“For the Love of Native People”
APPA Interviews Esther Lucero, Seattle Indian Health Board CEO

The Seattle Indian Health Board (SIHB) has provided essential community health care and services targeting urban American Indian and Alaskan Native populations in the greater Seattle/King County Area for 50 years. Although APPA is unable to visit Seattle for our 2021 Winter Training Institute, we believe it is important to recognize the amazing work being done by this institution.

The APPA gratefully acknowledges the Native Peoples on whose ancestral homelands we had intended to gather, as well as the diverse and vibrant Native communities who make their home here today.

Please take a moment to visit APPA’s Silent Auction to bid on beautiful and unique Native American items. You do not have to attend APPA’s Winter Training Institute to bid.

Esther Lucero, CEO of SIHB, recently sat down for an interview with APPA staff members Aaron Burch and Nan Benally to discuss the organization’s history, current challenges and goals for the future. Thank you so much to Ms. Lucero and the entire SIHB team. Please enjoy the interview and support SIHB if you’re able.

APPA: Thank you for being with us Ms. Lucero. Could you begin by telling us about yourself?

EL: Happy to be here! I was born and raised in Colorado Springs, Colorado. I’m Dine’ on my mom’s side and Latina on my dad’s side. These days I live in Issaquah, WA, and my number one responsibility is guiding the vision of the Seattle Indian Health Board. Our motto is “For the love of native people.” Every day, I try to remember that motto and motivate our team to give the best service possible to our patients.

APPA: You joined the SIHB in 2015. What attracted you to the position?

EL: I wasn’t attracted to the position at first, quite frankly. This is my second career. My first was in the corporate world. I had been successful, but I was totally unhappy. I called my mom and she said, “That’s because...
you’re not doing anything for your community.” I knew I had to make a change, so that’s when I started on the path of community health.

Polly Olsen, the former board president of SIHB, reached out to me about the CEO position while I was working as the Director of Programs and Strategic Development at the California Consortium for Urban Indian Health. I wasn’t sure I was ready, but Polly had faith in me. I feel really blessed that I made the decision to come here.

When I walked in, I had no preconceived visions. I felt privileged to lead a traditional health task force comprised of practitioners. I was and remain committed to carrying out traditional Indian medicine in an urban environment.

APPA: What strengths did you recognize in the SIHB when you came on board?

EL: There were a few obvious strengths and programs that I knew were essential to carrying out our mission. ‘Policy and advocacy’ is a strength. We were the first Indian health program to provide congressional testimony. This is something we must do to make sure systems work in favor of our patients and staff.

Workforce development is key as well. We’ve trained a tremendous number of American and Alaskan Native physicians, and we operate a 65-bed residential treatment program. Our physicians handle everything from pre-birth to crossing over.

There is a significant number of American Indian and Alaskan Native homeless in Seattle, and we see too much gender-based violence. SIHB is dedicated to the building of systems for these issues. That remains part of our vision moving forward.

APPA: What are the biggest challenges you’ve faced in the promotion and execution of good public health practices?

EL: One of the biggest hurdles we face is that outside groups want to force SIHB into a “western” system that doesn’t always work for out people. We have to educate people and hold them to our standard. SIHB is working to shift that power dynamic and not be dependent on government systems or any systems outside our own.

https://www.appa-net.org/TCCSC/
APPA: Could you talk about your demographics? Are there any populations you’d like to see more of?

EL: Sixty-seven percent of our patient population is American Indian and Alaskan Native. We see about 6,000 folks total, but there are 40,000 American Indian and Alaskan Native People in Seattle/King County. We have a long way to go. There’s a misconception that SIHB only serves the lowest socio-economic tiers, but that is not true. We’re implementing a system that will serve everyone.

APPA: Tell us about your advocacy work. What have you found to be the most effective methods of success through representation?

EL: My predecessor was savvy when doing national advocacy and spent a lot of time building good relationships. We have expanded that work by collaborating with congressional members in both the US House and Senate, and we have champions in more than 30 states. Our representatives provide testimony every year in a variety of forums, most typically the Committee on National Resources (Interior) and the Department of Appropriation.

In 2010, the Affordable Care Act gave states more authority over healthcare systems. Our tribes are not used to working with the state at all. I’ve been blessed to have good relationships with our tribal partners. They consider us a continuum of care.

I recognized we had to expand our advocacy to the state level. Funding goes to states and even to community governing boards. SIHB has been very strategic about where we’re involved. We’ve had success in seeing local legislation passed and assisting in issuing proclamations on missing and murdered indigenous persons. When you do policy work, you never expect to see change in your lifetime. We’re grateful for our successes every day.

APPA: You’ve been dedicated to public health for years now and have held pivotal roles in the wellness of Native American populations on the West Coast. How has your perspective on public health evolved over your career?

EL: Finally, we have windows of opportunity to provide an environment of wellness for our people. We don’t treat mind, body and spirit separately. It’s all one system of care. I don’t know if my perspective has evolved so much as we’ve been able to evolve the perspective of others. I know a younger me should have listened more. “Your goals are possible. Don’t stop.”

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APPA: How has the SIHB been affected by COVID-19? What have been the biggest challenges you’ve faced, and what have been your greatest successes?

EL: We have implemented telehealth for 80% of our services, and we rotate work from home schedules for everyone. We’ve done that to keep as healthy a workforce as we possibly can. This helps us honor the social distancing environment we need to be successful. Our community rose up to make sure we had appropriate PPE (personal protective equipment). But, it hasn’t all been easy. You may have read the news story where we asked for PPE and received body bags instead.

We never stopped giving well child visits and vaccinations. We limited these visits to Saturdays to contain the risks while still seeing people who need these services.

I also want to mention our “Elders” program. We regularly have 75 to 100 homeless elders come in to get a warm meal, wash their clothes, take care of their hygiene. When we tell our elders to shelter in place, 40% are homeless. We’re asking these individuals to shelter in place under a bridge. Our homeless management team delivers food, supplies, sleeping bags and tents to encampments. SIHB is committed to making sure these people stay healthy, and we’re really proud of that.

SIHB implemented consult rooms where they have access to a phone or computer. This allows them to access health providers on site as well. We’re working to be responsive but also creative.

APPA: Do you see any correlation between the misconceptions that surrounded HIV in the 80s and COVID-19 today? How do you address beliefs that science has proven false?

EL: HIV/AIDS is where I was introduced to public policy. There is tremendous correlation. Certain leaders want to deem Covid statistically insignificant and not look at the impact on population. What I saw during HIV/AIDS is that treatment was tested on our tribal systems, and then that treatment was no longer available to the tribal communities. We’ll have to see.

The difference in Washington at least is that they have adopted a centennial accord. This means they have agreed to honor fiduciary obligations and our tribes are being treated first. I think our tribal communities and urban programs are more prepared. We have fought to be included in the response systems.

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APPA: What unique issues do you see for Urban Native individuals relocating due to employment, school or even issues of probation & parole?

EL: There’s tremendous racism. We are disproportionately impacted by violence and racism, and we are disproportionately represented in incarceration, parole and all those things. Our experience as Urban Indians is one of strength and resilience but also being inundated by western influences and bias. That’s why we must have programs like SIHB. Some people come to us just to be treated like a human.

APPA: What impact have you seen the 2020 social justice movement have on Native communities?

EL: It’s definitely promising, but I can’t say it is positive yet. The Mayor of Seattle has put forth a task force to distribute 100 million dollars to black and indigenous communities. I’ve been asked to chair a committee, and we’ll see how that comes out. You know how Indians feel about promises. How about that? (laughing)

APPA: What else would you like to discuss or highlight for our audience of community corrections, probation and parole professionals?

EL: It’s about time to listen to Indian people. We’re seeing it all over the place. Look at the fires in California. Officials are now talking to tribes to discuss fighting those fires. They should have done so a long time ago. I feel the same about health care, about social justice. Stop tokenizing us, because one person on a committee doesn’t bring true change.

APPA: How can APPA continue to support you?

I feel honored to be selected for an interview. We’re always looking for accomplices. We’re always looking for allies. Get the message out. When you see systems of oppression continue to function as they always have, we must speak up. If you see our native folks not represented, speak up. That’s what I’d like to see.

This interview was edited for clarity. Thank you once more to Esther Lucero and the Seattle Indian Health Board. You’re doing great work and APPA is delighted to spread the word for the benefit of your people. To learn more, visit www.sihb.org. Also, take a moment to bid in APPA’s silent auction to benefit the SIHB.