Strategic Prevention Framework State Incentive Grant

Progress Report

Building a Sustainable Substance Abuse Prevention System

STATE OF HAWAI‘I, 2006–2010
In 2006, the Hawai‘i State Department of Health (DOH) received the Strategic Prevention Framework State Incentive Grant (SPF-SIG) from the Substance Abuse and Mental Health Services Administration (SAMHSA) to establish a comprehensive, coordinated, and sustainable substance abuse prevention infrastructure in Hawai‘i. The SPF-SIG Project is funded for five years with approximately two million dollars per year, administered by the Alcohol and Drug Abuse Division (ADAD) of the DOH. This progress report describes the SPF-SIG Project, examines the process-development indicators, and presents the project’s achievements and challenges in the past four years ending September 2010.

The first two years of the project focused on assessment and capacity building. A study of community needs in substance abuse prevention was commissioned. Based on the study’s findings and the recommendation of the State Epidemiological Workgroup (SEW), the State Advisory Council (SAC) adopted the reduction and prevention of underage alcohol consumption for youths 12–17 years old as the issue to be addressed by the SPF-SIG Project.

In the state, the mean age of first alcohol use was 12.2 years old among youths, and more than one third (36.3%) of 12th-graders reported alcohol use in the past 30 days (Table 1). Among the counties, Kaua‘i had the lowest mean age of first alcohol use (11.9) and Hawai‘i had the highest percentage of 12th-graders (49.8%) who were current users of alcohol.

An assessment of the state’s substance abuse prevention system was conducted to identify the strengths and weaknesses of its infrastructure and capacity. A strategic plan was then developed by the SAC and approved by the SAMHSA at the end of the second year.

### TABLE 1. Alcohol Use Among Youths

<table>
<thead>
<tr>
<th>County/State</th>
<th>Mean age of first use of alcohol</th>
<th>Past 30-day use of alcohol</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>6th Gr.</td>
<td>12th Gr.</td>
</tr>
<tr>
<td>Hawai‘i</td>
<td>12.0</td>
<td>6.2%</td>
</tr>
<tr>
<td>Honolulu</td>
<td>12.3</td>
<td>3.1%</td>
</tr>
<tr>
<td>Kaua‘i</td>
<td>11.9</td>
<td>6.6%</td>
</tr>
<tr>
<td>Maui</td>
<td>12.1</td>
<td>4.3%</td>
</tr>
<tr>
<td>State</td>
<td>12.2</td>
<td>3.9%</td>
</tr>
</tbody>
</table>

Source: Hawai‘i Epidemiological Profile for Substance Abuse Prevention (Revised March 2008).

### FIGURE 1. SAMHSA’s Strategic Prevention Framework

The Strategic Prevention Framework is an ongoing cyclical change process that ensures an adaptive prevention infrastructure and interventions can be integrated into the existing organizational, community, and state systems to benefit diverse stakeholders. This process includes five main steps and two crosscutting elements.
In accordance with the Strategic Prevention Framework (SPF, see Figure 1), this project has adopted the following guiding principles for underage drinking prevention in Hawai‘i:

- We identify issues and disparities and develop a plan for prevention based on the best available data.
- Coordination and collaboration are essential to achieving all phases of the SPF.
- The state underage drinking prevention plan identifies overall priorities and goals; counties address their specific needs with realistic strategies and actions.
- The SPF process identifies existing prevention programs and strives not to duplicate those efforts, but to build, enhance, and expand on them for the benefit of all citizens of Hawai‘i.
- The implementation of evidence-based programs (EBP) is crucial, and we make efforts to tailor those programs to fit the unique needs of Hawai‘i’s population.
- We evaluate the SPF process and outcomes on an ongoing basis and provide feedback regularly.
- We integrate cultural competency into all phases of the SPF.
- We make efforts to develop a prevention system at the state and county levels that will be sustainable over time.

In each county, a County Advisory Council (CAC) was established to conduct local assessments of substance abuse prevention needs and the prevention system’s capacity. In July 2009, ADAD awarded an equal amount of funding to each county to carry out activities focusing on infrastructure and capacity building, and to develop an underage drinking prevention plan for that county. Beginning January 2010, the funding for the implementation phase was awarded to the counties through a competitive Request for Proposal process that also considered factors such as the population size and the burden and magnitude of the underage drinking issue in the respective counties. Funding to counties was $8,372,000, or about 85% of the total SPF-SIG funds. Figure 2 shows the amount awarded to each county.

Hawai‘i SPF-SIG is being implemented at three levels: state (blue), community/county (green), and prevention program/provider (yellow) (Figure 3). This infrastructure is designed to include a wide array of members, representing various sectors of the community, who will be supportive of ongoing prevention efforts and will provide long-term, sustainable leadership. A list of SPF-SIG members is presented on page 15.

**FIGURE 2. SPF-SIG County Funding**

<table>
<thead>
<tr>
<th>Hawai‘i County</th>
<th>Honolulu County</th>
<th>Kaua‘i County</th>
<th>Maui County</th>
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<tbody>
<tr>
<td>$313,950</td>
<td>$313,950</td>
<td>$313,950</td>
<td>$313,950</td>
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<tr>
<td>$2,103,140</td>
<td>$2,310,503</td>
<td>$1,237,825</td>
<td>$1,464,732</td>
</tr>
</tbody>
</table>

**FIGURE 3. Hawai‘i SPF-SIG Infrastructure, 2006–2010**
**County SPF-SIG Projects’ Objectives and Prevention Programs**

Each of the four counties developed a logic model to guide planning and administration of its underage drinking prevention program. A summary of the county logic models is presented in Table 2. By the Fall of 2010, all counties went through the Request for Proposal process and selected EBPs to be implemented in local communities. The number of programs ranges from five to ten per county and sums up to a total 17 different programs statewide. Table 3 shows the list of programs and service providers as of September 2010.

**TABLE 2. Problems, Objectives, Activities, and Desired Outcomes of Hawai‘i SPF-SIG for Four Counties**

<table>
<thead>
<tr>
<th>COUNTY</th>
<th>PROBLEMS</th>
<th>OBJECTIVES</th>
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<tbody>
<tr>
<td>Hawai‘i</td>
<td>There are systemic community, family, and peer issues throughout the community that increase the early and frequent use of alcohol by youths 12–17 years old.</td>
<td>1. Increase the number of youths reporting they perceive “great risk” in binge drinking 2. Decrease the number of youths reporting alcohol use in the past 30 days 3. Increase the age of first use of alcohol by youths</td>
</tr>
<tr>
<td>Honolulu</td>
<td>Alcohol is available to minors through social outlets and retail establishments, and normative family, peer, and community attitudes tend to be favorable regarding youths’ alcohol use.</td>
<td>1. Decrease underage access to alcohol from retail establishments, parents, and peers 2. Change community norms to “alcohol use by minors cannot be tolerated” 3. Reduce the consumption of alcohol among youths 12–17 years old</td>
</tr>
<tr>
<td>Kaua‘i</td>
<td>Alcohol use among youths 12–17 years old is a significant problem on Kaua‘i and there is weakness in capacity and infrastructure needed to address the issue of underage drinking prevention.</td>
<td>1. Decrease underage access to alcohol 2. Increase awareness of the problem of underage drinking 3. Reduce underage consumption of alcohol 4. Increase community capacity to address the issue of use of alcohol by minors</td>
</tr>
<tr>
<td>Maui</td>
<td>There is a lack of effectiveness, cultural competence, and sustainability in underage drinking prevention programs, and age of first use of alcohol is earlier than the state’s average.</td>
<td>1. Increase initial age of first use 2. Decrease the number of youths reporting alcohol use in the past 30 days 3. Increase effectiveness of and support for underage drinking prevention programs throughout the county</td>
</tr>
<tr>
<td>County</td>
<td>Problems, Objectives, Activities, and Desired Outcomes of Hawai‘i SPF-SIG for Four Counties</td>
<td></td>
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<tr>
<td>--------</td>
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<tr>
<td></td>
<td>1. Implement evidence-based programs for youths that are culturally appropriate 2. Design and implement public information campaign 3. Strengthen county policies regarding use of alcohol by minors 4. Conduct compliance checks</td>
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<tr>
<td></td>
<td>1. Increased community awareness of the underage drinking problem 2. Less access to alcohol for minors 3. Increased parental involvement in activities of their youths 4. Decreased acceptance of alcohol use among youths as a “rite of passage”</td>
<td></td>
</tr>
<tr>
<td>Honolulu</td>
<td>Alcohol is available to minors through social outlets and retail establishments, and normative family, peer, and community attitudes tend to be favorable regarding youths’ alcohol use.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Decrease underage access to alcohol from retail establishments, parents, and peers 2. Change community norms to “alcohol use by minors cannot be tolerated” 3. Reduce the consumption of alcohol among youths 12–17 years old</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Strengthen county policies regarding access to alcohol by minors 2. Conduct media advocacy trainings and events 3. Implement evidence-based programs for youths 4. Conduct alternative activities for youths with support of schools, parents, businesses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Reduction of the number of alcohol outlets that supply to minors 2. Decreased acceptance of alcohol use among youths as a “rite of passage” 3. More comprehensive policy structure targeting underage drinking 4. Increased efficacy and collaboration within Honolulu County’s alcohol prevention system for youths</td>
<td></td>
</tr>
<tr>
<td>Kaua‘i</td>
<td>Alcohol use among youths 12–17 years old is a significant problem on Kaua‘i and there is weakness in capacity and infrastructure needed to address the issue of underage drinking prevention.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Decrease underage access to alcohol 2. Increase awareness of the problem of underage drinking 3. Reduce underage consumption of alcohol 4. Increase community capacity to address the issue of use of alcohol by minors</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Increase representation on CAC from various community sectors 2. Implement public awareness campaign regarding the problems and risks of underage drinking 3. Host annual drug summit 4. Initiate environmental prevention strategies to increase parental awareness and education 5. Implement evidence-based programs for youths 6. Engage businesses and other community stakeholders to increase public support for underage drinking prevention programs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Increased number of youths participating in prevention programs and activities 2. Increased penalties for adults who procure alcohol for youths 3. A pro-social, non-alcohol use environment fostered in schools and throughout the community 4. Increased community support for underage drinking prevention efforts</td>
<td></td>
</tr>
<tr>
<td>Maui</td>
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<td></td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>1. Implement evidence-based programs for youths 2. Conduct media campaign 3. Provide alternate activities for youths during off-school hours 4. Increase inter-agency involvement to provide coordinated approach to address underage drinking prevention 5. Engage business support for underage drinking prevention programs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Increased the age of first use of alcohol 2. Increased community support for underage drinking prevention efforts 3. Increased community awareness of the issue of underage drinking 4. Coordination of all available county resources to provide a more holistic way of addressing underage drinking</td>
<td></td>
</tr>
</tbody>
</table>
### TABLE 3. Evidence-Based Programs and Service Providers by County, as of September 2010

<table>
<thead>
<tr>
<th>COUNTY</th>
<th>EVIDENCE-BASED PROGRAMS</th>
<th>SERVICE PROVIDERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hawai’i</td>
<td>Alcohol Education</td>
<td>• Boys &amp; Girls Club of the Big Island</td>
</tr>
<tr>
<td></td>
<td>LifeSkills Training</td>
<td>• Big Island Substance Abuse Council</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Hawai’i Academy of Arts and Science</td>
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<tr>
<td></td>
<td></td>
<td>• People’s Advocacy for Trails Hawaii</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Salvation Army Family Intervention Services</td>
</tr>
<tr>
<td></td>
<td>Positive Action</td>
<td>• Hawaii County Economic Opportunity Council</td>
</tr>
<tr>
<td></td>
<td>Project Northland</td>
<td>• Hawaii Future Farmers of America Foundation</td>
</tr>
<tr>
<td></td>
<td>Project Towards No Drug Abuse</td>
<td>• The Institute for Family Enrichment</td>
</tr>
<tr>
<td></td>
<td>Project Venture</td>
<td>• ‘Aha Pūnana Leo, Inc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Hamakua Youth Foundation, Inc.</td>
</tr>
<tr>
<td></td>
<td>Too Good for Drugs and Violence</td>
<td>• University of Hawai’i at Hilo</td>
</tr>
<tr>
<td></td>
<td>Communities Mobilizing for Change on Alcohol</td>
<td>• Office of the Mayor, Hawai’i</td>
</tr>
<tr>
<td>Honolulu</td>
<td>ATLAS &amp; ATHENA</td>
<td>• Hawai’i Speed and Quickness</td>
</tr>
<tr>
<td></td>
<td>Big Brothers Big Sisters</td>
<td>• Big Brothers Big Sisters of Honolulu</td>
</tr>
<tr>
<td></td>
<td>Challenging College Alcohol Abuse</td>
<td>• Coalition for a Drug-Free Hawaii</td>
</tr>
<tr>
<td></td>
<td>Keeping It Real</td>
<td>• Honolulu Police Department</td>
</tr>
<tr>
<td></td>
<td>LifeSkills Training</td>
<td>• City and County of Honolulu, Department of Community Services, Youth Services Center</td>
</tr>
<tr>
<td></td>
<td>Positive Action</td>
<td>• Alu Like, Inc.</td>
</tr>
<tr>
<td></td>
<td>Project ALERT</td>
<td>• Boys &amp; Girls Club of Hawaii</td>
</tr>
<tr>
<td></td>
<td>STARS for Families</td>
<td>• Hina Mauka</td>
</tr>
<tr>
<td></td>
<td>Teen Intervene</td>
<td>• Hina Mauka</td>
</tr>
<tr>
<td></td>
<td>Communities Mobilizing for Change on Alcohol</td>
<td>• City and County of Honolulu, Department of Community Services</td>
</tr>
</tbody>
</table>

6 SPF-SIG Progress Report
The following reports are available on the ADAD Website at: http://hawaii.gov/health/substance-abuse/prevention-treatment/survey/adsurv.htm

1. Hawai‘i Epidemiological Profiles for Substance Abuse Prevention
   - State Profile, Revised March 2008
   - County Profiles, Current Revision May 2010

2. Hawai‘i’s Strategic Prevention Framework State Incentive Grant Underage Drinking Prevention Plan, October 2008

3. Hawai‘i SPF-SIG Project Infrastructure and Capacity Assessment Results—Final Analysis, May 2009
In the past four years, the activities of the SPF-SIG Project focused on assessment, capacity building, and planning at the state and county levels. Most common activities included meetings, training, and technical assistance (TA).

Meetings 2007–2010

At the state level, meetings were held for (1) State Advisory Council (SAC), (2) State Epidemiological Workgroup (SEW)/Epidemiology Team (EPI), (3) the Coordinating Team (made up of the state SPF-SIG Project Director, Epidemiology Team and Evaluation Team), and (4) ad hoc workgroups (such as EBP Review Committee and Assessment Tools Development Committee). The purpose of these meetings was to provide oversight, guidance, and coordination to the state and county efforts in underage drinking prevention.

Meetings at the county level were convened by County Advisory Council (CAC) members, representing various community sectors, to identify priority issues relating to underage drinking prevention, develop a strategic prevention plan, and select service providers for implementing prevention interventions in the community.

FIGURE 4. Number of Meetings Held at the State Level

A total of 43 meetings were conducted at the state level. The numbers of Coordinating Team meetings and ad hoc group meetings increased substantially between 2009 and 2010 as the SPF process worked its way into communities.

FIGURE 5. Number of Meetings Held at the County Level

There were 38 meetings held at the county level. A pronounced growth in the number of meetings was observed between 2008 and 2009 as counties embarked on their SPF process.
Training Sessions 2009–2010

Training was conducted to help SAC and CAC members, service providers, and community members understand the SPF development process and evidence-based prevention. Training also equipped the participants with knowledge and skills to develop a sustained statewide prevention system. Diverse subjects such as the seven components of SPF were covered at the training sessions. The state-level training was organized and conducted by the Coordinating Team. County training involved county-specific efforts with close collaboration among County SPF-SIG Project staff, CACs, and the Coordinating Team. The first training took place in May 2009.

FIGURE 6. Training Topics

A total of 45 training sessions were conducted statewide. The majority of state-level trainings focused on evaluation. Diverse training topics were covered among the four counties, with the highest number on the topic of capacity, followed by implementation, planning, and sustainability. An emphasis on cultural competency permeated all training sessions.
On average, 8 participants attended the state-level trainings. The average numbers of participants were 21, 23, 19, and 9 for Hawai‘i, Honolulu, Kaua‘i, and Maui Counties, respectively.

The training provided by the state and counties elicited positive evaluations from the participants. The average percentage of participants who rated the overall training as either good or excellent ranged from 83% (state level) to 100% (Maui County). The majority of participants (89%–95%) agreed either somewhat or strongly that they gained knowledge from the training.
Technical Assistance 2009–2010

Technical assistance (TA) is the provision of information related to a specific topic to one or a few individuals. The state’s Coordinating Team members provided TA to county staff, and county staff provided TA to local service providers. TA prepared the communities to carry out the local prevention efforts. The first instance of TA was provided in 2009. Note that county-level TA is not presented due to a lack of consistency in data collection.

A total of 136 instances of TA were reported by the Coordinating Team, with each county receiving a similar share of TA.

Capacity building, an important step of SPF, was the most common TA topic (48%) provided by the Coordinating Team, followed by planning (28%) and assessment (11%). Of all instances of TA, only 13% were concerned with implementation (8%) and evaluation (5%).

Among the 65 instances of TA concerning capacity building, the most common topic was funding application (29%), followed by contract issues (23%) and EBP (22%). Other less frequent capacity-building TA instances concerned evaluation capacity (15%), maintaining and strengthening County Advisory Councils (8%), and SPF and state requirements (3%).
**FIGURE 13. SPF-SIG Project Milestones, October 2006 to September 2010**

- **2006**
  - October 2006: Hawai‘i State awarded SPF-SIG funding for five years from SAMHSA.

- **2007**
  - April 2007: First State Advisory Council meeting held.
  - May 2007: State epidemiological profile developed.

- **2008**
  - April 2008: State infrastructure and capacity assessment completed.
  - October 2008: State underage drinking prevention plan approved by SAMHSA.
  - November 2008: County Advisory Councils organized.

- **2009**
  - April 2009: Hawai‘i SPF-SIG evaluation plan developed.
  - July 2009: (1) County epidemiological profiles disseminated. (2) Four counties awarded phase 1 funding for prevention planning.
  - October 2009: State-level planning phase completed.
  - November 2009: (1) County-level infrastructure and capacity assessment completed. (2) County underage drinking prevention plan completed.

- **2010**
  - January 2010: Four counties awarded phase 2 funding for program implementation.
  - March 2010: County evaluation handbook developed.
  - July 2010: Prevention intervention applications solicited by counties.
  - September 2010: Four counties selected evidence-based programs for implementation.
SPF-SIG Project

Accomplishments

The Hawai‘i SPF-SIG Project has provided much-needed funding for the state and counties to establish a sustainable substance abuse prevention framework. The development of this framework is a work in progress and will continue over the next year. During this reporting period there have been significant achievements as a result of the assessment, capacity-building, and planning process.

- **State and County Epidemiological Profiles were completed.** Prevention of alcohol use by youths 12–17 years old was recommended as the priority issue to address. The profiles identified patterns of youths’ alcohol use in each county and statewide, as well as the associated risk and protective factors.

- **State and County Capacity and Infrastructure Reports were completed** to provide baseline information regarding the status of substance abuse prevention system at both levels. Strengths and weaknesses in organization, effectiveness, workforce skills, funding, cultural competency, and sustainability were identified.

- **The SPF-SIG Project collaborated with the Hawai‘i School Health Survey Committee** regarding adding alcohol use questions to the Youth Risk Behavior Survey and the Youth Tobacco Survey. Trend data at the county level will become available in the near future to monitor progress in reducing underage drinking.

- **State and County Evaluation Plans were completed.** Training was provided to state and county project staff and prevention service providers with regard to the collection and reporting of evaluation data. Ongoing evaluation and feedback mechanisms have been put in place.

- **All four County Advisory Councils have utilized a number of strategies to build infrastructure within their counties.** These have included surveys to collect community input, training on various topics related to substance abuse prevention and community development, and informational meetings regarding underage drinking issues in each county.

- **The state and counties successfully completed and received approval for their strategic plans** to address the prevention of underage use of alcohol. They utilized data from the epidemiological profiles to develop goals and objectives related to the most pressing issues at both the state and county levels.

- **Based on the submission of the county strategic plans, ADAD awarded funding to all four counties** to provide resources for the implementation of prevention programs at the community level.

- **The County SPF-SIG Projects and the CACs are poised to move forward with building a stronger prevention system** that has a buy-in for implementing data-driven and evidence-based programs to meet the specific needs of the community relating to underage drinking prevention.
Community development is an ongoing process that can be slow. The SPF assessment and planning phases took a long time, leaving limited time in the funding cycle for the implementation of prevention programs. The turnover of advisory council membership and project staff at both the state and county levels also posed challenges to the momentum of the project. As Hawai‘i SPF-SIG enters its fifth year, with a one-year extension anticipated, increased efforts in the following areas will help SPF process continue and move forward.

**Streamline Process**
Identify ways to streamline the process of conducting the assessment, selecting evidence-based programs, applying for funding, and completing the procurement procedures.

**Coordinate Resources**
Coordinate with other governmental and community organizations involved in underage drinking prevention to effectively utilize limited resources.

**Expand Evidence-Based Prevention**
Expand the implementation of data-driven and evidence-based programs, policies, and practices to bring about better prevention outcomes.

**Strengthen Communication Practices**
Strengthen communication practices at all levels and hold regular update sessions for advisory council members to better involve them as a resource to increase support for the Strategic Prevention Framework.

**Increase Community Involvement**
Increase community involvement by expanding advisory council membership to include representatives from various community sectors.
SPF-SIG Members List

**Alcohol and Drug Abuse Division**
**Department of Health**
**State of Hawai‘i**
Wendy Nihoa, SPF-SIG Project Director
Christine Payne, SPF-SIG Project Specialist
(808) 692-7531

**Epidemiology Team**
**Office of Public Health Studies**
**John A. Burns School of Medicine**
**University of Hawai‘i**
Claudio Nigg, Principal Investigator
Rebecca Williams, Research Assistant
LaShanda Eller, Research Assistant

**Evaluation Team**
**Center on the Family**
**University of Hawai‘i**
Sarah Yuan, Principal Investigator
Karen Heusel, Evaluation Specialist
Mei-Chih Lai, Data Analyst
Lai Lamb, Project Facilitator

**State Advisory Council**
C. Kimo Alameda
Karl Espaldon (Chair)
Farrah-Marie Gomes
Cheryl Kameoka
Theresa Koki
Leina‘ala Nakamura
Tamah-Lani Noh
Pauline Pavao
Janice Shishido

**State Epidemiological Workgroup**
Kathleen Baker
Gerri Caldwell
Cortney Chambers
Kareem Fuertes
Deborah Goebert
Meredith Hersh
Robert Hirokawa (Chair)
Mayda Jones
Tonya Lowery St. John
Alvin Onaka
Florentina Salvail
Allen Shin
Ken Tano
Rebecca Williams

**County Advisory Councils, 2010**

**Hawai‘i**
Frecia Basilio  
Jim Brady  
Jason Cortez  
Lori Eldridge
Lisa Faulkner-Inouye  
Leonard Feliciano  
Joe Fichter  
Vicky Gapasen
Farrah-Marie Gomes  
Harry Kubojiri  
Kalani Kahalioumi  
Nancy Kelly
Jesse Kerr  
Heidi Koop  
Wally Lau  
Rita Miller
Lance Niimi  
Janice Pakele  
Pauline Pavao  
Jan Sears

**Honolulu**
Ken "Wiwik" Bunjamin-Mau  
Jim Gagne  
Anna Hirai
Dewey Kim  
Daniela Kittinger  
Alison Lum  
Valerie Mariano
Janna Mizuo  
Debbie Morikawa  
David Nakada  
Leina‘ala Nakamura
Andrew "Kona" Purdy  
Alan H. Shinn  
Michael Thomas
Mei Jeanne Wagner

**Kaua‘i**
Al Amimoto  
Bill Arakaki  
Bridget Arume
Fran Becker  
Kau‘i Castillo  
Francesco Garipoli
Lionel Gonsalves  
Eric Honma  
Theresa Koki
Francis Mission  
Dan Miyamoto  
Larry Moises
Al Nebre  
Mark Ozaki  
Ann Wooton

**Maui**
Joelle Aki  
Crystal Alboro  
Alika Atay  
Emily Bartow  
Jeny Bissell  
Isabella Bissen
Donna Borge  
Maile Carpio  
Frank Cummings  
Rosie Davis
Dusten Dudoit  
Leina‘ala Estrella  
Cheryl Ferguson  
Butch Gima  
Martha  
Guzman-Flores
Colin Hanlon  
Ray Henderson  
Venus Rosette Hill  
Cathy Inouye
Dianne Irons  
Tanya Jones  
Darlyne Kaahanui  
Mollie Klingman  
Leslie LauHee  
Kaimana Lee  
Heather Long  
Kaiokukanli Lum
Kawika David Mattos  
Gay McDonald
Ashley McGinley  
Richard Melton  
Iokepa Naeole  
Donalyn Naihe  
Misty Nakao  
Lia Oyama  
Kelly Pearson  
Maelynn Potter  
Lisa Rodrigues
Marylee T. Sagaunit  
Mary Santa-Maria  
David Silva  
Wendy Stubbins  
Diane Tavares  
Lori Tshukko  
Becky Vaughan  
Carole Vida  
Susun White  
Marlene Young

**County of Hawai‘i**
Office of the Mayor
Kalani Kahalioumi
SPF-SIG Program Coordinator
(808) 961-8860

**City and County of Honolulu**
Department of Community Services
Daniela Kittinger
SPF-SIG Project Manager
(808) 241-4924

**County of Kaua‘i**
Office of the Mayor
Rebecca Smith
SPF-SIG Project Manager
(808) 270-7150

**County of Maui**
Department of Housing and Human Concerns
Wendy Stebbins
SPF-SIG Project Manager
(808) 270-7150

**For more information, please contact:**

Alcohol and Drug Abuse Division (ADAD)  
Hawai‘i State Department of Health  
601 Kamokila Boulevard, Room 360  
Kapolei, HI 96707  
(808) 692-7517  

Center on the Family  
University of Hawai‘i  
2515 Campus Road, Miller Hall 103  
Honolulu, HI 96822  
(808) 956-4132  
http://uhfamily.hawaii.edu