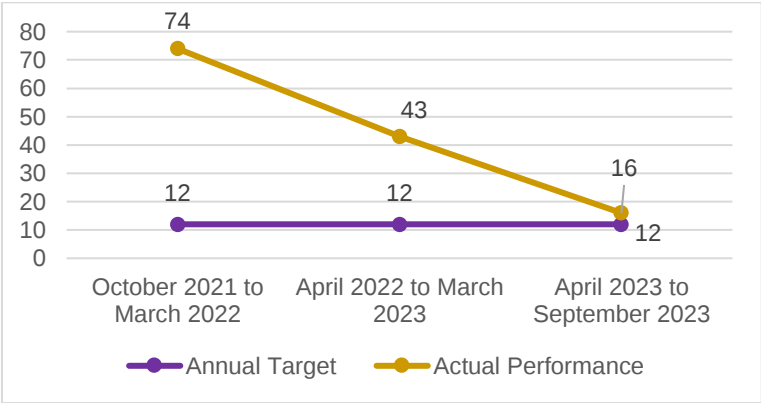
Figure 9. Quantity of mothers reached by phone call and social media – 1st October 2020 to 30th September 2023



Source: Bump to Breast – Breastfeeding Support Group self-monitoring data

Target four: To deliver 12 outreach sessions annually. Actual performance has consistently exceeded this target significantly over the course of the evaluation period. As illustrated by Figure 10, a total of 133 outreach sessions have been delivered, equating to approximately 66.5 per year.

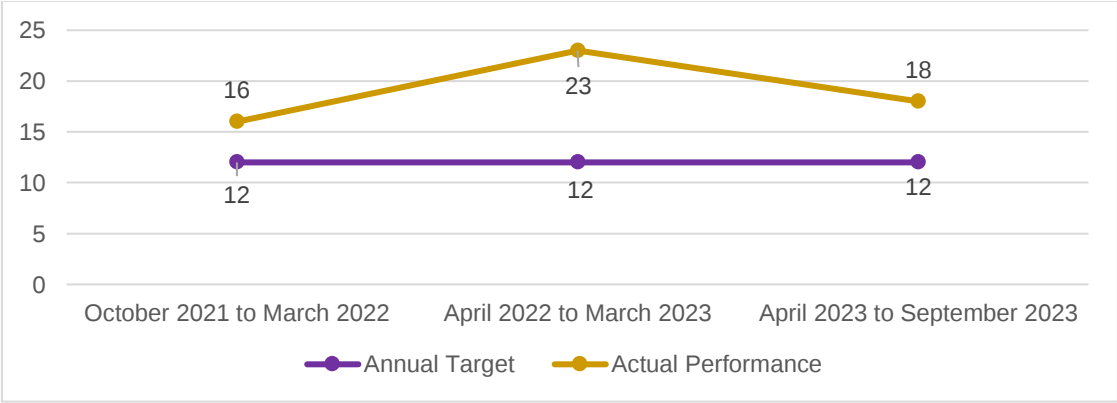
Figure 10. Number of outreach sessions delivered – 1st October 2020 to 30th September 2023



Source: Bump to Breast – Breastfeeding Support Group self-monitoring data

Target five: To deliver a minimum of 12 social events per year with a minimum of six mothers attending each event. As with Target 4, actual performance has met and exceeded this target on an annual basis across the evaluation period. As indicated by Figure 11, a total of 57 social events were delivered between October 2021 and September 2023, corresponding to approximately 28 events per year against a target of twelve.

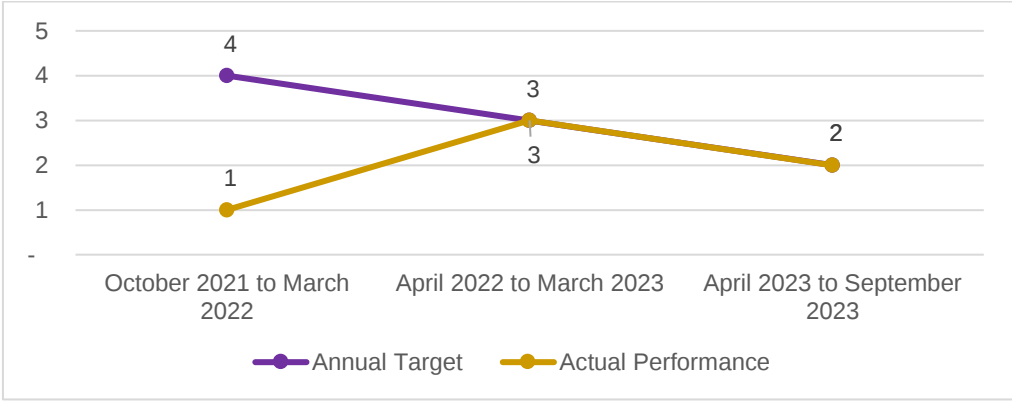
Figure 11. Number of social events delivered – 1st October 2020 to 30th September 2023



Source: Bump to Breast – Breastfeeding Support Group self-monitoring data

Target six: To deliver infant feeding information evenings with a minimum of eight mothers attending each session. The target number of information evenings shifted from four per year (October 2021 – March 2022) to three (April 2022 – March 2023) and eventually to two (April – September 2023). Within this context, actual performance has met the target in two of the three reporting periods (from April 2022 onwards), as illustrated by Figure 12.

Figure 12 – Number of infant feeding information evenings – 1st October 2021 to 30th September 2023



Source: Bump to Breast – Breastfeeding Support Group self-monitoring data

Interview and survey insights

The second way in which impact is measured is via the University of Essex formative evaluation. This consists of two elements: The first is an online survey that seeks to capture beneficiaries’ experiences of the service to understand how it meets beneficiary need and their perception of the quality and effectiveness of the service. This section of the report synthesises 137 survey responses received between the 1st October 2020 and 30th September 2023. Secondly, qualitative semi-structured interviews were undertaken with six beneficiaries and two staff members. This section presents thematised findings from both surveys and interviews for each of the four aspects of ABSS services.

3.2 Implementation: How is the project being implemented?

3.2.1. Access: How and why do parents access the project?

Information with respect to the accessibility of this project is available via the online survey, where respondents were asked to identify the type of support they received, whether online, group attendance, or a face-to-face support session. As illustrated in Table 3, a majority of survey respondents⁵ (52% or 71 of 137 beneficiaries) engaged with the Bump to Breast project through attendance at a group, followed by through face-to-face support sessions (27%, 37) and online support (21%, 29).

⁵ Survey respondents are breastfeeding parents and therefore not primary beneficiaries of the service (unless pregnant). Survey respondents are not representative of all project participants.

Table 3. Number of beneficiaries by kind of support - 1st October 2020 to 30st September 2023

Kind of support	Count of Direct Beneficiaries	Count of beneficiaries as a % of information provided
Online support	29	21.17%
Attendance at a group	71	51.82%
A face to face support session	37	27.01%
Total number providing information	137	100%

Source: Online Survey Data via Qualtrics

What made you decide to attend the Bump to Breast group/support?

Survey findings

Survey findings regarding the motivation of mothers/carers attending Bump to Breast activities have been consistent across evaluation periods, although during the period of peak-COVID-19 and associated disruptions, those seeking social interaction and peer support was particularly prominent.

Many survey respondents noted their motivation being to improve their general knowledge and understanding around breastfeeding, or to seek support and assistance for specific challenges they were experiencing initiating or maintaining breastfeeding. For example:

“Because I was having trouble with latching my 8-day old baby.”

“I wanted help and reassurance if needed.”

“I was keen to be as informed as possible and to meet other parents.”

“I needed general support and advice online because of COVID. My baby was feeding well but I went crazy as my period returned. They supported me and he settled after that.”

A desire for social interaction and peer support was also often cited by survey respondents, with the Bump to Breast groups seen as an avenue for meeting others with a shared experience of breastfeeding challenges and parenting more broadly. Some respondents specifically noted an experience of isolation as being a motivating factor for engaging with Bump to Breast, for example:

“I was new to area and didn’t know anyone...”

“To feel less isolated.”

“Social media posts made them familiar and accessible when I had a problem feeding and we were isolated.”

“To meet other feeding mothers and babies and to become part of a support network/family”.

Interview findings

Interviews with beneficiaries provided an opportunity to delve deeper into the motivations and experiences of those accessing the Bump to Breast support group and understand how initial motivations and expectations reflected actual experiences and outcomes. Several interviewees spoke of accessing the service for assistance with specific breastfeeding challenges or concerns, while others were seeking greater confidence and knowledge about breastfeeding more generally. For example:

"I was looking online for some sort of breastfeeding course [...] actually it was before giving birth [...] and I found the page for the group. I was very motivated to breastfeed, but from feedback from other people, I knew it could be hard."

"I didn't manage to breastfeed my first daughter because she dropped more than six percent of her weight, so she was quite poorly. I only breastfed for two weeks with her and I struggled. This time, I was more determined to stick with it and carry on [...] I was worried I wasn't doing things right."

As with the survey data, interviewees spoke of seeking an opportunity to meet with others with a similar experience and share the journey of breastfeeding with those who really understood it. For example:

"For me, it was a bit daunting, because I found breastfeeding really difficult [...] and I realised with the group that I wasn't by myself. Everyone goes through difficult phases with it."

"So, kind of learning from other parents' experiences as well who are going through or have had similar experiences to you or can actually offer you that kind of advice and support and guidance..."

3.3 Quality and Experience: What is it like being part of the programme?

3.3.1 'Was it easy to access and get involved in the 'bump to breast' group/support?'

Survey and interview findings

In response to the above question in relation to access and ease of involvement with the Group Breastfeeding project, feedback was consistently positive across the evaluation period. Many identified the friendliness and approachability of staff, the welcoming nature of other group members, and the relaxed 'no-pressure' atmosphere. Some examples from our survey data on this theme include:

"...very welcoming and supportive and great at getting mums and myself to effortlessly socialise and get to know each other rather than it feeling like an appointment."

"Yes absolutely, the ladies were lovely, the venue was suitable and warm with tea and coffee on offer and everyone else was very nice."

Some respondents did note challenges in terms of accessing the service, including a lack of clear directions to the venue, difficulties parking, and the cost of parking. For example:

"The venue was not easy to access due to no parking facilities on site. I had to pay for car park no [sic] close by. The group was welcoming though."

"Yes easy, however it was not immediately clear where the session was, as the postcode on the appointment conformation [sic] wasn't the same. I had to search through the posts on FB to verify. Also, it took me a while to find the entrance at the Plaza centre."

While most survey respondents across the course of our evaluation reflected on their experiences of accessing services in-person, some noted positively their experiences of accessing and using online support. For example, the ease of accessing online support when balancing other care responsibilities:

“Watching videos while at home breastfeeding was a perfect scenario to help with 2 little ones around.”

Interview findings

In interview, all beneficiaries described positive experiences with Bump to Breast support groups and were able to identify several practical and social and emotional benefits of their engagement. Several reflected on past experiences of accessing similar support services, noting how the Bump to Breast group combined social support alongside expert input and advice:

“...it wasn’t very sociable or interactive [experience of breastfeeding support with first baby] and I didn’t have any friends from it. But they [midwives] were very good and gave me pointers and stuff like that but because my baby was putting on weight...they signed me off...they had other people to see. I went to a group and there was someone there to talk to about breastfeeding but only if you had a problem. They could refer you to someone that knew what they were talking about, but there wasn’t anyone there to have a chat about it.”

Many felt that the support received had been critical to their success with breastfeeding, and again reflected on past experiences to highlight how impactful their experience with Bump to Breast had been:

“I think if I had what I have this time around I would have breastfed [baby one] much more than five months”.

“I’ve done the whole baby led weaning second time around and it’s just been a dream and it’s been non-stressful. I’ve support all the way. I have had friends to chat to and I’ve done triple of good [sic] with breastfeeding [baby two] than I’d ever done with [baby one] and I’ve made an abundance of friends.”

3.3.2 Beneficiaries’ experiences and perceptions of project staff

Survey and interview findings

As with many projects included within our evaluation, Bump to Breast participants reflected on the critical role that staff played in shaping their experience of the service, their length of involvement, and the perceived value and benefit they had drawn from it. Overall, staff were perceived as effective supporters for women attending groups for the first time, and navigators for those experiencing challenges with initiating or maintaining breastfeeding. An interview with a staff member from the service suggests that this was an outcome of a deliberately person-centred approach, with a focus on listening and supporting rather than a more deficits focused approach of simply ‘fixing a problem’:

I’ll really spend time with that person to listen and to let them tell their story, because...without interrupting or trying to fix things straight away. It’s very much about listening and making that person feel safe...

The knowledge and expertise of staff was noted as being an invaluable resource for several respondents who had been finding it difficult to find consistent and reliable support. For example, one interviewee compared the service positively with what she anticipated finding via online resources:

“If I didn’t have A Better Start, I honestly don’t think I’d have breastfed for as long as I did, because none of my...So, my mum didn’t. None of my family members breastfed...the fact that they were actually able to help me actually able to show me that, ‘oh your daughter’s not actually around your nipple and they

need to go further up, because your milk ducts are actually near your shoulders and it's all coming down from there. I would never have learned that from Google."

"A few times when I've asked them about how to express more, how do I store milk, how to build up a stash or supply for when I go back to work, nothing was too much trouble. They seemed very knowledgeable in the advice they were giving."

3.4 Effectiveness: How is participation impacting beneficiaries?

3.4.1 How does the project impact the lives of beneficiaries and the wider community?

Survey findings

Survey data highlights several areas of impact from the Bump to Breast support group for beneficiaries, including improved confidence and knowledge with breastfeeding, and the development of social support and friendship networks which had often extended beyond the immediate group setting.

Respondents to our survey highlighted how they had developed their confidence and knowledge about breastfeeding through participation in the group and were able to identify several practical impacts of this in terms of their breastfeeding behaviours. Several noted that they were now more confident breastfeeding in public due to their engagement in the group. For example, in response to the question 'What have you taken away from the 'bump to breast' group support?':

"To learn to be more confident when feeding out in public."

"I gained the confidence to feed in public."

"To trust my mother instinct."

This confidence appears to be linked with an increased level of breastfeeding knowledge reported by several survey respondents, which for some women was reported to be critical in their ability to maintain breastfeeding longer term. For example, in response to the same question above, others noted:

"I was able to breastfeed for over eight weeks which I wouldn't have done without the support."

"Loads [of learning]! Super supportive information, answered lots of general BF questions I had and also assessed latch, knowledge, friends."

"That advice was easily accessed, and they were very knowledgeable."

In response to several statements appearing under the question statement, 'Having accessed the Bump to Breast support/group, do you feel...', the outcomes were positive and consistent across the period of evaluation. For example, 96% of respondents (76 of 79 respondents) felt the group had enabled them to feel able to breastfeed as long as they want to, 88% (70) felt more motivated and encouraged to continue breastfeeding, and 87% (69) reported feeling more confident about breastfeeding. This survey question also highlighted the social aspects of the group, with 93% (74) feeling more supported by their community, and 89% (71) reported reduced feelings of isolation and an increased ability to connect with others.

Interview findings

Interviews provided a more in-depth look at the impacts of engagement in the project for beneficiaries. As with the survey, positive impacts were attributed to a combination of both professional and peer support inputs, with the two working synergistically to improve knowledge and confidence. The opportunity to learn from others and share the experience of breastfeeding, and the challenges along the way, was critical:

“So, kind of learning from other parents’ experiences as well who are going through or have had similar experiences to you or can actually offer you that kind of advice and support and guidance...”

The Bump to Breast project was also an opportunity for some to connect with other ABSS projects, and share with others their positive experiences of accessing support and developing their knowledge:

“I’m now really like on a main bump to breastfeeding support [sic], I’ve made some lovely friends. I’ve made use of all the groups. HENRY and all the fabulous projects going on. And I’m now a parent champion and ambassador from that.”

“The amount of people I’ve told. I’ve got loads of friends that are pregnant currently....and I’m just going you need to follow A Better Start. Not only do they provide help, advice and support...it’s like a friend.”

“Becoming a mum changes your whole life and I think it’s important to find people going through similar to what you are and at a similar stage to your baby/babies that you can relate too, but also to have people who are knowledgeable and can help and advise you on things you wouldn’t necessarily know. Or sometimes when you’re just having a bad day know that these people are there to lean on and lift you.”

Summary of key findings:

This summary report illustrates the success of Bump to Breast – Breastfeeding Support Group in achieving its primary objective: While evidence from the data dashboard and the project’s self-monitoring data demonstrate a mixed meeting of annual targets, the overall impact gleaned from surveys and interviews suggests the primary objective of this project has been met.

These data reveal that women consistently report enhanced self-confidence in breastfeeding and parenting, increased knowledge, strengthened social connections, greater empowerment as mothers and individuals, and an improved ability to sustain breastfeeding. The support provided by project staff, alongside the opportunities for social interaction and the development of informal support network, were critical to these outcomes.

The one-to-one interviews highlight the feeding advisors’ capability to establish rapport and trust with women in a person-centred manner as a fundamental element in a successful feeding experience. Interviewees also emphasise that breastfeeding is not only a practical endeavour but also an emotional one. The Bump to Breast service offers more than just practical feeding information, advice, and support, whether peer-to-peer or professional. Many interviewees acknowledge the emotional health and well-being benefits of the service, considering it a critical factor in both initiating and maintaining breastfeeding over time.

The service provides something unique that imparts individual and collective impact to mothers, their families, and even friends from non-covered areas through the service’s social media presence, benefiting the wider community. This uniqueness is attributed to the service’s knowledge, time investment, and responsiveness in its approach to women. These qualities are highly recognized and valued by those interviewed as part of the formative evaluation, highlighting the broader system-wide benefits that a service of this nature can bring.

Next steps and recommendations

This report has summarised the impact and outcomes of the Bump to Breast Support Group throughout the period of their inclusion within the University of Essex formative evaluation. Read in conjunction with other similar projects, particularly the 1:1 Breastfeeding Support service, our evaluation of this project highlights the critical role played by both peer and professional support when aiming to improve breastfeeding initiation and retention.

Evidently, this project has had a positive impact on many beneficiaries and has led to the development of friendships and networks which appear to extend beyond the project itself. In this way, this project appears to be highly sustainable, as many beneficiaries appear committed to the peer ethos of the project, and as invested in providing support as they are in need of its receipt. The peer involvement component of this project is a particularly distinct feature of its development and featured centrally in the positive experiences noted by many beneficiaries involved in our evaluation. There may be opportunities to formalise some aspects of this peer involvement, or pathways for supporting peer workers to 'transition' into more formal or expert roles, such as through the provision of specialist education.

As with several other projects, engagement with more deprived areas of Southend, and ethnically minoritized communities, was below target and lower than anticipated,⁶ despite several attempts to address this since the project's inception. Moving forward, more direct outreach to these communities, perhaps through more formalised community navigator/ambassador roles, or partnerships with other organisations with more of a visible identity or role in these communities, may be helpful in ensuring that the project benefits are shared by all communities in Southend.

⁶ It is important to acknowledge that 13.6% of beneficiaries do not identify their ethnicity therefore limiting our ability to determine performance in relation to reach into minoritized communities. For example, some non-respondents to this question may come from an ethnically diverse group.