Washington State Health Care Authority

Office of Tribal Affairs

Tribal Opioid Fentanyl Prevention Education Campaign Workgroup

October 29, 2025

1:00 pm – 3:00 pm

The HCA Office of Tribal Affairs logo was designed by Alfred B. Charles of the Lower Elwha Klallam Tribe.

Welcome

- Blessing
- Introductions
  - Tribal elected officials
  - Tribal health leaders
  - UIHPs/Urban Health Organizations
  - State staff

Opening Remarks
Tribal Campaign Updates

**November meeting changed to the 19th
**December meeting changed to the 17th

Workgroup Priorities

- Educate families and communities with campaign and educational materials, like what was provided during the COVID-19 Pandemic
- Improve communications between state and Tribal entities through Taskforce, GTLSSC, and GIHAC — GTLSSC Staff approved to be hired!
- Streamline and revise licensure requirements to increase workforce, especially for those with lived experience – connect to Continuum of Care Workgroup.
- Increase prevention through low- and no-barrier activities for children and youth.
- Collaborate across sectors to address trauma, being unhoused, etc.
- Increase focus and funding on Tribal prevention frameworks and systems: Positive Indian Parenting, Pulling Together for Wellness, Healing of the Canoe, Reef Net, Washington State Tribal Prevention Systems, Tribal Canoe Journey, Powwows, and Potlatches to strengthen the family unit.
- Create and review list of resources to support development of WA Tribal Opioid and Fentanyl Response Library

NorthStar Update

Naomi Jacobson, Northwest Portland Area Indian Health Board
Sarah Cook-Lalari, HCA Office of Tribal Affairs

NORTH STAR

Washington State Tribal Prevention System

October 29, 2025

Tribal Opioid/Fentanyl Prevention, Education and Awareness Campaign Workgroup

NORTH STAR

WS TPS Pilot Tribes

Confederated Tribes of the Colville Reservation	Jamestown S'Klallam Tribe	Lummi Nation
Swinomish Indian Tribal Community	Tulalip Tribes	

NORTH STAR

NORTH STAR

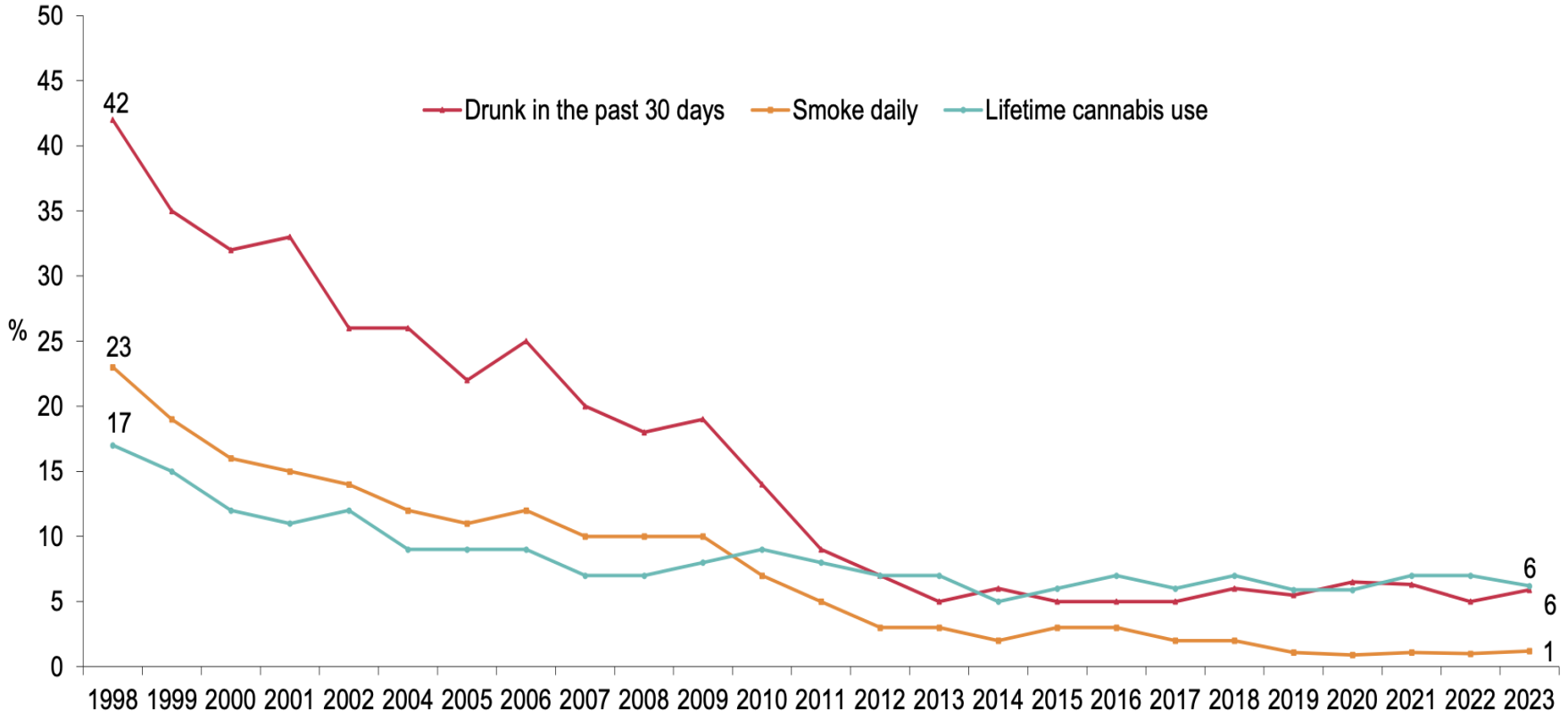
WS TPS Partners

Centers for Disease Control and Prevention: Tribal Overdose Prevention Program	Office of the Governor of Washington State	Northwest Portland Area Indian Health Board	Washington State Health Care Authority Office of Tribal Affairs

NORTH STAR

The Icelandic Prevention Model (IPM)

Trends in substance use among 10th grade students in Iceland, 1998-2023



Data: The Icelandic Centre for Social Research and Analysis, ICSRA/ 2023

Creating an Upstream Prevention Model to:

Decrease Substance Use	Increase Life Expectancy	Create healthier environments to raise our children
Allow kids to be kids by breaking the cycle of children raising themselves	Increase Mental Health Resources	Overcome Silos in Government Operations
Remove barriers to Social Systems	Rebuild Healthy Communities that our Ancestors once had	Creating Tribal Best Practices to create a common understanding between the Tribes, State & Federal Partners.

Photo Credit: Summer Hammons, Tulalip

The best time to plant a tree was 20 years ago, the next best time to plant a tree is now.

-Author Unknown

NPAIHB
Indian Leadership for Indian Health

Colville Confederated Tribes - North Star

★We have four (4) unique community coalitions, which meet monthly

★Average of 8-10 members per coalition

★Coalitions have hosted at least one event to support prevention in their communities

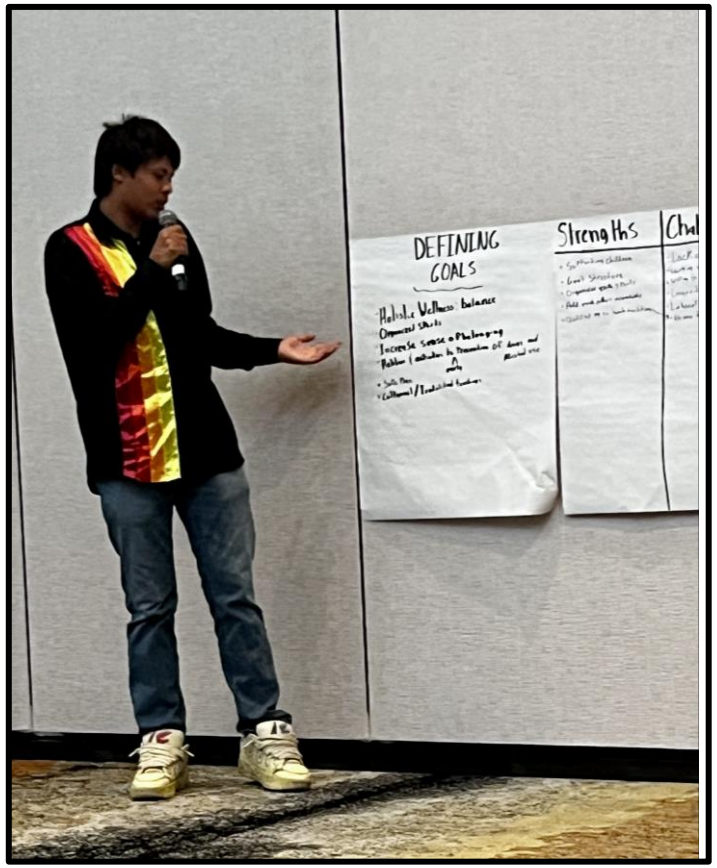
★Continuous efforts are being made by North Star & coalitions to recruit additional members

★North Star worked with four (4) youth workers and one (1) college intern to promote North Star on Social Media platforms

★The Youth organized a youth gathering this last summer with fourteen (14) youth participating to address issues they face today

★Our youth attended the Summer North Star Gathering and did a presentation of the media and gathering events they offered

Colville Tribal Youth Presentation



Mason.

I am a senior in Inchelium High School but also am pursuing my associates degree through Spokane Community College.

Outside of academics I am apart of the Inchelium tribal youth council and I play for the Inchelium volleyball team, I also am on the Evergreen Region club volleyball team.

During the summer I had gotten the opportunity to work for the North star initiative, during this time I had gotten to broaden my education to further my experience of being a leader and working with the youth.

The work I have done:

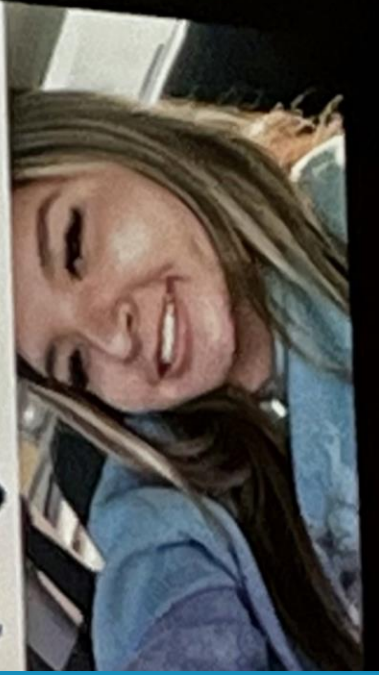
- Enhanced the presence of North Star and strengthened community engagement efforts.
- Designed promotional materials to increase visibility.
- Shared content across multiple platforms to reach wider audiences.
- Coordinated with local businesses to secure gift certificate donations.
- Organized social media giveaways to grow North Star's online following and visibility.
- Completed the Planet Youth certification, gaining valuable skills and knowledge to promote evidence-based, positive change in communities.

Nespelem District

Keller District

Omak District

Inchelium District



Colville Tribes - Data Summit

★We were able to host a data summit to review/revise Planet Youth Core Questions

★We had youth, parents, elders, leaders, and school participation during this event

★We added cultural, and violence questions to the core questions

★Our goal is Planet Youth returns the draft by the end of the year or no later than the first of January

★All the coalitions will be able to review the questions when returned

★Preparation to attend the Planet Youth Conference in May 2026 with youth and coalition members

★Support the Education Committee and Department on meeting with the school districts on the data survey roll out

NORTH STAR

Our Next Steps

★Continue to build the coalition

★Continue to share information about the North Star Initiative.

★Work with community members and partners on completing the Planet Youth Academy

★We plan to host two (2) youth leadership gatherings in November and December 2025.

★Coalition Updates to the Colville Business Council

★Another goal is to have the survey completed by the end of April 2026

★Results back to the Tribe and coalitions no later than late May or early June 2026

★The partnership with NPAIHB and Planet Youth has been awesome on the survey collaboration

Thank You!

Contacts:

Naomi Jacobson
(Quileute)
North Star Program Manager
njacobson@ npaihb.org

NPAIHB
Indian Leadership for Indian Health

Sarah Cook-Lalari
(Lummi)
WS TPS Coordinator
sarah.cook-lalari@hca.wa.gov

Washington State Health Care Authority
Office of Tribal Affairs

Photo Credit: Nicklaus Lewis, Lummi

Injectable Naloxone

Christina Muller-Shinn

Mason County Public Health & Human Services

Injectable Naloxone: History, Prevalence, Considerations

CHRISTINA MULLER-SHINN

MASON COUNTY PUBLIC HEALTH AND HUMAN SERVICES

CMULLER-SHINN@MASONCOUNTYWA.GOV

360-463-7949

History of Naloxone/Narcan

Naloxone hydrochloride became available in the market in 1971 as an injected ampule trademarked as "Narcan"

Began getting distributed to community-based programs that worked with people at risk of experiencing or witnessing an overdose in the mid-1990s as a generic injectable vial

Between 2001-2017, some cities, counties, and states began purchasing and distributing naloxone as well as providing legal coverage through standing orders and Good Samaritan Overdose Laws

Nasal naloxone (Narcan brand) was created and entered the market in 2015

WA's standing order allows entities to "dispense and deliver" both 0.4mg injectable and 4 mg nasal spray formulas, including administration

Comparisons: IM vs. Nasal

- IM has more bioavailability than nasal and absorbs faster
  - Both formulas have comparable effects
  - IMPORTANT to emphasize rescue breathing with all formulations!
- Community reports suggest less precipitated withdrawal with IM formulation; studies vary
- IM has a significantly lower price than nasal
- Community perception and appropriate settings

Cost Analysis

IM kits~$8 per kit (2 vials, 2 IM syringes, sleeve/container)

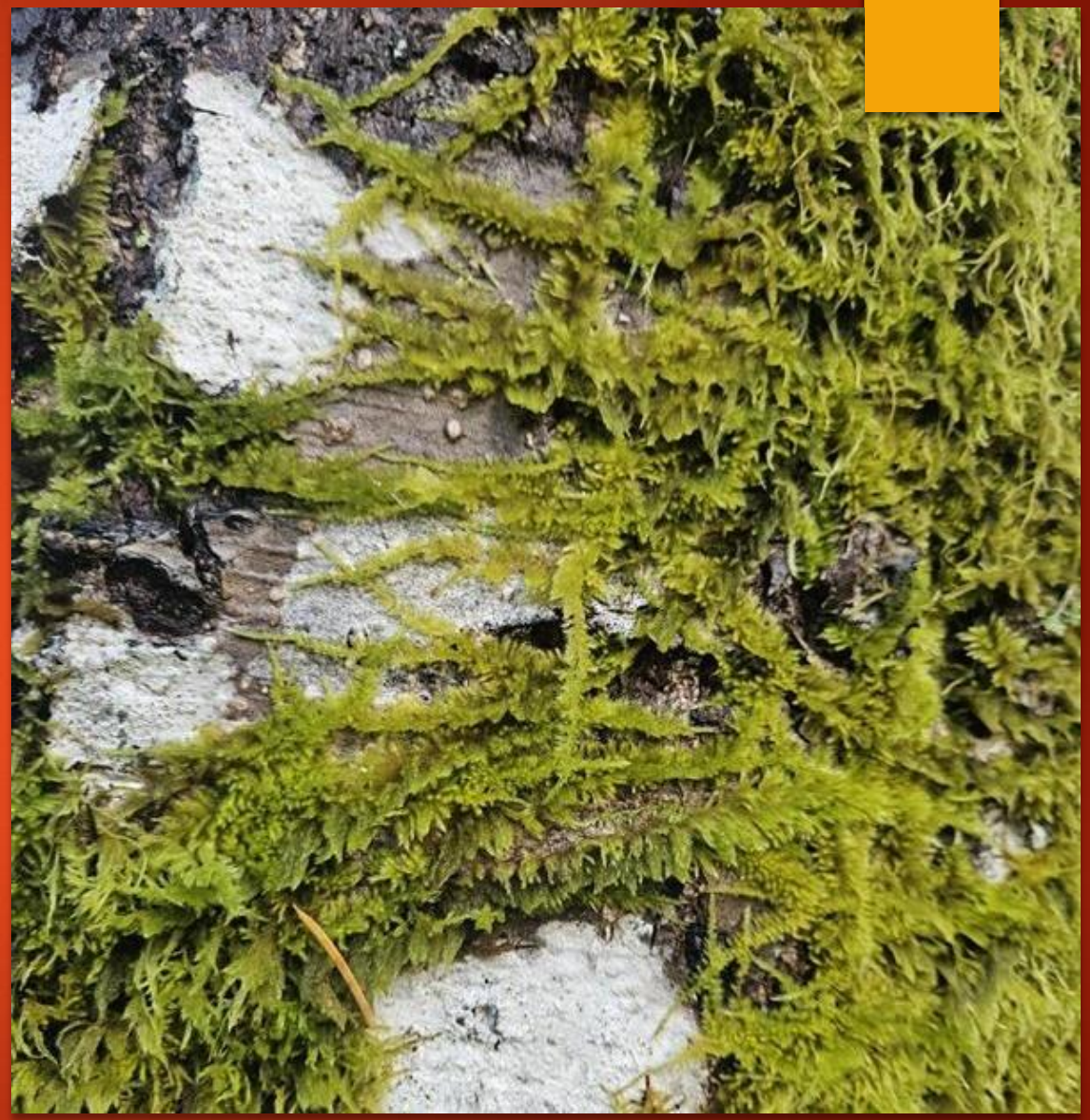
Nasal kits~$41 (2 intranasal sprays)

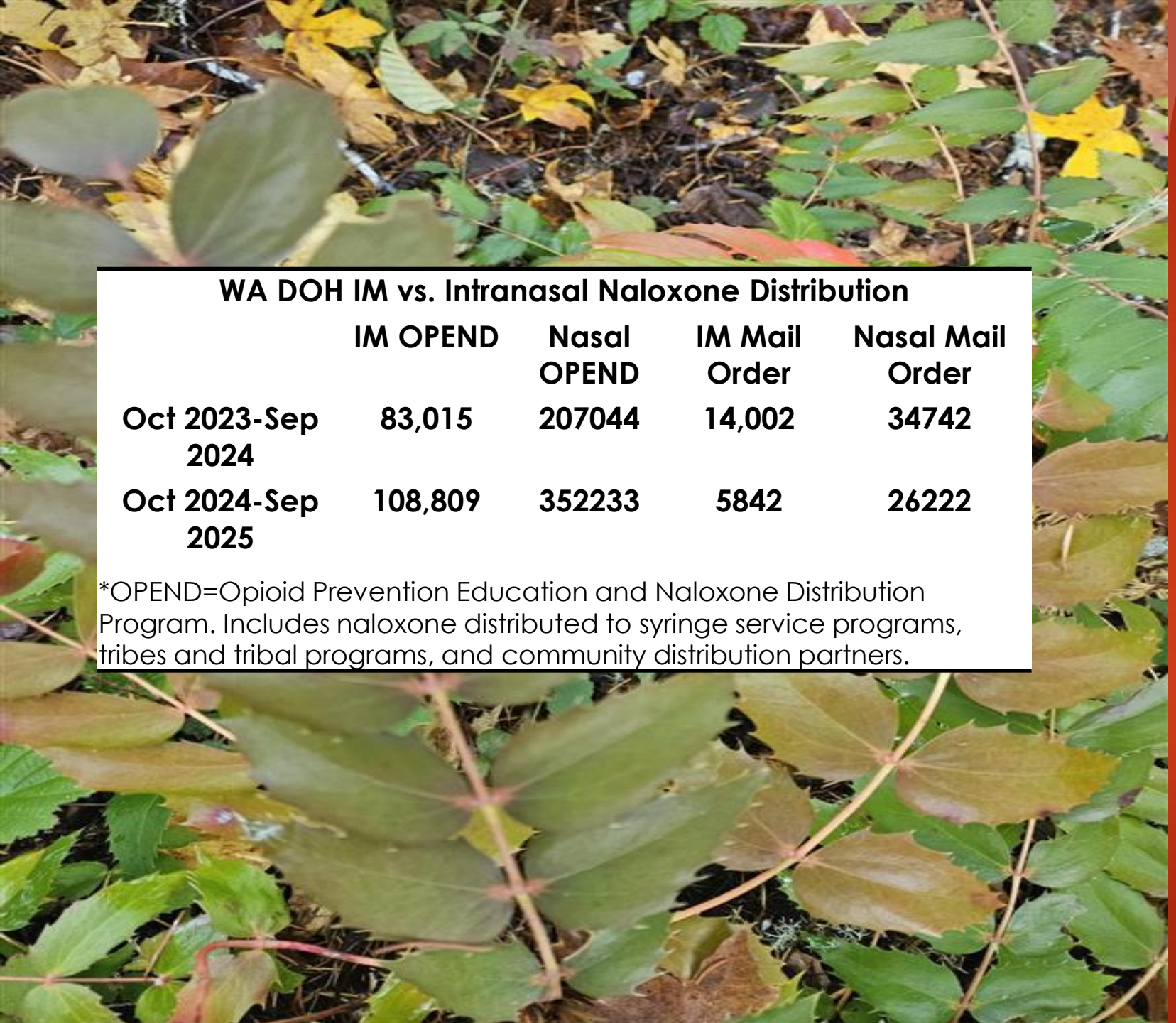
WA DOH Distribution Oct 2024-Sep 2025	Number of kits (2 doses)	Cost
IM ($8 per kit)	114,651	**$917,208.00**
Nasal ($41 per kit)	378,455	**$15,516,655.00**

Community Perception

- Consider:
  - Who is the audience? What is the setting?
  - What is the comfort level of the participant?
  - What are the preferences of the people who are likely to have naloxone administered to them?
  - How much naloxone is needed to get out?

- IM naloxone distribution is prevalent; with education, people are willing to take and use it





WA DOH IM vs. Intranasal Naloxone Distribution

	IM OPEND	Nasal OPEND	IM Mail Order	Nasal Mail Order
Oct 2023-Sep 2024	83,015	207044	14,002	34742
Oct 2024-Sep 2025	108,809	352233	5842	26222

*OPEND=Opioid Prevention Education and Naloxone Distribution Program. Includes naloxone distributed to syringe service programs, tribes and tribal programs, and community distribution partners.

IM distribution is common!

22% of WA DOH naloxone kits to distribution programs are IM


ADMINISTER NALOXONE
BEGIN RESCUE BREATHING
CALL 911
1
2
3
Naloxone
Naloxone
CPR
CPR Face Shield

Demo

Kratom

Dr. Jimmy Leonard, Chief Clinical Officer, WA Poison Center

WASHINGTON POISON CENTER

An Independent Nonprofit Organization

The opioid that wasn't, now really is: Kratom

Jimmy Leonard, PharmD, DABAT
Chief Clinical Officer
Washington Poison Center

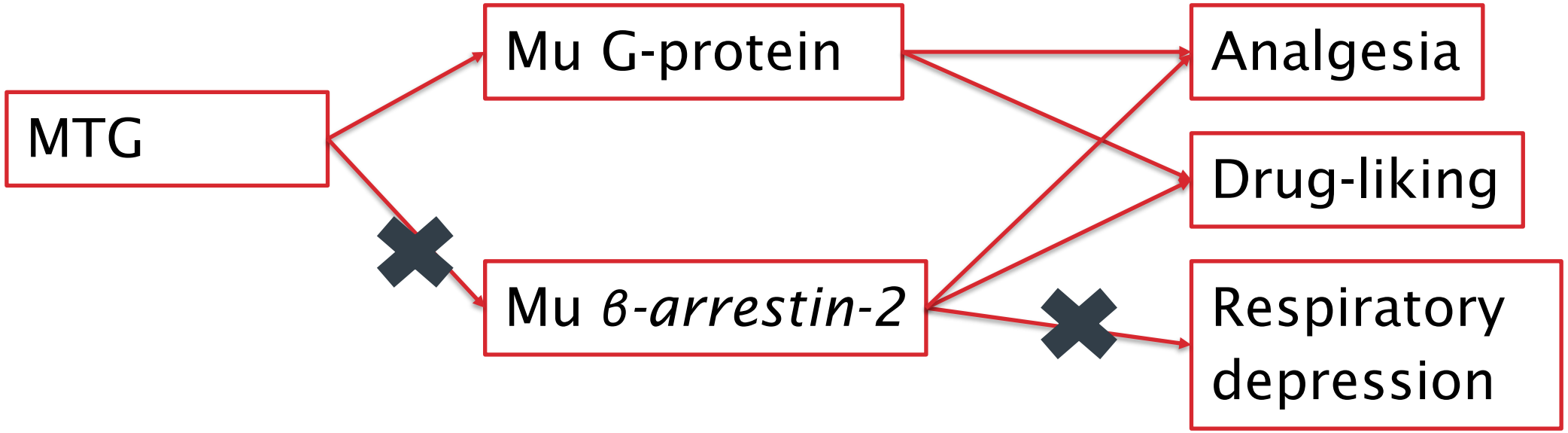
Kratom overview

- Naturally derived:
  - *Mitragyna speciosa korth*
  - Southeastern Asia
- Mitragynine and 7-hydroxymitragynine
- Mixed stimulant and opioid
- ~2 million adults used in last year
- US DEA proposed Schedule I in 2016
  - Scheduled in 6 states

- Palamar JJ. Past-Year Kratom Use in the U.S.: Estimates From a Nationally Representative Sample. Am J Prev Med. 2021;61(2):240-245.
- Eastlack SC, Cornett EM, Kaye AD. Kratom-Pharmacology, Clinical Implications, and Outlook: A Comprehensive Review. Pain Ther. 2020;9(1):55-69.

Kratom pharmacology

- Mitragynine (MTG) and 7-hydroxymitragynine (7-OH-MTG)
- Mu-receptor agonists



- Unclear stimulatory effects

- Todd, D.A., Kellogg, J.J., Wallace, E.D. et al. Chemical composition and biological effects of kratom (Mitragyna speciosa): In vitro studies with implications for efficacy and drug interactions. Sci Rep 10, 19158 (2020).
- Váradi A, Marrone GF, Palmer TC, et al. Mitragynine/Corynantheidine Pseudoindoxyls As Opioid Analgesics with Mu Agonism and Delta Antagonism, Which Do Not Recruit β-Arrestin-2. J Med Chem. 2016;59(18):8381-8397.

Kratom dosing

- 1-5 g per day reported to cause stimulatory effects
- 5-15 g per day more opioid-like effects

- Higher doses associated with:
  - Withdrawal
  - Addiction
  - Less of the desirable effects
- Doses often self-titrated

- Babu KM, McCurdy CR, Boyer EW. Opioid receptors and legal highs: Salvia divinorum and Kratom. Clin Toxicol (Phila). 2008;46(2):146-152.
- Smith KE, Rogers JM, Schriefer D, Grundmann O. Therapeutic benefit with caveats?: Analyzing social media data to understand the complexities of kratom use. Drug Alcohol Depend. 2021;226:108879.

Who is using Kratom

- Women: 52-60%
- White: 72-80%
- High school or college graduate: 98%
- Employed or student: 70%
- Income at or above US median: 38-50%
- In recovery from substance use disorder: 26%
- Geographic region:
  - South: 40%
  - NE: 15%
  - Midwest and west: 20%

- Smith KE, Dunn KE, Rogers JM, et al. Kratom use as more than a "self-treatment". Am J Drug Alcohol Abuse. 2022;48(6):684-694.
- Garcia-Romeu A, Cox DJ, Smith KE, Dunn KE, Griffiths RR. Kratom (Mitragyna speciosa): User demographics, use patterns, and implications for the opioid epidemic. Drug Alcohol Depend. 2020;208:107849.

Reasons for use

MALAYSIAN SURVEY

- Induce euphoria
- Decrease addiction to other drugs
- Enhance other drugs
- Cheaper than heroin
- Opioid withdrawal

REDDIT

- Self-treatment:
  - Pain
  - Anxiety
  - Depression
  - Substance use disorder
  - Opioid withdrawal
- Enhance:
  - Mood, energy, alertness, analgesia, relaxation

- Vicknasingam B, Narayanan S, Beng GT, Mansor SM. The informal use of ketum (Mitragyna speciosa) for opioid withdrawal in the northern states of peninsular Malaysia and implications for drug substitution therapy. Int J Drug Policy. 2010;21(4):283-288.
- Smith KE, Rogers JM, Schriefer D, Grundmann O. Therapeutic benefit with caveats?: Analyzing social media data to understand the complexities of kratom use. Drug Alcohol Depend. 2021;226:108879.

Benefits

MALAYSIAN SURVEY

- Work harder
- Increase activity
- Increase sexual desire
- Increase appetite
- Reduce heroin withdrawal symptoms

REDDIT

- Increase energy
- Mood enhancement
- Euphoria
- Relaxation and sedation
- Pain relief

- Vicknasingam B, Narayanan S, Beng GT, Mansor SM. The informal use of ketum (Mitragyna speciosa) for opioid withdrawal in the northern states of peninsular Malaysia and implications for drug substitution therapy. Int J Drug Policy. 2010;21(4):283-288.
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Adverse clinical effects

Short-term use

- Weight loss
- Hyperpigmentation
- Dehydration
- Constipation

Long-term use

- Weight loss
- Dehydration
- Hyperpigmentation
- Tiredness
- Constipation

Withdrawal

- Cravings
- Fatigue
- Rhinorrhea
- Insomnia
- Diaphoresis
- Nerve pain

Vicknasingam B, Narayanan S, Beng GT, Mansor SM. The informal use of ketum (Mitragyna speciosa) for opioid withdrawal in the northern states of peninsular Malaysia and implications for drug substitution therapy. Int J Drug Policy. 2010;21(4):283-288.

Adverse effects from Reddit

INTOXICATION

- Apathy
- Nausea/vomiting
- Decreased libido
- Irritability
- Lethargy

WITHDRAWAL

- Anxiety
- Uneasiness
- Depression
- Muscle aches
- Loss of appetite
- Restless leg syndrome
- Lethargy

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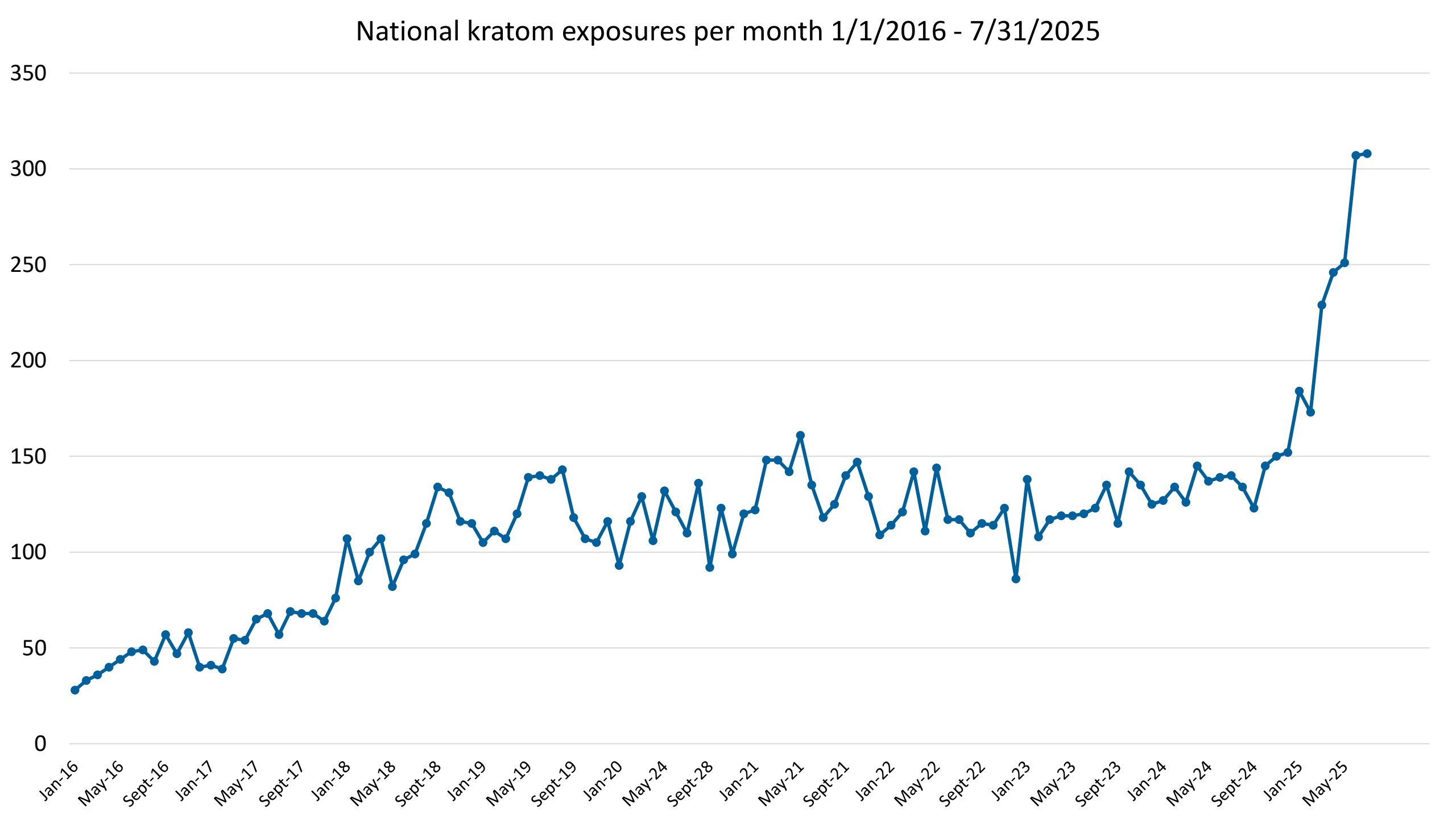
National kratom exposures per month 1/1/2016 - 7/31/2025
350
300
250
200
150
100
50
0
Jan-16
May-16
Sept-16
Jan-17
May-17
Sept-17
Jan-18
May-18
Sept-18
Jan-19
May-19
Sept-19
Jan-20
May-24
Sept-28
Jan-21
May-21
Sept-21
Jan-22
May-22
Sept-22
Jan-23
May-23
Sept-23
Jan-24
May-24
Sept-24
Jan-25
May-25

Do increased calls mean anything?

- Why do people call the center?
  - Made a mistake
  - Worried well
  - Something bad happened

- Why don't people call the center?
  - Provide feedback on how awesome drugs are

Poison center reported effects

Common	Severe
• Agitation: 19% • Tachycardia: 17% • Drowsiness: 14% • Vomiting: 11% • Confusion: 8%	• Seizures: 6% • Hallucinations: 5% • Respiratory depression: 3% • Coma 2%

Eggleston W, Stoppacher R, Suen K, Marraffa JM, Nelson LS. Kratom Use and Toxicities in the United States. Pharmacotherapy. 2019;39(7):775-777.

Polysubstance use

- Over half of reddit posts described polysubstance use
- Common:
  - Stimulants: 37%
  - Opioids: 32%
  - Hallucinogens/psychedelics: 22%
  - Benzodiazepines: 20%
  - Cannabis: 15%
  - Nootropics: 10%
- 1/3 of poison center cases are polysubstance

- Smith KE, Rogers JM, Schriefer D, Grundmann O. Therapeutic benefit with caveats?: Analyzing social media data to understand the complexities of kratom use. Drug Alcohol Depend. 2021;226:108879.

Treatment

OVERDOSE

- Supportive care
- Fluid resuscitation
- Airway management
- Naloxone

WITHDRAWAL

- Standard opioid withdrawal
- Buprenorphine/naloxone

Kratom as a “supplement”

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An Independent Nonprofit Organization

Kratom + salmonella

- January 2017 – May 2018
- 199 cases of salmonella reported with surge in October 2017
- Kratom identified as the source
- 54 patients hospitalized, none died

- Schwensohn C, Nsubuga J, Cronquist L, et al. A Multiple-Serotype Outbreak of Salmonella Infections Linked to Kratom, United States, 2017-2018. Foodborne Pathog Dis. 2022;19(9):648-653.

Kratom enhanced

	Mitragynine concentration (%)	7-hydroxymitragynine concentration (%)	MTG:7-OH-MTG ratio
Natural leaf	2.38	0.0124	192:1
Phoria Borneo white vein	1.83	0.0593	31:1
Phoria red	1.85	0.0410	45:1
Phoria green	1.17	0.0378	31:1
Phoria Borneo red vein	1.48	0.0346	43:1
Phoria maeng da kava	1.09	0.0300	36:1
Phoria regular	1.90	0.0093	204:1

- Lydecker AG, Sharma A, McCurdy CR, Avery BA, Babu KM, Boyer EW. Suspected Adulteration of Commercial Kratom Products with 7-Hydroxymitragynine. J Med Toxicol. 2016;12(4):341-349.

Kratom 2.0

WASHINGTON POISON CENTER

An Independent Nonprofit Organization

Kratom is not kratom

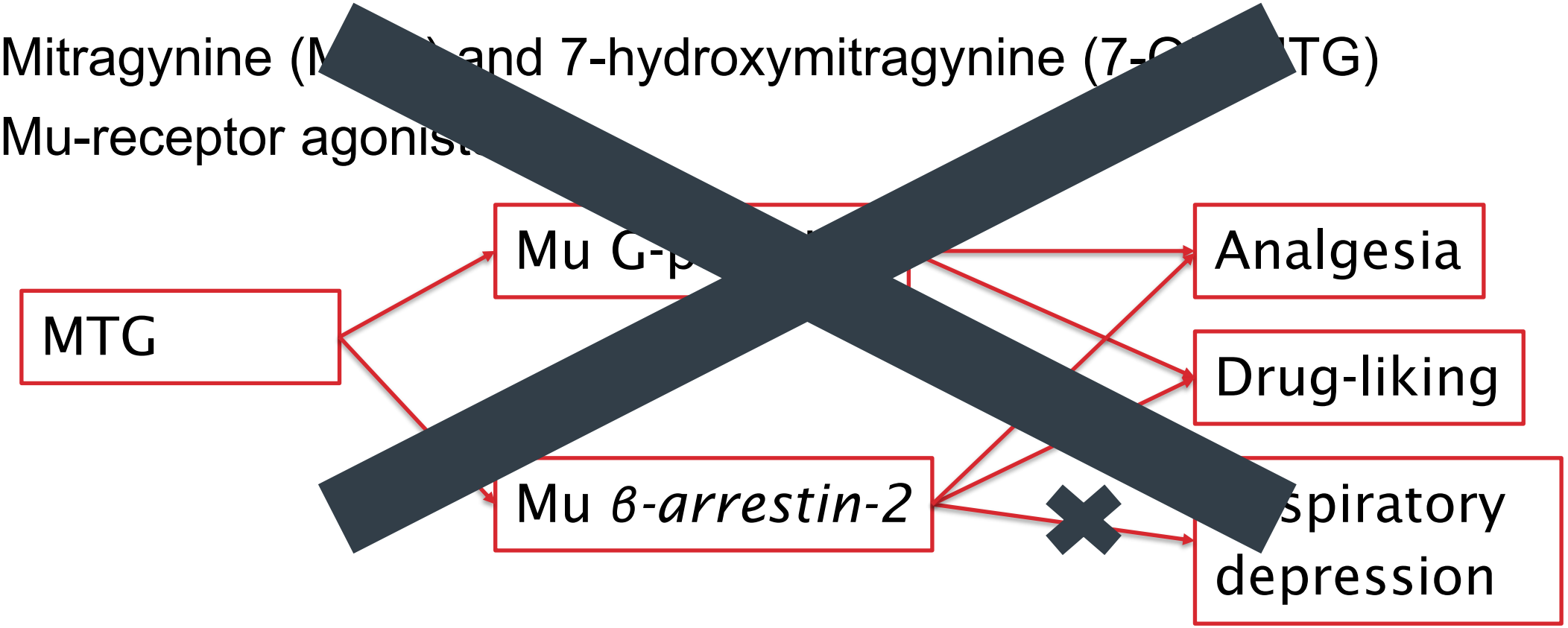
Hydroxie 7-OH Drink Mix – 15mg

$ 7.99

or 4 payments of **$ 2.00** with sezzle ⓘ

Kratom pharmacology

- Mitragynine (M) and 7-hydroxymitragynine (7-OH MTG)
- Mu-receptor agonist



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7-hydroxymitragynine

- Induces respiratory depression
  - Tolerance
  - Drug-liking effects
  - Withdrawal
- About 1/3 of Washington cases in 2025
- In an era of “let’s find a safer alternative to opioids”…
  - Companies are making this more dangerous

FDA and 7-hydroxymitragynine

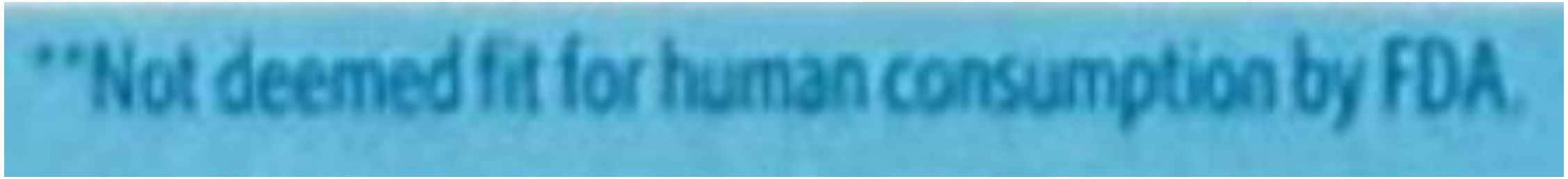
- Wrote “Dear Colleague” letter
- Authored report on concerns about 7-hydroxymitragynine
- Recommending regulatory action limiting 7-hydroxymitragynine

Safety concerns

- Harm reduction – encourage home naloxone
- Packaging and storage
- Dosage: ¼ tablet

All about the benjamins

- Goal of companies is to make money
- Avoid losing money



- Not safety

Hard to chase market

- Products sold in corner stores, vape shops, and others
- One of our staff reported seeing Diamond Shruumz in the clearance bin after the recall was reported
- Listings and internet sales still online weeks after recall

Ask your patients

- They may not link substances used to issues:
  - Blood clots with nitrous oxide
  - Withdrawal from kratom or 7-hydroxymitragynine
  - Anxiety with a mushroom edible
- We are here for patient care, not patient judgement

For Our Lives Campaign

Paj Nandi, Desautel Hege

Campaign Updates

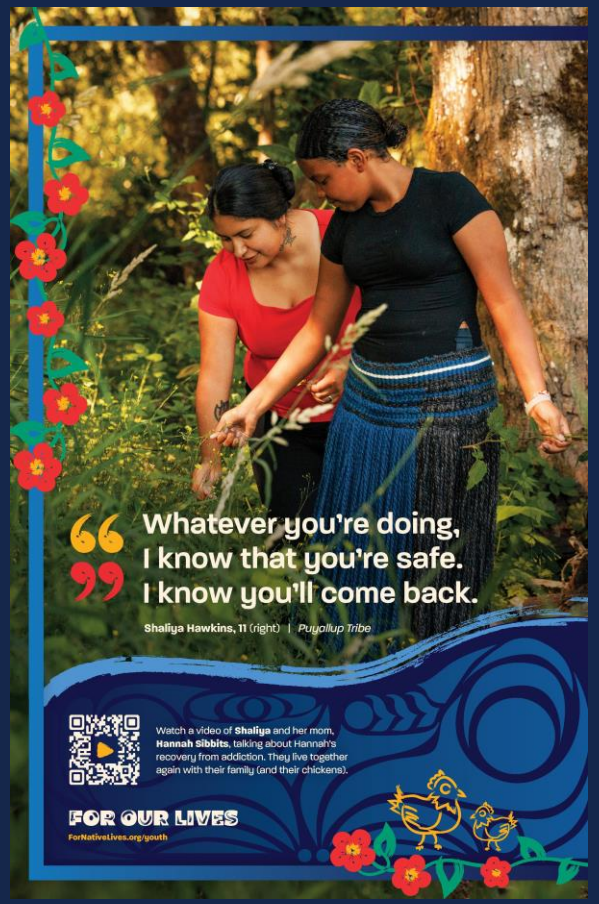
October 29, 2025

FOR OUR LIVES

Acting now to end overdose

Where we are now

Youth expansion (K5710-00-18)

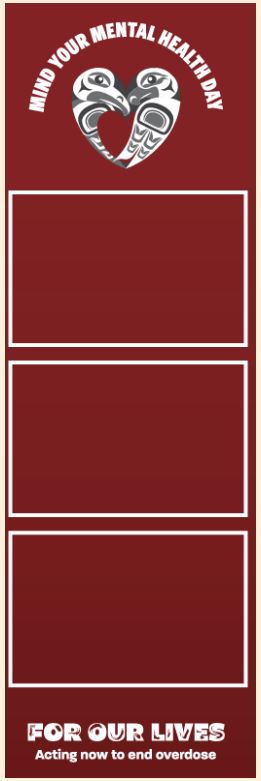


Complete

- Campaign plan
- Adaption of materials for youth
- Promotional packets
- Research and listening
- Creative materials
- Tribal engagement and outreach
- Event promotion

In progress

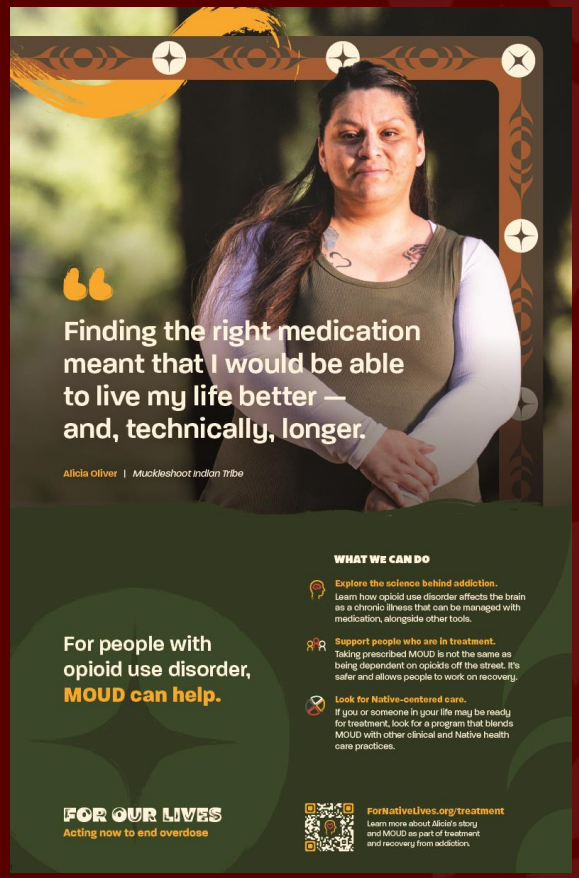
- **Tribal localization & customization**



In progress

- **Youth media buy**
  - Will run November 2025 through January 2026
  - 15 movie theaters in WA
  - 223 high schools in WA

Prevention and MOUD expansion (K5710-00-19)



Complete

- Prevention creative updates
- Prevention technical assistance
- Community events
- Treatment/MOUD listening and research
- Treatment/MOUD creative development

In progress

- **Prevention media buy**
  - Running September 1 through November 30, 2025
  - Mix of broadcast television, paid social advertising, and digital audio advertisements (e.g., Spotify).

In progress

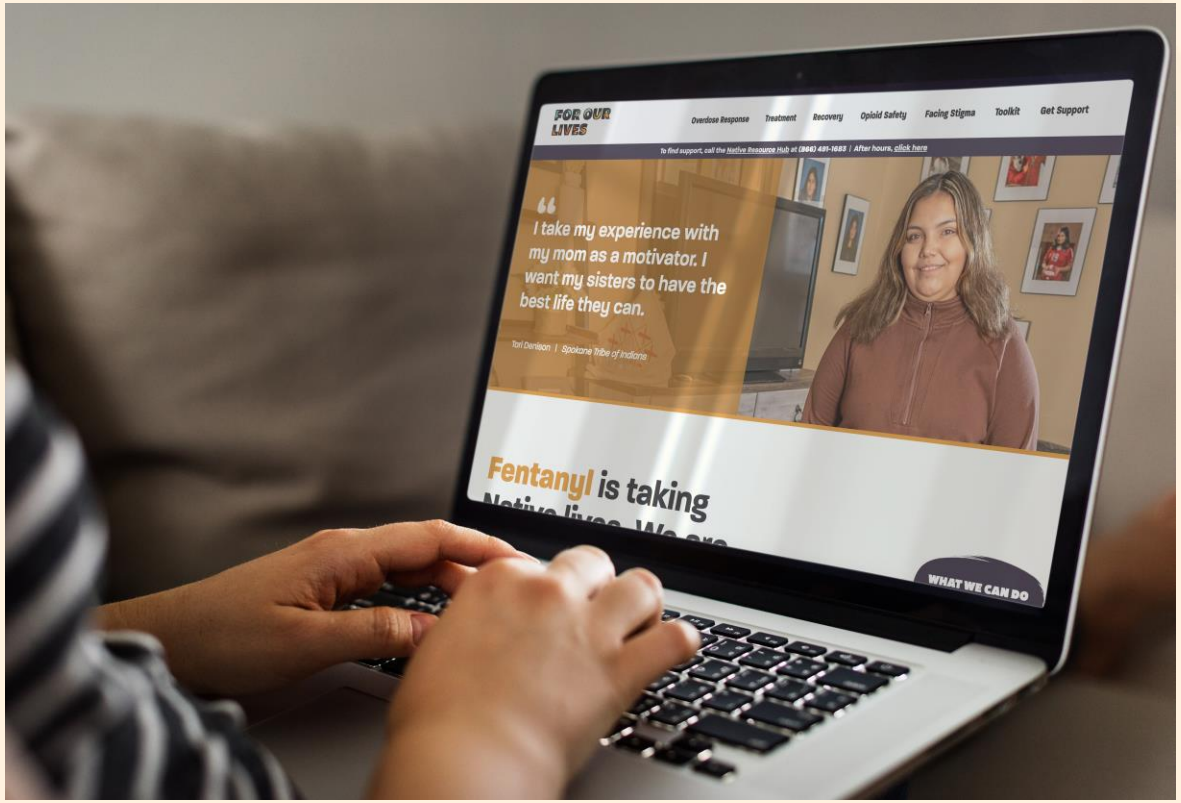
- **Treatment/MOUD media buy**
  - Running November 2025 through January 2026
  - Includes digital ads along with out of home advertising in health care settings and convenience stores in WA

What’s next?

Collaboration with Tribes

- DH will connect with each of the **29 Tribes** and **the 2 Urban Indian Health Programs**
- DH will work with them to **create custom materials** along with localized materials that would best support local communities and efforts

Website update and refresh



- DH will work in collaboration with OTA and Native partners to update the For Our Lives campaign website
- This will include updates to content and well as to the look and feel of the campaign

Youth toolkit update

- DH will work with OTA to develop, produce and send out **promotional youth packets** that include all of the new campaign materials for Native youth
- DH will work with OTA and Tribes to develop a **list of all Tribal schools, WA schools with Native education programs**, and **non-Tribal schools with high AI/AN populations** to send the toolkits to
- These schools will then be able to **order customized campaign materials** for youth

Thank you.

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pajn@wearedh.com

Meeting Wrap-Up
Next Agenda

Steven de los Angeles, Council Member, Snoqualmie Tribe
Lucilla Mendoza, HCA
Candice Wilson, DOH

Agenda
November 19th

- Carfetanil **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

WA Tribal Opioid Resource Exchange

Please share your Tribal events, trainings, and OUD/SUD resources!

heather@hrhnativewellness.onmicrosoft.com

nakia.demiero@hca.wa.gov

Click here or scan QR code