



**Washington Tribal Opioid and Fentanyl
Community and Family Services under Tribal Education and Awareness Campaign
Workgroup Minutes**

10/29/2025 1:00 PM PDT to 3:00 PM PDT
4th Wednesday from 1:00 - 3:00/Teams

Attendance:

Dayna Seymour, Councilmember, Confederated Tribes of the Colville Reservation; Zekkethal “Val” Vargas Thomas, Health Project Coordinator, Confederated Tribes of the Colville Reservation; Tracy Gillett, Human Resources Manager, Hoh Indian Tribe; Morgan Snell, Tribal Health Planner, Jamestown S’Klallam Tribe; Darrell Charles, Lower Elwha Klallam Tribe; Sharon Hamilton, Grants Development Office, Muckleshoot Indian Tribe; Rosemary LaClair, Chairwoman, Nooksack Indian Tribe; Brycelynn Greene, CPC CSP Peer Support, Quinault Indian Nation; John Scott, Outreach Services, Samish Nation; Steven de los Angeles, Council Member, Snoqualmie Indian Tribe; Bobbi Williams, Spokane Tribe of Indians; Erica Thale, Executive Director, Squaxin Island Tribe; Jessica Dolge, Behavioral Health Office Manager, Squaxin Island Tribe; Leonard Forsman, Chairman, Suquamish Tribe; Jeff Riggins, Community Health Program Manager, Suquamish Tribe; Zenitha Jimicum, Education/Youth Prevention, Tulalip Tribes; Shayla Driskell, CDP, Upper Skagit Indian Tribe; Scott Pinkham, Equity Program Director, United Indians of All Tribes Foundation (UIATF); Vicki Lowe, Executive Director, American Indian Health Commission (AIHC); Lisa Rey Thomas, Consultant, AIHC; Pam Priest, Executive Support, AIHC; Naomi Jacobson, Tribal Health Planner, Northwest Portland Area Indian Health Board (NPAIHB); Larissa Molina, Project Manager, NPAIHB; Rebecca Purser, Citizen, Suquamish Tribe; Shannel Squally-Janzen, Tribal Prevention Specialist, Department of Children, Youth and Families (DCYF); Charlene Abrahamson, Tribal Liaison, Health Benefit Exchange; Gerry RainingBird, Suicide Prevention Program, Department of Health (DOH); Kathy Pierre, Prevention/Community Health, DOH; Chantel Wang, Opioid Health Educator, DOH; Melissa Couture, Social Marketing and Public Health Campaign Manager, DOH; Gauri Gupta, Health Services Consultant, DOH; Renee Tinder, Management Analyst, DOH; Tim Collins, Senior Director, Department of Social and Health Services (DSHS); Leah Muasau, Tribal Agreements Coordinator, DSHS; Sher Stecher, Tribal Relations Manager, DSHS; Heather Hoyle, Regional Manager, DSHS; Michelle Johnson, Tribal Affairs Administrator, DSHS Behavioral Health and Habilitation Administration; Julie Jefferson, Statewide Tribal Relations Administrator, DSHS Economic Services Administration (ESA); Christina Diego, Director of Health and Social Services Policy and Legislative Affairs, Governor’s Office of Indian Affairs; Lucilla Mendoza, Tribal Behavioral Health Administrator, Health Care Authority (HCA); Nakia DeMiero, Tribal Opioid Response Coordinator, HCA; Anne Paulsen, State Opioid Response Communications Consultant, HCA; Sarah Cook-Lalari, Program Specialist, HCA; Lonni Rickard, Communications Consultant, HCA; Henry Strom, District Superintendent, Office of the Superintendent of Public Instruction; Jimmy Leonard, Chief Clinical Officer, WA Poison Center; Christina Muller-Shinn, Mason County Public Health and Human Services; Megan Mills, Desautel Hage (DH); Paj Nandi, DH

I. Welcome and Blessing

Presented By Lucilla Mendoza, Health Care Authority (HCA)

Link to [Meeting Slide Deck](#)

Tribal Introductions

- The meeting serves as the October session for the Tribal Opioid Fentanyl Prevention Education and Awareness Campaign workgroup and includes the Family and Community Services Committee under the Tribal Opioid and Fentanyl Task Force. Emphasis is on collaboration among tribes, tribal health programs, urban Indian health organizations, tribal consortia, and state partners.
- Participants are encouraged to introduce themselves or share greetings in the chat to save time for formal meeting discussions.

II. Opening Remarks and Tribal Campaign Updates - 1:10 PM PDT

Presented By Lucilla Mendoza, Health Care Authority

- The meeting date for November has been changed to the 19th, and the December meeting has been changed to the 17th.

Workgroup Priorities Review

- The workgroup aims to review if their established priorities are being met and plans to discuss this in a follow-up meeting.
- The workgroup priorities are included in the WA State Opioid and Fentanyl Task Force under the Family and Community services workstream.
- Goals include educating families and communities with materials similar to those used during the COVID-19 pandemic and improving communication between state and tribal entities.
- A new GOIA staff member has been hired and was introduced at Centennial Accord. Her name is Christina Diego.
- One of the priorities is to streamline and revise licensure requirements for the workforce, connected to the Continuum of Care Workgroup.
- The workgroup is focused on increasing prevention through low to no barrier activities for children and youth and collaborating across sectors to address trauma, especially for the unhoused.
- The work includes increasing funding on tribal prevention frameworks, such as positive parenting and healing models, to strengthen family units.
- They are creating a Washington tribal Opioid and Fentanyl Response library, which is currently under development.
- **Action Item** - The workgroup plans to assess whether these priorities are being met in future discussions and may adjust priorities as needed.

Previous Meeting Recap

- Lucilla Mendoza provided a brief recap of the previous meeting's activities.

III. North Star WA State Tribal Prevention System Update

Presented By Dana Seymour, Councilwoman, and Val Vargas Thomas, Confederated Tribes of the Colville Reservation; Naomi Jacobson, Northwest Portland Area Indian Health Board; and Sarah Cook-Lalari, Health Care Authority, Office of Tribal Affairs

See meeting slide deck in Section I.

- Naomi Jacobson presents the North Star Washington State Tribal Prevention System's consortium, which consists of five pilot tribes aiming to promote systems change for healthier environments for children, youth, and families.
- The program adapts the Icelandic Prevention Model to align with tribal values by strengthening existing supports, enhancing community engagement, and promoting collaboration.
- Funding for the North Star pilot comes from the Centers for Disease Control, Tribal Overdose Prevention Program, Office of the Governor, and Health Care Authority.
- The Confederated Tribes of the Colville Reservation have established four community coalitions, each meeting monthly and hosting events to support prevention efforts.
- **Action Item** - Planet Youth will return the draft of the revised core questionnaire by the end of the year or by January 1st, allowing coalition review in preparation for the Planet Youth Conference in May 2026.
- **Action Item** - The goal is to complete the survey by the end of April 2026 and receive results by early June 2026, with partnership from NPAIHB, and Planet Youth.
- Councilwoman Seymour expresses the goal to eventually roll out the program to all Tribal communities in Washington State, emphasizing the importance of community-wide involvement for addressing issues.

IV. Injectable Naloxone

Presented By Christina Muller-Shinn, Mason County Public Health and Human Services

- Christina Muller-Shinn provided an overview of her work and emphasized the importance of using injectable naloxone as a cost-effective alternative for overdose prevention.
- Historically, naloxone has been available since 1971, originally as an injectable ampule, and distributed in communities since the 1990s.
- Injectable naloxone has higher bioavailability compared to nasal forms, potentially making it more effective in the context of fentanyl overdoses.
- There is a considerable cost difference between injectable and nasal naloxone, with injectable kits costing approximately \$8 versus \$41 for nasal kits.
- The Department of Health distributed 114,651 intramuscular kits at a cost of \$917,000 and 378,455 nasal kits at a cost of \$15.5 million within the past year.
- Community acceptance and preference for injectable naloxone are considered, with 58% of participants in a sample preferring both types and 12% opting only for injectable naloxone.
- In Mason County, 639 reported overdoses were successfully reversed using naloxone out of 2,716 kits distributed last year.
- Christina highlighted the importance of educating elders about overdose prevention, as older individuals are also at risk.
- A demonstration of injectable naloxone use was conducted, noting practical considerations related to needle size and injection site.

- During a discussion, it was clarified that providing naloxone does not violate HIPAA, as it is not attached to a private information contract unlike ER procedures.
- Link to the DOH Naloxone Finder <https://doh.wa.gov/you-and-your-family/drug-user-health/naloxone-finder>

V. Kratom

Presented By Dr Jimmy Leonard, Chief Clinical Officer, WA Poison Center. jleonard@wapc.org

See meeting slide deck in Section 1.

- The discussion focused on kratom, a plant native to Southeast Asia with stimulant and opioid-like effects, used by approximately 2 million adults in the U.S. last year. It is not federally scheduled but is controlled in six states.
- Kratom is used in various forms, including raw leaves, teas, and processed powders, and can cause different effects depending on the dosage.
- Surveys report kratom use primarily among women, with the highest usage in the South of the U.S., commonly for pain, anxiety management, and as a substitute for opioids.
- Short-term side effects of kratom include weight loss and hyperpigmentation, while long-term use can lead to fatigue and withdrawal symptoms similar to opioids.
- An increase in kratom-related calls to poison centers has been noted, suggesting increased usage but not necessarily indicating higher health risk.
- Poison center data show severe effects like seizures or respiratory depression often occur with polysubstance use involving kratom.
- Kratom regulation involves complex challenges due to its sale as a supplement and concerns about product contamination, as highlighted by past cases involving salmonella.
- The FDA is involved in regulatory actions aimed at controlling the more potent 7-hydroxy-mitragynine, found in some kratom products, to manage safety concerns.
- Federal regulation over 7-hydroxy-mitragynine is expected, as efforts are underway to control substances of concern within kratom products.

VI. For Our Lives Campaign Update

Presented By Megan Mills and Paj Nandi, Desautel Hege

See meeting slide deck in Section I.

- The 'For Our Lives' campaign has been expanded for native youth, with efforts starting in November 2024 and new materials going live on October 1st.
- Development and submission of a campaign plan, adaptation of materials, promotional packets, research, and tribal engagement have been completed as part of the campaign.
- Customizable naloxone vending machines created in partnership with the Lummi Tribe, with additional work underway with Swinomish, Colville, and Nooksack Tribes.
- Many Tribes are ordering custom materials related to apparel and placing unique campaign advertisements such as billboards and media at events.
- A youth media buy starting November 3rd, to run through the end of January, with ads in movie theaters and schools to reach the target audience.

- Updated materials focus on treatment stigma and medication for opioid use disorder, targeting tribal opioid treatment programs.
- Contract finalized for campaign continuation from November 1st through June 30th, 2027, focusing on Tribal engagement and localized material creation.
- Plans to update and refresh campaign website to better reflect new materials and expanded participation with Tribal communities.
- Youth toolkit update to include introductory materials and promotional packets for Tribal schools and youth programs.
- Collaboration with OTA, OSPI, and other organizations to distribute campaign materials and ensuring schools opt-in for participation.
- Participants are invited to share their input on which schools should be prioritized for the youth campaign either via chat or email. Folks suggested the Muckleshoot Tribal School and Ferndale, Wellpinit, and Clover Park School Districts.

VII. Meeting Wrap-Up/Next Agenda

Presented By Steven de los Angeles/Snoqualmie Tribe, Lucilla Mendoza/HCA, Candice Wilson/DOH

- Heather Hoyle raised safety concerns related to overdoses happening in hotel rooms and the need for special cleaning processes, particularly when fentanyl is involved. She also suggested a presentation about nicotine vapes, and concerns about them potentially containing illegal substances. **Action Item** : Vicki and Lucy will try to get answers about that.
- **Action Item**: Council member de los Angeles highlighted the Carfentanil presentation scheduled and asked folks to view the link below prior to the next meeting.
- Carfentanil<https://adai.uw.edu/carfentanil-in-wa-state/>
- Advisory Board for Native and Strong Campaign Update
- For Our Lives Campaign Update
- HCA/DOH 2025 Provider Education Campaign

VIII. Adjourn

