Through the *Good Health and Wellness in Indian Country* (GHWIC) initiative, 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 **5 subcontracts of up to $25,000 each** to federally recognized Tribes in Idaho, Oregon, and Washington that are seeking to implement systems, policy or environment change (PSEs) approaches to address the following health areas:

1. Obesity – Food Systems Change
2. Obesity – Breastfeeding Promotion and Support
3. Commercial tobacco use

It is important to note that this funding **must be used** for policy, system, or environment (PSE) change. The focus is on upstream, sustainable change at the community level as opposed to programs which impact one individual at a time. Applicants should ensure their activities include PSE approaches.

For more information on PSE approaches, please see attachment following the application.

Applicants are welcome to contact the WEAVE-NW team with proposal ideas for guidance between **August 17th and September 30th.** To arrange a call with one of our content experts, please contact the WEAVE-NW Project Assistant, Chelsea Jensen, at [cjensen@npaihb.org](mailto:cjensen@npaihb.org) or 503-975-0921.

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

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

Phone: 503-975-0921

**WEAVE-NW 2019 Funding Request for Applications**

**Funding Amount:**

* $25,000 total including indirect costs

**Date of issuance:**

* August 17, 2020

**Applicant Information:**

* 1pm - August 25th
* Open question period: August 17th – September 30th 2020

**Applications Due:**

* September 30th, 2020

**Anticipated Notice of Award by:**

* October 15, 2020 (note that final award issuance will depend on CDC review and approval)

**Issuing Project:**

* WEAVE-NW, Northwest Tribal Epidemiology Center

**Funding Requirements**

* Recipients must represent one or more 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 described in the outcomes section.
* Recipients must participate in evaluation activities to be determined upon award.
* This opportunity is for one year of funding.

**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 activities and evaluation report (the template will be provided to you)**. All project activities and invoicing must be** **completed by September 15, 2021**

**Application Instructions**

Completed Application will include:

Brief Project Narrative (details below)

Project Activity Area (check **one** area under which your project falls in section below)

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

Workplan and evaluation measures

Letter of Support or if required by Tribe, a Tribal Resolution

|  |  |
| --- | --- |
| 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 **(no more than 2 pages).** This award is for one year.

In your project narrative, please include:

1. Background of the health challenge your project will address in your community.
2. The target population.
3. Purpose and overall objective.
4. An overview of the activities to be completed. If social distancing is required, please include how these activities will be adapted.
5. Capacity and strengths of existing programs to carry out activities.
6. A workplan including outcome for the funding period. (form attached)

**Project Activity Area**

Funded activities must fall within **one** of the following activity areas. Please select **one** area of primary focus for your proposed activities.

**Obesity Prevention – Food Systems Change**

Projects under this activity area seek to prevent obesity through improving access to healthy and traditional foods. Food sovereignty and food systems change-focused activities should select this area. Potential projects include:

* Food code development to distribute food at farmers’ markets, schools, childcare settings, tribal enterprises, etc.
* Developing and/or expanding community gardens or model farms.
* Restoring traditional food habitats.
* Food sovereignty or traditional/healthy foods media or education, if in support of the PSE change activities listed above.

While not required, if one has not already been completed, applicants can include conducting a baseline Food Sovereignty Assessment part of their activities. WEAVE-NW can provide training and technical assistance to support this work.

Applicants under this area are encouraged to participate in the Northwest Tribal Food Sovereignty Coalition.

Upon award, WEAVE-NW evaluation team will work with recipients to create performance measures that align with their chosen activities and assist in identifying available and feasible data for these measures within the community. Although specific outcomes will depend on the details of the project, all projects under this area must have a medium-term goal of **increasing the number or percentage of places offering healthy/traditional foods within the community.**

**Obesity Prevention – Breastfeeding Promotion and Support**

Projects under this activity seek to prevent obesity through increasing continuity of care/community support for breastfeeding. Potential projects include:

* Developing or expanding peer breastfeeding counselor training/programs.
* Establishing connections and/or MOU between hospitals and tribal clinics, WIC, or other partners to increase access to baby friendly and culturally competent birthing rooms for tribal mothers and strengthen connection between pre-natal care, delivery, and tribal services for new mothers .
* Developing tribal policies to support and encourage breastfeeding, e.g. paid breaks for milk expression.
* Breastfeeding media and education campaign (preferably based on assessment of community needs).

While not required, if one has not already been completed, applicants may include conducting a baseline Breastfeeding Assessment part of their activities. WEAVE-NW can provide training and technical assistance to support this work.

Applicants under this area are encouraged to participate in the Northwest Tribal Food Breastfeeding Coalition.

Upon award, WEAVE-NW evaluation team will work with recipients to create performance measures that align with their chosen activities and assist in identifying available and feasible data for these measures within the community. Although specific outcomes will depend on the details of the project, all projects under this area will have the short-term goal of **increasing the number of places that implement culturally-adapted continuity of care/community support strategies to promote and support breastfeeding** and a medium-term goal of **increasing the number of mothers who use these services.**

**Commercial Tobacco Prevention/Control**

Projects under this activity seek to reduce the prevalence of commercial tobacco use tobacco-free policies and practices. Potential projects include:

* Implementing commercial tobacco-free policies/flavored vape restrictions.
* Providing commercial tobacco cessation training for community providers and clinical staff.
* Improving health system to increase screenings and referrals to commercial tobacco cessation treatment.
* Creating tribal cessation training in conjunction with IHS.
* Incorporating traditional cultural activities/medicines into tobacco cessation programs.
* Developing education and/or media campaigns around commercial tobacco/vaping health risks, if in support of the PSE change activities listed above.

While not required, if one has not already been completed, applicants may include conducting a baseline assessment of tobacco and vaping/e-cigarette use, clinical tobacco programs and/or community resources part of their activities. WEAVE-NW can provide training and technical assistance to support this work.

Upon award, WEAVE-NW evaluation team will work with recipients to create performance measures that align with their chosen activities and assist in identifying available and feasible data for these measures within the community. Although specific outcomes will depend on the details of the project, all projects under this area will have the medium-term goal of **increasing the number of places in the community that implement commercial tobacco-free policies** OR **increasing the number of commercial tobacco users who receive cessation interventions.**

**Budget**

Applicants are required to submit **a one-year budget of no more than $25,000**.

Applicants should complete the budget template below including a brief budget on the right.

If needed, personnel, with the exception of consultants, contributing their time to the project should be listed on lines 1 and 2.

* Title
* Salary
* Fringe benefits
* Time spent on this project as a proportion of one full time equivalent (FTE)
* Role and responsibilities within the project

On line 3, consultants brought in to support the project, number of hours anticipated and total contract amount, and the roles/responsibilities of the contractor within the project should be listed.

Each piece of equipment to be purchased should be listed on line 4, along with a justification of need within the project. Equipment costing less than $5,000 should be included in the supplies category. Note that total cost for pre-fabricated structures such as greenhouses, raised garden beds and sheds must be less than $5,000 and cannot involve new construction such as poured concrete, permanent lighting, plumbing or heated/cooled space.

Training costs should be listed on line 5 with justification of need within the project.

Supplies should be listed on line 6, along with justification of need within the project. Routine office supplies can be listed as one item. Note that live animals cannot be purchased with CDC funds. Note that funding cannot be used to buy clinical supplies. Supplies may include items needed to extend activities via on-line platforms or other methods required to accommodate COVID-19 requirements.

Estimated cost of travel, purpose of travel, and title/roles of staff members who will be travelling should be listed on line 6, along with justification of need relative to the project goals. Travel expenses should not exceed GSA rates.

Indirect expenses should be listed on line 13.

|  |  |  |  |
| --- | --- | --- | --- |
| **Itemized Costs** | | | **Justification** |
| Salary and Wages | |  |  |
| Fringe Benefits | |  |  |
| Consultant Costs | |  |  |
| Equipment | |  |  |
| Training | |  |  |
| Supplies | |  |  |
| Travel | |  |  |
| Deliverable Cost | <enter description> |  |  |
| Other | <enter description> |  |  |
| Other | <enter description> |  |  |
| Other | <enter description> |  |  |
| Subcontract Costs | |  |  |
| **TOTAL DIRECT COSTS** | |  |  |
| Indirect Costs ($) | |  |  |
| **TOTAL INDIRECT COSTS** | |  |  |
| **TOTAL FOR CONTRACT** | |  |  |

**WEAVE NW Workplan:** Please complete the workplan template below for detailed overview of activities, timeline, resources, and evaluation criteria

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