

Seattle Indian Health Board

Centering Cultural Rigor

Annual Report 2019–2020

Seattle Indian Health Board Organizational Leadership

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(PAWNEE)
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(OGLALA SIOUX)

SHELLEY MEANS, BA
(OJIBWE/LAKOTA)

We invest in the health of our community now and for future generations



A LANGUAGE SHIFT

We call our patients “relatives.” As an organization that is rooted in community and founded on Native values, everyone who walks through our doors is part of that community, or family—Native or not.



INTRODUCTION

Another Year of Growth

Guided by our Indigenous Knowledge Informed Systems of Care model, in 2019 and 2020 Seattle Indian Health Board expanded and further integrated as an organization—driven by our mission to ensure the health and well-being of Native people wherever they reside through advocacy, decolonizing data, providing culturally attuned healthcare and human services, and collaborating with tribal, community, and local partners.

2019 was another year of growth for Seattle Indian Health Board. We saw growth in staff, programs, and number of relatives served as well as expansion into the community. 2020, was Seattle Indian Health Board's 50-year anniversary. The intention was to, reflecting on the past, celebrate our recent successes, and plan for the next 50 years. But 2020 ended up being a year that shows the resilience of our community. While we didn't celebrate in the ways we planned, our commitment to our relatives—and the resiliency of ourcommunity—shone greatly in our response to the COVID-19 pandemic.



Indigenous Resilience in Action

SINCE COLONIALIZATION, Indigenous communities have modeled resilience in the face of systemic oppression targeted at our people. In the past two years, our resiliency as an organization continues to make Seattle Indian Health Board a visible leader and fierce advocate for our urban Indian community from the local to national level.

In the tradition of Indigenous leadership, we spent 2019 and 2020 looking back on generations of Indigenous resistance, cultural knowledge, and community building to address some of our most trying challenges in recent memory.

Our partnerships with tribal nations and urban Indian organizations continued to strengthen in 2019 with the renovation of our dental clinic and expansion of mobile dental services. With new investments and partnerships, we have increased our capacity to service our relatives at the Leschi Center and through our partners sites at Cowlitz Tribal Health Services and Chief Seattle Club. We remain resolute that dental services remain accessible to our Native community near and far.

In 2020, we celebrated our 50th year as an organization doing what we do best – mobilizing to address the needs of our relatives. As our world was shaken by a global pandemic, Seattle Indian Health Board remained unwavering in our pursuit of Indigenous health equity for our community, especially our elders and our youth.

We quickly adapted our service delivery to ensure our relatives could safely access care and services through telehealth and implemented facilities and service modifications to provide COVID-19 testing. We were among the first health care providers to mobilize a community-based testing site at our satellite clinic at Chief Seattle Club where we provide low-barrier testing options for our relatives experiencing homelessness and housing instability. We developed a Saturday pediatrics clinic to service our pregnant and parenting families and we ensured our Elder's day program remained open to provide cultural and social connections in an era of social distancing. On December 21st, 2020, we became the first in the state to receive and administer the Moderna vaccine. We promptly established a vaccine distribution plan that was a model of equitable community-driven vaccine distribution in Washington state. Today, we continue to provide a safe cultural space for our relatives to address critical basic needs ranging from routine healthcare to rental assistance to nutrition services and beyond.

As home to a Tribal Epidemiology Center, we have brought national attention to institutional barriers in the collection, reporting, and analysis of American Indian and Alaska Native data that contribute to narratives of Indigenous erasure – a practice we call "data genocide." We continue to lead national advocacy efforts to ensure the disparate impacts of COVID-19 are documented and used for policy and systems changes that move us towards achieving Indigenous health equity.

We've always known that our community is strong and resilient, but the way we have all come together in the face of this pandemic demonstrates our commitment to providing for our people, and I am honored to be part of an organization that has been on the forefront of advocating for and providing resources and healthcare to our community.

Thank you for your continued support.

Sincerely,

Esther Lucero (Diné), MPP
President & CEO



Reflecting on 50 Years of Service

SEATTLE INDIAN HEALTH BOARD has continued to experience growth in workforce, programs, and relatives served to meet the needs of our community during these challenging times. Our top priority has been and continues to be bringing the best we have to our relatives, and the future looks bright for expanding our services and reaching more of our community.

In 2019, we made the difficult decision to temporarily pause our in-patient behavioral health services at Thunderbird Treatment Center to pursue our vision of transforming behavioral health services through culturally attuned care. Grounded in our traditional beliefs and practices, the relocated Thunderbird Treatment Center will fully implement our Indigenous Knowledge Informed Systems of Care model by integrating our behavioral health, dental, medical, and traditional health services in a culturally attuned residential behavioral health program. Through our partnerships with tribal nations, we will expand our services to better address the needs of pregnant and parenting adults and increase our capacity by up to 220% percent.

We reached a huge milestone in 2020—50 years of service to our community. We started out as a small volunteer clinic during the civil rights and American Indian Movement in the 60s and 70s and have grown to be a leader in culturally attuned healthcare in Washington State. With the COVID-19 pandemic, we were forced to adjust the way we serve our relatives, and I am happy to say that everyone in the organization stepped up to the plate and fought to make sure our relatives continued to get the best care. Seeing how we handled and continues to handle the COVID-19 pandemic brings me much hope and shows me that the possibilities for growth in this organization are endless. I'm excited to see what Seattle Indian Health Board will achieve in the next 50 years.

Despite and because of the COVID-19 pandemic, 2020 was also an exciting year for our expansion into the community. To provide more primary care and outpatient behavioral health services at Chief Seattle Club, we are developing a primary care health clinic in their new ?al?al building that will open in fall 2021. The facility will offer services through a low-barrier buprenorphine clinic that is designed to be culturally attuned to the needs of urban American Indian and Alaska Native people.

We continue to uphold our promise to provide the absolute best care to our relatives in a culturally attuned way so they are able to not only survive, but thrive.

Thank you for your continued support, and we look forward to continuing to serve our people.

Sincerely,

Tom Warren (Choctaw), SB ME
Chair, Board of Directors

Healthcare Amid a Global Pandemic

Seattle Indian Health Board's COVID-19 story is one of success. From the start of the pandemic to the end of 2020, we were a leader in delivering the best healthcare possible to our relatives and adapting to the rapidly changing reality amidst a global health crisis. Our hard work throughout the year in response to COVID-19 paid off when we became the firstfacility in the state to administer the Moderna vaccine, a turning point in our fight to protect our community against the virus.

In the months leading up to arrival of vaccines, it was the exceptional leadership of tribes in exercising their sovereignty and advocating for an equitable vaccine distribution. Our partners gave us the opportunity to be at the forefront of the COVID-19 response and immediately implement a phased, community-centered distribution plan. The success of our plan has been widely lauded and modeled after by other organization as a result.



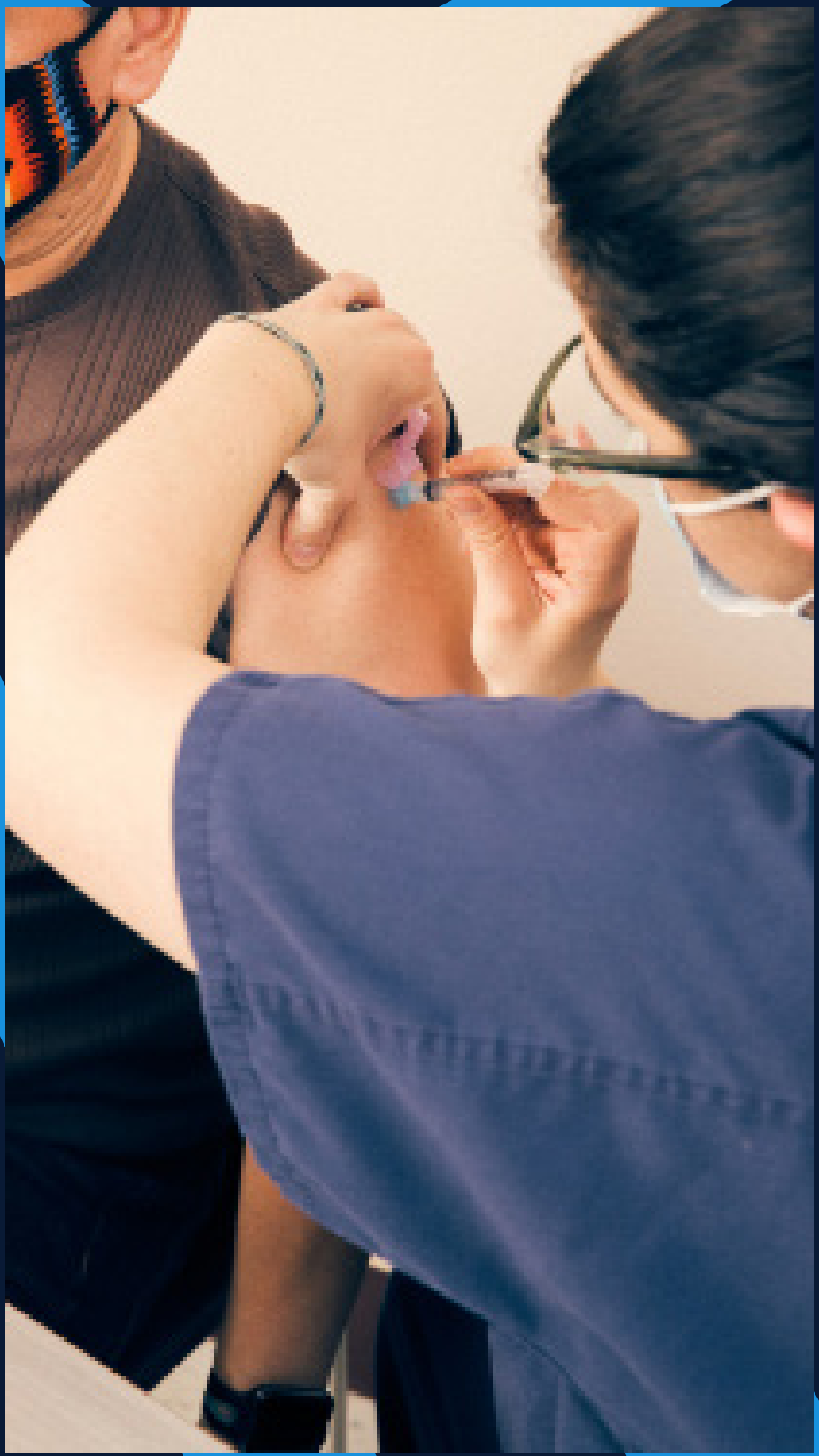


Mobilizing to Respond to COVID-19

Systemic government failures at federal, state, and local levels resulted in inadequate access to resources to slow the spread of the virus in Native communities across the nation. In May 2020, we experienced this first-hand as we struggled to acquire medical supplies, masks, and testing kits after months of working with federal agencies and Congress. During this confusing time instead, we received body bags—an unrequested delivery. The incident was a harsh reminder of the very real historic and present inequalities and atrocities endured by Native people across Indian Country. It was our community who rallied around us in this time of need—our friends at Eighth Generation, the City of Seattle, and other community-based organizations. This generosity and display of community directly impacted and sustained our ability to protect our staff and relatives.

Our resolve to provide the best for our people has seen our leadership fight every step of the way. When the state's "stay-at-home" order was announced, we made our services available online and adopted innovative strategies onsite to keep our doors open to in-person appointments. Ultimately, we did not close the clinic for a single day. Nor did we furlough or lay off any staff due to COVID-19.

As we turn a corner into 2021 and a future with a vaccine that will save countless lives, we will continue to do everything possible to ensure our community has access to the highest quality healthcare and realize our goal of vaccinating all our relatives.



Protecting Our Culture Keepers

Our elders hold the wisdom and traditional ways of knowing that are passed down through generations. When the pandemic started, we placed them at the forefront of the decision-making process for our initial response and again when we received our first shipments of the vaccine to help guide us through this pandemic while having the smallest possible negative impact on our community.

The Elders Program at Seattle Indian Health Board provides a place for our elders to socialize and stay connected to their community while also receiving health screenings, resources, and assistance. With the guidance of our elders, we kept our elders' space in the center open and running throughout the entirety of 2020, even while we moved many of our social activities to digital spaces. This decision allowed us to continue to serve our elders and provided a safe way for those experiencing homelessness to shelter in place as many other facilities began to close. We were successful in maintaining safety protocols and keeping our elders safe while also giving them a space of their own.

We know the elder population is at an even higher risk, which is why we ensured they had access to the COVID-19 vaccine during the first phases of our vaccine distribution plan.

Nurturing Indigenous Wellness and Healing

We do the work we do at Seattle Indian Health Board for the love of Native people. We adapt and adjust where needed to provide the best for our community. Between 2019 and 2020, we saw a large jump in the relatives we served each year, and that number continues to grow.



Breaking Down Barriers to Services

In 2019, we renovated our dental area in the Leschi Center and opened a new mobile dental clinic that travels to Cowlitz Tribal Health and Chief Seattle Club every month. Having a mobile dental clinic allows us to meet our relatives where they are. In 2020, we finalized plans for an additional mobile dental clinic that will begin service in 2021, bringing dental care to even more relatives in the Seattle area.

In response to COVID-19 in we had to come up with quick solutions so we could remain fully operational and continue to care for our relatives in a way that was safe for everyone. To increase the accessibility of our culturally attuned care, we implemented telehealth for all our services, allowing us to serve relatives through virtual appointments. Onsite, we created new safety protocols including increased sanitization, mandatory masking, social distancing in waiting areas, and screening for temperature and symptoms as soon as a relative enters the building.

ALL HEALTH AND HUMAN SERVICES

7,568
Relatives served in 2019

9,014
Relatives served in 2020



MEDICAL

4,322	2,796	4,032	2,288
Relatives served in 2019	Native relatives served in 2019	Relatives served in 2020	Native relatives served in 2020

DENTAL

1,826	1,303	1,533	1,043
Relatives served in 2019	Native relatives served in 2019	Relatives served in 2020	Native relatives served in 2020

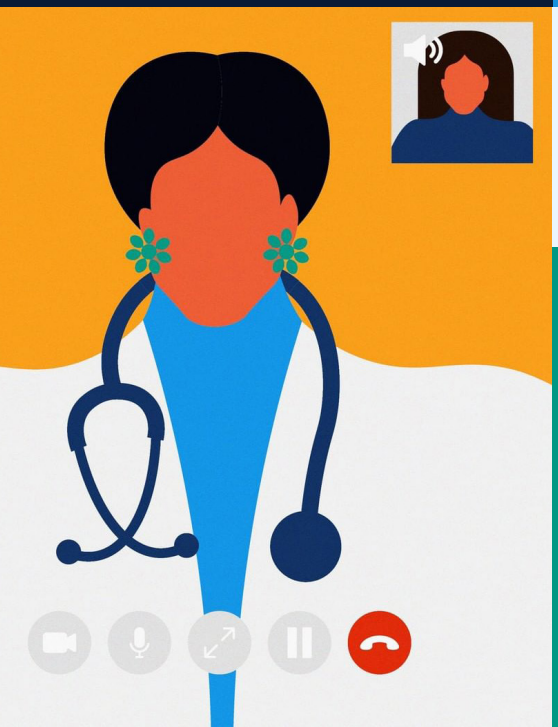


BEHAVIORAL HEALTH

893	530	509	287
Relatives served in 2019	Native relatives served in 2019	Relatives served in 2020	Native relatives served in 2020

TELEHEALTH

1,949	1,263
Relatives served in 2020	Native relatives served in 2020



PHARMACY

65	54	474	292
Relatives served in 2019	Native relatives served in 2019	Relatives served in 2020	Native relatives served in 2020

NUTRITION AND FAMILY SERVICES

452	267	517	276
Relatives served in 2019	Native relatives served in 2019	Relatives served in 2020	Native relatives served in 2020

TRADITIONAL MEDICINE 2019–2020

Traditional Health Expert Consultations with 72 relatives

Traditional Medicine and Plant Classes viewed by 1,514 relatives

Home and Hospital Visits to 23 relatives

Drum Circles attended by 1,452 relatives



Creating a Cultural Space for Treatment and Recovery

In 2019, Seattle Indian Health Board made the difficult decision to temporarily pause services at Thunderbird Treatment Center to pursue relocation and expansion of our in-patient substance use disorder treatment services.

While the temporarily loss of these services to our community weighsheavy on our hearts, we believe that relocation and expansion will create a cultural space for behavioral health services complete with expanded and integrated services, new tribal partnership opportunities, and financial sustainability.

A new space will allow us to fully integrate our Indigenous Knowledge Informed Svystems of Care model, expand bed capacity to our original licensure of 95 beds, and include specialized services and space accommodations for pregnant and parenting adults and people with co-occurring mental health conditions.

Preserving People over Property

In January 2021, we reached an important milestone in completing the sale of the Thunderbird Treatment Center facility to an affordable housing developer. The sale proceeds will support relocation and expansion efforts lead by a Relocation Advisory Committee in 2021. While this loss of in-patient behavioral health services is challenging, we secured funding to stand up an Intensive Outpatient Program to address interim behavioral health needs in our community.

Advocacy to Put Land Back in Indigenous Ownership

As part of our 2021 advocacy efforts, we are meeting with local and state policymakers to identify underutilized public land and/or capital infrastructure for Thunderbird Treatment Center's relocation. This includes participating in the local and state budget and collaborating with our tribal and government partners to pass legislation and resources for culturally attuned behavioral health services. As our local and state governments move towards greater investment in community-based behavioral health services, we strive to stay at the forefront of these discussions.

The Future of Thunderbird Treatment Center

Our future facility is the culmination of our hard work over the past 50 years as an organization dedicated to the health and well-being of urban American Indian and Alaska Native people. We know that our Indigenous Knowledge Informed Systems of Care model is crucial to serving our relatives and are thankful for the abundant community support and tribal partnerships that are turning our vision of culturally attuned and tribally-driven behavioral health services into reality.

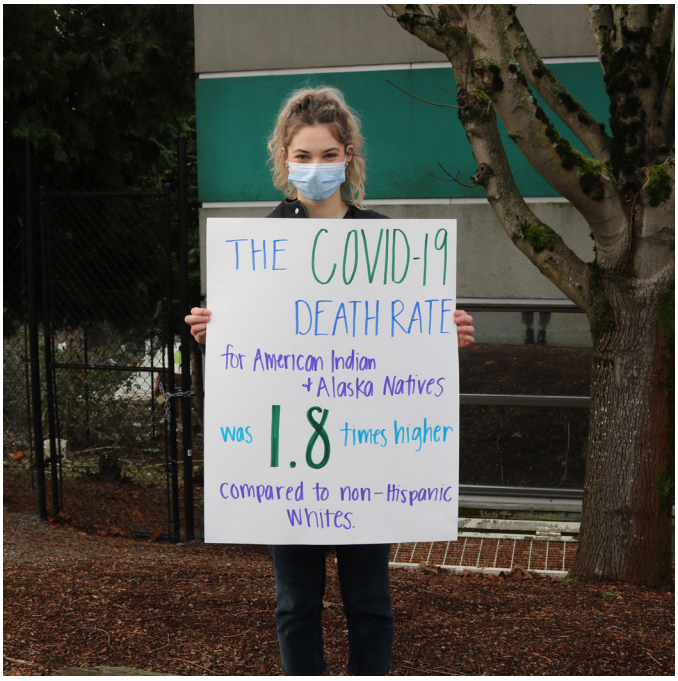
EPIDEMIOLOGY, RESEARCH , AND EVALUATION

Data Guided by Traditional Knowledge

Urban Indian Health Institute is the research division of Seattle Indian Health Board and provides services to Urban Indian Health Programs nationwide. Over the past two years, we were able to continue to expand and add new programs and services to assist those who serve urban American Indians and Alaska Natives.







Fighting the Spread of COVID-19 and Misinformation

Central to understanding the impact of COVID-19 on Indian Country and appropriately allocating resources in response, is the need for complete and accurate data. As a tribal epidemiology center and public health authority at the onset of the pandemic, we shifted many of our priorities to respond to the devastating and rapidly spreading virus. We sprang into action to monitor the developments, collect data, and create resources for tribes and urban Indian-serving organizations about the outbreak.

In 2020, we released over 30 culturally attuned informational resources on COVID-19, implemented a COVID-19 National Surveillance Survey for Urban Indian Health Programs, and contributed to the CDC's Morbidity and Mortality Weekly Report (MMWR) on mortality from COVID-19 among American Indians and Alaska Natives. The report revealed that Native people were 3.5 times more likely to contract COVID-19 and 1.8 times more likely to die from it than non-Hispanic white people, highlighting the stark disparities in Native mortality in the pandemic.[1]



Informing COVID-19 Vaccine Efforts in Indian Country

In tandem with our efforts to slow the spread of COVID-19 and understand its impacts on Indian Country, we were preparing for the development and distribution of a vaccine. To advocate for the equitable distribution of the vaccine for our people, Abigail Echo-Hawk, our Executive Vice President, join the vaccine allocation committee—the only Native American to be included.

In 2020, we developed the first ever national COVID-19 survey on vaccinations to better understand knowledge, attitudes, beliefs, and practices among Native peoples regarding the vaccine. The survey was conducted to inform a data-driven approach to vaccine education efforts in Native communities, empowering relatives to make informed decisions about the vaccine for themselves and for their families.

We remain dedicated to monitoring the latest developments surrounding COVID-19 and the vaccines and continues to make accurate information available to the communities we serve.

1. Arrazola J, Masiello MM, Joshi S, et al. COVID-19 Mortality Among American Indian and Alaska Native Persons — 14 States, January–June 2020. MMWR Morb Mortal Wkly Rep. 2020;69:1853–1856. DOI: http://dx.doi.org/10.15585/mmwr.mm6949a3. Accessed February 8, 2021.

POLICY AND ADVOCACY

Advancing Indigenous Health Equity

Through our tribal and community partners, we continue to advance policy and systems changes that fulfill trust and treaty obligations to American Indian and Alaska Native people, regardless of where they reside. Despite the unique challenges 2020 presented, the Public Affairs division provides testimony, authors, consults on, and influences legislation and administrative policy which will have lasting positive impact on Indian Country.

OUR TOP LEGISLATIVE PRIORITIES

1

To address disparities in health care and housing outcomes for American Indian and Alaska Native people through capacity and infrastructure investments

2

To address the crisis of Missing and Murdered Indigenous Women and Girls through culturally attuned services and community-defined solutions.

3

To honor federal obligations to American Indian and Alaska Native people through legislation that strengthens tribal sovereignty and upholds the federal trust responsibility to Native people, regardless of where they reside.



Supplemental Resources to Address COVID-19

Every year, Seattle Indian Health Board gives congressional testimony to the House Committee on Appropriations in Washington, D.C., which secures funds for all Urban Indian Health Programs and Tribal Epidemiology Centers nationwide. This effort laid the groundwork for our successful influence on COVID-19-related legislation. Through our partnerships with tribes, tribal organizations, and other urban Indian organizations, we secured supplemental funding needed to stabilize the Indian healthcare system and implement culturally attuned and community defined COVID-19 responses in tribal and urban Indian communities. This included successfully advocating for nearly $3.8 billion in funds directed toward Indian healthcare system, including a record $171 million for Urban Indian Health Programs (196% increase from fiscal year 2020's annual appropriation) and $24 million for Tribal Epidemiology Centers (441% increase from fiscal year 2020's annual appropriation).

Legislative Action to Address the Crisis of Missing and Murdered Indigenous Women and Girls

Also crucial to our work was the number of bills and other legislation that addressed the Missing and Murdered Indigenous Women and Girls crisis. In addition to critical work on Savanna's Act and the Not Invisible Act, which made history when they were passed in 2020, we co-authored the City of Seattle's Resolution 31900, a commitment to addressing the MMIWG crisis.

Securing Resources for Expansion

One very special success at the state-level was securing $1 million in capital budget to complete the financing needed for the 3,000 sq. ft. satellite clinic opening at Chief Seattle Club's ?al?al affordable housing facility in October 2021.



Preparing Future Leaders in Health

We are invested in the health of our community—now and for future generations.

Since 2015, we have grown from 120 to 186 employees in 2020. We envision a future where all Native people have healthy and successful lives and are training the next generation of health professionals to achieve this. In 2019 and 2020, four resident physicians graduated from our Family Medicine Residency Program, which offers specialized training in culturally appropriate care. In 2020, two new Traditional Indian Medicine apprentices join the team and were trained at the Leschi Center by our practitioners.

Seven Generations

Our commitment to passing down knowledge and training for culturally attuned care extends beyond our healthcare professionals to every member of our organization. For the first time ever, in 2020, we held a virtual, weeklong gathering as an organization. The gathering, Seven Generations, was designed to ground staff in our Indigenous, organizational values, Indigenous Knowledge Informed Systems of Care, and what it truly means to serve Native people. The Seven Generations retreat will be a reoccurring event as we develop our workforce to create space for centering and reflection on what drives our us as an organization and our deep commitment to community.

55%
Staff increase between 2015–2020

4
Graduates from our Family Medicine Residency Program

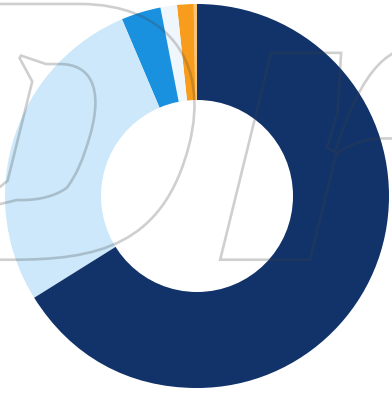




Revenue by Category

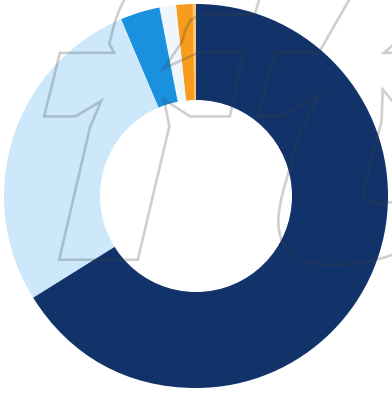
2019

Contracts
$9,551,133
Programs
$3,949,637
Grants
$205,917
Contributions
$199,569
Non-Operating
$29,969



2020

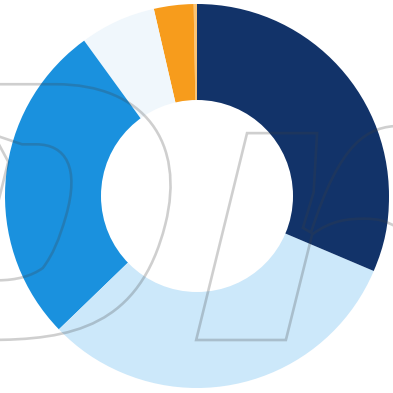
Programs
$8,660,184
Grants
$8,555,199
Contracts
$7,451,373
Other Revenue
$1,785,112
Contributions
$882,381
Non-Operating
$29,969



Expenditures by Division

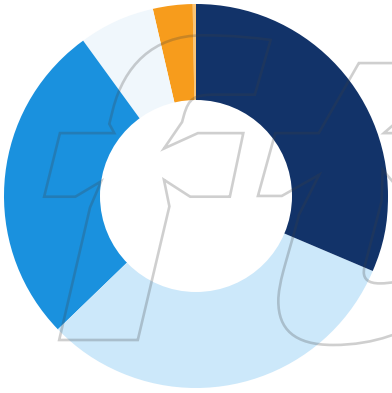
2019

Medical
$8,660,184
Administrative
$8,555,199
Urban Indian Health Institute
$7,451,373
Pharmacy
$1,785,112
Dental
$882,381
Behavioral Health
$29,969
Community Services
$29,969
Facilities Support
$29,969
Nutrition and Family Services
$29,969
Substance Use Disorder
$29,969
Traditional Health
$29,969



2020

Medical
$8,660,184
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Community Services
$29,969
Facilities Support
$29,969
Nutrition and Family Services
$29,969
Substance Use Disorder
$29,969
Traditional Health
$29,969



DEVELOPMENT

Growth within an Underfunded System

Between fiscal years 2019 and 2020, our total revenue increased by 35%. Our encounter rate increased by 180%, and the change was retroactive, providing an increased encounter rate from Medicaid moving forward and compensation for underpaid services into the past. This has translated into $1.9 million in additional income in 2020.

COVID-19 and Finance

In 2020, we received significant supplemental dollars from the Indian Health Service (IHS) and the Health Resources and Services Administration (HRSA) for our efforts in COVID-19 preparation, prevention, and response. Over $7 million has enabled us to purchase new equipment, complete repair and maintenance to ensure effective sanitization, prepare for a COVID-19-appropriate expansion at Chief Seattle Club, increase staffing for our COVID-19 testing plan as well as our current COVID-19 vaccination clinic, and overall enhance infrastructure to ensure the safety of our staff and relatives.

In addition to COVID-19-specific awards from IHS and HRSA, we received supplemental funds from other agencies and government entities including City of Seattle, the Substance Abuse and Mental Health Services Administration, Seattle Foundation, the National Council of Urban Indian Health, and Washington State.

Donors and Sponsors

Thank you to all of you who have donated to Seattle Indian Health Board in 2019 and 2020. Because of your generosity, we are able to continue serving our community in a good way now and into our next 50 years.

2019

NETWORK FOR GOOD

SEATTLE FOUNDATION

THE BEHNKE FAMILY

2020

FIDELITY BROKERAGE SERVICE

HUNT, CHRISTOPHER A

FIDELITY CHARITABLE

GONG, LOUIE

GUTHRIE AND TKACHUCK FUND

NETWORK FOR GOOD

NUIFC COLLABORATION

SEATTLE FOUNDATION

SOCIAL GOOD FUND BILL

THE BEHNKE FAMILY

WYMAN YOUTH TRUST

NATIONAL PHILANTHROPIC TRUST

SCHWAB CHARITABLES

FIDELITY CHARITABLE

WYMAN YOUTH TRUST

NEW BEGINNINGS

YOURCAUSE

AMERICAN GIFT FUND

SEATTLE FOUNDATION

GPTSO

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