

History

The Hawaii State Department of Health (HDOH) Office of Health Equity was established by legislative mandate in 2002 and is located under the administrative control of the Director of Health.

In 2006 the Hawaii State Legislature established an Office of Language Access at the Department of Labor and Industrial Relations to implement state and federal language access requirements.

In 1978, by an amendment of the State Constitution, the Office of Hawaiian Affairs (OHA) was created to hold title to all property held in trust for Native Hawaiians. OHA manages and administers the proceeds from the sale or disposition of the lands, natural resources, minerals, and income derived from sources for Native Hawaiians. OHA also formulates policy relating to Native Hawaiian affairs in Hawaii.

Health Priorities

The HDOH has identified the following health priorities for the general population of the state:

Health Priorities for the General Population
Pandemic flu preparedness
Disaster preparedness
Assuring medical services for at-risk populations
Assuring availability of appropriate services for substance abuse and mental health

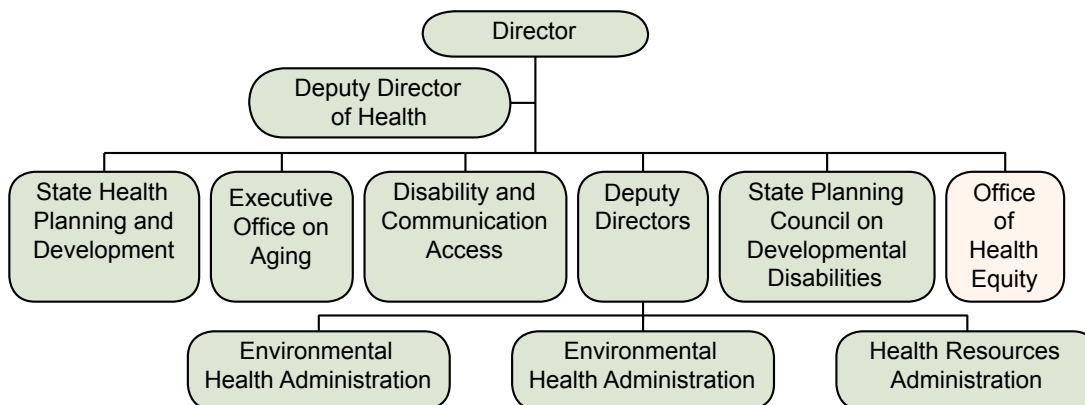
Overview

	Funding for HD Activities	Personnel Dedicated to HD	HD Unit	HD Advisory Body	State HD Legislation or Mandate	HD Strategic Plan	Evaluation of HD Activities
Hawaii	x	✓	✓	x	✓	x	✓
Total Affirmative Responses out of 46	30	38	36	36	27	36	39

Organization, Infrastructure and Resources

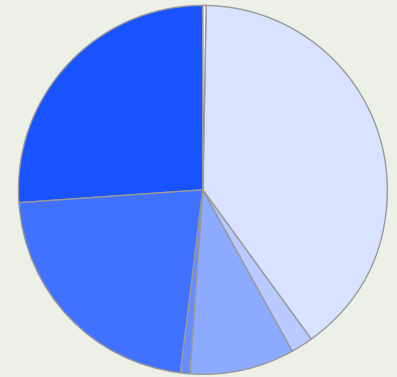
The following is a simplified organizational chart that demonstrates the location of the state's health disparities focal point in relation to the State/Territorial Health Official and/or other key public health offices:

Hawaii State Department of Health



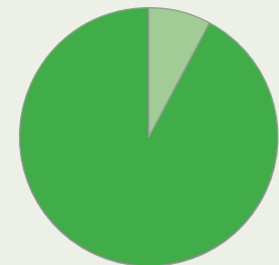
Total State Population:
1,285,498

Racial Distribution



- American Indian/Alaskan Native (0.3%)
- Asian (40%)
- Black/African American (2%)
- Native Hawaiian/Pacific Islander (9%)
- Other Race (1%)
- Two or More Races (22%)
- White (26%)

Hispanic/Latino Ethnic Distribution



- Hispanic/Latino Ethnicity (8%)
- Non-Hispanic/Latino Ethnicity (92%)

Note: People can self-identify as members of any racial group in the Census, as well as report having Hispanic/Latino ethnicity.

Source: 2006 American Community Survey, US Census Bureau

Strategic Planning

The Hawaii State Department of Health seeks to protect and improve health and environment for all residents as part of its vision to achieve an optimal state of physical, mental, social and environmental well-being for all Hawaiians. Since Hawaii's population is comprised primarily of racial and ethnic sub-populations that are considered to be racial/ethnic minorities in other parts of the United States, the HDOH does not focus on "racial and ethnic minority health" as a distinct area.

Instead, one of its primary goals is the elimination of health disparities for at-risk populations in Hawaii. These populations include the un- or under-insured, those with limited access to health care, and people with low-income or less educational attainment than the majority population.

The HDOH also recognizes that culturally and linguistically appropriate health information, education and interventions are essential to achieving the HDOH vision. To this end, HDOH tailors most of its programs and services for particular racial and ethnic populations that are disproportionately affected by particular health conditions, e.g. tuberculosis services for Vietnamese and Filipino migrant populations in Hawaii at risk for TB, or healthy lifestyles programs for Native Hawaiian populations that experience a disproportionate rate of obesity and diabetes.

Human Capital Investments

HDOH has 3,019 employees operating out of over 100 sites statewide (approximately 45 sites are mental health centers or satellite sites). With the exception of approximately 400 positions in environmental health programs, most HDOH employees work directly or indirectly on programs serving high-risk populations, defined by low income, immigrant or migrant status, limited access to health care, lack of adequate insurance or other special health needs.

Financial Investments

Although the HDOH does not allocate financial resources specifically for state health disparities activities, it does support these activities through the budgets of its public health divisions conducting the activities. Specific financial data on HDOH funding streams were not reported.

Activities

Community Health Center Partnership

Since 1990, the HDOH has partnered with a network of primary health care providers and centers throughout Hawaii to deliver WIC, family planning, perinatal, pediatric and primary care services for Filipinos, Native Hawaiians, other Pacific Islanders and Asian immigrants in Hawaii. Community health centers provide preventive services, health screenings and primary care that is culturally and linguistically appropriate for the populations they serve which - due in large measure to the attention health centers give to the affects of culture on health and health seeking behaviors - results in high service utilization rates and improved health outcomes for underserved populations.

Partners (and Funding)

CHC services: HDOH (approximately \$10 million/year), HRSA, Hawaii Primary Care Association, Papa Ola Lokahi Health Partnership

Activity Outcomes

Increased access to primary health care and improved health outcomes

Evaluation Methods

Health outcome measures and HRSA grantee reports

Partnerships

- HDOH initiates and maintains partnerships with both public and private agencies and programs whose intended audiences are those who are un- and under- insured, low-income, low-literacy, and lacking in access to health care. Reported partnerships included those with other state agencies, community-based and non-profit organizations, health systems, foundations, schools, universities, professional associations, and federal agencies. Activities focusing on health disparities are conducted and coordinated across many HDOH program offices.

Activities continued...

Malama A Ho'opili Pono Program

HDOH began to support prenatal outreach, education and services at community health centers serving Native Hawaiian and Filipino populations in 2000 to increase the number of pregnant Native Hawaiian and Filipino women in early prenatal care. Health centers train outreach workers from Native Hawaiian and Filipino communities to engage and enroll pregnant women in prenatal care programs using methods that are culturally and linguistically appropriate for Native Hawaiian and Filipino populations.

Partners (and Funding)

Health Resources and Services Administration (HRSA) (\$971,000), Big Island Perinatal Consortium, Hui Malama Na OIwi Healthcare System and the Hawaii Primary Care Association

Activity Outcomes

Increased access and use of perinatal care, improved birth outcomes among Native Hawaiian and Filipino women in Hawaii

Evaluation Methods

Health center client surveys, process evaluation and grantee reports to HRSA

Hansen's Disease Community Program

This program provides preventive services and outpatient care for populations at risk for or affected by Hansen's disease (Leprosy). Because the majority of current Hansen's disease cases are found among Micronesian migrants, HDOH has developed partnerships with community health centers and homeless shelters serving Micronesian migrants to control the transmission of Hansen's disease and prevent complications and disability due to the illness among Micronesians in Hawaii.

Partners (and Funding)

HDOH (\$132,000), federal Hansen's Disease Program funding (\$800,000), New Nations of Micronesia Primary Care Health Centers and local homeless shelters

Activity Outcomes

Reductions in Hansen's disease transmission, and fewer disabilities or complications caused by the disease among Micronesians

Evaluation Methods

Process evaluation: number of at-risk people screened, number of new Hansen's disease diagnoses, and number of people in contact with new cases screened

Hawaii Breast and Cervical Cancer Program

The program is designed to increase early detection and prevention of breast and cervical cancer among low-income, uninsured, and underinsured women. The Hawaii HBCCCP serves women who are asymptomatic, high-risk, medically underserved, and between the ages of 50 to 64. In addition, the Program provides breast screenings to symptomatic women ages 40 to 49. The HBCCCP priority population is Native Hawaiian, Filipino and Pacific Island women.

Partners (and Funding)

Funding is provided by the Centers for Disease Control and Prevention (\$1.1 million). Partners include the Papa Ola Lokahi-Imi Hale, AANCART, Cancer Information Services and the American Cancer Society. Eleven contracted community health care providers including Community Health Centers, the Native Hawaiian Health Care System, Hospitals, and the American Cancer Society

Activity Outcomes

Detection of breast and/or cervical cancer or pre-cancerous conditions among rarely or never-screened women; access to cancer treatment and coverage for other health conditions

Evaluation Methods

Quality assurance, fiscal and program monitoring and evaluation

Activities continued...

Hawaii Cardiovascular Disease Burden Report

HDOH developed a Cardiovascular Disease Burden Report in 2007 to document the burden of heart disease and stroke in the state. In this report, Native Hawaiian and Filipino populations were found to have disproportionate morbidity, mortality and risk factors for heart disease and stroke. Community organizations are encouraged to use the report to develop and expand CVD prevention efforts.

Partners and Funding

HDOH Developmental Disabilities Division, Emergency Medical Services, Office of Health Status Monitoring, American Heart Association, North Hawaii Outcomes Project, Queen's Medical Center Neuroscience Institute, University of Hawaii John A. Burns School of Medicine; there is no dedicated funding for this effort.

Activity Outcomes

Increased partnerships for cardiovascular health

Evaluation Methods

Process evaluation – number of community programs addressing CVD

Hawaii's primary contact for racial/ethnic minority health and health disparities is:

Health Equity Coordinator

Office of Policy, Planning and Program Development
Hawaii State Department of Health
<http://hawaii.gov/health/healthy-lifestyles/ohe/index.html>
Phone: (808) 586-4189