



CDC-RFA-DP-24-0025

A Cultural Approach to Good Health and Wellness in Indian Country (GHWIC)

Department of Health and Human Services

Centers for Disease Control - NCCDPHP

GENERAL INFORMATION

Document Type:	Grants Notice
Opportunity Number:	CDC-RFA-DP-24-0025
Opportunity Title:	A Cultural Approach to Good Health and Wellness in Indian Country (GHWIC)
Opportunity Category:	Discretionary
Opportunity Category Explanation:	
Funding Instrument Type:	Cooperative Agreement
Category of Funding Activity:	Health
Category Explanation:	
Expected Number of Awards:	28
CFDA Number(s):	93.479 -- Good Health and Wellness in Indian Country
Cost Sharing or Matching Requirement:	No

Version:	Forecast 1
Forecasted Date:	Aug 07, 2023
Last Updated Date:	Aug 07, 2023
Estimated Post Date:	Dec 26, 2023
Estimated Application Due Date:	Feb 24, 2024 Electronically submitted applications must be submitted no later than 11:59 pm ET on the listed application due date.
Estimated Award Date:	Aug 30, 2024
Estimated Project Start Date:	Sep 30, 2024
Fiscal Year:	2024
Archive Date:	Mar 25, 2024
Estimated Total Program Funding:	\$104,446,590
Award Ceiling:	\$1,450,000
Award Floor:	\$100,000

ELIGIBILITY

Eligible Applicants:

Native American tribal governments (Federally recognized)
Others (see text field entitled "Additional Information on Eligibility" for clarification)
Native American tribal organizations (other than Federally recognized tribal governments)

Additional Information on Eligibility: Component 1: Federally recognized American Indian Tribes/Alaska Native Villages, and Urban Indian Organizations (UIOs). Component 2: Tribal organizations that support all American Indian Tribes/Alaska Native Villages in their Area (12 IHS Administrative Areas), or Urban Indian Organizations (Urban Area defined for this NOFO) and have at least 4 Tribes/Villages or UIOs in their Area. Component 3: Tribal organizations that support all American Indian Tribes/Alaska Native Villages in their Area (12 IHS Administrative Areas), or Urban Indian Organizations (Urban Area defined for this NOFO) and have at least 4 Tribes/Villages or UIOs in their Area. Note: Unless otherwise defined, the term "Area" in this NOFO refers to the 12 IHS Administrative Areas and the Urban Area defined for this NOFO as the group of UIOs listed at: <https://www.ihs.gov/urban/nationalprograms/>. Eligibility is limited to a) Federally Recognized American Indian Tribes/Alaska Native Villages, b) Urban Indian Organizations (UIOs) that have current Title V Indian Health Care Improvement Act contracts with the Indian Health Services, and c) American Indian or Alaska Native Tribal Organizations. In fiscal year (FY) 2019, Conference Report (CR), HR 115-862, provided that funding was included to "expand the Good Health and Wellness in Indian Country program" stating that the "Good Health initiative supports efforts by American Indian and Alaska Native communities to implement holistic and culturally adapted approaches to reduce tobacco use, improve physical activity and nutrition, and increase health literacy." This language builds on support for the program expressed in reports accompanying previous appropriations (e.g., the Explanatory Statement to the FY 2017 Appropriations stated that CDC should be guided by HR 114-699, that provided that "CDC is expected to build on these existing programs 'Good Health and Wellness in Indian Country' (GHWIC) to allow for a more comprehensive public health infrastructure in tribal communities and the ability to develop mechanisms to improve good health and wellness in Indian Country." In subsequent FYs, funding was either continued at previous enacted levels or increased. FY 2023, HR 117-403, recommended an increase of \$4,000,000. FY 2022, HR 117-96, included an increase of \$5,000,000. FY 2021, HR 116-450, recommended an increase of \$2,000,000. FY 2020, HR 116-62, provided for continued funding at the FY 2019 enacted level.

ADDITIONAL INFORMATION

Agency Name:

Centers for Disease Control - NCCDPHP

Description:

Leading with culture, A Cultural Approach to Good Health and Wellness in Indian Country (GHWIC) strategies combine (1) community-chosen cultural practices that are family centered to build resilience and connections to community, family, culture, and wellness; (2) policy, systems, and environmental changes (PSE) to build clinical-community linkages (CCLs) to support screening and assessing for chronic diseases and their risk factors (commercial tobacco use, diabetes and pre-diabetes, hypertension, obesity, and oral disease), and making referrals to clinical care, community-based organizations, and/or social service organizations for evidence-based and evidence-informed chronic disease prevention and management programs, including self-management and self-monitoring; and (3) PSEs and programs that promote wellness, prevent disease, and address nonmedical factors that influence health outcomes (built environment, food and nutrition, tobacco-free policy, and social connectedness), in a culturally appropriate manner. GHWIC has three (3) separate, competitive components with eligibility and scope of work requirements for each. Applicants must submit a separate application for each component for which they are applying. Component 1 (C1) applicants must propose at least one activity from each of three strategies. Applicants should describe their plans to implement evidence-informed and culturally appropriate activities to improve the health of their community members to prevent chronic diseases and their risk factors, (e.g., commercial tobacco use, diabetes and pre-diabetes, hypertension, obesity, and oral disease), establish CCLs, and address barriers to participation in clinical care and prevention and wellness activities. Recipients will include federally recognized Tribes, Alaska Native Villages, and Urban Indian Organizations (UIOs). Component 2 (C2) applicants must propose allocating at least 50% of their annual award in subawards to at least four (4) American Indian Tribes/Alaska Native Villages, UIOs, or other tribal entities within their IHS Area to implement all C1 strategies. With remaining award funds, C2 applicants must propose providing technical assistance, training, and resources for all Area Tribes/Villages/UIOs/other tribal entities in their IHS Area to support the planning, development, implementation, and evaluation of all C1 strategies. C2 applicants must also propose providing technical assistance, training, and resources to build partnerships and develop tailored communication messages. C2 applicants must describe how they will make subawards, including the rationale for their approach, so that all strategies and activities are addressed over the 5-year period of performance. This allows CDC resources and programs to reach additional local Tribes/Villages/UIOs/other tribal entities beyond those directly funded C1 recipients. Applicants will not need to identify the subawardees in the application but should describe how subawardees will be selected. Recipients will include tribal organizations that support all American Indian Tribes/Alaska Native Villages in their Area (12 IHS Administrative Areas), or Urban Indian Organizations (Urban Area defined for this NOFO) and have at least 4 Tribes/Villages or UIOs in their Area. Component 3 (C3) applicants must propose the establishment of a Tribal Coordinating Center (TCC) to develop a national communication plan, assist in the coordination, development, and implementation of a national evaluation plan with CDC evaluators, establish and support a Community of Practice (CoP) consisting of representatives from each GHWIC recipient, and facilitate regular CoP meetings to support shared learning and peer support to advance the goals of GHWIC. Recipients will include tribal organizations that support all American Indian Tribes/Alaska Native Villages in their Area (12 IHS Administrative Areas), or Urban Indian Organizations (Urban Area defined for this NOFO) and have at least 4 Tribes/Villages or UIOs in their Area. C3 applicants may also apply for C2 funding. GHWIC is the collaborative effort of six (6) divisions/office within CDC's National Center for Chronic Disease Prevention and Health Promotion: Division of Diabetes Translation, Division for Heart Disease and Stroke Prevention, Division of Nutrition, Physical Activity, and Obesity, Division of Oral Health, Division of Population Health, Office on Smoking and Health.

Link to Additional Information:

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