



Indiana Breastfeeding Plan 2024-2028



Indiana
Department
of
Health



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Dear Public Health Partners:

Breastfeeding is recognized by the Indiana Department of Health (IDOH), the American Academy of Pediatrics (AAP), the Centers for Disease Control and Prevention (CDC), and the World Health Organization (WHO) as the optimal nutrition for infants. Breastfeeding and access to human milk significantly impact maternal and infant health and are critical components of community food security, making it an important public health priority.

IDOH is proud to share our ambitious five-year Indiana Breastfeeding Plan as part of the agency's strategy to improve Indiana's infant and maternal health outcomes. This plan is focused on increasing access to quality lactation support to ensure that all families have the opportunity to breastfeed for as long as they choose. In Indiana, there are disparities in breastfeeding rates that disproportionately impact communities of color and contribute to similarly disparate infant and maternal mortality rates within the same communities. Reducing these mortality rates among Hoosier moms and babies remains IDOH's most urgent priority.

The Indiana Breastfeeding Plan reflects IDOH's commitment to ensuring that every Hoosier has access to social and physical resources needed to promote health from birth through end of life. Each of the plan's goals and accompanying strategies and activities are designed to ensure all families have access to the essential breastfeeding support they need.

Our agency, led collaboratively by the divisions of Nutrition and Physical Activity; Women, Infants, and Children; and Maternal and Child Health, has already begun working intensely to implement the activities in this plan to fulfill our mission to promote, protect, and improve the health and safety of all Hoosiers. We look forward to continuing to improve breastfeeding rates in Indiana.

Sincerely,



Lindsay M. Weaver, M.D., FACEP
State Health Commissioner

BREASTFEEDING PLAN TEAM MEMBERS

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BREASTFEEDING PLAN PARTNERS

The Indiana Breastfeeding Plan was developed with the involvement of the following:

- Indiana Department of Health, Division of Nutrition and Physical Activity (DNPA)
- Indiana Department of Health, Women, Infants, and Children (WIC)
- Indiana Department of Health, Maternal and Child Health (MCH)
- Indiana Department of Health, Internal Breastfeeding Workgroup
- Indiana Perinatal Quality Improvement Collaborative
- The Milk Bank
- Indiana Breastfeeding Coalition (IBC)
- Coffective

Section 1: Introduction



The IDOH has developed the Indiana Breastfeeding Plan to address disparities and barriers in infant feeding and to provide more families the opportunity to reach their breastfeeding goals. The American Academy of Pediatrics (AAP) recommends that infants are exclusively breastfed for about six months, followed by continued breastfeeding with complementary foods for at least two years and beyond as mutually desired.¹

According to the 2022 CDC Breastfeeding Report Card, which reflects data from infants born in 2019, 85.9% of Indiana infants were ever breastfed, 52.9% were breastfeeding at six months, and 30.3% were breastfeeding at 12 months. When we look at exclusive breastfeeding rates, we see that 46.2% of Indiana infants were exclusively breastfed through three months and 21.5% were exclusively breastfed at six months.² Although breastfeeding rates in the United States have increased during the past decade, racial/ethnic disparities persist. In Indiana, 74.1% of Black infants were ever breastfed, compared to 85.4% of Hispanic infants and 84.1% of white infants.³

Many families do not reach their breastfeeding goals due to a variety of factors, such as the economic need to return to work shortly after giving birth and limited clinical lactation support. The Indiana Breastfeeding Plan aims to increase the option of breastfeeding for more families, especially for those in communities of color.

This work must be done in partnership and with evidence-based best practices, policies, and support systems for new and growing families.

GOAL 1: IMPROVE ACCESS TO DIVERSE LACTATION SUPPORT AND SERVICES

Objectives	Strategies
<p>Objective 1.1: Increase diversity of lactation professionals and services in Indiana.</p>	<p>Strategy 1.1.1: Develop a clinical mentorship program for Black International Board Certified Lactation Consultant (IBCLC) candidates.</p> <p>Strategy 1.1.2: Through funding from the Health Issues and Challenges grant, the Indiana Breastfeeding Coalition (IBC) will support education for diverse lactation students and consultants.</p> <p>Strategy 1.1.3: Provide free community-based prenatal breastfeeding classes in priority communities using a train-the-trainer model.</p> <p>Strategy 1.1.4: Support capacity building and/or implementation projects for local breastfeeding coalitions in priority communities.</p>
<p>Objective 1.2: Increase the number of qualified lactation professionals available to Hoosiers.</p>	<p>Strategy 1.2.1: Increase the number of IBCLCs in the Nurse Family Partnership (NFP) program.</p> <p>Strategy 1.2.2: Increase the number of community support professionals who are trained in lactation.</p>
<p>Objective 1.3: Enhance culturally responsive lactation care across hospitals and clinics in Indiana.</p>	<p>Strategy 1.3.1: Identify breastfeeding training opportunities for medical providers and support staff.</p> <p>Strategy 1.3.2: Develop outreach and referral processes that increase awareness, support, and referrals to culturally responsive complementary support services.</p> <p>Strategy 1.3.3: Develop diverse and inclusive breastfeeding education materials.</p>

GOAL 2: IMPROVE ACCESS TO TIMELY, AFFORDABLE, AND QUALITY LACTATION SERVICES

Objectives	Strategies
<p>Objective 2.1: Increase the availability of quality breastfeeding training to clinical, community, and government organizations/individuals.</p>	<p>Strategy 2.1.1: Offer statewide training opportunities for IBCLCs.</p> <p>Strategy 2.1.2: Distribute information on breastfeeding training opportunities for medical professionals and students annually.</p> <p>Strategy 2.1.3: Provide breastfeeding training for community partners serving families [i.e., maternal health, home visiting, Early Care and Education (ECE) providers, local health departments].</p>
<p>Objective 2.2: Increase the implementation of evidence-based practices in hospitals and access to quality care.</p>	<p>Strategy 2.2.1: Use the CDC Maternity Practices in Infant Nutrition and Care (mPINC™) Survey to increase awareness of gaps in the implementation of evidence-based maternity care practices.</p> <p>Strategy 2.2.2: Increase the number of Baby-Friendly USA-engaged hospitals in Indiana, with a focus on priority communities.</p> <p>Strategy 2.2.3: Develop an interim baby-friendly hospital designation.</p>
<p>Objective 2.3: Increase access to affordable lactation services.</p>	<p>Strategy 2.3.1: Increase covered lactation services to improve continuity of care.</p> <p>Strategy 2.3.2: Disseminate information to providers, WIC agencies, lactation workforce, and hospitals to give to patients on how to acquire a breast pump through private insurance or Medicaid.</p>
<p>Objective 2.4: Ensure all families have access to pasteurized human donor milk within a one-hour drive.</p>	<p>Strategy 2.4.1: Increase access to and awareness of Milk Express and Milk Depot sites.</p> <p>Strategy 2.4.2: Explore private insurance coverage of pasteurized human donor milk.</p> <p>Strategy 2.4.3: Increase awareness that pasteurized human donor milk is a covered benefit by Indiana Medicaid.</p>

GOAL 3: IMPROVE COMMUNITY-BASED BREASTFEEDING SUPPORT

Objectives	Strategies
<p>Objective 3.1: Increase the number of businesses and organizations that have supportive breastfeeding policies and pumping accommodations.</p>	<p>Strategy 3.1.1: Develop a breastfeeding-friendly workplace designation program.</p> <p>Strategy 3.1.2: Create a statewide breastfeeding-friendly designation program for Indiana ECE providers.</p> <p>Strategy 3.1.3: Update Indiana’s ECE licensing rules and regulations to reflect evidence-based practices pertaining to breastfeeding.</p> <p>Strategy 3.1.4: Create awareness of the Fair Labor Standards Act protections to pump at work under the PUMP for Nursing Mothers Act and the Pregnant Workers Fairness Act.</p>
<p>Objective 3.2: Develop resources that identify available lactation support across Indiana.</p>	<p>Strategy 3.2.1: Inclusion of lactation support services data in the Indy Hunger Network’s statewide Community Compass App.</p> <p>Strategy 3.2.2: Enhance the IDOH breastfeeding webpage to become a diverse resource for lactation support services across Indiana.</p> <p>Strategy 3.2.3: Create outreach and marketing to promote access to existing lactation resources.</p>
<p>Objective 3.3: Improve access to breastfeeding support by developing innovative methods of providing classes and support groups.</p>	<p>Strategy 3.3.1: Develop a virtual breastfeeding support group platform available in multiple languages.</p> <p>Strategy 3.3.2: Promote the utilization of the WIC Breastfeeding Support App for WIC clients.</p> <p>Strategy 3.3.3: Provide support for hospitals to start or maintain breastfeeding support groups.</p>

GOAL 4: BUILD COLLABORATIVE PARTNERSHIPS TO IMPROVE COORDINATION OF BREASTFEEDING SERVICES AND PROGRAMS.

Objectives	Strategies
Objective 4.1: Build collaborative partnerships and improve coordination in local communities.	Strategy 4.1.1: Provide technical assistance to local communities each year to build collaborative partnerships that improve continuity of care.
Objective 4.2: Develop and enhance state organization and program partnerships.	Strategy 4.2.1: Develop and maintain a statewide breastfeeding collaborative that meets monthly.
Objective 4.3: Develop a statewide referral system to improve access to maternal and child health breastfeeding services.	<p>Strategy 4.3.1: Develop a referral process across at least three state-level programs to improve access to breastfeeding support services.</p> <p>Strategy 4.3.2: Develop referral best practices toolkit for local communities.</p>

OVERVIEW OF THE PROCESS

In 2022, IDOH’s statewide breastfeeding initiatives manager convened an internal breastfeeding workgroup to begin developing the new Indiana Breastfeeding Plan. The group comprised representatives from the following IDOH Divisions: DNPA, MCH, WIC, Office of Minority Health, Division of Fatality Review and Prevention, and Chronic Disease, Primary Care and Rural Health. In 2023, the group welcomed external partners from the Indiana Black Breastfeeding Coalition and the Indiana Breastfeeding Coalition.

Members determined that community engagement with diverse stakeholders from a variety of public and private sectors was a top priority in the creation of the plan. Listening sessions were held to better understand the landscape of breastfeeding supports and services across the state.

The next step was the development and distribution of a needs assessment survey. Through a WIC Midwest Region Operational Adjustment (OA) Grant, the IDOH DNPA partnered with Coffective to guide the needs assessment. Between the listening sessions and the needs assessment survey, data collected included representation from

healthcare professionals from a variety of healthcare systems, parents, state and local breastfeeding coalitions, lactation consultants and counselors, local WIC agency staff, Early Care and Education (ECE) providers, doulas, community health workers, insurance representatives, and public health professionals.

Understanding the social factors that contribute to sub-optimal rates of breastfeeding among disparate groups was a priority in developing the breastfeeding plan. The goal of achieving health equity, and thus improving health outcomes through increasing breastfeeding rates, was a focus throughout the planning process.

The 2024-2028 Indiana Breastfeeding Plan outlines goals, objectives, and strategies that provide decision-making guidance to state and local agencies and partners for prioritization and resource allocation. In addition to this plan, a working document contains data measures, timelines, and action steps. State and local partners with a shared interest in the implementation of the breastfeeding plan will collaborate to develop this workplan and identify key partners and funding opportunities. During the first year of implementation, [priority communities](#) will be identified through a data-driven process that will examine breastfeeding rates, available lactation support services, social determinants of health, and will incorporate community engagement and feedback.

DEVELOPMENT TIMELINE

OCT 2022	Listening Sessions: Stakeholder input sessions conducted.
MARCH 2023	Indiana breastfeeding plan kick-off meeting held.
MAY 2023	Statewide Needs Assessment: State and local community input survey conducted.
JUNE-JULY 2023	Priority areas developed.
JULY 2023	Goals, objectives, and strategies drafted. Workgroup finalized goals, objectives, and strategies. Activities and action steps drafted.
AUG-SEPT 2023	Indiana Breastfeeding Plan review and approval.

NEEDS ASSESSMENT

In October 2022, IDOH held virtual listening sessions to learn from stakeholders from across the state about Indiana's strengths and challenges in the lactation landscape. IDOH held seven sessions and heard from 71 Hoosiers representing 41 counties. Those conversations helped IDOH learn where efforts are needed to improve breastfeeding support for families and education for healthcare professionals in Indiana. The participants of those sessions were instrumental in the development of this plan.

In spring 2023, a statewide needs assessment survey instrument was developed in partnership with Coffective and sent to state and local partners. The needs assessment survey provided additional local perspectives to ensure a complete picture of communities' needs and organizations' interests were incorporated into state-level decision-making. Surveys were disseminated to state and local networks to collect information on breastfeeding needs, priorities, successes, and challenges. Survey responses represented all 92 Indiana counties.

Results from the listening sessions and needs assessment survey were used to identify key priorities to inform the breastfeeding plan's goals, objectives, and strategies.

PRIORITY AREAS

The top priority areas indicated in the state needs assessment included the following:



STRENGTHS, IMPROVEMENT AREAS, AND OPPORTUNITIES

Strengths	Improvement Areas	Opportunities
<p>Indiana WIC's breastfeeding services and support</p> <p>Lactation support in hospitals designated as Baby-Friendly</p> <p>Medicaid coverage for breast pumps</p> <p>Dedication by various organizations in the community to improve breastfeeding rates</p>	<p>Diversity of lactation consultants and education materials</p> <p>Improve access to lactation support</p> <p>Awareness of available lactation services</p> <p>Breastfeeding education for healthcare providers and continuing education for lactation professionals</p> <p>Workplace support for breastfeeding</p>	<p>Develop and strengthen community partnerships</p> <p>Improve awareness for insurance breast pump coverage</p> <p>Identify grant funding to support breastfeeding plan initiatives</p> <p>Engage populations with greatest disparities in program development</p>

Read the [needs assessment survey summary report](#).

The Indiana Breastfeeding Plan prioritizes improving access to diverse lactation support and services; access to timely, affordable, and quality lactation services; community-based breastfeeding support; and building collaborative partnerships to improve coordination of breastfeeding services and programs. The Indiana Department of Health (IDOH) will continue to build and strengthen partnerships and ensure community involvement to work toward accomplishing these strategic priorities.

GOAL 1: IMPROVE ACCESS TO DIVERSE LACTATION SUPPORT AND SERVICES

Objective 1.1: Increase diversity of lactation professionals and services in Indiana.

Strategy 1.1.1: Develop a clinical mentorship program for Black International Board Certified Lactation Consultant (IBCLC) candidates.

Activities

- Partner with Eskenazi Health to pilot a clinical training cohort for Black IBCLC candidates.
- Support two IBCLC candidates in the first year of the pilot.
- Identify grant funding for lactation-specific education costs.
- Indiana WIC will provide available training opportunities to count toward required lactation-specific education.

Strategy 1.1.2: Through funding from the Health Issues and Challenges grant, the Indiana Breastfeeding Coalition (IBC) will support education for diverse lactation students and consultants.

Activities

- IBC will award 10-15 scholarships, totaling \$30,000, over a three-year period to diverse lactation students.
- IBC will provide Continuing Education Recognition Points (CERPs) through six free webinar opportunities.
- IBC will provide eight \$500 mini grants to local coalitions that promote breastfeeding support and awareness.

Strategy 1.1.3: Provide free community-based prenatal breastfeeding classes in [priority communities](#) using a train-the-trainer model.

Activities

- Identify funding for local health departments or community-based organizations.
- IDOH DNPA will develop an evidence-based, equitable, and inclusive curriculum and train two to three educators in each [priority community](#).

Strategy 1.1.4: Support capacity building and/or implementation projects for local breastfeeding coalitions in [priority communities](#).

Activities

- Partner with the Indiana Breastfeeding Coalition to identify and engage with breastfeeding champions in communities lacking lactation support.
- IDOH will provide communities with technical assistance to form new coalitions.

Objective 1.2: Increase the number of qualified lactation professionals available to Hoosiers.

Strategy 1.2.1: Increase the number of IBCLCs in the [Nurse Family Partnership \(NFP\)](#) program.

Activity

- Identify funding opportunities to train at least one nurse on each NFP team.

Strategy 1.2.2: Increase the number of community support professionals who are trained in lactation.

Activity

- Identify funding opportunities to increase the number of doulas, community health workers, and breastfeeding peers who reflect the communities they serve and are trained in lactation support.

Objective 1.3: Enhance culturally responsive lactation care across hospitals and clinics in Indiana.

Strategy 1.3.1: Identify breastfeeding training opportunities for medical providers and support staff.

Activity

- Distribute information on breastfeeding training opportunities for medical professionals annually.

Strategy 1.3.2: Develop outreach and referral processes that increase awareness, support, and referrals to culturally responsive complementary support services.

Activities

- Partner with community groups in Indiana to identify appropriate referral needs and processes.
- Provide education to birthing hospital staff and doula services, specifically those who serve [priority communities](#).
- Provide education on complementary support services to other non-hospital organizations that serve families.

Strategy 1.3.3: Develop diverse and inclusive breastfeeding education materials.

Activities

- IDOH will develop printed and digital breastfeeding education materials written in higher-demand languages, such as Spanish, Haitian Creole, and Burmese.
- IDOH will work with Indiana WIC and local health departments to increase the number of breastfeeding education materials offered in multiple languages.

GOAL 2: IMPROVE ACCESS TO TIMELY, AFFORDABLE, AND QUALITY LACTATION SERVICES

Objective 2.1: Increase the availability of quality breastfeeding training to clinical, community, and government organizations/individuals.

Strategy 2.1.1: Offer statewide training opportunities for IBCLCs.

Activities

- Host the State Breastfeeding Conference.
- Partner with NFP and healthcare systems to provide continuing education.

Strategy 2.1.2: Distribute information on breastfeeding training opportunities for medical professionals and students annually.

Activities

- Explore opportunities to work with the Institute for Breastfeeding and Lactation Education (IABLE) to provide education to physicians and other medical staff.
- Share breastfeeding training information with Indiana University School of Medicine.

Strategy 2.1.3: Provide breastfeeding training for community partners serving families (i.e., maternal health, home visiting, ECE providers, local health departments).

Activities

- Explore breastfeeding curriculum options and adapt a curriculum to meet the training needs of Indiana.
- Partner with programs such as My Healthy Baby and NFP, which have local networks that serve families, to provide breastfeeding training opportunities.

Objective 2.2: Increase the implementation of evidence-based practices in hospitals and access to quality care.

Strategy 2.2.1: Use the [CDC Maternity Practices in Infant Nutrition and Care \(mPINC™\) Survey](#) to increase awareness of gaps in the implementation of evidence-based maternity care practices.

Activities

- Disseminate information on ways to improve implementation of evidence-based maternity care practices.
- Send targeted communications to hospitals to increase awareness of 2024 mPINC deadlines for submission.

Strategy 2.2.2: Increase the number of Baby-Friendly USA-engaged hospitals in Indiana, with a focus on [priority communities](#).

Activities

- Enlist five priority area hospitals in a collaborative to move through the Baby-Friendly USA pathway.
- Promote mentor-mentee relationships between existing Baby-Friendly USA-designated hospitals and emerging Baby-Friendly USA-engaged hospitals.

Strategy 2.2.3: Develop an interim baby-friendly hospital designation.

Activities

- Complete an assessment of state-level interim baby-friendly hospital designations in the United States.
- Establish a team with key partners to develop a plan and process to develop an interim baby-friendly hospital designation in Indiana.

Strategy 2.2.4: Create a Breastfeeding-Friendly Office designation pathway for Indiana provider offices, based on the World Health Organization's Ten Steps to Successful Breastfeeding.

Activities

- Complete a scan of Breastfeeding-Friendly Office designations in the United States.
- Create a designation pathway, facilitated by expert design and contracted technical assistance.

- Recruit a minimum of five pediatric offices for Cohort 1, with a focus on priority areas. Optimally, the offices engaged will be in the same communities as the Baby-Friendly USA-engaged facilities.

Objective 2.3: Increase access to affordable lactation services.

Strategy 2.3.1: Increase covered lactation services to improve continuity of care.

Activities

- Collaborate with Indiana Perinatal Quality Improvement Collaborative (IPQIC) Breastfeeding Subcommittee on efforts to increase lactation coverage.
- Explore partnership with the Indiana Family and Social Services Administration (FSSA) to expand Medicaid lactation coverage.

Strategy 2.3.2: Disseminate information to providers, WIC agencies, lactation workforce, and hospitals to give to patients on how to acquire a breast pump through private insurance or Medicaid.

Activities

- Develop user guides on how to obtain a breast pump.
- Partner with organizations that serve families to disseminate information.

Objective 2.4: Ensure all families have access to pasteurized human donor milk within a one-hour drive.

Strategy 2.4.1: Increase access to and awareness of Milk Express and Milk Depot sites.

Activities

- Connect The Milk Bank to partners across the state for collaboration and expansion of Milk Express/Depot locations.
- Include Milk Express sites and Milk Depot sites on the [Community Compass App](#).

Strategy 2.4.2: Explore private insurance coverage of pasteurized human donor milk.

Activities

- Conduct a review of successful coverage models of other milk banking systems for private insurance coverage.
- Obtain support from stakeholders for the development of a proposal to present to private insurers.

Strategy 2.4.3: Increase awareness that pasteurized human donor milk is a covered benefit by Indiana Medicaid.

Activities

- Disseminate information to healthcare providers, WIC agencies, lactation workforce, and families about how to access pasteurized human donor milk and the process for Medicaid reimbursement.
- Promote and protect the Indiana donor milk supply by supporting and promoting the efforts of The Milk Bank's donor drives.

GOAL 3: IMPROVE COMMUNITY-BASED BREASTFEEDING SUPPORT

Objective 3.1: Increase the number of businesses and organizations that have supportive breastfeeding policies and pumping accommodations.

Strategy 3.1.1: Develop a Breastfeeding-Friendly Workplace designation program.

Activities

- Review established workplace designation models that can be replicated in Indiana.
- Identify key partners to collaborate with in the development of a designation program.

Strategy 3.1.2: Create a statewide Breastfeeding-Friendly designation program for Indiana ECE providers.

Activities

- Promote the use of [Go NAPSACC](#), an online tool, free to ECE providers that provides an assessment to improve nutrition and physical activity best practices, including infant feeding.
- Provide resources and training on breastfeeding support to ECE providers.

Strategy 3.1.3: Update Indiana’s ECE licensing rules and regulations to reflect evidence-based practices pertaining to breastfeeding.

Activities

- IDOH will partner with the Office of Early Childhood and Out-of-School Learning (OECOSL) within FSSA as part of the Preschool Development Grant to provide evidence-based infant feeding information.
- Explore creating a point system utilizing Go NAPSACC to embed into Paths to Quality (PTQ), Indiana’s Quality Rating and Improvement System (QRIS).

Strategy 3.1.4: Create awareness of the Fair Labor Standards Act protections to pump at work under the Break Time for Nursing Mothers, PUMP Act, and the Pregnant Workers Fairness Act.

Activities

- Disseminate information regarding protections to local chambers of commerce and large employers, local health departments, and city governments.
- Develop outreach and marketing to community members to create awareness of workplace protections.

Objective 3.2: Develop resources that identify available lactation support across Indiana.

Strategy 3.2.1: Inclusion of lactation support services data in the Indy Hunger Network’s statewide [Community Compass App](#).

Activities

- The Indiana Breastfeeding Coalition will work together with The Milk Bank, Indy Hunger Network, and IDOH DNPA to provide logistical support.
- The Indiana Breastfeeding Coalition will create and maintain a database of breastfeeding support statewide to include in the Indy Hunger Network’s Community Compass App.
- Include Milk Express sites and Milk Depot sites on Indy Hunger Network’s Community Compass App.

Strategy 3.2.2: Enhance the IDOH breastfeeding webpage to become a diverse resource for lactation support services across Indiana.

Activities

- Expand information on the IDOH breastfeeding pages.
- Work with Indiana WIC to include local WIC agencies and identify community resources.
- Link the Indy Hunger Network’s Community Compass App to the webpage.

Strategy 3.2.3: Create outreach and marketing to promote access to existing lactation resources.

Activities

- The Indiana Breastfeeding Coalition will seek funding to develop flyers and magnets to promote the Indy Hunger Network’s Community Compass App.
- Disseminate information to healthcare providers and lactation professionals on utilizing Community Compass App referral system for patients and clients.
- Develop culturally responsive promotion materials and methods.

Objective 3.3: Improve access to breastfeeding support by developing innovative methods of providing classes and support groups.

Strategy 3.3.1: Develop a virtual breastfeeding support group platform available in multiple languages.

Activity

- Explore virtual breastfeeding support group options and identify best practices.

Strategy 3.3.2: Promote the utilization of the WIC Breastfeeding Support App for WIC clients.

Activity

- Develop and distribute materials to clients to encourage app utilization.

Strategy 3.3.3: Provide support for hospitals to start or maintain breastfeeding support groups.

Activities

- Identify existing breastfeeding support groups across the state.
- Support collaboration between hospitals with robust breastfeeding support groups and hospitals developing or expanding support groups.

GOAL 4: BUILD COLLABORATIVE PARTNERSHIPS TO IMPROVE COORDINATION OF BREASTFEEDING SERVICES AND PROGRAMS

Objective 4.1: Build collaborative partnerships and improve coordination in local communities.

Strategy 4.1.1: Provide technical assistance to local communities each year to build collaborative partnerships that improve continuity of care.

Activities

- Contract with an organization to provide technical assistance to local communities with the greatest disparities in breastfeeding rates.
- Develop partnerships in local communities to support implementation, referral, and utilization of classes and support groups.

Objective 4.2: Develop and enhance state organization and program partnerships.

Strategy 4.2.1: Develop and maintain a statewide breastfeeding collaborative that meets monthly.

Activities

- Lead implementation of the breastfeeding plan.
- Identify partners with a shared interest in the breastfeeding plan activities to join the collaborative.

Objective 4.3: Develop a statewide referral system to improve access to maternal and child health breastfeeding services.

Strategy 4.3.1: Develop a referral process across at least three state-level programs to improve access to breastfeeding support services.

Activities

- Identify at least two state partner organizations and programs to begin aligning referral processes.
- Develop aligned referral processes and policies at the state level.
- Disseminate information on new referral policies and procedures locally.

Strategy 4.3.2: Develop referral best practices toolkit for local communities.

Activities

- Identify current successful referral processes used in local communities.
- Develop lessons learned shared by other local communities.

More Information

Email [Ann Marie Neeley](#) for more information or to contribute to the implementation of the Indiana Breastfeeding Plan.

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3. Chiang KV. Racial and Ethnic Disparities in Breastfeeding Initiation — United States, 2019. *MMWR Morb Mortal Wkly Rep*. 2021;70. doi:10.15585/mmwr.mm7021a1