

## Health Equity Zone For Native Communities Submission Form

### Community-Driven Solutions for Health Equity

Health Equity Zones is a community-driven initiative, created from the understanding that people who are most impacted by health inequities are closest to the solutions that will improve their health.

This initiative, created by [legislation](#), supports a unique approach for the Washington State Department of Health to collaborate with community through participatory decision-making and innovative funding structures. Through the initiative, the Department of Health will collaborate with the selected health equity zones as they identify pressing health concerns, develop strategies that address their unique needs and strengths, and implement projects to improve the health of their community.

The Health Equity Zones Community Advisory Council, comprised of Native, community, and sector leaders, established the foundation and vision for the Health Equity Zones Initiative. Native community representatives on the Community Advisory Council formed a Zone for Native Communities Subcommittee to develop submission guidelines, which includes a zone definition, eligibility criteria, and selection process. The subcommittee invited input on the selection process from Native leaders in Washington and led recruitment of an Indigenous Advisory Panel reflective of Tribal and Urban Native communities from across the state. The Indigenous Advisory Panel will review the submission forms and select the Health Equity Zone for Native Communities.

On March 18, 2024, the Health Equity Zones Initiative opened submissions for the Health Equity Zone for Native Communities. Tribal and Urban Native communities from across Washington are encouraged to apply. One community will be selected by the Indigenous Advisory Panel in this pilot phase of the Initiative.

The selected community will receive flexible funding of \$200,000 per year for two years that can be used towards developing organizational infrastructure to support community decision-making, identifying health priorities, and developing culturally relevant strategies. The Department of Health is committed to supporting the zone in securing additional funding that aligns with the identified health priorities to implement community selected strategies.

For more information about the Health Equity Zones Initiative and zone selection process, please [visit our webpage](#). For questions, contact [HealthEquityZones@doh.wa.gov](mailto:HealthEquityZones@doh.wa.gov).

## Zone For Native Communities Definition

An opportunity for Tribal communities and Urban Native communities in a zone to continue to strengthen health through culturally relevant approaches. The zone will be a geographically self-defined and connected area, that is small enough for focused strategies to have a measurable impact on health outcomes. For example, ancestral homelands, defined tribal lands, a city, town, zip code, or neighborhood.

## Eligibility Criteria

The submitter must meet the following criteria to be eligible for the Zone for Native Communities:

- Represent a Tribe (federally and non-federally recognized), Tribal Organization, Urban Indian Organization, or Collaborative of these entities.
- Identify as an Native-led entity.
- Use a community-driven approach.
- Serve and prioritize the Native population.

## Selection Criteria

Criteria Categories	Max Score
<p><b>Honors &amp; Respects Indigenous Sovereignty</b></p> <ul style="list-style-type: none"> <li>Engaged the community in the decision to be considered as a health equity zone</li> <li>Illustrates broad reaching support from community members and organizations serving and are part of the proposed community</li> <li>Identifies approaches to challenge systems and policies in support of individual and Tribal Sovereignty</li> </ul>	3
<p><b>Multigenerational Vision</b></p> <ul style="list-style-type: none"> <li>Includes reference to a story or example about engaging youth and elders in their work</li> <li>Demonstrates a visionary perspective to improve health for future generations</li> </ul>	3
<p><b>Grows Relations &amp; Connections</b></p> <ul style="list-style-type: none"> <li>Describes existing or potential partnerships in the community, including coalitions, collaboratives, grassroots formations, and/or community councils and working groups</li> <li>Describe a vision for more connectedness across systems, sectors, or organizations</li> </ul>	3
<p><b>Strengths-Based</b></p> <ul style="list-style-type: none"> <li>Describes the community, including key characteristics and strengths</li> <li>Includes reference to a story or example that highlights key characteristics and strengths of the community</li> <li>Identifies equity gaps to be addressed and how community strengths can be used to support</li> </ul>	3
<p><b>Rooted in Indigenous Knowledge</b></p> <ul style="list-style-type: none"> <li>Describes an idea for a proposed project and approaches that the submitter is excited about</li> <li>Includes reference to a story or example that speaks to the impact of existing efforts to improve community health</li> </ul>	3

Scoring Scale
0 = Criteria Not Met
1 = Criteria Partially Met
2 = Criteria Met
3 = Criteria Exceeded

## Health Equity Zone For Native Communities Submission Form

### A Letter From the Indigenous Advisory Panel

Greetings,

We are the Indigenous Advisory Panel for the Health Equity Zone for Native Communities. We come from many different tribes and geographies across Washington state and have a shared commitment to fostering the well-being of our Native relatives throughout the state.

Through a collaborative effort with the Washington Department of Health, we have been honored to design a funding opportunity specifically for Native communities. The process we have designed takes a strength-based approach, honors Indigenous practices, and lays a framework for government entities to better collaborate with Native communities. Our hope is that as leaders and organizers, you are inspired to collaborate with one another and exchange ideas for culturally relevant strategies that will contribute to the health of our communities.

As you complete the form, we invite you to consider that we, as Indigenous peoples, are the "practice-based evidence" and that contrary to the framework of evidence-based practice, our Native communities are the evidence needed to develop strategies that improve health outcomes. We are confident that together, we can enhance existing efforts in our communities and bring forth tailored strategies that resonate with the diverse needs of our Native communities.

Your participation is crucial in ensuring the success of this initiative, and we look forward to witnessing the positive transformations that will unfold as a result of our combined efforts.

Thank you for your interest in the Health Equity Zone for Native Communities.

Respectfully,  
The HEZ Indigenous Advisory Panel

## Health Equity Zone For Native Communities Submission Form

### Data Commitment

**The Health Equity Zones Initiative is committed to honoring the inherent rights of Indigenous Peoples to govern the collection, ownership, and application of their own data.**

The following statements describe how the information provided in submission forms will be used, protected, and stewarded to support submitters in self-determining what information to share.

The information you provide in this submission form will only be used for the purposes

of zone selection by a review panel of Native-identifying individuals. All submission forms will be stored securely using cloud services and protected by encryption. Information will be deleted one year after zone selection per state agency retention policy. As a state agency, we are subject to public records requests, which means information provided in submission forms could be made available to the public if it were requested.

To maintain transparency during the submission process, we will provide ongoing updates on the total number of submissions received. Submitters can choose to opt in to share additional information for the purposes of collaboration with other submitters from the same community or geographic area. This is completely optional and will not affect your submission form review.

\* 1. Do you give your permission to share your entity name and/or geographic area for the purposes of collaboration? This information would be available to view on a map on the HEZ WA Portal site during the submission process.

Please select your preferences for sharing information on HEZ WA Portal, upon request, or not at all.

- Geographic area and entity name shown on HEZ WA Portal map
- Only geographic area shown on HEZ WA Portal map
- Entity name shared with other submitter upon request
- I don't want to share this information

## Health Equity Zone For Native Communities Submission Form Instructions For SurveyMonkey

Once you start this submission form your responses on each page will be saved only when you click the next button at the bottom. You can return to your saved responses at any time while the submission process is open. A reminder email will be sent to those with incomplete forms one week prior to the submission process closing.

To view your saved responses you must use the device (computer, tablet, phone) you started the submission form on. You can navigate between pages using the previous and next buttons at the bottom.

For drafting responses or collaborating with others, we recommend that you [download a PDF](#) of the submission form. If you are having technical difficulties completing the submission form, please contact [HealthEquityZones@doh.wa.gov](mailto:HealthEquityZones@doh.wa.gov).

## Health Equity Zone For Native Communities Submission Form

### Submitter Contact Information

\* 1. Name

\* 2. Organization/s or Entity/Entities

\* 3. Phone Number

\* 4. Email Address

## Health Equity Zone For Native Communities Submission Form

### Eligibility

If you do not meet all of the following criteria, you will not be considered eligible for the Zone for Native Communities.

\* 1. Do you identify as a Native-led entity?

Please note, a Native-serving organization is not the same as a Native-led organization; only the latter will be considered eligible. For example: Are your leadership and organization staff from the Native community you serve?

No

Yes (please describe how you identify as Native-led)

\* 2. Do you apply a community-driven approach to your work?

A community-driven approach refers to community involvement in decision-making and priority-setting for programs and services. For example: Does your community guide policy or programming decisions and priorities? Do you have a process in place to incorporate community-identified strategies into services or programs?

- No
- Yes (please describe how you apply a community-driven approach)

\* 3. Do you serve and prioritize the Native population?

- No
- Yes

## Health Equity Zone For Native Communities Submission Form

### Proposed Health Equity Zone

\* 1. What geographic area are you proposing to be a Health Equity Zone?

For example: ancestral homelands, defined tribal lands, a county, city, town, zip code, neighborhood, or community. The geographic area identified must be smaller than the state, small enough for focused community work, and be connected via land or a shared body of water such as a group of islands.

\* 2. What is your connection to the proposed geographic area?

For example: your ancestral connection to the land, your experiences living or working in the area, or your connection to the community.

\* 3. How has the community living in the proposed geographic area been involved in the decision to be considered as a Health Equity Zone?

For example: were community members consulted to complete this submission or the responses to submission questions?

## Health Equity Zone For Native Communities Submission Form Submission Questions

\* 1. Why are you proposing your community to be a Health Equity Zone? How do you hope this initiative will impact your community and benefit current and future generations?

Length of response is 500 words maximum.

\* 2. Each Health Equity Zone will be led by a Community Collective, comprised of representatives reflecting the community. Describe existing or potential partnerships in the community, including coalitions, collaboratives, grassroots formations, and/or community councils and working groups and a vision of how they might work together. Partnerships do not need to be established at the time of completing this submission, you may describe future partnerships that do not exist yet.

Length of response is 500 words maximum.



\* 3. What are your community's key characteristics and strengths? Examples may include references to stories, cultural teachings, or generational knowledge that you feel capture the strengths of your community, but this is not required.

Length of response is 500 words maximum.

\* 4. What health equity gaps does your community face? How can strengths of the community support efforts to address health equity gaps?

Length of response is 500 words maximum.

\* 5. Please share examples or stories that speak to the impact of your existing efforts to improve community health.

Length of response is 500 words maximum.

\* 6. How would this funding support work that is already happening or something you want to get off the ground? Approaches you are excited about, including those rooted in Indigenous Knowledge and decolonized practices, are encouraged!

Length of response is 500 words maximum.

7. Optional: Is there additional information you would like to share that highlights how your community would benefit from being a Health Equity Zone?

Length of response is 500 words maximum.

## Health Equity Zone For Native Communities Submission Form

Thank you for completing the Health Equity Zones Submission Form!

\* 1. We need your feedback to help us improve! Would you like to participate in a brief feedback survey?

Your responses will help us improve the submission process. It will take no more than 5 minutes to complete. Your participation is optional - choosing to participate will not impact your submission form.

Yes

No

## Health Equity Zone For Native Communities Submission Form Feedback Survey

1. How difficult was it to complete the Health Equity Zones Submission Form?

Not difficult at all

Somewhat difficult

Moderately difficult

Very difficult

## Health Equity Zone For Native Communities Submission Form Feedback Survey

1. What did you find difficult about completing the submission form?

## Health Equity Zone For Native Communities Submission Form Feedback Survey

1. Did you have the resources and information you needed to complete the Health Equity Zones Submission Form?

- Yes
- No (please specify, what would have been helpful?)

2. How transparent do you feel the submission process was?

- Not transparent at all
- Somewhat transparent
- Moderately transparent
- Very transparent

## Health Equity Zone For Native Communities Submission Form Feedback Survey

1. What did you find not transparent about the submission process?

## Health Equity Zone For Native Communities Submission Form Feedback Survey

1. What could be improved in future submission processes?

2. Is there any other feedback you want to share about the submission process?