



**STATE PARTNERSHIPS**  
— IMPROVING —  
**NUTRITION & EQUITY**

**State Partnerships Improving Nutrition & Equity**

**State Action Plan Guidance and Template**

**Special Breastfeeding Project**

# SPINE State Action Plan Guidance and Template

## Special Breastfeeding Project

**Finalized SAPs for the SPINE Special Breastfeeding Project will be accepted by April 29, 2022.**

The SPINE Special Breastfeeding Project State Action Plan is meant to provide a strategic approach to implementation and may be revised over the project period.

### SPINE Key Concepts to Include

The following key concepts should be reflected in your Special Breastfeeding Project SAP.

- **Health Equity:** How does your project work to attain the highest level of health for the population(s) to be reached? What efforts will your project make to address avoidable inequalities, historical and contemporary injustices, health and healthcare disparities, and inequitable breastfeeding support? Which multisector partnerships will support this?
- **Policy, Systems, and Environmental Change Approach:** What sustainable, long-term, and community/population-level changes will your Special Breastfeeding Project have? How can partners and programs that serve lactating parents and groups with low breastfeeding rates be engaged?

### Sections of the Template

The Special Breastfeeding Project State Action Plan Template is divided into three sections. Below is a description of each section to assist in completing your draft.

#### **Section 1: Key Program Activities**

**Filling out information in the “Key Program Activities” section of the template:**

- 1) Reach: Enter the estimated number of people you will reach in the population(s) your project focuses on. You will also need to describe how you developed this estimate, referencing the population or geographic area of focus, source of data, and/or methodology.
- 2) Describe how you are integrating health equity into your project.
- 3) Provide action steps with a timeline to assist in achieving your Special Breastfeeding Project goals. For each sub action step, provide the responsible party/partners, expected output, and any additional comments. You may have more than one output for each activity.

Please see page 6 for additional guidance on how to fill out the action steps portion of the template.



## Section 2: Partnerships

In this section, please use the table to:

List all your partnerships for your SPINE Special Breastfeeding Project

- Indicate whether the partnership is:
  - New: newly formed partnership to implement the SPINE Special Breastfeeding Project
  - Existing: not a new partnership, that has *not* been strengthened or enhanced as a result of the SPINE Special Breastfeeding Project
  - Strengthened: partnership existed beforehand and has been strengthened or enhanced as a result of the SPINE Special Breastfeeding Project
- State how the partnership will help with project implementation and influence PSE changes.

## Section 3: Additional Information

In this section, please describe:

- 1) Challenges/Barriers: describe any challenges or barriers you anticipate related to addressing equitable food and nutrition security that will impact implementation.
- 2) Solutions Identified: describe solutions to any of the challenges/barriers identified.
- 3) Leveraging Other Funds: describe any additional funds your state has leveraged or plans to leverage in support of your Special Breastfeeding Project SAP.
- 4) Other Comments: share any other comments regarding the Special Breastfeeding Project SAP not addressed above.



# State Partnerships Improving Nutrition & Equity (SPINE)

## Special Breastfeeding Project State Action Plan Template

**State/Organization Name:** Nevada Department of Health and Human Services

### Section 1: Key Program Areas

**Estimated Reach.** Please state the estimated number of people you anticipate reaching/impacting through your food and nutrition security efforts:

38,490

**Please describe below how you are estimating the number of people that will be reached (e.g., population or geography of focus, data source, and/or methodology).**

The estimated number of individuals reached was calculated using the number of licensed early childhood education (ECE) centers, times estimated applicable staff per center, plus the number of available lactation sponsorships, and the estimated number of parents who initiate breastfeeding. Currently, there are 639 ECE's statewide, across these centers the average number of staff who would directly support the breastfeeding dyad was estimated at 5 ( $639 \times 5 = 3,195$ ). Next, with this award, we plan to support a maximum of 6 individuals statewide to obtain International Board-Certified Lactation Consultant (IBCLC) certification, and finally the estimated the number of breastfeeding individuals in Nevada was calculated using the Center for Disease Control and Prevention's (CDC) National Immunization Survey, 34,489 in Nevada in 2018 ( $3,195 + 6 + 34,489 = 38,490$ ).

**Please describe your approach to addressing inequitable food and nutrition security.**

Breastfeeding allows infants to be food secure from the very beginning of life and provides infants with essential nutrients and other protective factors while they grow. Thus, enhancing breastfeeding equity is paramount because of its immense importance in building human and social capital, health, food and nutrition security, and social wellbeing. The Nevada Division of Public and Behavioral Health (DPBH) first strategy to improve breastfeeding equity and food and nutrition security is to increase awareness of breastfeeding-friendly childcare providers across the state. The [nevadabreastfeeds.org](http://nevadabreastfeeds.org) website will be updated to support current efforts as it is an improvement to an existing campaign and website that is widely promoted across the state. The established [nevadabreastfeeds.org](http://nevadabreastfeeds.org) website is missing a tab to highlight and promote breastfeeding-friendly childcare providers. Since finding a childcare provider who can support and promote a breastfeeding-friendly environment is crucial for breastfeeding parents, the first activity to improve breastfeeding equity will be to enhance resource dissemination by updating and making improvements to the website. Promoting these breastfeeding-friendly providers will help parents choose the right provider for their breastfeeding goals and encourage other childcare providers to seek the breastfeeding-friendly status.

For many new parents, finding breastfeeding support is a challenge, and the responsibility is often placed on the individual person to discover appropriate resources. In Nevada, there is limited access to IBCLCs, particularly among our rural, Spanish speaking, and representation of our minority populations. Therefore, the second strategy to improve breastfeeding equity and food and nutrition security in Nevada is to increase access to professional support by increasing the number of professionals who are among and representative of these communities.

The last strategy to improve breastfeeding equity and food and nutrition security is to increase support for breastfeeding in early care and education (ECE). Increasing access to ECE programs that support breastfeeding families will help women start and continue breastfeeding. Therefore, this project is going to focus on improving breastfeeding support in ECEs and highlighting ECEs the state has designated as “breastfeeding-friendly.” Support is needed for breastfeeding parents who may not have the capability to be with their infant throughout the day. ECE center support to this dyad is vital for continued success in breastfeeding. Staff at these ECE centers need to understand not only the importance of breastfeeding but also how to safely prepare and store breastmilk, identify appropriate hunger cues and provide a space where parents can breastfeed or express breast milk for their infant. An educational video will be created that targets ECE staff and highlights culturally appropriate support for their breastfeeding parents.

**Please describe your approach to integrating health equity into your efforts.**

Breastfeeding equity is a critical part of nutrition and health-related equity. Unequal access to breastfeeding and lactation support and supplies contributes to infant feeding disparities and health inequities. Closing this breastfeeding disparity gap begins with developing our efforts through an equity lens. Therefore, the DPBH seeks to promote actions that build organizational and system capacity to advance breastfeeding through education, training, policies, practices, and continuous quality improvement. Furthermore, DPBH will address disparities and inequities in breastfeeding rates among historically disadvantaged breastfeeding parents to improve positive health, social, and economic outcomes.

Even when resources are available, lactation professionals may lack cultural humility and often do not even speak their language. In Nevada, there is limited access to IBCLCs, particularly among our rural, frontier, and Spanish-speaking populations. Therefore, the first strategy to improve health equity in this project is to increase access to IBCLCs by sponsoring up to six Nevadans to obtain lactation training/certifications focusing on Spanish-speaking individuals, those living in rural and frontier counties, and the African American population. Increasing the diversity of and access to diverse IBCLCs will allow parents to receive visual, hands-on feedback that will help them learn about lactation strategies in a culturally and linguistically appropriate manner. Additionally, with breastfeeding rates in the African American population historically low, it is important to ensure the African American community has breastfeeding support and primarily support from peers. Therefore, the African American population will be the third group with increased IBCLC representation.

Developing culturally competent approaches and resources helps break down misconceptions about breastfeeding. Consequently, DPBH’s will also create culturally relevant ECE staff educational video and disburse to current and newly designated breastfeeding-friendly ECE sites, CACFP locations, SNAP-Ed implementing



agencies and other avenues as appropriate. This video will consist of culturally responsive and inclusive, evidence-based breastfeeding information, images, and examples of encouraging and supporting diverse populations in childcare settings. This one-hour breastfeeding education video



## Guidance on Completing Action Steps Template

### What are Major Action Steps?

These are overarching actions or goals that support the implementation of your Special Breastfeeding Project. Major Action Steps should be reflected as whole numbers (Action Step 1,2,3, etc.)

### What are Sub Action Steps?

Your Major Action Steps most likely have Sub Action Steps that will help you achieve the Major Action Steps. They will be numbered as followed:

- Sub Action Steps for Action Step 1 will be 1.1, 1.2, 1.3, etc.
- Sub Action Steps for Action Step 2 will be 2.1, 2.2, 2.3, etc.
- And so on
- Feel free to add or delete rows as needed.

*Please provide Responsible Parties/Partners, Expected Outputs, and Additional Comments for all Sub Action Steps.*

### Some friendly reminders:

- **Action Steps** are specific activities that outline **what** is being done, **who** is delivering and **who** is receiving, **where** it is taking place (virtually, in person, etc.), **how** it is being implemented/the delivery model (webinar, conference, workshop, etc.) and by **when**.
  - Example: New York City DOH (**who**) will partner with Happy Mama breastfeeding coalition (**who**) through an MOU (**how**) to provide two trainings on supportive breastfeeding to five TBD community-based organizations (**what**) located in Brooklyn & Harlem NY (**where**) by September 2022 (**when**).
- **Expected Outputs** are the tangible or measurable deliverables or the things we “walk away with” after we conduct an activity. Some examples might be: MOUs/other types of partnership agreements, environmental scan, new partnerships, etc.



**Major Action Step 1: The Nevada Division of Public and Behavioral Health (DPBH) will update information on the Nevadabreastfeeds.org website to support breastfeeding in early childhood education centers (ECEs) by December 31<sup>st</sup>, 2022.**

<b>Sub Action Step</b> <i>(who, what, where, how, when)</i>	<b>Responsible Party/Partners</b> <i>(Agency or the individual responsible for achieving the action step. Include partner(s) if any)</i>	<b>Expected Output</b> <i>(Provide expected output(s) for each action step, such as an MOU, a toolkit, training materials, 2 partners, 3 meetings attended, etc.)</i>	<b>Additional Comments</b> <i>(Added comments or resources useful for achieving the action step)</i>
<u>Sub Action Step 1.1: DPBH will update nevadabreastfeeds.org to highlight breastfeeding-friendly ECEs by December 31<sup>st</sup>, 2022.</u>	Chronic Disease Prevention and Health Promotion (CDPHP) Office of Food Security	Updated website that makes it easy for parents to identify breastfeeding-friendly ECE's near them	

**Major Action Step 2: The Nevada Division of Public and Behavioral Health (DPBH) will create one (1) training video for ECE staff regarding breastfeeding by December 31<sup>st</sup>, 2022.**

<b>Sub Action Step</b> <i>(who, what, where, how, when)</i>	<b>Responsible Party/Partners</b> <i>(Agency or the individual responsible for achieving the action step. Include partner(s) if any)</i>	<b>Expected Output</b> <i>(Provide expected output(s) for each action step, such as an MOU, a toolkit, training materials, 2 partners, 3 meetings attended, etc.)</i>	<b>Additional Comments</b> <i>(Added comments or resources useful for achieving the action step)</i>
<u>Sub Action Step 2.1: DPBH will establish a work order with a vendor to produce the training video by December 31<sup>st</sup>, 2022.</u>	CDPHP Office of Food Security	Work order established Vendor secured	
<u>Sub Action Step 2.2: DPBH will partner with a selected vendor to draft video content by December 31<sup>st</sup>, 2022.</u>	CDPHP Office of Food Security	Video content drafted	
<u>Sub Action Step 2.3: DPBH will consult with the CDPHP Health Equity team to receive and</u>	CDPHP Office of Food Security and CDPHP Health Equity Unit	Feedback documented	



<u>incorporate feedback about health equity and cultural humility by December 31<sup>st</sup>, 2022.</u>			
<u>Sub Action Step 2.4: DPBH will share content with select ECE leadership and staff to receive feedback regarding content and training and ensure clarity of training by December 31<sup>st</sup>, 2022.</u>	CDPHP Office of Food Security, selected ECEs	Feedback documented	
<u>Sub Action Step 2.5: DPBH will produce one (1) culturally relevant and inclusive breastfeeding video by December 31<sup>st</sup>, 2022.</u>	CDPHP Office of Food Security and Vendor	Video produced	
<u>Sub Action Step 2.6: DPBH will disseminate video to ECEs using existing ECE network by December 31<sup>st</sup>, 2022.</u>	CDPHP Office of Food Security	Dissemination list and record	
<u>Sub Action Step 2.7: DPBH will conduct a follow up survey regarding video use among staff to assess improved knowledge, attitude, and behavior regarding breastfeeding in ECEs by December 31<sup>st</sup>, 2022.</u>	CDPHP Office of Food Security	Survey Dissemination and Results	
<b>Major Action Step 3:</b> DPBH will sponsor up to six (6) Nevadans to obtain Lactation training/ certification targeting Spanish speakers, rural/frontier populations, and the African American population by July 31 <sup>st</sup> , 2023.			
<b>Sub Action Step</b> <i>(who, what, where, how, when)</i>	<b>Responsible Party/Partners</b> <i>(Agency or the individual responsible for achieving the action step. Include partner(s) if any)</i>	<b>Expected Output</b> <i>(Provide expected output(s) for each action step, such as an MOU, a toolkit, training materials, 2 partners, 3 meetings attended, etc.)</i>	<b>Additional Comments</b> <i>(Added comments or resources useful for achieving the action step)</i>
<u>Action Step 3.1: DPBH will work with its existing partner network (MCAH, WIC, SNAP-ED, CDPHP Health Equity Unit etc) to identify and recruit six (6) persons representing rural/</u>	CDPHP Office of Food Security CDPHP Health Equity Unit MCAH WIC	Individuals identified and recruited from rural/ frontier, Spanish Speaking, and African/ American communities	



<u>frontier, Spanish Speaking, and African/ American communities by July 31<sup>st</sup>, 2022.</u>	Snap-ED		
<u>Action Step 3.2: DPBH will sponsor lactation training for identified individuals by July 31<sup>st</sup>, 2023.</u>	CDPHP Office of Food Security	Sponsored individuals trained	



# State Partnerships Improving Nutrition & Equity (SPINE)

## Special Breastfeeding Project State Action Plan Template

### Section 2: Partnerships

Partner Name	New, Existing, or Strengthened Partnership	How Partner Will Help to Implement SAP and Influence PSE Changes	Progress <i>Progress column(s) will be completed during quarterly reporting to describe progress in planned partnership activities and how efforts may have pivoted to address equitable food and nutrition security.</i>
CDPHP Health Equity Unit	Existing	Review all materials to ensure health equity and cultural humility. Assist with recruitment of individuals for training.	
WIC	Existing	Assist with recruitment of individuals for training. Dissemination of materials	
SNAP-ED	Existing	Assist with recruitment of individuals for training. Dissemination of materials	
MCAH	Existing	Assist with recruitment of individuals for training. Dissemination of materials	
ECE Network	Existing	Assist with recruitment of individuals for training. Dissemination of materials. Provide feedback on training. Participate in evaluation of training.	



# State Partnerships Improving Nutrition & Equity (SPINE) Special Breastfeeding Project State Action Plan Template

## Section 3: Additional Information

### 1. Challenges/Barriers

- a. Identifying sponsorship candidates that are far enough along in their education and training requirements to sit for the IBCLC exam by July 2023. Potential of these individuals to not pass the exam.
- b. Time for ECE center staff to view a one-hour educational video

### 2. Solutions, if any, related to challenges/barriers above:

- a. Work with WIC clinics and breastfeeding coalitions to outreach and identify the best candidates for sponsorship.
- b. Work with the centers to encourage viewing during in-service meetings and be available for any technical assistance needed.

### 3. Other Leveraged Funds:

- a. CDPHP Health Equity Grant (CDC Grant 21-2103)

### 4. Other Comments:

