Through the *Good Health and Wellness in Indian Country* (GHWIC) initiative CFDA 93.762, the Northwest Portland Area Indian Health Board (NPAIHB) began the Wellness for Every American Indian to Achieve and View Health Equity (WEAVE-NW) Project at the Northwest Tribal Epidemiology Center (NWTEC).

WEAVE-NW is able to provide between $1000 - $10,000 to federally recognized Tribes in Idaho, Oregon, and Washington seeking to implement policy, health systems, or environment change (PSEs) approaches aimed at prevention of cardiovascular disease, obesity, and/or type 2 diabetes as well as associated risk factors.

In addition to these awards, through September 30, 2019, WEAVE-NW has technical assistance in the form of data analysis, program evaluation, strategic planning and other opportunities. Please contact WEAVE-NW at [weave@npaihb.org](mailto:weave@npaihb.org) , if you would like support beyond this funding opportunity.

**Activity Examples**

* Contract or stipend for a gardener and/or garden supplies
* Traditional Food Preparation classes: recipe books, elder’s honoraria for Native Chef, etc.
* Population Health or other health systems trainings, consultant, software
* Youth Risk Behavior Survey (YRBS) to include printing materials, pre-meeting costs, and funding for Youth Health Initiative based on YRBS results.
* Community-based assessment (eg. Community inventory, CHANGE Tool, Food Sovereignty Assessment, Environmental Physical Activity Assessment) that includes strategic planning towards implementation.
* Food Sovereignty Support including signage for gardens, informational materials, and meeting expenses.
* Meeting expenses for policy stakeholder meetings in preparation of a PSE sustainably focused policy initiative.
* Develop and implement workplace wellness policy and/or committee for tribal employees
* Cultural adaptation of existing program or campaign materials focusing on breastfeeding, diabetes or heart disease prevention
* Develop and implement nutrition standard policies regarding availability of healthy foods and beverages in community vending machines, at community meetings or events
* Healthy Food or Beverage Policy Initiatives
* Physical Activity community based initiatives (Funding for a bike library or walking path)
* Training in peer breastfeeding support, lactation consultant certification
* Built environment improvements to accommodate breastfeeding for tribal employees, including improvements to nursing rooms.

**To submit your completed application or for additional information please contact:**

Email: [weave@npaihb.org](mailto:weave@npaihb.org)

Phone: 503-228-4185

**Implementation Funding Request for Applications**

**Funding Amount:**

* **$1,000. - $10,000.**

**Date of issuance:**

* Rolling basis determined by available funding
* October 1, 2017 – September 29, 2018

**Notice of Funding Approval:**

* Within 30 days of Contract Signing

**Issuing Project:**

* WEAVE-NW, Northwest Tribal Epidemiology Center

**Funding Requirements**

* Recipients must represent one of NPAIHB’s 43 member Tribes.
* Recipients must utilize funding to implement activities related to health prevention policies, health systems, or built environment approaches as mentioned in the outcomes section.
* Recipients must participate in evaluation TBD by proposed funding activities.

**Funding Restrictions (from CDC)**

Restrictions that must be considered while planning the project and writing the budget are:

* Recipients may not use funds for research.
* Recipients may not use funds for clinical care.
* Recipients may use funds only for reasonable project purposes, including personnel, travel, supplies, and services.
* Recipients may not use funds to purchase furniture, equipment, or clinic/patient supplies.
* Salaries, if requested, are restricted to project activities.
* Recipients may not use funds to break ground, however use of funds for salaries or for temporary equipment may be used (inquire for specific details).

**Funding Agreement** All funded Tribes will need to sign a Contract Agreement with the NPAIHB. This will include a commitment to work with the WEAVE-NW Project Evaluation or other staff (the level and types of evaluation will be specific to each proposed implementation activity). At the end of your project you will be requested to complete a concluding project survey report (the template will be provided to you).

**All project activities and invoicing must be** **completed by September 29, 2018**

**Application Instructions**

Completed Application will include:

Brief Project Narrative (details below)

Project Outcomes (check the items that apply in section below)

Budget Justification and details (Financial sheet detailing expenditures of funding below)

Letter(s) of Support and/or Tribal Resolution

Evaluation statement of how the successes or failure of the objective will be determined

|  |  |
| --- | --- |
| Tribe |  |
| Agency Name |  |
| Full Location Address |  |
| Full Mailing Address, if different |  |
| Program/Subcontract Contact Name |  |
| Telephone Number |  |
| E-mail |  |
| Amount of Funding Requested |  |

**Project Narrative**: Briefly describe how the WEAVE-NW funds will be used within your community, **not to exceed 2 paragraphs**.

**Project Plan (please use Workplan template attached)**

Description of project goals and measurable activities. Indicate whether this is a new or an ongoing activity. If this is similar to current work please indicate how these funds will further support and extend the current activities.

**Project Outcomes** should include at least two of the following outcomes **(Please check all that apply):**

Cultural adaptation and implementation of evidence-based practices, for the prevention of cardiovascular disease, stroke, type 2 diabetes, commercial tobacco use, physical inactivity, and unhealthy diet.

Increase availability and access to healthy traditional and other foods and beverages, such as fruits, vegetables, and water.

Increase opportunities for physical activity and utilization of these opportunities.

Increase number of tribal members protected from secondhand commercial tobacco smoke as a result of implementation of tobacco-free policies.

Increase use of team-based care strategies for the prevention of heart disease, stroke, type 2 diabetes, commercial tobacco use, and obesity, including use of health care extenders such as Community Health Representatives, pharmacists, public health nurses, case managers, patient navigators, etc.

Increase number of tribal programs, departments and facilities that adopt and implement practices that increase physical activity and improve the nutrition quality of foods and beverages available in these settings.

Increase number of settings within and adjacent to tribal communities that develop, adopt and implement food service guidelines/nutrition standards, including sodium standards, that improve the nutrition quality of foods and beverages offered or available in these settings, including vending machines.

Increase community-clinical linkages to support prevention, self-management, and treatment of, type 2 diabetes and their affiliated risk factors.

Increase proportion of high-risk adults who participate in CDC-recognized diabetes prevention program.

Increase percentage of adults or youth who increase consumption of nutritious foods and beverages and decrease total intake of discretionary calories, including added sugars and solid fats.

Increase physical activity among children, youth, and adults in the population.

Increase proportion of patients with high blood pressure and/or diabetes who adhere to a self- management plan.

Increased proportion of adults with high blood pressure and adults with type 2 diabetes in adherence to medication regimens.

Increase number of adult smokers making quit attempts and using tobacco cessation quit lines.

Expand the reach of the TIPs Campaign (Tips from Former Smokers) with culturally relevant and tribal-specific education. (For more information on the TIPS campaign see <http://www.cdc.gov/tobacco/campaign/tips/> )

Decrease the number of youth that initiate commercial tobacco use.

Increase number of policies and support that promote initiation, duration and exclusivity of breastfeeding.

**Budget**

Include a **budget narrative justification** to describe the following, as relevant to the project:



|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project**  **Goal (PSE):** |  | | | | | | |
| **Rationale for priority area:** | |  | | | **Number of People Reached:** |  | |
| **Objective** | | **Activities** | **Timeline**  **(Include Deadlines & Benchmarks)** | **Staff** | **Ongoing Program?**  (Yes or No, if Yes please describe how these activities will extend and further support current work) | **Partnerships & Resources** | **Evaluation**  **Tracking Measures** |
|  | |  |  |  |  |  |  |