

2025

WASHINGTON STATE TRIBAL



OPIOID FENTANYL SUMMIT



HEALING TOGETHER:
CULTURE, COMMUNITY, AND RECOVERY

3rd WA Tribal Opioid and Fentanyl Summit

May 20, 21, and 22, 2025

ABOUT THE AMERICAN INDIAN HEALTH COMMISSION

The American Indian Health Commission (AIHC) is a tribal consortium formed in 1994 by leaders from the Washington State Tribes and Urban Indian Health Organizations (UIHOs). The Commission is governed by representatives from the twenty-nine Tribes and two UIHPs. For 30 years, the Commission has advanced tribal-state collaboration to improve the health status of American Indians/Alaska Natives (AI/AN). By providing a forum for identifying priorities and developing a unified voice, the work of the Commission focuses on advocacy, policy, and program development.



American Indian Health Commission for Washington State
“Improving Indian Health through Tribal-State Collaboration”

3rd WA Tribal Opioid and Fentanyl Summit 2025

SUMMARY

Tribal Opioid and Fentanyl Summit

The first WA Tribal Opioid and Fentanyl Summit was held in May of 2023. During this first summit, priorities were divided into four tracks: (1) Justice, (2) Treatment, Recovery, and Prevention, (3) Housing and Homelessness, and (4) Community and Family. These discussions were for Tribes and the State to come together as partners and develop plans and recommendations to address this crisis. From these priority areas, Tribal and State leaders and their staff developed action plans. Using existing work groups and meetings, an effort was made to implement the workplans. One of the priorities identified at the first summit was the need to establish a Tribal Opioid and Fentanyl Taskforce to connect and organize the identified work to be done. In the 2024 Washington State budget, funding was included to implement such Taskforce and hold a second and third statewide summit.

During the 2024 Washington state legislative session, the State Operating Budget included funding for the Health Care Authority (HCA) and American Indian Health Commission (AIHC) to establish the Washington State Tribal Opioid and Fentanyl Response Taskforce (Taskforce). The Taskforce is comprised of representatives from American Indian and Alaska Native (AI/AN) communities and Tribal governments, state agencies, local governments, persons with lived experience, and the Legislature. The Taskforce gives needed structure to the work and brings in the necessary partners to accomplish goals. There was difficulty getting all the workgroups established and membership has changed based on the change in the WA state administration.

The first Taskforce meeting happened at the 2nd WA Tribal Opioid and Fentanyl Summit, which was held on July 2024, hosted by the Spokane Tribe at the Davenport Grand Hotel in Downtown Spokane, WA. Tribal Leaders requested a fifth priority track be added to the work done at the summit – Community Response: Supporting Frontline Workers. There was also a request to utilize two traditional practices that were used at the National Tribal Opioid Summit held at the Tulalip Tribes in August of 2023: Wellness services and the “Auntie Society”.

The Third WA Tribal Opioid and Fentanyl Summit was held on May 20, 21 and 22nd, hosted by the Cowlitz Indian Tribe and the ilani Resort Hotel in Ridgefield, WA. The Summit began with a gracious welcome from

Tanna Engdahl, Elder and Spiritual Leader from the Cowlitz Indian Tribe. Vicki Lowe, AIHC Executive Director, presented an overview of accomplishments based on priorities from the previous summit. Heather Holzer, AIHC Consultant, and Nakia DeMiero, HCA OTA Tribal Opioid Response Coordinator, presented on the [Washington Tribal Opioid Fentanyl \(WTOF\) Resource Library](#), a new online resource creating a central location for Tribes and Tribal serving organization to access resources available across the state for opioid and fentanyl response. This was followed by a presentation from Chelsea Sayles, Tribal Attorney for the Quileute Tribe, summarizing the Tribal Warrants bill and the efforts of the corresponding workgroup.

Presentations for the first day were rounded out with a Living Experience Panel of four people in recovery. Two of the people in recovery were currently receiving services at the Healing Lodge of the Seven Nations. The panel's purpose was to ground attendees in the experiences of people trying to receive treatment and move to recovery. The panel was asked to answer the following questions:

- Can you please introduce yourself and tell us a little bit about who you are?
- Everyone's path and journey to recovery is different, can you please share your story? Was there a turning point (or turning points) you remember?
- If you could offer words of hope to someone who is struggling and/or is on their recovery journey, what would you say?

Panelists were honest and vulnerable in their answers. Their stories highlighted systemic barriers, and the difficulties caused by stigma throughout systems of care. They spoke about the importance of mental health services being received at the same time as recovery is happening, specifically cognitive behavioral therapy (CBT) and dialectical behavioral therapy (DBT). One panelist share, "I realized I didn't have an anger problem; I had trauma." The words of these panelists set the course for our discussions the following two days.

The living experience panel was followed by a cleansing ceremony, provided by the Cowlitz Indian Tribe to help attendees emotionally impacted by the stories shared by the panelists.

Day two started out with a panel of Tribes and an Urban Indian Health Organization (UIHO) sharing how they are using their Tribal Opioid Abatement Settlement Funds. The rest of Day two consisted of three opportunities to attend breakout sessions on the five priority areas. This gave an opportunity for attendees to hear more details about accomplishments under the five priorities areas:

- (1) *Justice*, (2) *Treatment, Recovery, and Prevention*, (3) *Housing and Homelessness*, and (4) *Community and Family* (5) *Community Response*

and to give feedback on what work should be done in the next year. We also heard remarks from Attorney General Nick Brown about his dedication fighting for more Opioid Settlements funds. Day two ended with a culture night hosted by the Cowlitz Indian Tribe. This included a beautiful traditional meal, traditional songs, and stories.

Day three was a report out from the breakout sessions. The attendees broke into Tribal Caucus and State Agency discussions then came together in a roundtable that gave a clear roadmap of the work for this next year.

We would like to thank our notetakers from Evergreen State College: Ty Hartwell, Duncan Mays, Hattie Williams, Patricia Pacheco, Charity Fivekiller Turk, and Frances Rohr.

ATTENDANCE SUMMARY

Tribes in Attendance

- Confederate Tribes of Chehalis
- Confederate Tribes of Colville
- Confederate Tribes of Yakama Nation
- Cowlitz Indian Tribe
- Jamestown S'Klallam Tribe
- Kalispel Tribe
- Kootenai Tribe
- Lummi Nation
- Makah Tribe
- Muckleshoot Tribe
- Nez Perce Tribe
- Nisqually Tribe
- Port Gamble S'Klallam Tribe
- Puyallup Tribe
- Quileute Tribe
- Quinault Nation
- Sauk-Suiattle Tribe
- Shoalwater Bay Tribe
- Skokomish Tribe
- Snoqualmie Tribe
- Squaxin Island Tribe
- Spokane Tribe
- Stillaguamish Tribe
- Suquamish Tribe
- Swinomish Indian Tribal Community
- Tulalip Tribes
- Upper Skagit Tribe

Urban Indian Health Programs in Attendance:

- NATIVE Project
- Seattle Indian Health Board

Native Serving Providers/Tribal Consortiums in Attendance:

- American Indian Community Center
- American Indian Health Commission
- The Healing Lodge of the Seven Nations
- Mother Nation
- Northwest Indian Treatment Center
- Northwest Portland Area Indian Health Board
- United Indians of All Tribes

State Agencies/Partners in Attendance

- Administration of Courts
- Attorney General's Office
- Department of Commerce
- Department of Children Youth and Families
- Department of Corrections
- Department of Health
- Department of the Military
- Department of Social and Health Services

- Governor's Office of Indian Affairs
- Health Care Authority
- Office of the Insurance Commissioner
- Office of the Governor
- State Board of Health
- Washington Health Benefit Exchange
- Washington State Legislature
- Washington State Patrol

Federal Partners

- Bureau of Indian Affairs
- HIDTA/ Drug Enforcement Agency
- Indian Health Services
- US Army
- US Department of Justice

Other Partners

- Better Health Together ACH
- Blue Mountain Heart to Heart
- Boulder Care
- Casey Family Programs
- CHAS Health
- Choice Regional Health Network
- Clark County Public Health
- Counting Coup Media
- Desautel Hegge- For Our Native Lives
- Humana
- Kauffman and Associates
- Molina Health Care
- Southwest Accountable Community of Health
- Spokane Regional Health District
- Volunteers of America: Native and Strong Lifeline/Native Resources Hub
- Washington State University
- United Health Care

Summit Registration

[Third Annual Washington State Tribal Opioid Fentanyl Taskforce Summit](#)

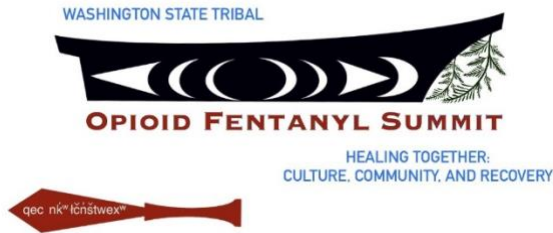
Summit Materials:

[Calendar | American Indian Health Commission](#)

WA Tribal Opioid and Fentanyl Taskforce (WTOF) Webpage

[Washington State Tribal Opioid and Fentanyl Taskforce - American Indian Health Commission](#)

SUMMIT AGENDA:



GOAL #1- DEVELOP PRIORITIES FOR THE TRIBAL OPIOID/FENTANYL RESPONSE TASKFORCE TO ADDRESS IN THE NEXT YEAR.

GOAL #2- SHARE NEW RESOURCES AVAILABLE TO SUPPORT OPIOID/FENTANYL RESPONSE WORK.

Hosted By the Cowlitz Tribe

Agenda:

May 20, 2025 – Day One

Time	Agenda Items	Lead by
Noon	Lunch Served, registration begins New campaign videos	ilani Staff, AIHC
1:00 -1:30 pm	Welcome and Opening Prayer	Cowlitz Indian Tribe
1:30 – 1:45 pm	WA Tribal Opioid Fentanyl Response Resource Guide	Heather Holzer, AIHC Nakia DeMiero, HCA
1:45 - 2:45 pm	Review of 2025 Priorities and Accomplishments	Vicki Lowe, AIHC
3:00 - 5:00 pm	Living Experience Panel	Introduction by Councilwoman Robertson, Cowlitz Indian Tribe Moderated by Cindy Gamble
5:00 pm	Cleansing ceremony	Cowlitz Indian Tribe
6:00 pm	Adjournment	All

May 21st, 2025 – Day Two

Time	Agenda Items	Lead by
8:00 - 9:00 am	Breakfast served and campaign videos Registration continues	ilani Staff, AIHC
9:00- 9:15 am	Welcome and Opening Prayer	Cowlitz Indian Tribe
9:15 to 10:10 am	Tribal Program Sharing - How Tribes and UIHOs are spending their settlement funds Mona Miller, Reentry Directory – Puyallup Tribe	Moderated by Nakia DeMiero, HCA

	Kay Culbertson, HHS Executive Director – Cowlitz Tribe Debbie Hassler, HHS Deputy Director – Cowlitz Tribe Jeff Riggins, Health Program Manager – Suquamish Tribe Ray Oen, CFO – Seattle Indian Health Board	
10:20 am to 11:35 am	1 st Breakout - all 5 sessions Housing that Wraps Around, Public Safety and the Justice System, Community and Family Service, Continuum of Care AND Community Response	See descriptions on page 3
11:45 to Noon	Update on Settlement Funds from Attorney General	Attorney General Brown
Noon- 1:00 pm	Lunch provided – Open	Open Mic
1:00 -2:30 pm	2 nd Breakout - all 5 sessions Housing that Wraps Around, Public Safety and the Justice System, Community and Family Service, Continuum of Care AND Community Response	See descriptions on page 3
2:45 -3:15 pm	Resource tables - Networking	On your own
3:30 -5:00 pm	3 rd Breakout - all 5 sessions Housing that Wraps Around, Public Safety and the Justice System, Community and Family Service, Continuum of Care AND Community Response	See descriptions on page 3
6:00-8:00 pm	Culture Night presented by Cowlitz Tribe	Cowlitz Indian Tribe coordinated by Councilwoman Robertson

- **Throughout Day- Tribal Leader Video Messages**

May 22, 2025, Day Three

Time	Agenda Items	Lead By
8:00 – 9:00 am	Breakfast Served - campaign videos	ilani Staff
8:45 – 9:00 am	Morning Opening	Cowlitz Tribe
9:00- 11:00 am	Break out session report outs	Workgroup Co-Chairs
11 am- 12:30 pm	Tribal Caucus, Prep for Roundtable	Cowlitz Indian Tribe
Noon - 1 pm	Lunch Served - Open Mic	ilani Staff
1:30 - 3:30 pm	Roundtable with Tribal leaders, the Governor’s cabinet, and state legislators	Councilwoman Robertson, Cowlitz Indian Tribe
3:30 pm	Closing prayer Colors will be retired after we leave	Cowlitz Indian Tribe

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Breakout Sessions

Each session will provide updates on these priorities, share innovative practices that have been put into place or strengthened, and hear from participants to identify new priorities for the coming year.

Community Response

Tribal leaders shared that they are hearing from people in their communities who are not specifically trained for responding to opioid and fentanyl use and its impacts but who are interacting with people who use and/or are impacted by opioid and fentanyl use. These frontline workers are people like childcare providers, bus drivers, case managers, Indian Child Welfare workers, teachers and other school staff, office staff in non-clinical settings, etc.

Continuum of Care

All people deserve access to effective, compassionate, timely, and culturally grounded services wherever they are on the continuum of use to recovery. This includes access to prevention, treatment, harm reduction, and recovery support services. There are many barriers within the systems in our state that keep people from receiving care when they need it.

Family and Community Services

The opioid and fentanyl public health crisis is impacting families and communities in addition to individuals. Therefore, identifying priorities and addressing them is important for reducing negative impacts and strengthening families and communities.

Housing That Wraps Around

Accessible and affordable housing is critical to the health of an individual, family, and community. For people who use drugs and those on a path of recovery, housing with supportive services can make all the difference.

Public Safety and the Justice System

Effective responses to the opioid and fentanyl public health crisis are complicated by the complexity of jurisdiction on Tribal lands, providing appropriate services in carceral settings, and linking people to care at release.