

# Squaxin Island Tribe

Written Testimony of Ray Peters, Intergovernmental Affairs Liaison, Squaxin Island Tribe
Submitted to the House Interior, Environment and Related Agencies
Appropriations Subcommittee
On the Fiscal Year FY 2020 Budgets for the
Bureau of Indian Affairs and the Indian Health Service
March 6, 2019

On behalf of the Squaxin Island Tribal Leadership and citizens, it is an honor to provide our funding priorities and recommendations for the FY 2020 Budgets for the Bureau of Indian Affairs (BIA) and Indian Health Service (IHS). We ask that this Committee supports our historical trust and treaty relationship with the United States and honor the fiduciary obligations that were a part of the negotiations with our Tribal Leaders. We ask that this Committee:

- 1. Exempts Tribal program funding throughout the Federal government from future sequestrations, rescissions and disproportionate cuts;
- 2. Ensures stable Federal funding for essential Tribal services by supporting the Indian Programs Advanced Appropriations Act for the Bureau of Indian Affairs, Bureau of Indian Education and the Indian Health Service; and,
- 3. Supports the Special Diabetes Program for Indians reauthorization at \$200 million annually for 5 years. Efforts by the Administration to change the funding from mandatory to discretionary spending must require Tribal consultation before any changes occur.

### **SQUAXIN ISLAND TRIBE Specific Requests**:

- 1. \$500,000 Shellfish Management Program BIA
- 2. \$3.0 Million Increase for Northwest Indian Treatment Center (NWITC) Residential Program in IHS

#### **REGIONAL Requests and Recommendations**

- 1. \$110 million for Pacific Coastal Salmon Recovery Fund
- Supports the Regional Budget Requests of the Affiliated Tribes of Northwest Indians (ATNI), the Northwest Portland Area Indian Health Board (NPAIHB) and the Northwest Indian Fisheries Commission (NWIFC)

#### NATIONAL Requests and Recommendations – Bureau of Indian Affairs:

- 1. BIA Rights Protection Increase funding to \$52 million for the BIA Rights Protection Implementation
- 2. Fully Fund Fixed Costs and Tribal Pay Costs
- 3. Increase Tribal Base Funding (instead of through grants

#### NATIONAL Requests and Recommendations - Indian Health Service

- **1. IHS mandatory funding (maintaining current services)** Provide a total of \$6.4 billion for the Indian Health Service in FY 2020, a 33% increase over the FY 2016 planning base
- 2. \$150 million for Opioid Funding Increase funding and include Tribal set asides in any funding decisions to states
- 3. Purchased and Referred Care (PRC) Provide an increase of \$474.4 million
- **4.** \$158 Million for Mental Health- For behavioral health services to increase the ability of Tribes to further develop innovative and culturally appropriate prevention and treatment programs that are so greatly needed in Tribal communities.

#### 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 located in southeastern Mason County, Washington and the Tribe is a signatory to the 1854 Medicine Creek Treaty. We were one of the first 30 Federally-recognized Tribes to enter into a Compact of Self-Governance with the United States.

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 500 acres of Puget Sound tidelands.

The Tribal government and our economic enterprises constitute the largest employer in Mason County with over 1,250 employees. The Tribe has a current enrollment of 1,040 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% (according to the BIA Labor Force Report).

#### Squaxin Island Tribe Specific Requests/Justifications:

#### 1. \$500,000 - 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 \$500,000 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.

## 2. \$3 Million Increase to the Base Funding for the Northwest Indian Treatment Center (NWITC) Residential Program - IHS

#### "D3WXbi Palil" meaning "Returning from the Dark, Deep Waters to the Light"

The Squaxin Island Tribe has been operating the Northwest Indian Treatment Center (NWITC) since 1994. The Center, given the spiritual name "D3WXbi Palii" meaning "Returning from the Dark, Deep Waters to the Light", is a residential chemical dependency treatment facility designed to serve Native Americans who have chronic relapse patterns related to unresolved grief and trauma. NWITC serves adult clients from Tribes located in Oregon, Washington, Idaho and Alaska. We facilitate Medication Assisted Treatment (MAT) – suboxone and vivitrol injections which are cutting edge components of opioid addictions. Since the original Congressional set-aside in the IHS budget for alcohol and substance abuse treatment for residential facilities and placement contracts with third-party agencies in 1993, NWITC has not received an adequate increase in the base IHS budget. With the well-documented nation-wide rise in prescription opioid and heroin abuse, it is more critical than ever to increase the NWITC's annual base in order to sustain the current services to the Tribes of the Northwest. Al/AN face opioid related fatalities three times the rate of non-Natives.

An increase of \$3.0 million would restore lost purchasing power, ensure adequate baseline operating funds and allow NWITC to continue to meet the needs of those who are struggling to recovery and return to their families and Native communities.

#### NATIONAL Requests and Recommendations – Bureau of Indian Affairs:

- 1. BIA Rights Protection Increase funding to \$52 million This Subactivity Account has a clear and direct relationship with the Federal trust obligation to Tribes. This program ensures compliance with Federal court orders by implementing effective Tribal self-regulatory and co-management systems. The benefits of these programs accrue not only to Tribes, but to the larger communities as well. In addition, this program supports implementation of the United States/Canada Pacific Salmon Treaty.
- 2. Fully Fund Fixed Costs and Tribal Pay Costs Partial funding or failing to fund Pay Costs for Tribes has devastated Tribal communities by causing critical job losses. Over 900 Tribal jobs have been lost and an estimated 300 more jobs will be permanently lost on an annual basis if 100 percent Pay Costs are not provided. The Tribal losses are being further exacerbated by recent projections of costs that have been significantly underestimated. We strongly urge full funding of fixed costs and Tribal pay costs.
- 3. Increase Tribal Base Funding (instead of through grants) Grant funding, particularly inside the BIA, is not consistent with the intent of Tribal self-determination. Tribal leaders have grown increasingly frustrated by the increase in Indian Affairs funding offer through grants. Allocating new funds via grants marginalizes and impedes Tribal Self-Determination and Self-Governance. Provide increases via Tribal base funding instead of through grants to Tribal governments

#### NATIONAL Requests and Recommendations – Indian Health Service:

1. IHS mandatory funding (maintaining current services) - *Provide a total of \$6.4 billion for FY2020, a 33% increase over 2016 planning phase*. If these mandatory requirements are not funded, Tribes have no choice but to cut health services, which further reduces the quantity and quality of health care services available to AI/AN citizens.

- 2. \$150 million for Opioid Funding Increase funding and include Tribal set asides in any funding decisions to states. Addressing the opioid epidemic is a nationwide priority. American Indians and Alaska Natives face opioid related fatalities three times the rate on non-Indians. Tribal governments must be included in major agency-wide funding decisions, including to states, to treat and prevent opioid misuse.
- 3. Purchased and Referred Care (PRC) Provide an increase of \$474.4 million. The Purchased/Referred Care program pays for urgent and emergent and other critical services that are not directly available through IHS and Tribally-operated health programs when no IHS direct care facility exists, or the direct care facility cannot provide the required emergency or specialty care, or the facility has more demand for services than it can currently meet.

#### NATIONAL Requests and Recommendations:

Squaxin Island Tribe supports the National Budget Requests of the National Congress of American Indians (NCAI) and the National Indian Health Board (NIHB)

Thank you for accepting the FY 2020 budget requests and recommendations for the Squaxin Island Tribe.