Good Health and Wellness in Indian Country (GHWIC)

Good Health and Wellness in Indian Country (GHWIC) is a Centers for Disease Control (CDC) funded grant no. NU58DP006732 awarded to the Rocky Mountain Tribal Leaders Council (RMTLC). GHWIC's goal is to support a coordinated, holistic approach to healthy living and chronic disease prevention, reinforce the work already underway in Indian Country to make healthy choices and lifeways easier for American Indians and Alaska Natives, and to build off the previous GHWIC cycle to emphasize strategies in Native communities, reduce obesity, prevent type 2 diabetes, reduce commercial tobacco use, and other risk factors for heart disease and stroke.

The purpose of GHWIC project is to a) increase the purchase of healthy foods and physical activity with an emphasis on walking, b) increase breastfeeding, c) reduce prevalence of commercial tobacco use, d) reduce incidence of type 2 diabetes and e) reduce the prevalence of high blood pressure and high cholesterol.

- Through tribal subawards, GHWIC program provides funding, training, technical assistance, and evaluation support to Montana/Wyoming Tribes and UIOs conducting activities across all four strategies addressing policy, systems, and environmental changes and community clinical linkages.
- ♦ In year-2 RMTLC-GHWIC disseminated over 52% overall award to tribes/tribal orgs who applied for funding and met the application requirements.

GHWIC YR2 (2020-2021) funded tribes/organizations:

- Blackfeet Southern Peigan Health Center
- Fort Belknap Tribal Health Department
- Little Shell Tribe Tobacco Program
- Eastern Shoshone Tribal Health Department
- Wild Rose Center-Northern Cheyenne
- FAST Blackfeet
- Blackfeet Agriculture Resource Management Program
- Billings Urban Indian Health & Wellness Center
- Wind River Cares Northern Arapaho
- Rocky Boy Health Center



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FOUR FOCUS AREAS ADDRESSING

Policy, Systems, and Environmental Strategies (PSE) & Community Clinical Linkages (CCL)



Strategy 1: Implement evidence-informed and culturally-adapted policy, system, and environmental changes to prevent obesity







Strategy 2: Implement evidence-informed and culturally-adapt policy, system, and environmental changes to prevent and control commercial tobacco use









Strategy 3: Implement evidence-informed and culturally-adapt community-clinical linkages to support type 2 diabetes prevention







Strategy 4: Implement evidence-informed and culturally-adapt community clinical linkages to support heart disease and stroke prevention







Long Term Goals:

Reduce Rates of death and disability from tobacco use by 5%; Reduce prevalence of obesity by 3% Reduce rates of de and disability from diabetes, heart disease, and stroke by 3%