



First Nations Health Authority
Health through wellness

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Winter Wellness Challenge

Hosting Winter Wellness Challenges throughout British Columbia

Grant Eligibility

Organizations and agencies engaged in direct health service delivery to BC First Nations and/or Aboriginal people may be eligible for funding to host a community driven Winter Wellness Event or Challenge. To be eligible the challenge must be held between November 21 to December 21, 2014. The deadline for applications is October 27, 2014.

The First Nations Health Authority envisions healthy, self-determining and vibrant BC First Nations children, families and communities playing an active role in decision-making regarding their personal and collective wellness; therefore, as per Directive 1, the FNHA is challenging First Nations to create their own health challenge!

Community Challenge examples:

1. **Secwepemc Back to the Land Challenge:** Points are awarded for a variety of traditional foods that are harvested and preserved. One point is awarded for every individual that has harvested/preserved, one point for each food/medicine that is preserved and one point if a youth or child is able to report on the harvesting/preserving in their ancestral language. E.g. A Grandmother and child harvest a root and the child reports on it via video = 4 points. Prizes are awarded to individuals and communities.
2. **Observing Tobacco Free day:** Challenges for this can range from abstinence to harm reduction to respective tobacco use. Community members pledge to go 48 hours smoke-free. A 5km walk can be held and at the end of the walk the community members who have gone smoke free will be acknowledged and rewarded. Another example is having a tobacco plant growing challenge to take place over the month. Tobacco pouches could be made and handed out and the conclusion of the challenge.
3. **Community fish or hunt:** The person who catches the heaviest animal or fish is deemed the winner. Following this a feast can take place where prizes are given in different categories. **An example of this is Community Ice Fishing derby**
4. Challenges that involve the use of social media to raise awareness for an aspect of health or a health issue. Community members could challenge each other to take part in a traditional activity at which each participating member may be rewarded with a small prize and recognition. **An example of this is the ALS Ice Challenge or Winter Challenge**
5. A challenge to raise awareness for a specific target group over a specific length of time. **An example of this may be holding a 24 hour non-stop relay or physical activity or MoVember**

Applications will be weighed against the following criteria:

- Challenges that focus on the FNHA Wellness Streams
- BC First Nations community based applications (single or multiple)
- Applications where collaboration or partnership with other communities is possible and demonstrated at the regional, or sub-regional level
- Fairness and equity within and across the regions
- Host organizations that can involve higher numbers of participants
- Past Day of Wellness grant recipients who have submitted final reports for last year's grant.

Application Form

To apply for a grant, please complete this form. Funds may be used for any required costs necessary to carry out the challenge (except assets or infrastructure). Only fully completed application forms will be considered.

Applications can be received via email, fax or via the Fluid Survey link no later than **October 21, 2014 at 4pm** . If a fax is being sent then you must first call the phone number below to let them know that your entry will be sent by fax:

First Nations Health Authority – Winter Wellness Challenge

Email: active@fnha.ca

Phone: (604) 693-6575

Fluid Survey Link: <http://fluidsurveys.com/surveys/fnha/winter-wellness-challenge/>

Fax: (604) 913-2081

LEGAL NAME OF HOST ORGANIZATION (as it should appear on grant cheque):

HOST ORGANIZATIONS COMPLETE MAILING ADDRESS: (include Postal Code)

YOUR NAME

**NAME OF YOUR WINTER WELLNESS COORDINATOR:
(Person within your organization who will be the contact with FNHA)**

WINTER WELLNESS COORDINATOR'S POSITION/JOB TITLE WITH THE HOST ORGANIZATION:

WINTER WELLNESS COORDINATOR'S CONTACT NUMBERS:

Work: Ext:

Cell:

WINTER WELLNESS DAY EVENT COORDINATOR'S EMAIL ADDRESS:

HOW DID YOU HEAR OF THE WELLNESS DAY CHALLENGE?

- eBlast Newsletter FNHDA Email FNHA Facebook Other: _____
- FNHA website Word of Mouth AHLA Regional Leadership Training Sessions
- Partner's Council email

Which wellness streams will be part of your challenge?
(Check all that are applicable)

- Being Active Nurturing Spirit
- Healthy Eating Respecting Tobacco

Describe the challenge, how it fits into one or more wellness stream and how it will be monitored/rated/scored/prizes awarded:

For more information on the Wellness Streams please see our website

(<http://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/wellness-streams>)

TARGET GROUP	ESTIMATED NUMBER OF PARTICIPANTS YOU WILL INVOLVE
<p>Please check all that apply:</p> <p><input type="checkbox"/> Pre-school age</p> <p><input type="checkbox"/> School age / youth</p> <p><input type="checkbox"/> Adults – women</p> <p><input type="checkbox"/> Adults - men</p> <p><input type="checkbox"/> Elders</p> <p><input type="checkbox"/> Pregnant women</p> <p><input type="checkbox"/> All of the above</p> <p><input type="checkbox"/> Other: _____</p>	<p><input type="checkbox"/> between 51 and 100</p> <p><input type="checkbox"/> between 100 and 150</p> <p><input type="checkbox"/> between 151 and 200</p> <p><input type="checkbox"/> between 201 and 250</p> <p><input type="checkbox"/> between 251 and 300</p> <p><input type="checkbox"/> between 300 and 400</p> <p><input type="checkbox"/> between 400 and 500</p> <p><input type="checkbox"/> over 500</p>
<p>Did your community/organization receive a FNHA Day of Wellness Grant for National Aboriginal Day?</p>	<p>If yes, did you submit a Final Report on your event?</p>
<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	

A. GRANT CATEGORIES

Funding Amounts Available for Challenges

Amount	Typical Applicant Type
Category 1: \$4000-5000	Nation, Regional or Sub regional collaborations and partner agencies, groups or organizations
Category 2: \$1,000-3,999	Multiple (up to 4) BC First Nations Community(s), and partner agencies Groups, or Organizations
Category 3: Up to \$1000	Single Community or Organization or Group serving BC First Nations

Challenges

Funding Category 1: \$4000-5,000

Nation-based or regional scale challenges with collaborating communities or groups

- Participation from multiple First Nations communities and health or social organizations providing health services to BC First Nations
- Ability to leverage community and corporate partnerships for increased collaboration and cost-sharing
- Challenges that benefit a high number of BC First Nation community members living home or away from home (500 or more)

Funding Category 2: \$1,000-\$3,999

Sub-regional level challenges (multiple community collaboration of 4 or more)

- First Nations communities (up to 4) and organizations and health or social organizations providing health services to BC First Nations
- Ability to leverage community and corporate partnerships for increased collaboration and cost-sharing
- Challenges that benefit a high number of BC First Nation community members living home or away from home (300 or more)

Funding Category 3: Up to \$1,000

Single BC First Nation community or small collaboration of communities (1-3) that is/are isolated and/or remote

- A remote or isolated individual First Nation Community
- A collaboration of 1-3 communities that are relatively remote or isolated (ie. First Nations Health Center serving multiple communities) with less than 300 participants expected

B. BUDGET: How will your funding be spent (your best estimate):

BUDGET	ESTIMATED COST (\$)
Revenues (cash or in kind): Host organization (Your own organization) Partner organization(s) FNHA (How much funding are you requesting from the FNHA?) <u>Total Revenues</u>	
Expenses: Transportation Food/Water Honoraria Supplies/Resource Material Promotional Advertising Other: <u>Total Expenses</u>	

C. PARTNERS: Please list official First Nations communities and other community partner agencies (Health Authority, non-profit organizations, businesses, etc.) for your challenge (willing to share in expenses, resource materials, host facilities, tobacco control/health promotions expertise, knowledge in culture/traditions, etc. Please note providing a community based letter of support may be requested):

Partner Name:	Partner types: <input type="checkbox"/> First Nations/Aboriginal Community <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Business <input type="checkbox"/> Other _____
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The FNHA would like to learn from these Wellness experiences and share resources and information in order to continue to grow in our Wellness Journey. We require a brief report on your Challenge (template to be provided to successful communities), along with photos of your Challenge. We look forward to connecting with you in the near future to discuss your successes.

For any questions regarding grant application and guidelines please contact us at: active@fnha.ca.