

GWA'SALA-NAKWAXDA'XW TRUST GRANT PROPOSAL

1. GENERAL INFORMATION

Proposal Name: Program Participant Travel Assistance for Kwala'sta Healing Centre
Name of Trustee Applicant: Cathie Wilson
Associated Band Department: Kwala'sta Healing Centre
Associated Band Department Contact Information: Manager, 250-949-0329
Amount Requested for 2025: \$15,000.00
Estimated number of Band members to benefit: all GNN members

2. PROJECT DESCRIPTION

<p>Project Summary: Briefly describe the project (3 or 4 sentences), including a high-level description of what will be done.</p> <p>To assist GNN members who live out of the Port Hardy area, with travel costs to attend trauma healing programs at Kwala'sta Healing Center.</p>

PROJECT BACKGROUND

Project Background: Outline the context for the project. Provide necessary background to understand why the project is being undertaken.

The Gwa'sala-'Nakwaxda'xw Nations have long had a goal of creating a program to support healing from the impacts of the colonial experience, including residential schools and the foster care system, as well as other forms of trauma. Our programs are rooted in Kwakwaka'wakw cultural teachings and facilitated with a trauma informed approach by staff who are members or who have close connections to Kwakwaka'wakw Nations.

PROJECT PURPOSE

Project Purpose: Explain the purpose of the project by describing what this project is aiming to achieve. What is its vision? What need or opportunity will it address?

The goal would be to remove barriers for travel for members to attend our trauma healing programs.

3. Budget

Project Costs: Identify applicable cost categories such as: wages, consulting costs, materials, project management, equipment costs, etc.

Gas, ferry fare, plane fare, per diem, accommodations
\$15,000.00

Funding Timeline: In what month(s) will you require the Trust funds requested in your proposal.

2025/2026 Fiscal Year or the year timeline of the trust calendar

4. PROJECT MANAGEMENT

Project Management Team: Identify the individuals who will be responsible for managing the project and provide their contact information.

This project will be managed by the Gwa'sala-'Nakwaxda'xw Kwala'sta Healing Centre Manager, Cathie Wilson (250-949-0329).

REPORTING STRUCTURE

Identify the reporting structure for the proposal

Reports would be made quarterly to the Trust board

5. OTHER

Are there any potential risks that might threaten the successful completion of the project? Indicate how these risks will be mitigated.

I don't foresee any risk at this time.

Is there any other information relating to the proposal that the Trust Committee should be aware of?

N/A

Where the proposal requires the purchase of supplies, equipment or services, indicate how best values for money will be ensured. Indicate where the Applicant has a procurement policy in place.

Nation travel claim policy will be adhered to.

6. TRUSTEE APPLICANT

How have project costs been reviewed /verified for accuracy, completeness and reasonableness? Explain.

Budget has been estimated according to the GN HS – KHC program schedule and based on the number of requests from GN members inquiring about travel assistance in the past year.

In addition to the funding sources identified above, has the Applicant approached/applied to any other funding programs? If yes, indicate organization and the status of those applications. If no, please explain.

At this time, we have not submitted applications to other funders. We are approaching our one-year anniversary at the Scotia Bay facility and are just now establishing a consistent program facilitation schedule. Over the coming year, we expect to gain clearer insight into the potential participation of out-of-town GNN members in our trauma healing programs, particularly if travel assistance is made available.

Submitted by: Cathie Wilson

Trustee Applicant:

Associated Band Department Representative: GN Health Services - Kwala'sta Healing Centre