



Squaxin Island Tribe

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**Written Testimony of Kristopher K. Peters, Chairman
Squaxin Island Tribe
Submitted to the House Interior, Environment and Related Agencies
Appropriations Subcommittee
On the Fiscal Year FY 2024 Budgets for the
Bureau of Indian Affairs, Bureau of Indian Education and the Indian Health Service
March 9, 2023**

On behalf of the Squaxin Island Tribal Leadership and citizens, it is an honor to provide our priority funding requests and recommendations for the FY 2024 Budgets for the Bureau of Indian Affairs (BIA), Bureau of Indian Education (BIE), and Indian Health Service (IHS) and related agencies. We applaud the Committees' work to include advance appropriations for the IHS in the FY 2023 omnibus spending package and we hope that this will remain for each fiscal year. Squaxin Island is continuing to work to also include the BIA and BIE funding in advance appropriations to prevent funding lapses and other unintended consequences associated with short-term funding measures from disrupting critical services to American Indians and Alaska Natives provided by the Federal government. We will also continue to advocate and urge Congress to shift funding for all Tribal programs to mandatory direct appropriations with the hope that Tribal program funding throughout the Federal government will be exempt from sequestrations, rescissions, and disproportionate cuts.

SQUAXIN ISLAND TRIBE Specific Requests:

1. +\$13 million Construction of New Health Center
2. Northwest Indian Treatment Center (NWITC) Residential Program in IHS
 - A. +\$1.5 million – Medicine Building
 - B. +\$250,000 – Sustain Operations
3. +\$900,000 Shellfish Management Program – BIA

SUPPORT NATIONAL and REGIONAL FY 2024 BUDGET Requests and Recommendations for the Bureau of Indian Affairs, Indian Health Service and Bureau of Indian Education - by the National Congress of American Indians, National Indian Health Board, National Indian Education Association, Affiliated Tribes of Northwest Indians and the Northwest Indian Fisheries Commission

Squaxin Island Tribe Background

We are native people of South Puget Sound and descendants of the maritime people who lived and prospered along these shores for untold centuries. We are known as the *People of the Water* because of our strong cultural connection to the natural beauty and bounty of Puget Sound going back hundreds of years. The Squaxin Island Indian Reservation is in southeastern Mason County, Washington and the Tribe is a signatory to the 1854 Medicine Creek Treaty. Our treaty-designated reservation, Squaxin Island, is approximately 2.2 square miles of uninhabited forested land, surrounded by the bays and inlets of southern Puget Sound. Because the Island lacks fresh water, the Tribe has built its community on roughly 26 acres at Kamilche, Washington purchased and placed into trust. The Tribe also owns 6 acres across Pickering Passage from Squaxin Island and a plot of 36 acres on Harstine Island, across Peale Passage. The total

land area including off-reservation trust lands is 1,715.46 acres. In addition, the Tribe manages roughly five hundred acres of Puget Sound tidelands.

Our Tribal governance combines our sovereign powers as well as U.S. Congressional acts related to treaties, statutes, and public law. Squaxin Island is one of the first 30 Federally recognized Tribes to enter a Compact of Self-Governance with the United States in both the Departments of the Interior and Health and Human Services. Prior to COVID-19, the Tribal government and our economic enterprises constituted the largest employer in Mason County with over 1,250 employees. We continue to require the assistance of Congress to mitigate the amplified health inequities in Tribal communities because of underfunded and under-resourced health systems, limited access to health services, poor infrastructure, and underlying health disparities. The Tribe has a current enrollment of 1,123 and an on-reservation population of 426 living in 141 homes. Squaxin has an estimated service area population of 2,747; a growth rate of about 10%, and an unemployment rate of about 30%. We appreciate the support we have received so far.

Squaxin Island Tribe Specific Requests/Justifications:

1. +\$13 million – Design and Construct New Squaxin Island Health Center – IHS Division of Facilities Planning and Construction

In 1995, under a Self-Governance compact with the U.S. Department of Health and Human Services' Indian Health Service, the Squaxin Island Tribe began construction of the Tribally owned Sally Selvedge Memorial Health Center (the Center). The original 8,000 square foot facility housed the primary care, dental, mental health, contract health services and community health and served an estimated 770 users. The Center consolidated health programs into one facility and expanded new services not previously available due to the lack of space and resources. We remain proud of this accomplishment and what we were able to offer our citizens using and leveraging funds as we saw fit to meet our local needs.

On June 17, 2021, IHS testified before the House Committee on Natural Resources on the status of IHS and Tribal facilities, *"Disparities in the health status of American Indians and Alaska Natives are directly affected by access to health care services. Health care services are constrained by the limited capacities of existing Indian Health Service and Tribal health care facilities. There is a significant need for expansion, renovation, or replacement of many buildings."*¹ This remains true today within the network of over 687 Federal and Tribal health facilities and 41 Urban Indian Organizations (UIOs) that are located across 37 states providing health care services to approximately 2.7 million American Indian and Alaska Native people.

Thirty years after the Center was built, the Squaxin Island Health and Human Services (HHS), located in the Center now provides 9,000 patient/clinic visits with over 17,000 pharmacy encounters taking place each year to 905 AI/AN patients as well as other family members of those patients. We can no longer accommodate all of our mental health and substance use disorder programs in the same facility. Our Health Promotion/Disease Prevention and HIT programs are also located in another site. Medical services have outgrown our existing space and our ability to address the public health emergency because our

¹ <https://www.hhs.gov/about/agencies/asl/testimony/2021/06/17/examining-federal-facilities-indian-country.html>

facility was unable to accommodate any increases to medical or administrative staff. The Tribe bills Medicare, Medicaid and other third-party payers but the buying power we once had to build a new health center in 1995 has diminished in 2023, even more so because of inflation caused by the pandemic. Our American Indian/Alaska Native patient population has increased over 25% since 2012. Current medical, dental, and behavioral services are insufficient for our current population. Laboratory and lab services are severely under built and would not be able to meet accreditation standards. The recent pandemic spotlighted our need for basic health care delivery infrastructure improvements, in both staffing and buildings, required to address communicable viruses. The potential consequences on our Tribal members and families with underlying health conditions remains a concern for us. We can no longer continue to provide the level of care that we strive to achieve in facilities that have met their maximum remodeling capacity. **Squaxin Island Tribe is in desperate need of Congressional appropriations to construct a new facility.**

Since 1993 and continues today, the Healthcare Facilities Construction Priority System (HFCPS) is the methodology that the IHS uses to identify and prioritize the need for IHS and Tribal healthcare facilities. Prior to Squaxin Island building the Center, the IHS, in collaboration with Tribal representatives, used the HFCPS to prioritize major health facilities' needs. The IHS projects were ranked based on the population served, the condition of health care facilities, remoteness, and barriers to care. The overall health care facility construction need grew from \$14.5 billion in 2016 to \$23 billion in 2021 due to expanded programs and better reporting. The IHS facilities construction appropriations have only averaged \$194 million annually since the last report was submitted to Congress.

In March 2020, pre-pandemic, we were in the process of rolling out the Squaxin Island Tribe Strategic Health Plan; a robust health program plan which includes all the details about a new facility and expanded services. Today there is approximately 12,000 square feet that houses the entire HHS department. Using estimates of current building sizes, or comps, the Confederated Tribes of the Umatilla Indian Reservation recently built a 64,000 square foot health center with a user population of 3,331. Medical facilities average \$500 per square foot. Squaxin Island's user population is approximately 28% the size of Umatilla. We estimate we need a minimum of 25,000 square feet based on the Indian Health Care Services' Healthcare Systems Planning tool, which calculates the current user population and projections of growth out to 2034.

Estimated total cost for the design and construction of the Squaxin Island Health Center is \$13,000,000.

2. + \$1.750 Million Increase for Northwest Indian Treatment Center (NWITC) Residential Program – IHS - "D3WXbi Palil" meaning "Returning from the Dark, Deep Waters to the Light"

The Squaxin Island Tribe's Northwest Indian Treatment Center, D3f bi Pa lil, is a residential treatment facility that serves Native Americans with chronic substance abuse patterns related to unresolved grief and complex trauma, including generational trauma. The Center is Commission on Accreditation of Facilities accredited and a recognized national model of treatment for treating trauma in the presence of addiction, uniquely integrating the Best Practice of Dialectical Behavioral Therapy (DBT) with Plant Medicines. This culturally infused use of a Best Practice, based on this NWITC program, has been adapted in many Tribal communities since its development. DBT is a model of treatment with good research results for the treatment of substance abuse and mental health conditions.

In recognition of NWITC's unique model of treatment, the State of Washington Health Care Authority has requested NWITC to create a video-documentary describing the key elements. They have provided over \$82,000 to fund this video-documentary which can be used as a model by other Tribes to help understand the benefits and requirements of the facility. NWITC has these urgent needs:

- A. **Medicine Building – this project is shovel ready cost estimated at +\$1.5 million** - This building will support and expand the reach of the activities of the DBT/Plant Medicine program. It will be a place of medicine making, but also have video capacity linking this program to other Tribal medicine programs and creating a library available to Tribal behavioral health programs and NWITC alumni. The result will be better support for alumni, but also will help build capacity in Tribal communities in the Northwest.
- B. **NWITC Recovery Support Team and Outreach - +\$250,000** - The pandemic has attributed to a high relapse rate in Tribal communities served by NWITC. To better support NWITC alumni, it is necessary to provide more support. Even though the NWITC has a Recovery Support Team who actively supports alumni for one-year post treatment, in the current environment this is insufficient. NWITC requires a staff position to provide the DBT/Plant Medicine training/coaching in the Tribal communities in which alumni live. Costs include a position to implement this, plus expenses of alumni to participate, including hotel, food, etc. In past events NWITC has verified this as the most successful approach for teaching/coaching alumni.

3. +\$900,000 – Shellfish Management – BIA

The Squaxin Island Tribe faces an ongoing budget deficit to maintain and operate the shellfish program at its current level of operation—a level that leaves 20% of treaty-designated state lands and 80-90% of private tidelands unharvested due to lack of funding. To address this shortfall and enable effective growth and development of the program, an annual minimum increase of \$900,000 is requested. Shellfish have been a mainstay for the Squaxin Island people for thousands of years and are important today for subsistence, economic and ceremonial purposes. The Tribe's right to harvest shellfish is guaranteed by the 1854 Medicine Creek Treaty. Today, we are unable to fully exercise our treaty rights due to lack of Federal support for our shellfish management program.

Thank you for considering these FY 2024 funding priorities for the Squaxin Island Tribe.