

NEVADA RPE STATE ACTION PLAN 2024

Element 1. Implementing and prioritizing primary prevention at the outer layers of the Social Ecological Model (SEM)

Section 1.1. Current (2024) Nevada strategies for preventing future SV include:

- Provide educational opportunities to target audiences to decrease SV in high prevalence environments (hospitality industry, K-12, higher ed)
- Work with community partners (public and private) to develop and implement SV prevention policies such as private employer policies, higher ed policy
- Facilitate a statewide economic justice workgroup to coordinate diverse array of community partners (public and private)
- Identify and establish public/private partnerships that can provide technical assistance and help
- support evaluation capacity of sub-recipients to facilitate and monitor the implementation of prevention programs, practices and policies
- Develop a state action plan for implementing approaches corresponding to the focus areas
- Develop and implement a state- level evaluation plan
- Identify and track SV Indicators
- Participate in CDC-sponsored program support activities

Strategies and activities to achieve these outcomes are reviewed annually as part of the RPE Program funding cycle. Strategies and activities selected are those capable of achieving short-term and mid-term outcomes while laying a foundation for the long-term outcome of decreased rates of SV statewide. Current short and mid-term strategies include alignment of prevention strategies statewide, increased policy development and implementation at the local and state level and improving program evaluation and data use. The program's long-term outcome of decreasing the rates of sexual violence statewide will take many more years to achieve statewide.

The successful implementation of the SAP relies on identifying, establishing, and leveraging partnerships and resources that can sustain the work of the RPE Program beyond the current five-year cooperative agreement with the CDC. New partners and new ways of streamlining processes have emerged through the development of the SAP. As directed by the CDC, subrecipients and partners are encouraged to work at the community and societal levels of the Social-Ecological Model (SEM) and ultimately decrease SV occurrence in Nevada. Current Subrecipients and alignment with the CDC's STOP SV Framework:

- Promote social norms that protect against violence
- Teach skills to prevent sexual violence
- Provide opportunities to empower and support girls and women
- Create protective environments
- Support victims (Lessen harm)

Section 1.2. Potential Nevada strategies for preventing future SV include:

- Reaching specific groups on college campuses, such as Greek Life and new orientation students.
- Expanding economic justice statewide workgroup to align policy priorities with a diverse array of non-traditional partners with an end goal of increasing economic opportunities for women and children.
- Focusing on specific groups within Nevada to identify more specific areas of need for SV prevention and education.
- Increasing training/capacity building through DEI efforts that relate to SV data.
- Increasing partner convening between NV RPE subrecipients and grantee.

Nevada RPE will continue to provide educational opportunities to target audiences to decrease sexual violence in high prevalence environments, such as hospitality industry, K-12, and higher education. NV RPE will also continue to expand their work with community partners, both public and private, to develop and implement sexual violence prevention policies through private employers and higher education. The facilitation of the statewide Economic Justice Workgroup will continue its coordination in expanding a diverse array of community partners (public and private). Nevada RPE will continue to seek and establish public/private partnerships that can provide technical assistance and help support the evaluation capacity of sub-recipients to facilitate and monitor the implementation of prevention programs, practices and policies. NV RPE will continue to identify and track sexual violence Indicators, with emphasis on determining priority populations to increase healthy equity at the community and societal-level.

Section 1.4. Partners and Resources

Nevada Coalition to End Domestic and Sexual Violence (NCEDSV), University of Nevada, Reno (UNR), University of Nevada, Las Vegas (UNLV), and Signs of HOPE (SOH) will continue their partnerships with the Division of Public and Behavioral Health (DPBH) to reach the greater Nevada areas, specifically Northern and Southern Nevada areas at the community and societal level through continual efforts of NV strategies. NV RPE community partners are significant in implementing prevention strategies and capacity at the community and societal levels. They work directly with the community in prevention and education strategies, which will support the goal of identifying more specific disproportionately impacted groups in the communities they currently serve.

Nevada RPE may anticipate support and assistance in expanding both public and private partnership in evaluation capacity building. RPE coordinator would also like technical assistance and references to available trainings and webinars on expanding community and societal-level prevention strategies.

Element 2. Expanding the use of state or local data to address health disparities and disproportionate burden

Section 2.1. Current Data Sources and Their Uses

Data Source (Name)	Data Source Type	Description of Data Source	Use of Data	Description of Data Use	Process Used to Obtain Access	Barriers/Challenges
FBI Crime Data Explorer: Nevada: Rape	Police data	Data on all violent offenses reported by population	Select population of focus Select prevention strategies/approaches/programs Address health disparities	The Nevada RPE Program will collect secondary data from federal, state, survey, and police department data relevant to the state environment in relation to sexual assault and rape in order to inform programming and prevention efforts.	Secondary public data is accessible as a public source to access without restrictions.	N/a
Youth Risk Behavior Surveillance System (YBRSS) Nevada Data (High School and Middle School)	Surveillance data	The YRBSS is a survey of adolescent health behaviors and provides critical information to help us understand	Select population of focus Select prevention strategies/approaches/programs Address health disparities	The Nevada RPE Program will collect secondary data from federal, state, survey, and police department data relevant to the state environment in relation to	Secondary public data is accessible as a public source to access without restrictions.	N/a

		the health and well-being of youth in Nevada	Inform Action Plan Inform program or policy effort	sexual assault and rape in order to inform programming and prevention efforts.		
Las Vegas Metropolitan Police Department 2023 Annual Report: Sexual Assault Data	Police data	Annual reports on sexual assault data each year	Select population of focus Select prevention strategies/approaches/programs Address health disparities	The Nevada RPE Program will collect secondary data from federal, state, survey, and police department data relevant to the state environment in relation to sexual assault and rape in order to inform programming and prevention efforts.	Secondary public data is accessible as a public source to access without restrictions.	N/a
Safe Voice Data	Surveillance data	The program allows students, parents, and faculty throughout Nevada to have access to SafeVoice, an anonymous reporting system used to report threats to the safety or well-being of students. SafeVoice was established	Select population of focus Select prevention strategies/approaches/programs Address health disparities Inform Action Plan Inform program or policy effort implementation	The Nevada RPE Program will collect secondary data from federal, state, survey, and police department data relevant to the state environment in relation to sexual assault and rape in order to inform programming and prevention efforts.	Secondary public data is accessible as a public source to access without restrictions.	N/a

		by the Nevada Department of Education under SB 212 in 2017, to protect student wellness, prevent violence and save lives.				
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Section 2.2. Planned Data Sources and Their Uses

Data Source Name	Data Source Use	Plans for Obtaining Access
Hospital inpatient billing data	Data could be used for examination and observation following an alleged adult rape through billing and data codes	Nevada Department of Health and Human Services Office of Analytics provides data upon request

Section 2.3. Using Data to Identify Risk and Protective Factors

Please use the space below to describe your plans for:

- Gathering data that will be used to identify specific social determinants of health (SDOH) and risk/protective factors that produce disproportionate burden of SV in your state/territory.
- Synthesizing this data to identify the SDOH and risk/protective factors that produce disproportionate burden of SV in your state/territory.

The NV RPE Coordinator continues to provide monthly TA to subrecipients on identifying risk and protective factors being addressed through subrecipients prevention strategies as outlined in their scope of work, as well as factors for strategies they are not currently addressing. Monthly TA calls also continue to provide TA to subrecipients on data collection and reporting. NV RPE plans to implement newer, more effective strategies in determining disproportionate populations amongst the audience that the subrecipients currently reach. By determining the disproportionate populations that are in higher need of SV prevention and education, NV RPE can better identify SDOH among specified communities.

Section 2.4. Using Data to Identify Priority Populations

Nevada's youth and young adults are the focus of primary prevention with strategies to impact schools, college campuses, and other environments where youth and young adults are working. Each year the RPE Program and subrecipients have engaged additional partners positioned to work with populations who are most at risk based on available data.

It is important to include strategies with high levels of engagement and inclusion of target populations within the communities where the interventions are being planned. This is critically important for efforts that may take place within Nevada's diverse racial and ethnic populations, including Native Americans, people who are LGBTQ+, and people who have disabilities. It is also important to develop partnerships with people working in the environments for strategy implementation, such as people already working in rural, frontier, and urban areas.

Current subrecipients have expertise and relevance to the populations/communities they currently reach, data collected from TA meetings and reports will continue to be used in this process to identify higher areas of priority. Current uses of surveillance data will also contribute to the methods used to further identify disproportionate populations among communities currently served.

Section 2.5. Using Data to Select Program/Policy Efforts

In 2018, a Needs and Strengths Assessment for the RPE Program was developed through the Nevada Institute for Children's Research and Policy (NICRP). The purpose of the study was to identify community perceptions of risk and protective factors associated with SV, learn what community support services Nevadans knew about, gain an understanding of barriers to accessing support services, and identify additional services needed. The assessment also sought to identify new partners to engage in the primary prevention work of the RPE Program. The NV RPE Program anticipates updating the Needs and Strengths Assessment through NICRP in calendar year 2025.

Risk factors identified as increasing the likelihood of SV in Nevada included homelessness; mental health and substance use (including alcohol); lack of knowledge about community resources; neighborhood appearance and infrastructure, including the inability to walk safely in the community and number of bars; lack of community connectedness and help (neighbor to neighbor); transportation and isolation; family activities, resources, and education; and economy, workforce, and housing. Women and girls were more often at risk than men and boys, with economically disadvantaged women and African American women being most at risk.

Suggested prevention efforts to increase protective factors included improving community infrastructure and access to key social services, as well as educating youth in the community and in schools to recognize and support other youth, including offering referrals and utilizing active bystander behavior. Education recommendations also extended to the business community and parents, so they know how to identify and support prevention and intervention actions. Ongoing media campaigns and educational programming were recommended as consistent efforts that engage community members and survivors of SV to change community norms and attitudes toward women and girls.

Element 3. Increasing, maintaining, and leveraging partnerships to promote primary prevention

Section 3.1. Partner Roles in SAP

Name of Partner Organization	Primary Sector	Role of Partner	Describe how your [Initiative] program engaged this partner in your violence prevention work during the reporting period.	Partner Status during this reporting period (New, Existing, Potential)	State-, Community-, or Tribal-level Partner
Nevada Coalition to End Domestic and Sexual Violence (NCEDSV)	Government (Federal, State, Local)	Train and Educate community members	NV RPE supported NCEDSV's Economic Justice Workgroup engagement and community prevention efforts to policy makers and employers through review and approval of training documents and handbooks.	Existing partner	State
University of Nevada, Reno (UNR)	Education (schools)	Train and Educate community members	With NV RPE support, UNR has continued to build its rapport with nightlife and bars in the Reno area to begin an initiative on sexual violence prevention and education trainings to all staff and	Existing partner	State

			partygoers to these venues.		
University of Nevada, Las Vegas (UNLV)	Education (schools)	Train and Educate community members	With NV RPE support, UNLV was able to implement sexual violence prevention and education as a requirement for all incoming freshman on campus.	Existing partner	State
Signs of HOPE (SOH)	Social Justice/Community Organizations	Train and Educate community members	With NV RPE support, SOH has begun to build rapport with the local Las Vegas Raiders, with hopes to include them in their StaySAFE campaign.	Existing partner	State

Section 3.2. Engaging New Partners

NV RPE will continue to maintain and strengthen existing partnerships and identify new public/private partnerships to provide TA and support for program implementation and evaluation. It is the RPE Program's intent to develop formal partnerships to improve them program's capacity to access and use data, increase implementation of community/societal-level strategies, and improve coordination of State SV prevention efforts.

Establishing new partnerships is an essential part of the plan for achieving RPE Program objectives over the project period. Subrecipients will continue to engage key leaders in prevention efforts as well as looking for non-traditional partnerships. The RPE Program will continue to work with subrecipients to prioritize partners, especially non-traditional partners, and specific ways to contribute to achieving the long-term results of the RPE Program.

Section 3.3. Sustaining Engagement of Existing Partners

Throughout the remainder of the grant period there will be multiple opportunities to engage subrecipients to discuss how current partners contribute to the RPE Program and to prioritize

new partners that can advance the program's work. Each quarter, as process measures are captured and shared with subrecipients, facilitated conversations and peer-to-peer discussion will enhance results, and identify new strategies and potential opportunities to improve programming. Subrecipients and partners will discuss cross-agency and cross-sector data and engage in conversations about the meaning and implications in both the short and long-term related to strategy and how to engage better and utilize partnerships.

Section 3.4. Formalizing Partnerships

NV DPBH formalizes partnerships in the form of a subaward contract. This contract lays out budget, scope of work, and deliverables the subrecipient has agreed to for the entirety of the grant cycle. Subrecipients have the opportunity to request a move of funds or a change of scope of work and deliverables throughout the grant period, upon approval. All currently funded NV RPE partners with an active subaward are listed in section 3.1 above.

Subrecipients also submit a quarterly report to the NV RPE Program Coordinator, outlining data, reach, obstacles, and successes within the prior quarter.

Element 4. Building Capacity and Sustainability

Section 4.1. Assessing Primary Prevention Capacity

As part of the update to the 2018 Needs and Strengths Assessment for the RPE Program through the Nevada Institute for Children's Research and Policy (NICRP), NV RPE program anticipates an updated capacity assessment. Within this assessment, a primary prevention capacity element will be included.

Section 4.2. Increasing Primary Prevention Capacity

Will complete this section after the updated 2018 Needs and Strengths Assessment for the RPE Program through the Nevada Institute for Children's Research and Policy (NICRP) is completed.

Recommendation	Topic Area	Key Action Steps	Potential Barriers and Challenges	Facilitators and Resources

Section 4.3. Utilizing Capacity Assessment Results

The RPE 2025 Needs and Strengths Assessment including a section on capacity assessment, will be a valuable tool for understanding the strengths and weaknesses of the Nevada RPE Program and partners, particularly in relation to developing infrastructure and strengthening capacity. The results of the capacity assessment will develop

infrastructure and strengthen capacity by identifying gaps, needs, and current capabilities. NV RPE can identify specific gaps in infrastructure and resources to prioritize areas of need for improvement. Strategic Planning will also be utilized to set realistic goals and develop actionable plans that align with disproportionately impacted groups within currently served communities. Continual monitoring and evaluation efforts to establish key benchmarks through the capacity assessments will allow NV RPE partners to monitor progress over time and evaluate the effectiveness of interventions.

Section 4.4. Funding SV Primary Prevention Strategies

Nevada's SAP recognizes that while violence (SV, intimate partner violence, explicit or implicit violence) can be prevented, lasting prevention requires a cross-sector, public health approach. Violence prevention is more effective when public health, education, faith-based, nonprofit, housing, business, economic development, transportation, zoning and land use, and many other sectors and interests are involved.

The successful implementation of the SAP relies on identifying, establishing, and leveraging partnerships and resources that can sustain the work of the RPE Program beyond the current five-year cooperative agreement with the CDC. New partners and new ways of streamlining processes have emerged through the development of the SAP. As the plan is implemented, we expect to uncover further opportunities to increase the capacity of subrecipients and partners to work at the community and societal levels of the Social-Ecological Model (SEM) and ultimately decrease SV occurrence in Nevada.

Section 4.5. Partner Support for State- and Community-Level SV Prevention

Partnerships, capacity building activities, indicators, data, impact, and implementation are recurring topics in the SAP for SV prevention at the state and community level. Data is a central theme of the work, including how it is used to identify priority populations and address health disparities through current partners. Although no community is immune to violence, it is the most socioeconomically disadvantaged populations who face a disproportionate burden of violence. Demographics such as race, ethnicity, gender, educational inequality, intellectual disabilities, poverty, and employment status are areas of emphasis that DPBH intends to capture with newer goals, objectives, and activities with current partners.

Section 4.6. Changes Necessary to Sustain SV Prevention Accomplishments

Sustainability is an essential component of planning because it focuses on sustaining benefits and results beyond any single program or strategy. It goes beyond finances to include building and sustaining partnerships, developing key champions, and embedding or institutionalizing policies and practices within systems. Sustainability planning accepts and expects things (funding, policies, attitudes, economics, etc.) will change over time and anticipates actions and strategies now that can build on the change that supports the long-term results or mitigates the effects of change negatively impact SV in Nevada.

Section 4.7. Using Data to Continuously Improve SV Prevention Efforts

RPE Program staff understand sustainability means different things to programs at different stages of development and implementation. Items to discuss and consider during the continued creation of the sustainability plan include whether newer programs need and want to concentrate on sustaining their activities or infrastructure should initial funding end and whether more experienced programs want or need to enlarge their target population or reach, transfer their best practices to other programs, build new relationships with other agencies, or promote broader policy initiatives. The collection of SV data will be monitored and expanded for continuous quality improvement to best show disproportionate populations of need for SV prevention and education implementation.