

HAWAII STATE HEALTH PLANNING AND DEVELOPMENT AGENCY
1177 Alakea Street, Suite 402 • Honolulu, HI 96813 • Phone: (808) 587-0788 •
Kauai County Subarea Health Planning Council

DRAFT

Meeting Minutes

July 13, 2026

11 AM Hawaii Time

Virtual Zoom Meeting and Physical Location at the
Keoni Ana Building, 1177 Alakea Street, Suite 402

MEMBERS: Jen Chahanovich, Tricia Yamashita

MEMBERS ABSENT: None

GUESTS: Lauren Guest (DOH, Acting District Health Officer), Kurt Akamine (Chief Operating Officer, HHSC)
Orianna Skomoroch; Dr. Amithea Love; Walt Barnes; Bronson Ho; Lauren Guest (DOH); Kurt Akamine
(HHSC);

SHPDA: John Lewin, Terry Visperas; Wanda Anae-Onishi

ATTENDANCE RECORD OF APPOINTED MEMBERS

Date	8/18/22	2/14/23	3/14/23	6/13/23	8/8/23	2/13/24	4/9/24	12/16/24	5/20/26	7/13/26
Jen Chahanovich	X	O	X	X	X	X	X	O	X	X
Tricia Yamashita									X	X

Legend: X=Present; O=Absent; /=No Meeting *-Chair, **=Vice Chair

Meeting recording: https://www.zoomgov.com/rec/share/1JlvjzKxwmPnUYLctUAhE0zz2B5KOOV_6GcoaUxCsfEv3c1_-BW6g5QSkGladxH.4mWLB3_wroQmxMzB
Passcode: Q!2hoS52

TOPIC	DISCUSSION	ACTION
Call to Order	The meeting was called to order at 11:07 a.m. T. Visperas facilitated meeting	
Row Call/Introductions	✓ Jen Chahanovich – President & CEO, Wilcox Health ✓ Tricia Yamashita – Executive Director, Kaua’i Hospice ✓ Lauren Guest – Acting District Health Officer, DOH ✓ Kurt Akamine – Chief Operating Officer HHSC Kauai Region, (KVMH, Mahelona). ✓ Orianna Skomoroch - HHSC regional CEO; broad career in healthcare, land ownership, and Kauai Humane Society. Previous SAC and SHCC member. ✓ Dr. Amithea Love – Clinical psychologist at Kauai Medical Clinic, Co-Chairs the Kauai mental health Consortium. ✓ Walt Barnes – Resident with long term healthcare involvement; recently retired from cybersecurity work at at&t/bell labes/ Former HHSC Kauai Regional Board member ✓ Bronson Ho – Administrator at Garden Isle Rehab & Nursing; Background in skilled nursing and long-term care.	
Meeting Minutes	Motion to accept the minutes from the May 20, 2026, meeting. Vote: Unanimous. Motion carried. Call for public testimony – none.	
SHPDA Administrator Report – Dr. Jack Lewin, MD	Dr. Lewin provided an extensive and detailed briefing on statewide health policy activities, major legislative outcomes, statewide data modernization efforts, and federal CMS initiatives shaping Hawai‘i’s healthcare transformation. His remarks emphasized the significant role of the Kauai Subarea Health Planning Council in both the AHEAD and Rural Health Transformation programs.	

1. Legislative Session Overview

- SHPDA testified on approximately 135 bills, with 30 ultimately passed.
- Some testimonies were submitted in support; others were aimed at stopping proposed measures that were not beneficial.
- This year’s session was described as “amazingly successful” in advancing key health policies.

Psychologist Prescribing Bill – SB 847

- Highly controversial and strongly opposed by psychiatrists and many physicians statewide.
- The bill passed and is expected to become law without the Governor’s signature.
- Establishes a team-based pilot program for psychologist prescribing, requiring:
 - psychiatrist oversight
 - collaborative practice with psychologists
 - partnership with physicians/APRNs
 - involvement of social workers
- Kauai has a psychiatrist supportive of the initiative, which will help implementation.
- Dr. Lewin emphasized that SHPDA will rely on Kauai’s council to ensure safe, effective rollout.

2. Clinical Trials Expansion – Hawai‘i Cancer Center

- Funding secured for Phase I and Phase II cancer clinical trials—first time Hawai‘i will host early-phase trials locally.
- Reduces patient need to travel to mainland facilities for experimental

treatments.

- Goal to expand clinical trial access to neighbor islands in future phases.
- Particularly important for cancers requiring drugs available only through clinical trials.

3. Insurance & Patient Protection Improvements

- Multi-year efforts led to major coverage expansions:
- Continuous Glucose Monitor (CGM) coverage approved for insulin-dependent diabetics.
- Improved biomarker testing coverage.
- Gains in immigrant health access, reproductive health protections, and specialty coverage.
- SHPDA statute modernized for the first time in 50 years, reinforcing SHPDA's authority to:
 - serve as statewide health policy leader
 - convene agencies across the public and private sector
 - use data to improve statewide coordination
- Dr. Lewin noted Hawai'i's health system remains siloed, with limited collaboration between Med-QUEST, DOH, HHSC, DCCA, DOE, and Corrections—each managing separate health programs without shared strategy.

4. Statewide Health Data Modernization

- Dr. Lewin explained that Hawai'i has powerful data systems that are not yet fully utilized, and SHPDA intends to change that.

All-Payer Claims Database (APCD)

- Contains the medical claims of over 1 million Hawai'i residents.
- Includes diagnoses, prescriptions, labs, hospital/ED visits, outpatient care.

- Fully de-identified and privacy protected.

Hawaii Health Information Exchange (HIE)

Collects:

- 100% of hospital admissions statewide
- 100% of ED visits
- 100% of statewide lab results

Significant outpatient records, including:

- all employed physicians at Queens and Hawai'i Pacific Health
- 15–20% of private practice data
- Efforts underway to add FQHC and prescription data.

Laulima (Hospital Association)

- Statewide inpatient and ED discharge data.

Statewide Prior Authorization Denial Reporting

A new SHPDA mandate:

- Collects **all prior authorization denials** from every insurer.
- Tracks denial reasons, appeals filed, and outcome of appeals.
- Hawai'i may be the only state collecting this across all lines of business.

These data sources form the backbone for upcoming CMS programs and SHPDA's statewide analytics strategy.

5. CMS AHEAD Grant

AHEAD is an 8-year federal modernization program launching January 2028.

Key Points

- Hawai'i receives \$12 million for planning and analytics.
- Potential to receive \$200+ million per year if providers participate.
- Major statewide shift from fee-for-service to value-based reimbursement, including:
 - global hospital budgets
 - incentives for quality
 - population health improvement metrics
 - reductions in avoidable ED/hospital use
 - significantly expanded primary care investment

Both major political parties support the national transition to value-based care. CMS is expected to mandate this system nationally within the next five years.

Role of Kauai SAC

- CMS will look to Kauai's advisory council as the official consumer voice for Kauai County.
- The council will be asked to evaluate program outcomes and recommend improvements.

6. CMS Rural Health Transformation Program (RHDP)

Hawai'i received \$190 million, one of the highest per-capita rural awards in the nation.

Funding Buckets Outlined

1. Workforce Development

- Incentives up to \$200,000 for rural health practitioners.
- Loan repayment programs.
- Community college partnerships.

2. Statewide Telemedicine Backbone

- Connects all islands for coordinated telehealth.

- Prioritizes Hawai'i-based specialists.
 - 3. **Respite Facilities (Department of Human Services)**
 - For homeless or medically fragile individuals who cannot be discharged safely.
 - 4. **EMS Expansion – RICA**
 - Major investment in emergency services statewide.
 - Potential pilot programs in community paramedicine.
 - Addresses the fact that 80% of EMS calls are non-emergencies.
 - 5. **Rural Health Information Networks – SHPDA (\$45M)**
 - EHR systems for providers without one.
 - Upgrades for existing systems.
 - Interfaces to connect EHRs to HIE statewide.
 - Broadband infrastructure.
 - Cybersecurity protection.
 - 6. **Rural Value-Based Payment Readiness – SHPDA (\$25M)**
 - Staffing and resources for hospitals, clinics, and private practices.
 - Care coordination workforce investment.
 - Preparation for statewide value-based reimbursement.
- Additional SHPDA & Med-QUEST Projects**
- Social Needs Coordination Hub: statewide system for tracking food, housing, transportation supports.
 - **High-Need, High-Cost Patient Tracking:** focuses on the 5% of residents who represent 50% statewide healthcare spending.
 - **AI Data Integration Platform:** combines claims, hospital, clinical, and social data to identify statewide care gaps.
- Funding Deadline**
- SHPDA must encumber its \$70 million allocation by September; ~\$3 million has already been encumbered.

- RFP development is nearly complete.
- SHPDA is moving faster than other statewide agencies despite its small staff.
- Dr. Lewin requested more direct input from Kauai, noting Kauai has been “the least vocal” of all counties in stating concrete needs.

Legislative Session Highlights

- SHPDA testified on ~135 bills; 30 passed.
- Major attention on controversial psychologist prescribing bill (SB 847).
- Emphasis on team-based, psychiatrist-led collaborative approach for pilot.

New Clinical Trials Funding

- Funding secured for Phase 1–2 trials at the Hawaii Cancer Center.
- Goal to expand access to neighbor islands.

Insurance & Patient Protection Measures

- CGM coverage for insulin-dependent diabetics approved.
- Biomarker coverage and reproductive health protections strengthened.
- SHPDA statute modernized during its 50th anniversary year.

Data Infrastructure

- All-Payer Claims Database now holds claims for ~1M Hawaii residents.
- Hawaii Health Information Exchange collects major hospital/ED/lab data; efforts underway to expand prescriptions and outpatient data.
- SHPDA also mandated to collect statewide prior authorization denial data.

CMS AHEAD Grant Overview

- 8-year federal initiative beginning Jan 2028.
- Hawaii receiving ~\$12M for preparation; possible \$200M/year increase if providers participate.
- Shift toward value-based reimbursement across Medicare, Medicaid, and commercial plans.

- Major goals: global hospital budgets, increased primary care investment, data-driven population health improvement.

CMS Rural Health Transformation Program

- Hawaii was awarded \$190M; \$70M allocated to SHPDA.
- Funding buckets include:
 - Workforce development
 - Telehealth backbone
 - Respite facilities
 - EMS expansion (RICA)
 - EHR connectivity, cybersecurity
 - Care coordination improvements for high-cost patients
 - Statewide social needs coordination
 - AI-integrated statewide data platform
- SHPDA must encumber all funds by September; ~3M already completed.
- Encouraged Kauai members to articulate needs more clearly to ensure the island is well supported.

Questions & Discussion	Walt Barnes • Asked how value-based models will work when providers have mixed payer revenue. • Lewin affirmed that commercial payers will be required to join; AHEAD is designed as an all-payer model. Follow-up on funding • Walt asked how much of SHPDA's \$70M remains unencumbered. • Lewin noted most funds are close to encumbrance; final RFP refinements underway. Jason Espero (SHPDA) • Reported on Kauai site visits completed in May. • Noted HHSC interest in transitioning from Cerner to Epic. • SHPDA evaluating how to support Kauai hospitals and health centers under coordinated EHR strategy.
Community Updates	Lauren Guest, DOH • Announced completion of Kauai's 9th CASPER Survey. <i>Please see attached.</i> • Key findings include gaps in access, affordability of care, and trends in vaccination attitudes. • Report available online; will email link due to chat issues. Tricia Yamashita, Kauai Hospice • Shared major initiative: creation of Kauai's first inpatient hospice facility ("hospice home"). • Challenges include land acquisition and construction delays. • Exploring conversion of existing Lihue property. • Upcoming visit to Maui's inpatient facility for planning insight.

Next Steps & Action Items		
Next Steps	• SHPDA (Lewin / Espero) to continue refining RFPs for rural health transformation funds. • Council Members encouraged to strengthen Kauai-specific needs communication for future funding allocations. • Prepare for major AHEAD and rural health transformation program participation. • Encourage community agencies to bring updates to future meetings. • Continue onboarding new prospective members for confirmation in 2027.	
Future Meetings	• November 18, 2026 – 10:00 a.m. • In-person KCSAC meeting planned for 2027 upon full member confirmation.	
Next Meeting	September 16, 2026 – 10:00 a.m.	
Adjourn	The meeting was adjourned at 12:51 p.m.	



KAUA'I 2026 CASPER REPORT

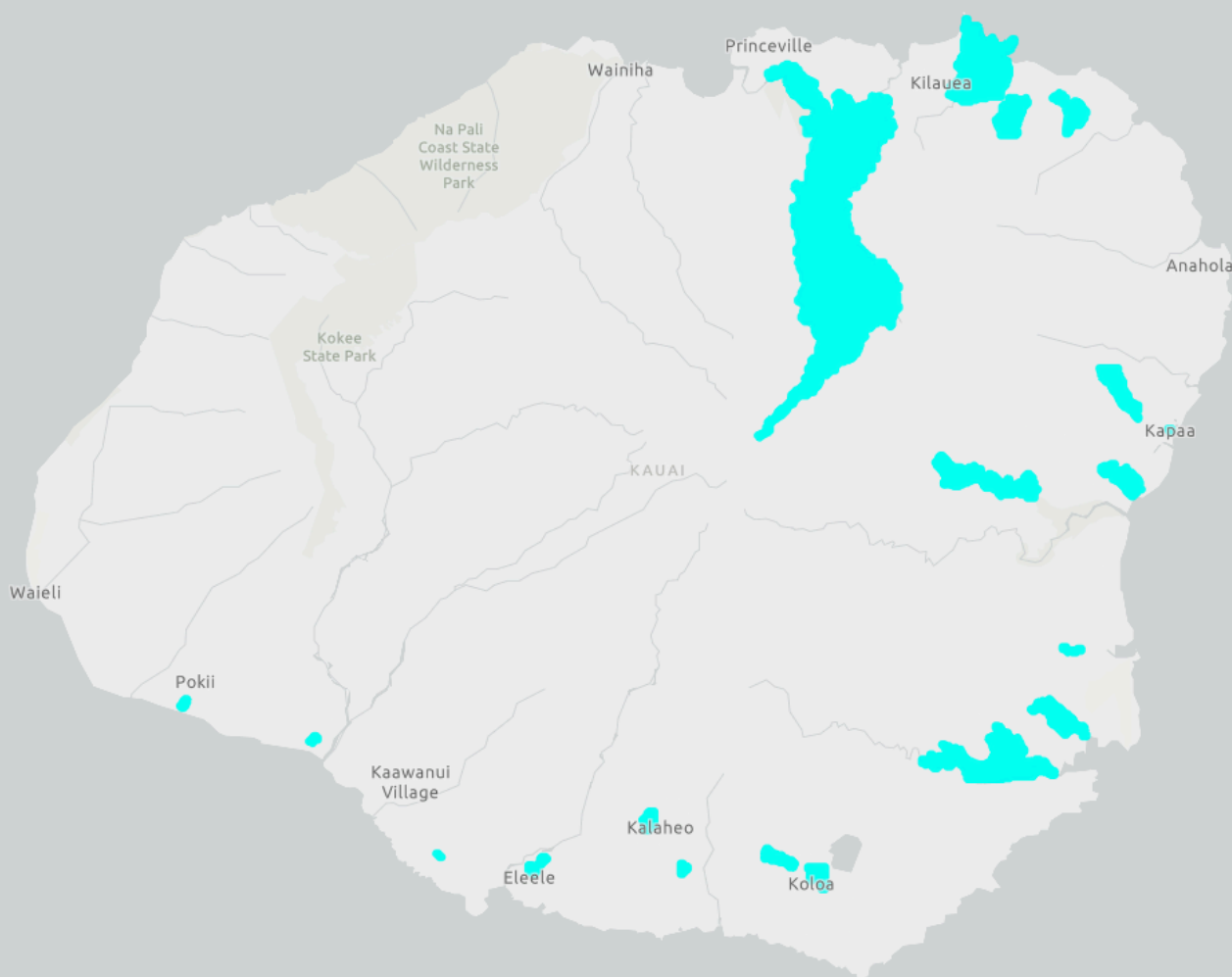
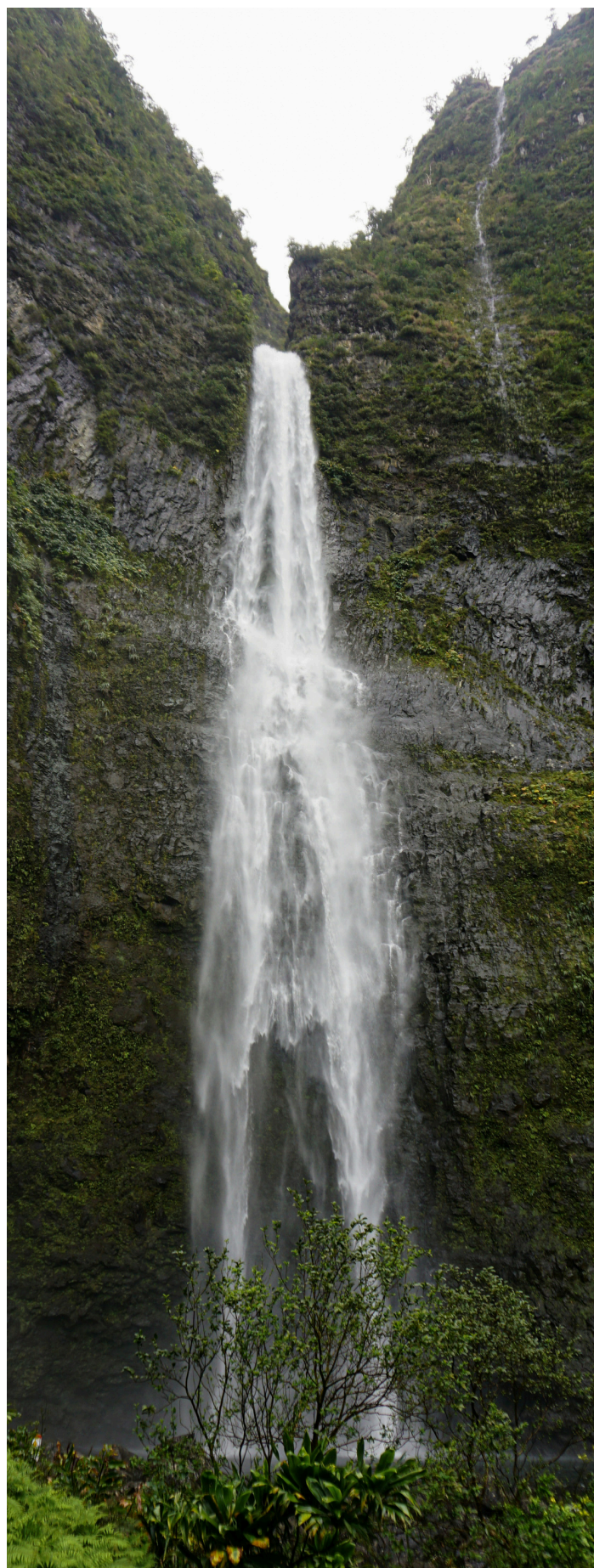


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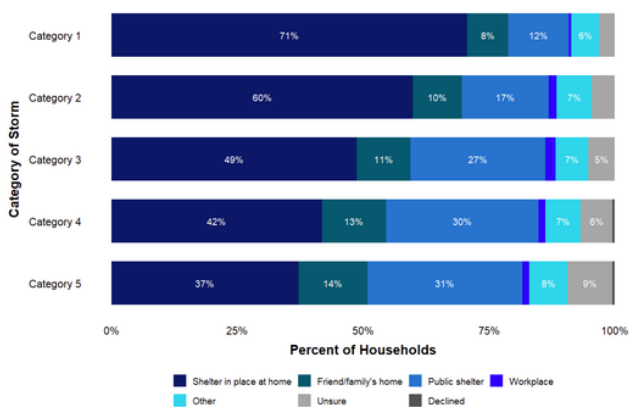
2026 KAUA'I CASPER EXECUTIVE SUMMARY



A community assessment for public health emergency response (CASPER) survey was conducted on Kaua'i in June 2026 by the Kaua'i District Health Office (KDHO). KDHO conducted CASPERs annually from 2017 - 2026 to monitor trends in emergency preparedness. In 2026, KDHO survey teams attempted to interview 210 randomly selected households about emergency evacuation plans, infectious diseases, and general health and well-being. One hundred and seventy-five of the targeted 210 interviews were completed (83% completion rate).

EMERGENCY EVACUATION PLANS

Hurricane Response by Category of Storm



As observed in previous years, Kaua'i households reported that as the category of storm increases, they are more likely to go to a public shelter than shelter in place at home.

The majority of Kaua'i households have an emergency communication plan (73%), designated meeting place (59%), and copies of important documents stored in a safe location (71%).

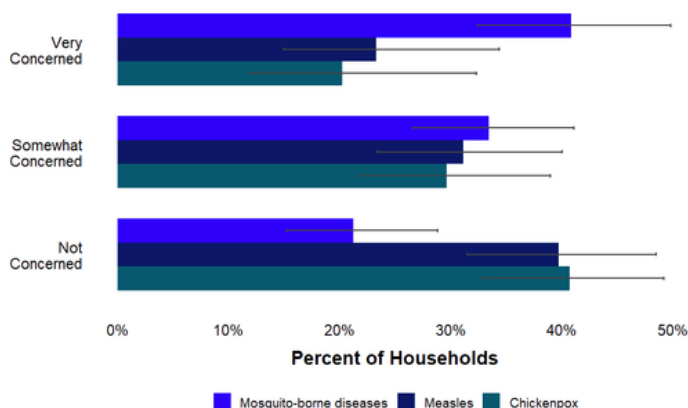
The majority of Kaua'i households (83%) are familiar with the tsunami evacuation zones islandwide.

Kaua'i households reported higher levels of concern regarding mosquito-borne diseases becoming established in Hawai'i than they did about the impacts of measles and chickenpox outbreaks. The majority of households (60%) are following DOH's recommendation to dump standing water at least weekly to reduce mosquito breeding activity.

In 2026, 62% of Kaua'i households think it is very important, 25% somewhat important, and 8% not important to stay up-to-date on recommended vaccines. No statistically significant changes were observed between 2025 and 2026.

INFECTIOUS DISEASES

Concern for Infectious Diseases



GENERAL HEALTH & WELL-BEING

Missed Healthcare Services due to Unaffordability



Households Receiving Food Assistance



While the majority of Kaua'i households indicated that all members (88%) had a regular source of healthcare and had seen their provider (82%) in the past year, 14% delayed or skipped care in the past year due to cost.

About 20% of Kaua'i households indicated that the food they bought didn't last and they didn't have money to buy more at some point in the last year. Seventeen percent received food assistance through a government program or charitable organization.

INTRODUCTION

Background

A community assessment for public health emergency response (CASPER) survey was conducted on Kaua'i in June 2026 by the Hawai'i State Department of Health's (HDOH) Kaua'i District Health Office. CASPER is a validated two-stage cluster sampling methodology developed by the Centers for Disease Control and Prevention (CDC) to rapidly obtain information about the health and resource needs of a community.¹ Information obtained is generalizable to the entire sampling frame, providing population-based estimates. This methodology is designed to be inexpensive, quick, and scalable, making it ideal for use in disasters.

CASPERs can also be used to establish baseline preparedness levels and build capacity to conduct CASPERs post-disaster. The Kaua'i District Health Office (KDHO) conducted CASPERs annually from 2017 - 2026 (excluding 2021) to monitor trends in the emergency preparedness of island residents.² Several of these CASPERs also included disaster components such as evaluating impacts from a major flood event and the COVID-19 pandemic. Through these efforts, over 150 HDOH staff and community volunteers were trained in this rapid health needs assessment methodology. In 2026, the Kaua'i CASPER was supported by O'ahu and Hawai'i Island HDOH staff members who flew over to assist with implementation, surveying, and analysis with the goal of building this capability statewide.

Objectives

Kaua'i preparedness CASPERs alternate their focus between emergency supplies and evacuation plans, with evacuation plans asked in even years and emergency supplies asked in odd years.

Kaua'i's 2026 CASPER included an assessment of:

1. Emergency evacuation plans
2. Infectious disease awareness and concerns
3. General health and well-being



METHODS

CASPER Sampling Methodology

CASPER is a two-stage cluster sampling methodology.¹ The first stage, cluster selection, begins with the determination of a sampling frame, or the area from which the sample is selected and to which the data is generalized. Once the sampling frame is determined, 30 census blocks (termed "clusters") are randomly selected. The probability of a census block being selected is proportional to the number of housing units located within it.

The second stage of sampling, household selection, is typically completed by survey teams in the field. This stage involves systematic selection of seven households per cluster. Homes are selected by dividing the total number of housing units (occupied or total, depending on the sampling frame) in the cluster by seven (the target number of surveys per cluster) to determine each cluster's sequence number ("n"). Survey teams then attempt to interview every "nth" house, with an ultimate target of 210 surveys (30 clusters x seven surveys per cluster).

2026 Kaua'i CASPER Methodology

Cluster and Household Selection

The sampling frame for this assessment consisted of occupied housing units on the island of Kaua'i. The 2020 census block data was used to select 30 clusters via random number generation. Kaua'i has a total of 1,344 census blocks, 30,157 housing units, 24,712 occupied housing units, and a population of approximately 73,000 (Figure 1). As a major tourist destination, many housing units are not occupied by residents and are classified as "vacant" in census data. To better capture data representative of Kaua'i residents, cluster selection used occupied housing units rather than total housing units to reduce the likelihood of selecting clusters with primarily short-term vacation rentals, which are ineligible for survey participation.



Figure 1. Satellite imagery of all census blocks on Kaua'i.

Census data, including census block geographic information system (GIS) shape files, total population, total housing units, and occupied housing units (all per census block) were downloaded via the United States (U.S.) Census webpage.² Using a random number generator between one and 24,712 (the total occupied households on the island), 30 households were selected, and their corresponding census blocks were chosen as survey clusters. Selected cluster shapefiles were layered over satellite images using ArcGIS (Figure 2).

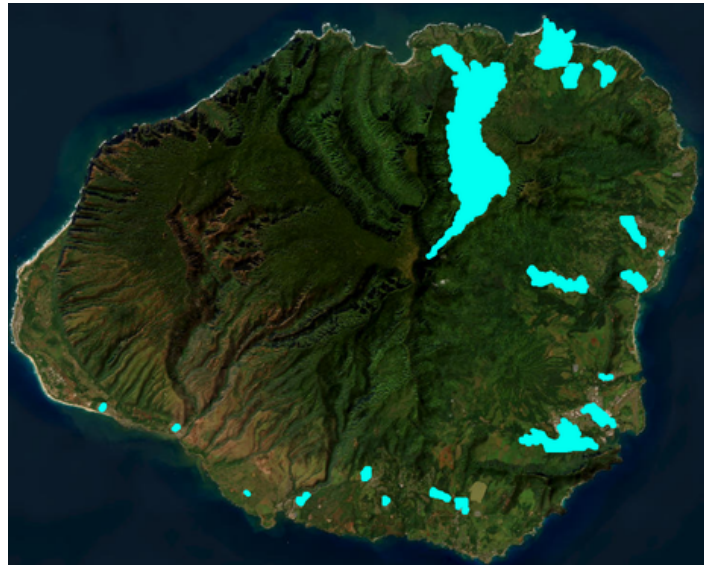


Figure 2. Satellite imagery of census blocks randomly selected for 2026 survey participation.

To save survey teams time in the field, survey planners utilized satellite imagery and County of Kaua'i Real Property tax map key data to pre-select households for participation. Starting points were chosen using random number generation. Researchers used these points, along with Kaua'i County tax parcel shapefiles, to enumerate housing units within each cluster. Counting sequences were calculated by dividing the number of census-block specific occupied housing units by seven (referred to as "n").

From the starting point, survey planners virtually counted housing units through each cluster in a continuous, serpentine manner until seven participant households and seven potential replacement households were selected. Survey teams were provided with maps of each cluster, seven primary households and seven potential replacement households to use if conditions for replacement were met. This methodology saved time in the field, ensured adherence to a systematic household selection process, and improved efforts to include additional dwelling units (known as 'ohana units) that are typically hidden from street view and often missed during field enumeration processes.

Questionnaire

The 2026 Kaua'i CASPER questionnaire was developed by KDHO's Acting District Health Officer and Public Health Emergency Preparedness staff with input from the Hawai'i Food Bank.



Figure 3. Group photo of the entire 2026 Kaua'i CASPER survey team at the mandatory in-person training session.

Forms were not translated into other languages, but survey teams were instructed on how to request interpreter services for a selected household. To streamline data collection, surveys were collected in the field on tablets using the EpiCollect5 application, while households could follow along on a paper copy of the survey (see Appendix C).

Training and Survey Teams

Survey teams were comprised of HDOH staff from Kaua'i, Hawai'i Island, and O'ahu along with volunteers from the Kaua'i Medical Reserve Corps. All survey team members attended mandatory in-person training prior to field deployment.

Teams were briefed on common safety and security issues and were provided with interview and safety tips sheets for quick reference in the field. Teams were grouped so that each team had at least one member with prior CASPER experience and (as feasible) familiarity with the assigned cluster area. While surveying, teams drove vehicles with clearly visible state decals, wore green vests identifying them as members of the "Department of Health Survey Team", and had visible state-issued ID badges.

Methods

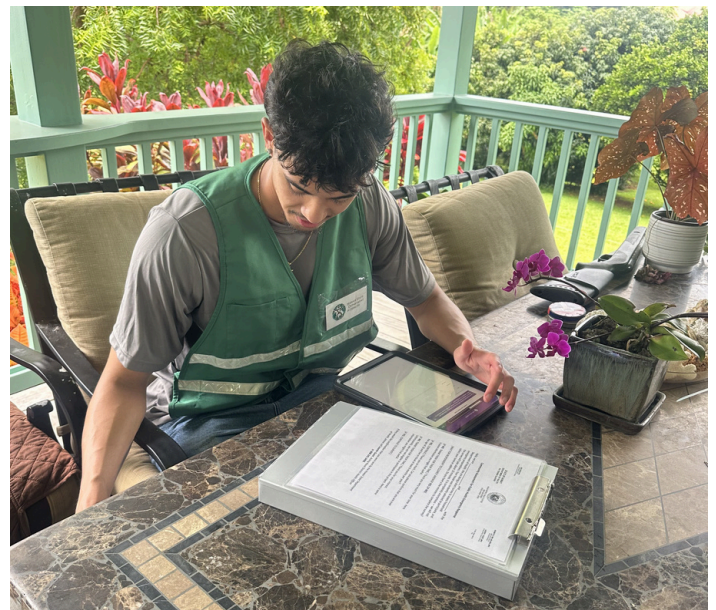


Figure 4. Survey team staff completing a survey at a selected household.

Community Notification

Numerous methods were utilized to notify the public of the 2026 CASPER survey, including an HDOH press release, radio advertisements, and County of Kaua'i social media postings.

Notifications began two weeks prior to deployment to provide ample community notice. All communication emphasized the option for selected households to participate in an in-person interview or to complete the survey over the phone.

Survey Implementation

From June 15-19, anywhere from six to nine survey teams deployed each day to conduct door-to-door surveys in the 30 randomly selected clusters. Teams were given a detailed map and list of the systematically selected households, a verbal informed consent script, a cluster-specific tracking sheet, referral forms, extra paper-based questionnaire forms, a copy of the press release describing the survey's objectives, and a tablet to collect electronic data. Copies of all documents were available for household distribution upon request and are provided in Appendices C-K. To be eligible to participate, respondents had to provide verbal consent, reside on the island at least six months per year, and be 18 years of age or over.

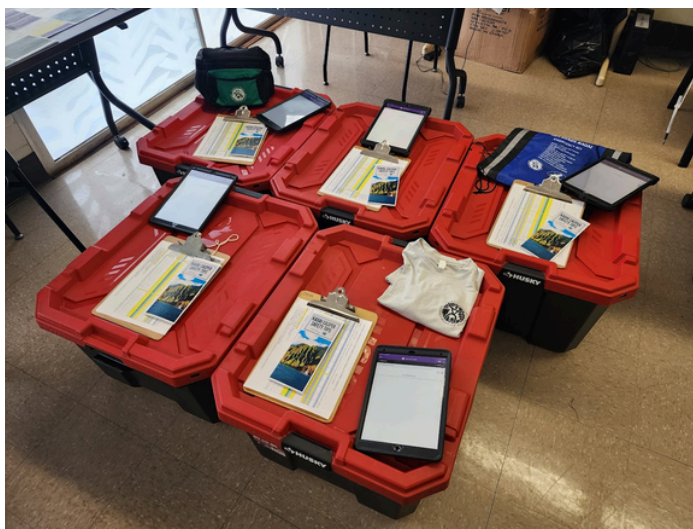


Figure 5. Survey team supplies.

Over the course of the week, 36 total survey teams knocked on doors at selected households to complete in-person interviews. When selected households were not at home, survey teams left letters with an invitation to call the KDHO phone line back to conduct their interview via phone, coordinate a convenient time for an in-person interview, or to decline to participate (Appendix F). After survey completion, households were provided drawstring backpacks with a list of important items to keep in their emergency kits, a basic first aid kit, waterproof bags for storage of important documents, and educational materials.



Figure 6. Survey team staff completing a survey over the phone at the operations center.

Educational material topics included wastewater surveillance, rat lungworm disease, measles, mosquito-borne viruses, 2025 CASPER infographic, KDHO services, Kaua'i mental health resources, emergency preparedness, and emergency power planning. Participating households were asked if they had needs that KDHO could help with, and referrals were made for those that requested them.

Households that declined to participate still received the waterproof bags for storage of important documents and educational materials.

Data Entry and Analysis

Survey data were collected electronically via tablets using the EpiCollect5 application. Entries were uploaded to an online EpiCollect5 database upon return to the operations center. The data cleaning and analysis were done using R. During analysis, each completed interview was assigned a weight based on the number of surveys completed in the corresponding cluster. Weighting each interview ensures the data is representative of the entire sampling frame, and results can be generalized to the island of Kaua'i.

$$\text{Weight} = \frac{\text{Total \# of HHs in sampling frame}}{(\text{\# of HHs surveyed in cluster}) \times (\text{\# of clusters selected})}$$

```
summarize_evac <- function(evac_vars) {srv_design %>%
  #filter(!is.na(.data[[evac_vars]])) %>%
  group_by(.data[[evac_vars]], .drop = FALSE) %>%
  summarize(
    Frequency = n(),
    Estimated_HH = round(survey_total(vartype = NULL), 0),
    Percent = round(survey_mean(vartype = c("ci", "se"),
                                na.rm = TRUE) * 100, 2)
  ) %>%
  mutate(Variable = evac_vars, Category = .data[[evac_vars]]) %>%
  select(Variable, Category, Frequency, Estimated_HH, Percent,
         Percent_low, Percent_upp, Percent_se)
}
```

Figure 7. Sample R code: frequency, weighted estimate, weighted percent, 95% confidence intervals.

RESULTS

In the 30 clusters, survey teams attempted to contact 313 households, spoke with a resident at 198 households, and ultimately completed a total of 175 interviews. Of those, 18 were completed over the phone in the operations center and 157 were completed in the field. Response rates are shown in Table 1, which includes response rates from 2019 - 2026 CASPERs.

Interpreter services were available to teams by request. In 2026, this service was used for four households. Operations was able to send a new team to complete the survey in the household's primary language. Three total referral forms were completed during the 2026 Kaua'i CASPER to link residents to a needed service.

Survey results are grouped by theme and summarized in data figures and tables on the following pages. Weighted analysis with 95% confidence intervals (CI) are provided for cells with five or more observations. Counts less than five are reported as less than five (<5) in accordance with CDC CASPER results guidance.

The CI offers a range based on sample data within which we are reasonably confident that the true population parameter lies, given the confidence level (95%). The range of the CI gives you an idea about the precision of the estimate. A narrower interval suggests a more precise estimate of the population parameter, while a wider interval suggests less precision. Confidence intervals are shown as error bars in the figures.

Where possible, this report analyzes changes over time for questions that were assessed in the same way year-over-year.³ Data from 2018 has been excluded due to loss of raw data. Rao-Scott Chi-square Test of Independence (χ^2) was used to assess differences in distribution across years. The asterisk (*) is used to represent a comparative statistically significant result between years (where $p < 0.05$).

Basic Household Information

The first section of the survey assessed basic household information. In 2026, the mean and median household size was 3.0 (95% CI [2.7, 3.3]) and 2 (IQR [2.0, 4.0]), respectively. This distribution has remained consistent from 2017-2026.

Table 1. Calculated response rates for Kaua'i CASPERs (2019 - 2026).

Response Rates		2026	2025	2024	2023	2022	2020	2019
Completed Surveys		175	186	177	180	176	189	186
Completion Rate	Percent of target # of surveys collected: $\frac{\text{completed surveys}}{\text{target surveys}}$	83% (210)	89% (210)	84% (210)	86% (210)	84% (210)	90% (210)	89% (210)
Cooperation Rate	Willingness of the community to participate: $\frac{\text{completed surveys}}{\text{total contacted eligible households}}$	82% (213)	80% (232)	83% (213)	78% (232)	77% (228)	89% (212)	78% (237)
Contact Rate	Proportion of households where contact was attempted and interview completed: $\frac{\text{completed surveys}}{\text{total attempted households}}$	56% (313)	55% (339)	47% (380)	46% (392)	52% (338)	70% (271)	56% (333)

Surveyors next asked how many members of each age group reside in their household (Figure 8). Thirty percent of households have at least one child under the age of 18.

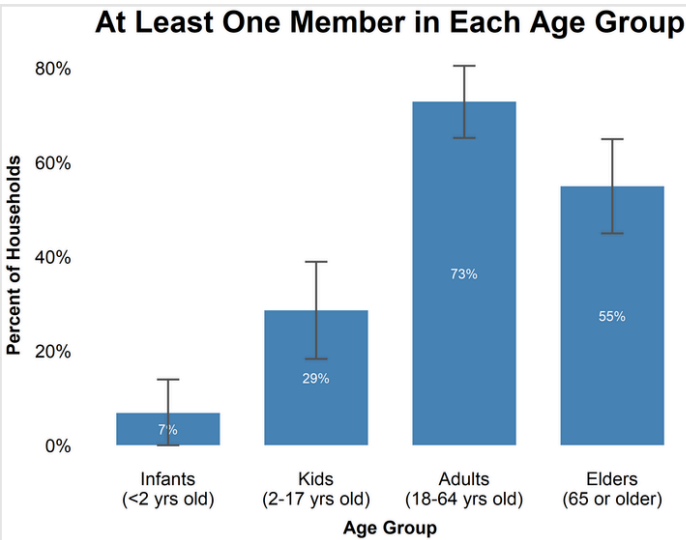


Figure 8. Percent of Kaua'i households with a household member in each age group.

Next, surveyors asked what languages are spoken in each household. The majority (77%) of households identified English as the only language spoken while 23% of households spoke English and/or at least one other language. Additional languages identified by households in 2026 included: Chinese, French, Spanish, 'Ōlelo Hawai'i, Ilokano, Tagalog, Korean, Pidgin, Thai, Mandarin, Greek, Lao, Visayan, Filipino, and Japanese.

Surveyors then asked households if they owned or rented their residence (Figure 10). Seventy-seven percent of households owned their residence, while 22% rented. From 2017 to 2026, no statistically significant difference was observed in the percent of households that own versus rent their residence.



Figure 9. DOH survey team in the field.

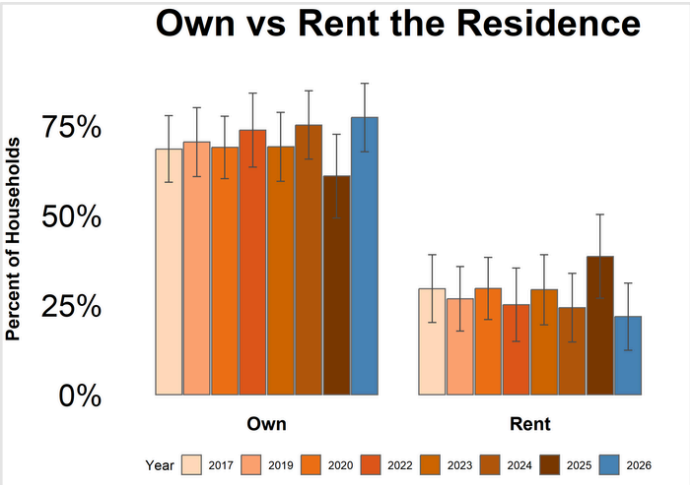


Figure 10. Percent of Kaua'i households who own versus rent their residence.

Among homeowners, 10% reported loss of homeowners insurance coverage or inability to pay due to rising costs in the past year (Figure 11). This remained relatively consistent since first asked in 2025 due to rising insurance rates related to the 2023 Maui wildfires and other national disasters.

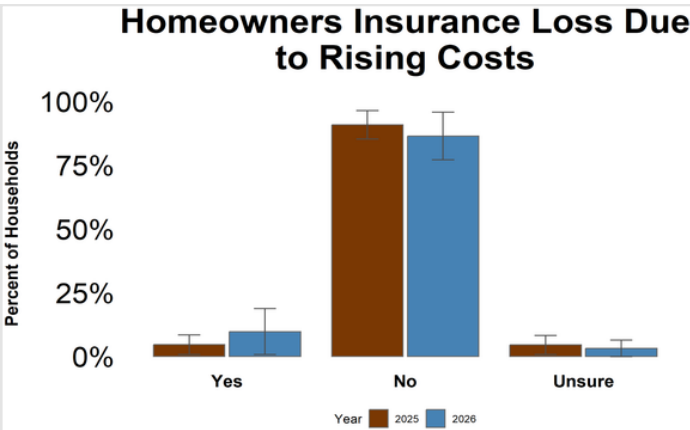


Figure 11. Percent of Kaua'i households who have experienced loss of homeowners insurance coverage or inability to pay due to rising costs in the past year.

Emergency and Evacuation Plans

The next section of the survey focused on household emergency and evacuation plans. Household emergency and evacuation plans were last assessed in 2024 since this data is now collected in every other CASPER survey.

Seventy-three percent of households had a communication plan, such as a list of phone numbers and a designated out-of-town contact (Figure 12). Fifty-nine percent of households, had a designated meeting place immediately outside their home or close by in their neighborhood, and 71% of households had copies of important documents in a safe location, such as a waterproof bag. No statistically significant changes were observed from 2017-2026 in the percent of households with each type of emergency plan.

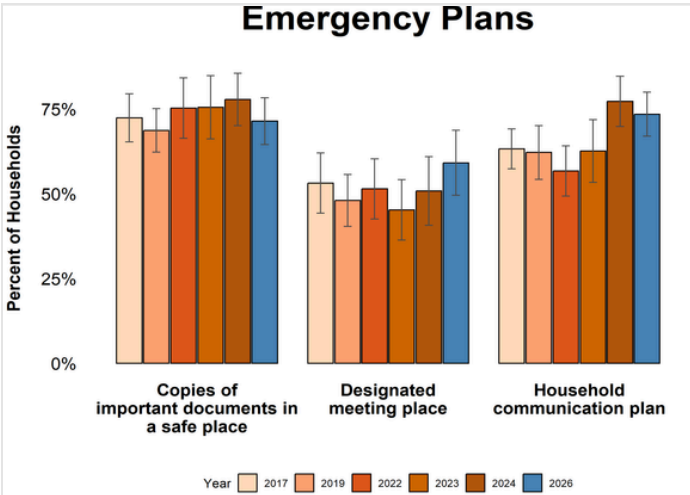


Figure 12. Percent of Kauaʻi households with recommended emergency plans.

In 2026, 10% of households have at least one member who is dependent on medical equipment that requires electricity or medication that requires refrigeration (Figure 13). No statistically significant changes have been observed from 2019-2026. Among households with electricity-dependent health needs, 57% have a backup power supply.

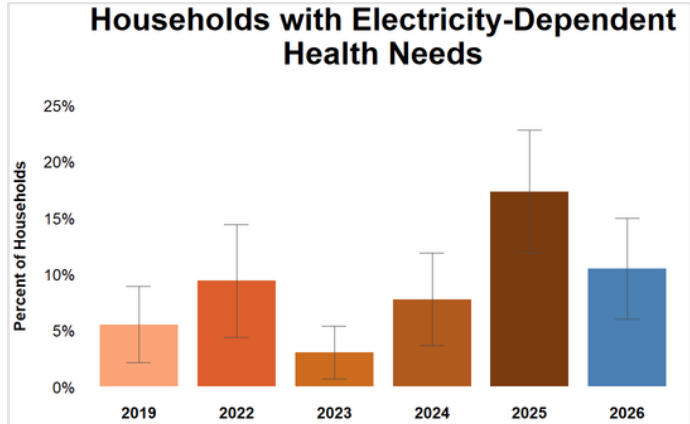
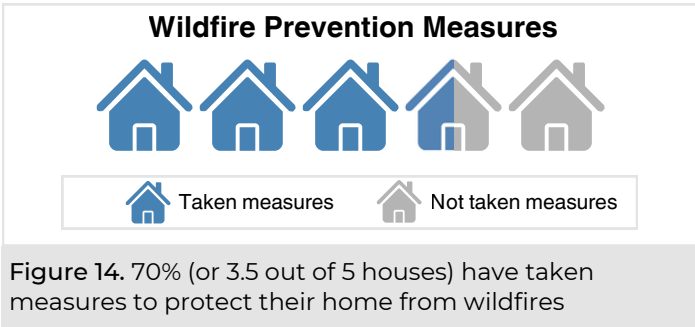


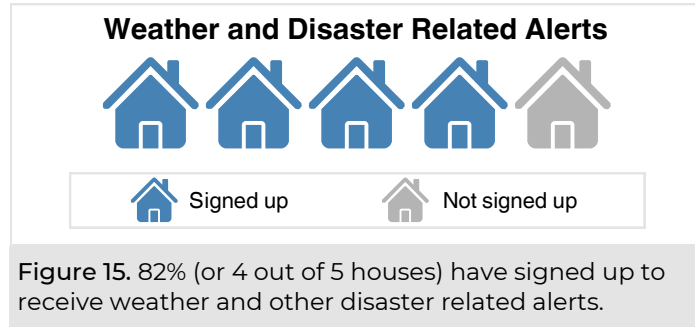
Figure 13. Percent of Kauaʻi households with at least one member who is dependent on medical equipment that requires electricity or medication that requires refrigeration.

Almost 84% of Kauaʻi households responded they were familiar with the tsunami evacuation zones island-wide in 2026. No statistically significant changes have been observed since first assessed in 2022. Among households who were not familiar with the tsunami evacuation zones islandwide, 54% knew where to find that information.

Most households (70%) have taken measures to protect their home from wildfires, such as clearing brush, cleaning gutters, and/or keeping plants at least five feet away from their home (Figure 14). A statistically significant increase in the percent of households that had taken measures to protect their homes from wildfires was observed from 2024 to 2026 ($p < 0.03$).* Refer to Table 7.



On Kauaʻi, 82% of households have signed up to receive weather and other disaster related alerts in 2026 (Figure 15). Although year-to-year changes were not statistically significant, the overall change from 2017 to 2026 showed a statistically significant increase in the percent of households signed up for weather and other disaster-related alerts ($p < 0.05$).* Refer to Table 7.



Each year, Kauaʻi households were asked about their familiarity with the Kauaʻi Emergency Management Agency’s website [Kauaʻi.gov/KEMA](http://Kaua'i.gov/KEMA). In 2020, a statistically significant increase was observed likely due to KEMA’s critical role in communicating local information related to the pandemic. Some of this increased awareness was lost by 2022. In 2026, 55% of Kauaʻi households were familiar with KEMA’s website and this has remained steady over the last few years (Figure 16).

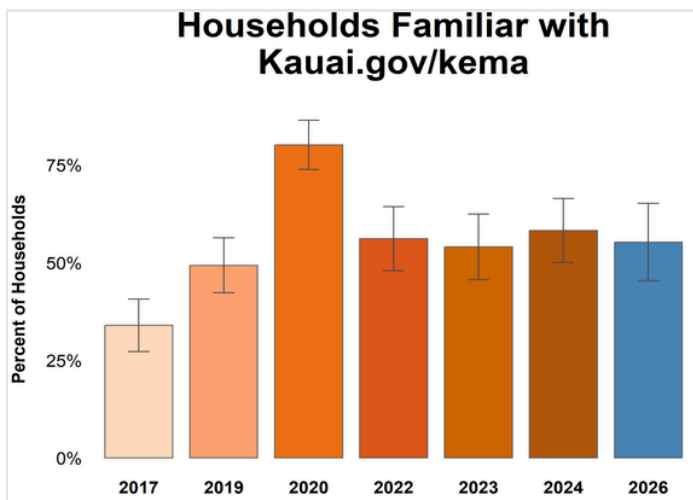


Figure 16. Percent of Kaua'i households that are familiar with the Kaua'i Emergency Management Agency's website.

The next section of the survey focused on hurricane sheltering. Hurricanes are divided by severity into "categories" based on a hurricane's maximum sustained wind speed (Table 2). In order to better understand household plans for hurricane sheltering, beginning in 2019, Kaua'i households were asked about their shelter plans for each category of hurricane.

Table 2. Saffir-Simpson Hurricane Wind Scale

Hurricane Category	Wind Speed (mph)
Category 1	74 - 95
Category 2	96 - 110
Category 3	111 - 129
Category 4	130 - 156
Category 5	157+

In 2026, the percent of households planning to shelter in place at home decreased with the increasing category, or severity, of storm (Figure 17). This matched the trend observed in prior years where shelter seeking behavior was assessed.

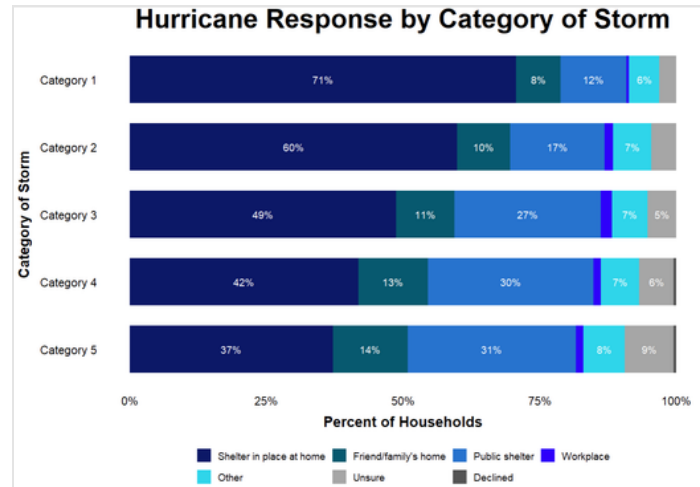


Figure 17. Percent of Kaua'i households that would shelter in place, at a friend/family home, at their workplace, at a public shelter, or other for each category of hurricane.

While only 12% of households would seek public shelter for a Category 1 hurricane, significantly more households would seek public shelter for a Category 3 (27%), Category 4 (30%), and Category 5 (31%) hurricane (Figure 18). No statistically significant changes to shelter seeking behavior were observed from 2019 to 2026.

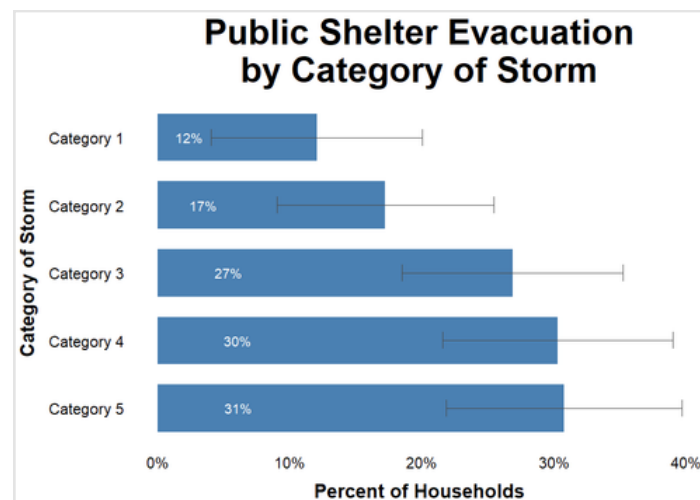


Figure 18. Percent of Kaua'i households that would seek public shelter by category of hurricane.

Next, households were asked about barriers to emergency evacuation. Forty-five percent of households indicated that they face no barriers to emergency evacuation if advised to do so by county officials. Among households that identified barriers, the most commonly reported included: traffic congestion (16%), concern about leaving pets (13%), evacuation routes blocked due to debris/flooding (9%), and concern about leaving property vacant (5%). See Figure 19.

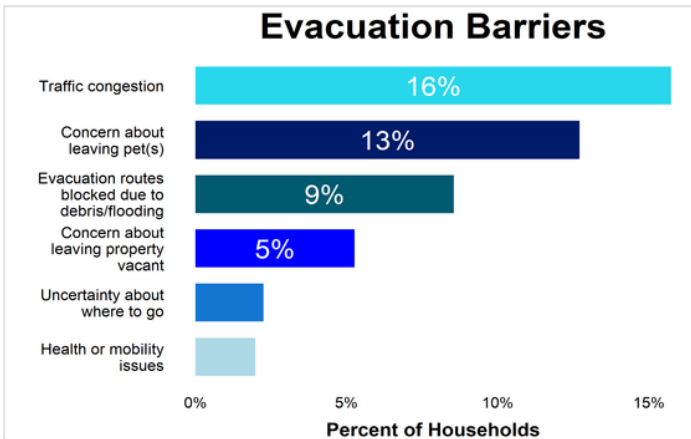


Figure 19. 45% of households identified no barriers to emergency evacuation when advised to do so. The remaining households most commonly reported traffic congestion and concern about leaving pets.

Households were next asked if they've planned for additional emergency and evacuation needs of vulnerable members such as children, the elderly, those with certain medical conditions, and pets. Twenty-four percent said they don't have any vulnerable household members. Among households with vulnerable members, only 36% have planned for their additional needs.

Infectious Diseases

The 2026 CASPER assessed Kaua'i households' awareness of ongoing infectious disease outbreaks such as measles and chickenpox. During the 2019 U.S. mainland measles outbreak, households on Kaua'i were asked about their awareness and level of concern regarding measles. From 2024-2026, households were asked again about their awareness and level of concern regarding ongoing outbreaks,

In 2026, 79% of households were aware of the current measles outbreak on the mainland and recent cases in Hawai'i, compared to 81% in 2019, 51% in 2024, and 74% in 2025 (Figure 20). A statistically significant increase in the percent of households that were aware of the outbreak was observed between 2024 and 2025. This change was likely due to the larger size of the outbreak, and the high degree of media coverage surrounding the outbreak itself as well as the three fatalities associated with it in 2025. No change in awareness was observed between 2025 and 2026.

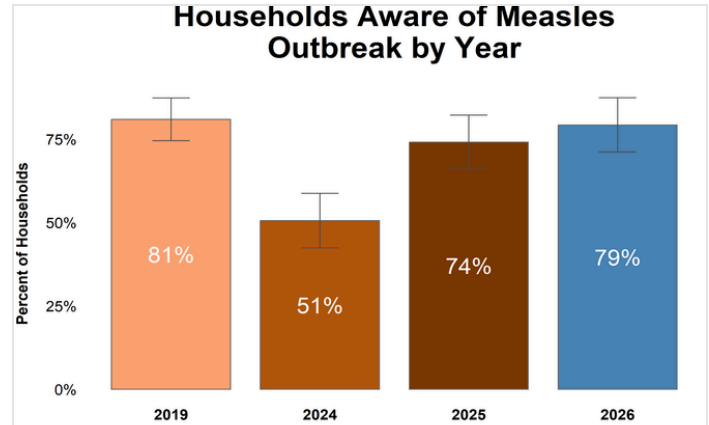


Figure 20. Percent of Kaua'i households who are aware of the current measles outbreak on the mainland and recent cases in Hawai'i.

Next, surveyors asked households how concerned they are about the impact of the measles outbreaks on Kaua'i. The majority of households were either somewhat concerned (31%) or not concerned (40%) about the impacts in 2026, with 23% indicating they are very concerned (Figure 21).

Overall, the level of concern regarding measles outbreaks impacting Kaua'i has not changed significantly over the years.

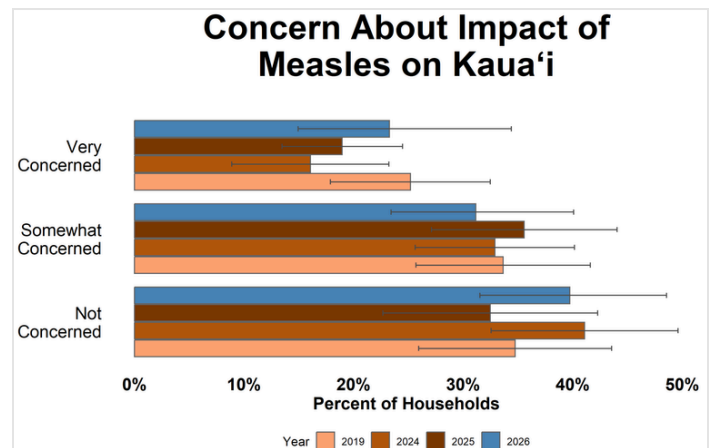


Figure 21. Kaua'i households' level of concern regarding the impact of measles outbreaks.

Next, surveyors asked households whether they were familiar with the recent chickenpox outbreak on Kaua'i. The majority of households (52%) reported they were not aware of the outbreak, with the remaining households aware (44%) or unsure (4%) See Figure 22.

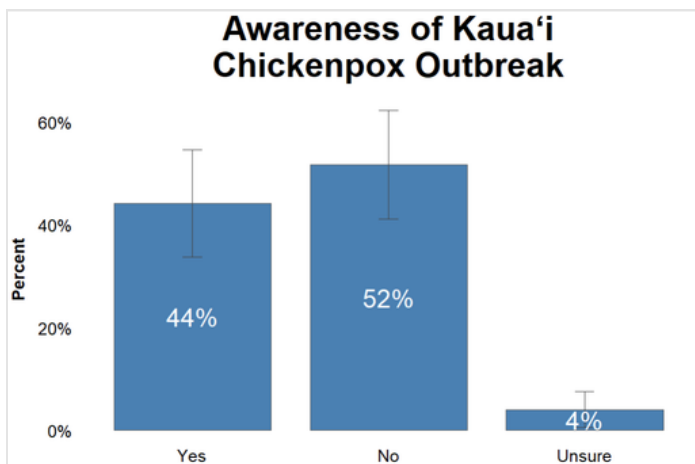


Figure 22. Percent of Kaua'i households that are familiar with the recent chickenpox outbreak on Kaua'i.

Surveyors then asked households how concerned they are about the recent chickenpox outbreak on Kaua'i. Twenty percent reported that they are very concerned, 30% somewhat concerned and 41% not concerned (Figure 23).

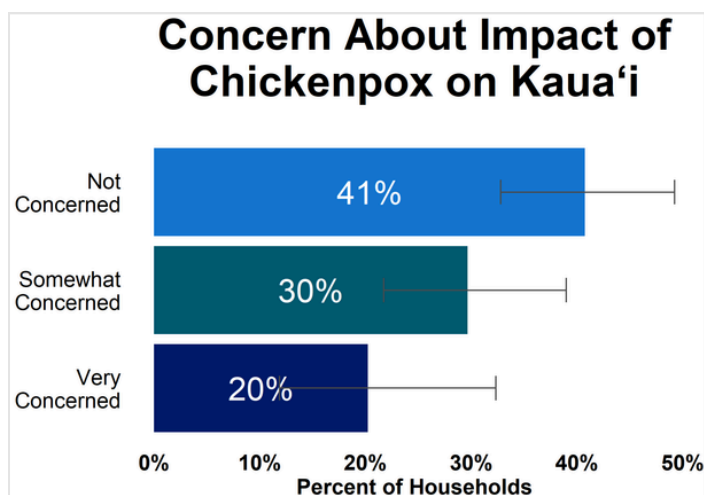


Figure 23. Percent of Kaua'i households that are concerned about the impact of chickenpox on Kaua'i.

CASPER surveys have assessed vaccine importance since 2019. In 2026, the majority of Kaua'i households (62%) think it is very important to stay up-to-date on recommended vaccines. From 2019 to 2025, a statistically significant 16% decline was observed in the percent of households that think it is very important to stay up to date on recommended vaccines (Figure 24). This trend was no longer observed when 2019 and 2026 data were compared ($p > 0.05$). Refer to Figure 24 and Table 7.

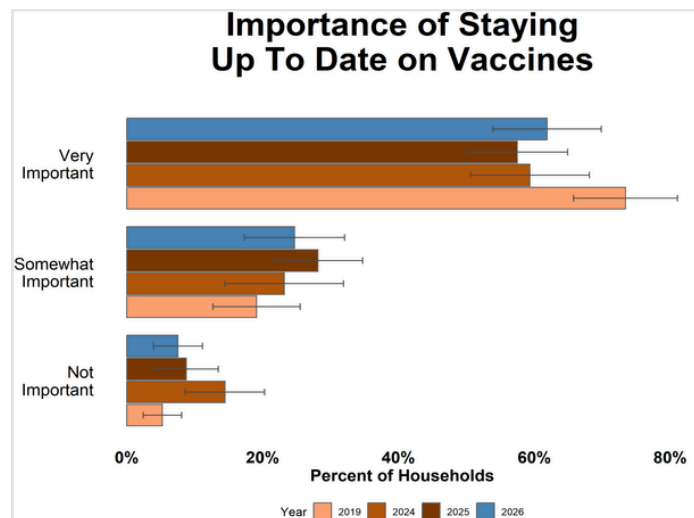


Figure 24. Percent of Kaua'i households that think it is very, somewhat, or not important to stay up-to-date on recommended vaccines.

Mosquitoes in Hawai'i do not currently carry diseases like dengue, Zika, and chikungunya. Households were asked how concerned they are about those diseases becoming established in Hawai'i. The majority of households (74%) are very concerned or somewhat concerned, with 21% not concerned about those mosquito-borne diseases becoming established here (Figure 25).

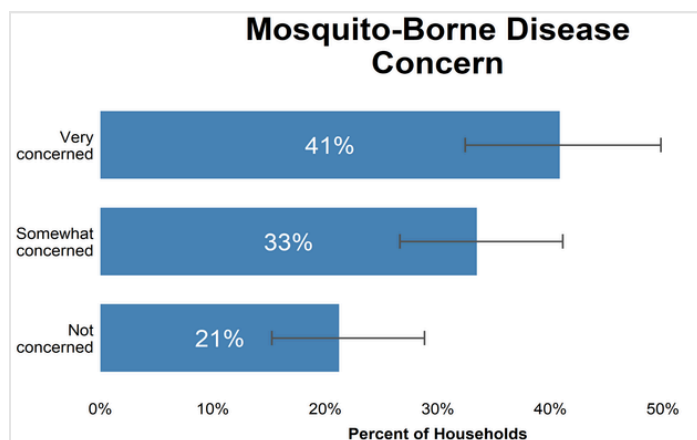


Figure 25. Percent of Kaua'i households concerned about dengue, Zika and chikungunya becoming established in Hawai'i.

Households were then asked how frequently they take measures to prevent mosquitoes from breeding on their property such as getting rid of standing water. Sixty percent of households perform these actions at least weekly, with only 10% indicating they never take actions to prevent mosquito breeding (Figure 26).

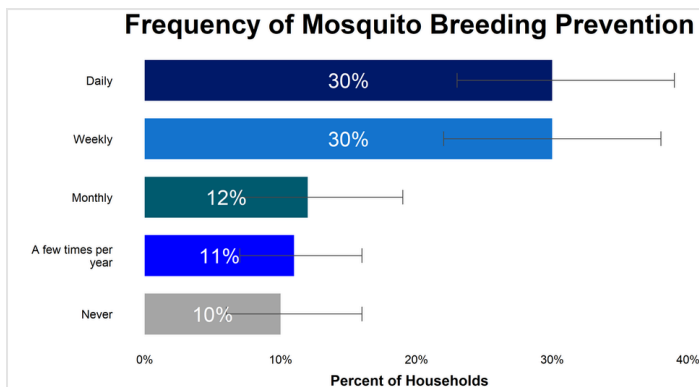


Figure 26. How frequently Kaua'i households take measures to prevent mosquitoes from breeding on their property.

General Health & Well-being

The last section of the 2026 CASPER assessed the general health and well-being of Kaua'i households.

First, households were asked whether their members had a specific doctor, clinic, or health center that they usually go to for care. Eighty-eight percent indicated that all household members have a regular source of care, while 6% said most, 3% some and 2% none (Figure 27A).

Eighty-two percent of households indicated that all members had seen their regular healthcare provider in the past year. The remaining households said that most (6%), some (6%), or none (4%) of their members had seen their regular healthcare provider in the past year (Figure 27B).

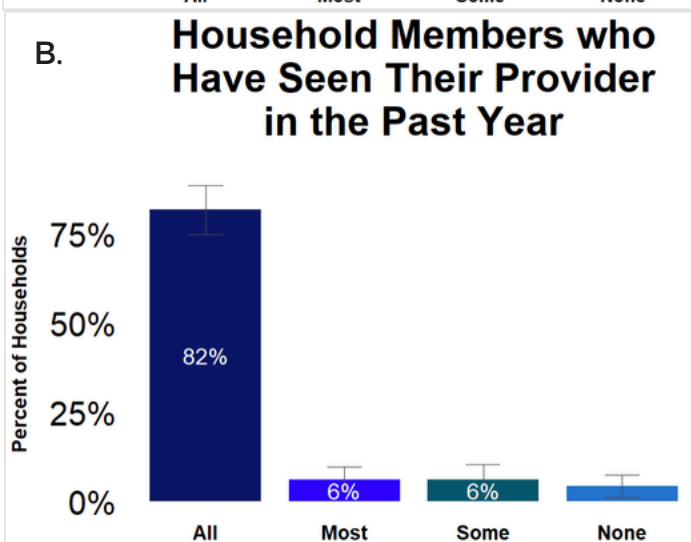
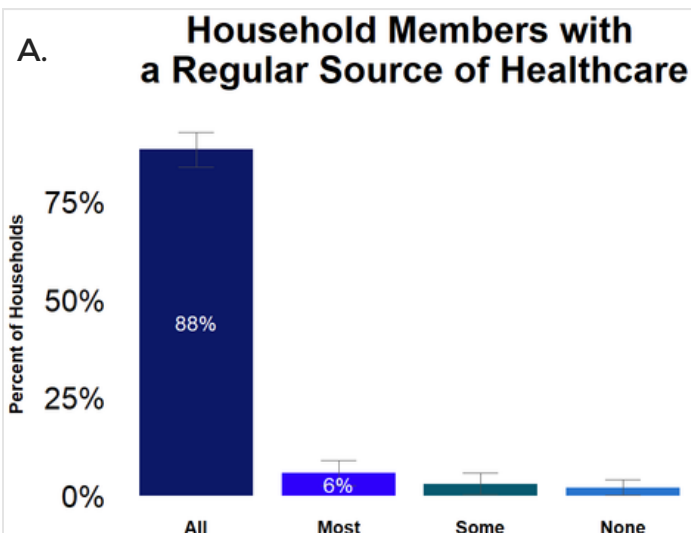
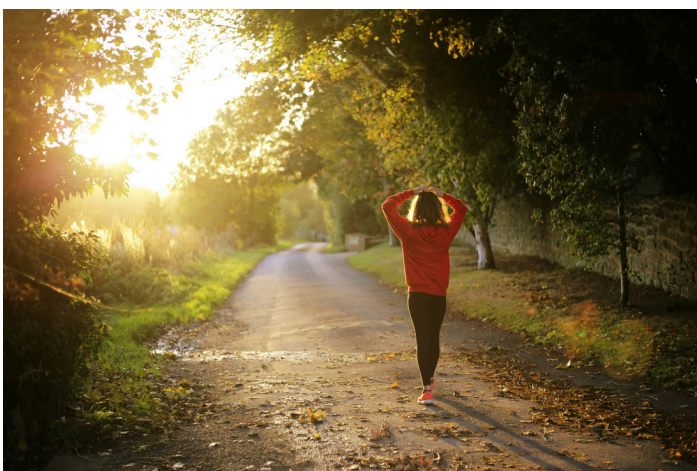


Figure 27. Kaua'i households where members have a specific doctor, clinic, or health center they usually go to for care, and if they've seen a provider in the last year.

Next, households were asked if any members delayed or skipped medical care, prescription medicine, or dental care in the past 12 months because they couldn't afford it. Eighty-four percent of households did not skip or delay care in the past year. Importantly, 14% had skipped or delayed care in the past year and 2% were unsure or declined to answer (Figure 28).

Missed Healthcare Services due to Unaffordability

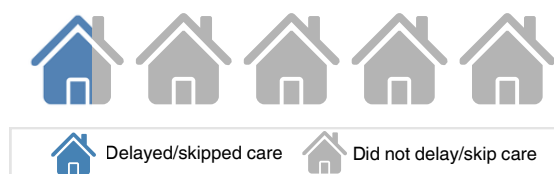


Figure 28. Percent of Kaua'i households (14%) with at least one member who delayed or skipped medical care, prescription medicine, or dental care in the past 12 months because they couldn't afford it.

Households were then asked to rank their physical and mental health and well-being on a scale of 1 to 5, with 1 being very poor and 5 being very good. The majority of households (89%) ranked their physical health and well-being as “good” or “very good” with a mean and median of 4.4 (95% CI [4.3, 4.5]) and 5.0 (IQR [4.0, 5.0]), respectively. Ten percent of households ranked their physical health and well-being a 3, or “fair” (Figure 29).

Similarly, 89% of households ranked their mental health and well-being as “good” or “very good” with a mean and median of 4.5 (95% CI [4.4, 4.6]) and 5.0 (IQR [4.0, 5.0]), respectively. Eight percent of households ranked their mental health and well-being as a 3, or “fair” (Figure 29). These physical and mental health ratings are similar to those reported in 2024 and 2025.

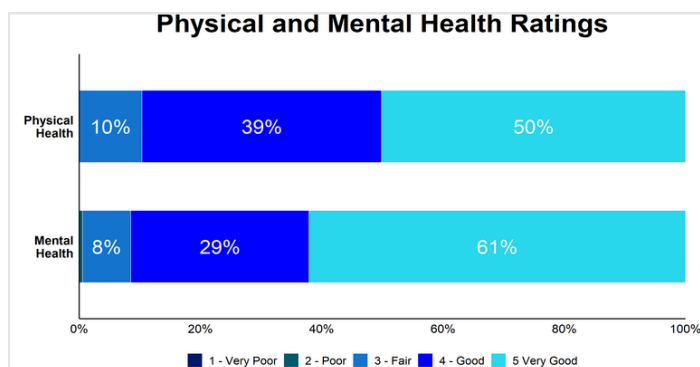


Figure 29. Percentage of Kauaʻi households rating their physical and mental health on a scale from 1 (very poor) to 5 (very good).

Next, households were asked questions designed to assess social connectedness. First, households ranked how connected they feel to the Kauaʻi community on a scale of 1 to 5, with 1 being very disconnected and 5 being very connected.

The majority of households (80%) indicated they are “somewhat” or “very connected” to the Kauaʻi community with a mean and median of 4.3 (95% CI [4.1, 4.5]) and 5.0 (IQR [4.0, 5.0]), respectively. Approximately 20% of households ranked their social connectedness as a 3 or lower representing “neutral” (16%), “somewhat disconnected” (1%), or “very disconnected” (3%). See Figure 30.

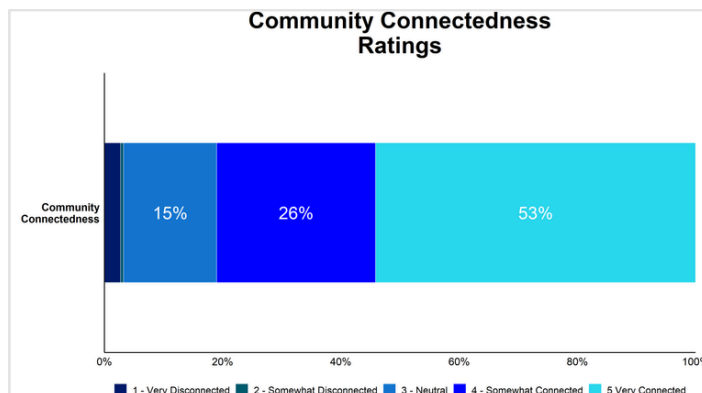


Figure 30. Percentage of Kauaʻi households rating their connectedness to the Kauaʻi community on a scale of 1 (very disconnected) to 5 (very connected).

Next, households were asked how frequently they get together with friends, relatives, or neighbors. Most households (64%) reported they gather at least weekly, 24% indicated a few times per month, 10% rarely and 0% never (Figure 31).

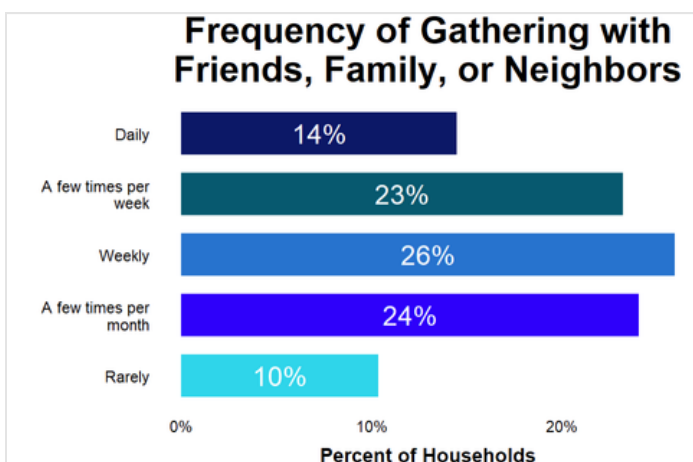


Figure 31. Percentage of Kauaʻi households gathering with friends, family, or neighbors rarely, a few times per month, weekly, a few times per week, or daily.

Households were then asked how frequently they attend church, community groups, or club meetings, with most households attending these types of events at least a few times per month (59%), 23% rarely, and 15% never.

Next, the majority of households (76%) reported they were not concerned about their ability to pay the next month’s rent/mortgage, 11% were somewhat concerned, and 7% were very concerned (Figure 32).

Concern for Ability to Pay Next Month's Rent/Mortgage

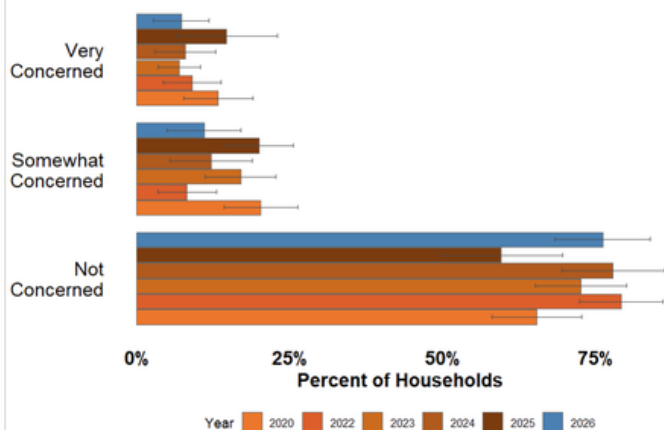


Figure 32. Percent of Kaua'i households concerned about their ability to pay the next month's rent or mortgage by year.

To assess household food security, KDHO worked with the Hawai'i Food Bank to include two questions on the 2026 Kaua'i CASPER.

First, households were asked how often during the past 12 months the food they bought did not last, and they didn't have money to get more. While 80% said this never happened, 11% said rarely, 5% sometimes, and less than 5% combined said usually or always. See Figure 33.

How Often Households Ran Out of Food in the Past 12 Months

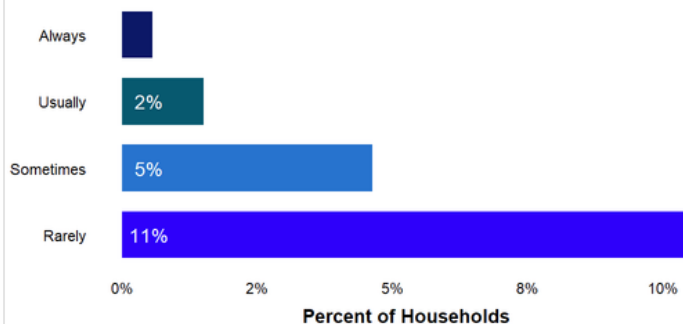


Figure 33. The majority of households (80%) did not report food shortages over the past 12 months. Of the households that did, most reported food shortages rarely (11%) or sometimes (5%).

Next, households were asked if they have received food support through a government program such as SNAP/WIC or free groceries or meals from a charitable organization such as a food bank or food pantry in order to meet their needs.

Seventeen percent reported having received food assistance in the past year, while 81% did not (Figure 34).

Households Receiving Food Assistance



Figure 34. 17% percent of Kaua'i households reported having received food assistance in the past year.

Finally, households were asked if they are aware that Naloxone, used to treat opioid drug overdoses, is available for free on Kaua'i, with only 41% indicating that they are aware (Figure 35).

Household Awareness of Free Naloxone



Figure 35. Two out of every five households are aware that Naloxone is available for free on Kaua'i.

DISCUSSION

Data collected across the nine Kaua'i CASPERs from 2017-2026 has played a vital role in shaping local emergency response plans and operations.

Annual CASPERs have also served as a capacity building exercise for KDHO and partner agencies, with over 150 staff and volunteers trained in this methodology over the past nine years. The development of this capability in non-emergency times enabled KDHO to immediately implement rapid needs assessments in response to local disasters, such as the historic 2018 floods and the COVID-19 pandemic. It also enabled us to rapidly design a new rapid needs assessment methodology in response to the 2023 Maui wildfires.

Recommendations are detailed in the next section from a KDHO perspective. A county-level led and consultative process is needed amongst Kaua'i partner agencies to determine any potential strategic actions based on the data findings.

Key Findings

1. To assess household food security, households were asked how often during the past 12 months the food they bought did not last, and they didn't have money to get more. While 80% said this never happens, 11% said rarely, 5% sometimes, and less than 5% combined said usually or always.

Seventeen percent of households reported that they received food support through a government program or a charitable organization in the past year in order to meet their food needs.

The percent of food insecure households reported here is lower than has been estimated by other statewide assessments, though reported 95% confidence intervals do overlap.⁴ As a household level surveying technique, CASPER systematically excludes houseless residents and, therefore, represents a low estimate of food insecurity on our island. Importantly, CASPER can still serve as a data collection tool to routinely assess food insecurity and monitor changes over time. Since food security is an important early indicator of economic vulnerability and systemic inequality, KDHO should continue to work with partners to monitor trends related to household food security in Hawai'i via CASPER surveys. CASPERs also serve as an important outreach opportunity for KDHO to assist with linking households to food assistance programs available in our community.

2. Only 41% of Kaua'i households are aware that Naloxone, an over-the-counter medication used to treat opioid drug overdoses, is available for free on Kaua'i.

There are currently several free Naloxone distribution sites on Kaua'i. HDOH's Alcohol and Drug Abuse Division is currently working with the County of Kaua'i on an agreement to set up an additional 20 distribution sites to ensure coverage islandwide. This is a critical, life-saving resource that all Kaua'i households should be aware of. When the additional distribution sites are established, a public education campaign could be implemented to raise awareness on Naloxone availability and use.

3. CASPERs have assessed Kaua'i households' perceived importance of staying up to date on recommended vaccines since 2019. Through this effort, we have been able to track changes in real time. In 2026, 62% of Kaua'i households think it is very important, 25% somewhat important, and 8% not important to stay up-to-date on recommended vaccines.

The majority of Kaua'i households have continued to think it is very important to stay up-to-date on recommended vaccines from 2019 to 2026. However, from 2019 to 2025, a statistically significant 16% decline was observed in the percent of households that think it is very important to stay up to date on recommended vaccines. This trend was no longer observed when 2019 and 2026 data were compared. It is too early to say if this represents regained ground on the vaccine front since the observed change from 2025 to 2026 was not statistically significant. However, this should continue to be assessed via annual CASPERs, and the public health and healthcare community need to continue to prioritize working together to address vaccine concerns in our community.

4. Twice as many Kaua'i households are very concerned (41%) about mosquito-borne diseases such as dengue, Zika and chikungunya becoming established in Hawai'i compared to the impact of infectious disease outbreaks like measles and chickenpox (23% and 20% respectively).

While Hawai'i is home to the mosquitoes that can transmit mosquito-borne diseases, they are not endemic (established) in the state — and cases are currently limited to travelers. However, the state has seen an increase in imported cases from visitors and residents traveling from locations where those diseases are endemic, and these imported cases represent a serious risk. This risk is reflected in the high level of community concern reported on this issue. Importantly, the majority of Kaua'i households (60%) are taking actions at least weekly to mitigate mosquito breeding on their property such as getting rid of standing water as recommended by HDOH's Vector Control Program. Mosquitoes need only small amounts of standing water to breed. Common breeding sites include buckets, water-catching plants (such as bromeliads), small containers, planters, and rain

barrels. Additional outreach and education on this topic and the frequency with which households should be taking these actions will reduce the risk of imported cases leading to these diseases becoming established in Hawai'i. More information on mosquito control can be found [here](#).

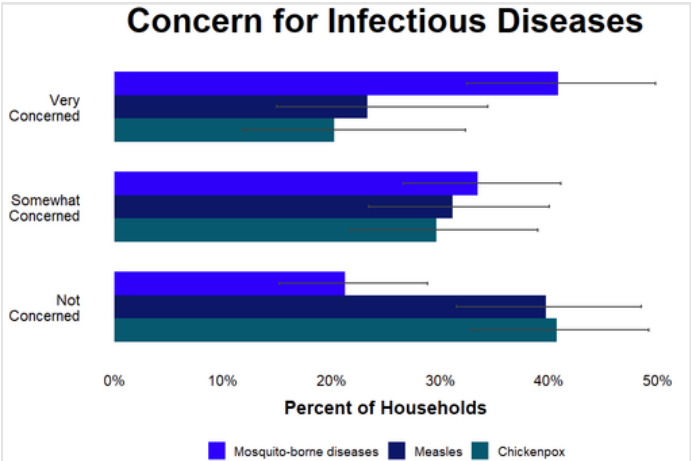


Figure 36. Kaua'i households' level of concern for chickenpox, measles, and mosquito-borne diseases.

5. Eighty-eight percent of Kaua'i households indicated that all members have a specific doctor, clinic, or health center they usually go to for care, and 82% reported that all members saw their regular healthcare provider in the past year. Fourteen percent of households indicated that at least one member had delayed or skipped medical care, prescription medicine, or dental care in the past year because they couldn't afford it.

While it's encouraging that most Kaua'i households indicated that all members had a regular source of healthcare and had seen their healthcare provider in the past year, there is still room for improvement in this area. Additionally, the 14% of households that indicated at least one member had delayed or skipped care because they couldn't afford it is very concerning. This is an important indicator to monitor in addition to routine insurance coverage rates. Even individuals who have full health insurance coverage can experience cost as a significant barrier to seeking needed care. All three of these questions should continue to be included in future CASPERs during the shifting landscape of health insurance coverage created by national policy changes.

Limitations

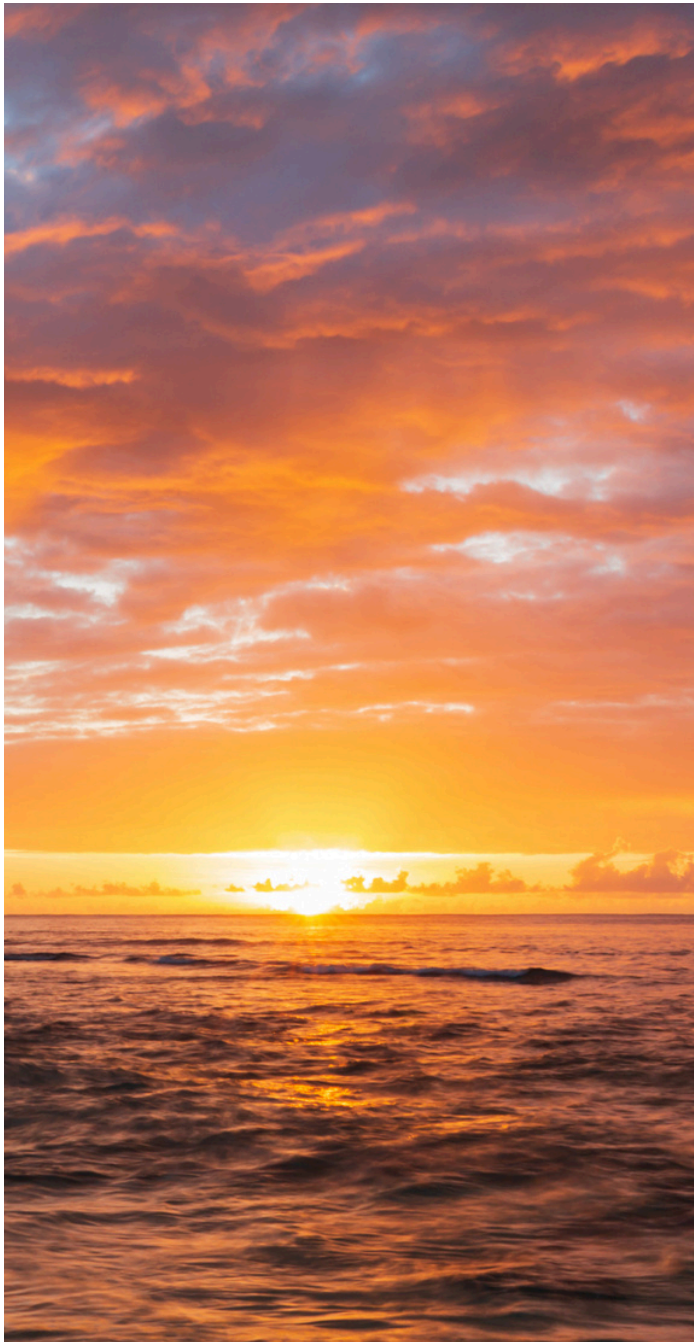
The CASPER methodology is based on the systematic selection of households within 30 randomly selected census blocks. For the purposes of the 2026 Kaua'i CASPER, 2020 U.S. Census Bureau data was used as the most recent data available. The island of Kaua'i has experienced some growth since the 2020 census was conducted. Changes to the overall number, composition, and geographic location of occupied housing units is not reflected in the data used for census block and household selection processes.

Survey teams had to replace some systematically selected households after three attempts with no answer, household refusal, household inaccessibility, or household ineligibility (i.e., not a Kaua'i resident). Replaced households may be inherently different from the originally selected household which may influence the representativeness of results. Nevertheless, internal validity is preserved by selecting replacements households using the same systematic methodology.

Standard door-to-door surveying was conducted on weekdays during standard business hours. This may present sampling bias in unintentionally skewing towards certain demographics, such as unemployed or retired households. Nevertheless, steps were taken to minimize such bias, such as an alternative method to conduct the survey via phone during normal business hours as well as outside of normal business hours. Additionally, selected households were revisited at least three times on different days and times (e.g., morning versus afternoon) prior to being replaced.

Certain high-risk groups, particularly houseless individuals and those living in congregate settings, such as long-term care and correctional facilities, are excluded by CASPER's census block and household selection method. These individuals may have greater resource needs and potentially different barriers than those living in residential settings better captured by census block data. Emergency planners should take this into account when using this data to inform planning efforts and emergency response operations.

Data from the CASPER survey is cross-sectional and represents a snapshot in time, which should be considered when accounting for how household needs, awareness, or conditions may change over time. Since annual CASPER preparedness surveys are conducted consistently at the beginning of hurricane season, any statistically significant changes observed likely reflect real differences rather than seasonal variation.



REFERENCES

1. Centers for Disease Control and Prevention (2019). Community Assessment for Public Health Emergency Response (CASPER) Toolkit: Third Edition. Retrieved from: <https://www.cdc.gov/casper/php/overview/index.html>
2. U.S. Census Bureau (n.d.). Explore Census Data. Retrieved from: <https://data.census.gov>
3. Guest et al. (n.d.). Kaua'i 2017, 2018, 2019, 2020, 2022, 2023, 2024, 2025. Reports retrieved from: <https://health.Hawaii.gov/Kaua'i/casper/>
4. The Hawai'i Food Bank. The State of Food Insecurity in Hawai'i 2024-2025. Retrieved from: https://hawaiifoodbank.org/wp-content/uploads/2026/02/HawaiiFoodbank_FoodInsecurityReport_2024-25.pdf

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Alina Dorian
Blanca Gil Lopez, MPH, MS
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Daisy Pang, MPH
Eli Jones, CPM
Emily Klann, MPH
Grace Jamoraban
Jaedyn Pavao, BSN, RN
Jamie Humphrey, MPH
Janet Berreman, MD, MPH
Judi Matola
Kiersten Garcia
Kira Fallas
Laura Hadley
Lorrin-Alyssa Fujita, MPH
Maddie Heyde
Maka Chow
Marie Perez, MPH
Mark Jamorabon, BSN, RN
Michael Manera
Nicole Mintz, MPH
Pua Kaohelauii
Randy Blake, MD
Rhianon Ako, MPH
Rikita Merai
Sarah Mabry, BSN, RN
Scott Kelly
Shavon Fenton
Sherry Ann Oyamot
Taylor Fujisawa
Tommy Noyes
Tracey Ochoco



APPENDIX A:

Table 3. Questions related to basic HH information on the 2026 Kaua'i CASPER (n = 175)

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
Percentage of households with at least one member in each age group					
Under 2 years old	8	1,687	6.8%	0%	14%
2 – 17 years old	46	7,064	28.6%	18.3%	38.9%
18 – 64 years old	122	17,993	72.8%	65.2%	80.5%
Over 64 years old	105	13,568	54.9%	44.9%	64.9%
What languages are spoken in your household?					
English only	132	19,146	77.5%	69.6%	85.4%
English + At least one other Language	40	5,194	21%	13.5%	29.6%
Other language only	<5	-	-	-	-
Other Languages Identified					
Ilocano	20	2,479	10.0%	3.8%	16.3%
Japanese	<5	-	-	-	-
Mandarin	<5	-	-	-	-
‘Ōlelo Hawai‘i	6	902	3.7%	0.7%	6.7%
Pidgin	<5	-	-	-	-
Spanish	<5	-	-	-	-
Tagalog	11	1,334	5.4%	0.8%	10%
Thai	<5	-	-	-	-
Visayan	<5	-	-	-	-
Does your household own or rent this residence?					
Own	133	19,099	77.3%	67.8%	86.8%
Rent	40	5,378	21.8%	12.4%	31.1%
Other	<5	-	-	-	-
Unsure	0	-	-	-	-
Declined	0	-	-	-	-
If own, has your household experienced loss of homeowners insurance coverage or inability to pay due to rising costs in the past year? (n=133)					
Yes	9	1,863	9.8%	0.8%	18.6%
No	118	16,510	86.4%	77.1%	95.8%
Unsure	5	608	3.2%	0%	6.4%
Declined	<5	-	-	-	-

Table 4. Questions related to Evacuation Plans on the 2026 Kaua'i CASPER (n = 175)

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
Does your household have the following emergency plans:					
Communications plan, such as a list of phone numbers and a designated out-of-town contact					
Yes	124	18,142	73.4%	67.0%	79.9%
No	40	5,150	20.8%	15.2%	26.5%
Unsure	10	1,302	5.3%	2.0%	8.6%
Declined	<5	-	-	-	-
Designated meeting place immediately outside your home or close by in your neighborhood					
Yes	100	14,600	59.1%	49.5%	68.7%
No	59	8,065	32.6%	24.4%	40.9%
Unsure	15	1,930	7.8%	4.1%	11.5%
Declined	<5	-	-	-	-
Copies of important documents in a safe location such as a waterproof bag					
Yes	121	17,636	71.4%	64.5%	78.3%
No	47	6,186	25.0%	18.1%	31.9%
Unsure	5	635	2.6%	0.4%	4.8%
Declined	<5	-	-	-	-
Is anyone in your household dependent on medical equipment that runs on electricity or medication that requires refrigeration?					
Yes	21	2,589	10.5%	6.0%	15.0%
No	151	21,750	88.0%	83.1%	93.0%
Unsure	<5	-	-	-	-
Declined	<5	-	-	-	-
If yes, does your household have a backup power supply in the event of a power outage? (n=21)					
Yes	12	1,471	56.8%	30.9%	82.8%
No	9	1,118	43.2%	17.2%	69.1%
Unsure	0	-	-	-	-
Declined	0	-	-	-	-
Is your household familiar with the tsunami evacuation zones on Kaua'i islandwide?					
Yes	143	20,723	83.9%	78.1%	89.6%
No	19	2,361	9.6%	4.8%	14.3%
Unsure	13	1,628	6.6%	2.5%	10.7%
Declined	0	-	-	-	-

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
If no, does your household know where to find tsunami evacuation zone information? (n=19)					
Yes	10	1,263	53.5%	35.3%	71.7%
No	9	1,098	46.5%	28.3%	64.7%
Unsure	0	-	-	-	-
Declined	0	-	-	-	-
Has your household taken any measures to protect your home from wildfires?					
Yes	125	17,310	70.1%	61.6%	78.5%
No	39	6,088	24.6%	16.3%	33.0%
Unsure	8	961	3.9%	1.1%	6.7%
Declined	<5	-	-	-	-
Have you or anyone in your household signed up to receive weather and other disaster-related alerts?					
Yes	140	20,174	81.6%	74.9%	88.3%
No	25	3,185	12.9%	7.3%	18.5%
Unsure	10	1,353	5.5%	2.0%	9.0%
Declined	0	-	-	-	-
Is your household familiar with the Kauaʻi Emergency Management Agency's website Kauai.gov/kema?					
Yes	97	13,654	55.3%	45.4%	65.2%
No	61	8,571	34.7%	25.4%	43.9%
Unsure	16	2,322	9.4%	3.8%	15.0%
Declined	<5	-	-	-	-
If Kauaʻi was threatened by a hurricane, where would your HH seek shelter for each category of storm?					
Category 1					
Shelter in place at home	134	17,459	70.7%	59.6%	81.7%
Friend/Family's home	13	2,016	8.2%	3.3%	13.0%
Public Shelter	16	2,981	12.1%	4.1%	20.1%
Workplace	<5	-	-	-	-
Other	5	1,373	5.6%	0.0%	12.6%
Unsure	6	765	3.1%	0.2%	6.0%
Declined	0	-	-	-	-
Category 2					
Shelter in place at home	114	14,812	59.9%	48.8%	71.1%
Friend/Family's home	16	2,397	9.7%	4.0%	15.5%
Public Shelter	26	4,264	17.3%	9.0%	25.5%
Workplace	<5	-	-	-	-
Other	8	1,726	7.0%	0.0%	14.2%
Unsure	8	1,141	4.6%	0.7%	8.5%
Declined	0	-	-	-	-

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
Category 3					
Shelter in place at home	92	12,046	48.8%	38.5%	59.0%
Friend/Family's home	18	2,624	10.6%	5.6%	15.6%
Public Shelter	44	6,641	26.9%	18.5%	35.2%
Workplace	<5	-	-	-	-
Other	7	1,608	6.5%	0.0%	13.7%
Unsure	10	1,302	5.3%	2.0%	8.6%
Declined	0	-	-	-	-
Category 4					
Shelter in place at home	78	10,340	41.8%	32.1%	51.6%
Friend/Family's home	22	3,134	12.7%	7.3%	18.0%
Public Shelter	51	7,484	30.3%	21.6%	39.0%
Workplace	<5	-	-	-	-
Other	8	1,726	7.0%	0.0%	14.2%
Unsure	12	1,557	6.3%	2.6%	10.0%
Declined	<5	-	-	-	-
Category 5					
Shelter in place at home	69	9,194	37.2%	27.6%	46.9%
Friend/Family's home	24	3,369	13.6%	7.8%	19.4%
Public Shelter	52	7,602	30.8%	21.9%	39.7%
Workplace	<5	-	-	-	-
Other	9	1,863	7.5%	0.3%	14.8%
Unsure	17	2,212	9.0%	4.6%	13.3%
Declined	<5	-	-	-	-
What main barrier might prevent your household from evacuating for a disaster when advised to do so?					
Concern about leaving property vacant	10	1,302	5.3%	2.4%	8.1%
Uncertainty about where to go	<5	-	-	-	-
Traffic congestion	30	3,891	15.8%	9.4%	22.1%
Evacuation routes blocked (debris/flooding)	17	2,114	8.6%	4.1%	13.0%
Health or mobility issues	<5	-	-	-	-
Concern about leaving pets	19	3,142	12.7%	5.4%	20.1%
No barriers (household will evacuate)	50	7,574	30.7%	19.8%	41.5%
No barriers (household would not evacuate)	24	3,534	14.3%	6.7%	21.9%
Other	<5	-	-	-	-
Unsure	11	1,334	5.4%	2.1%	8.8%
Declined	<5	-	-	-	-

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
Has your household planned for additional emergency and evacuation needs of vulnerable members such as children, the elderly, those with certain medical conditions, or pets?					
Not Applicable	46	5,935	24.0%	15.8%	32.3%
Yes	57	8,904	36.0%	26.6%	45.5%
No	56	7,798	31.6%	23.4%	39.8%
Unsure	15	1,957	7.9%	4.2%	11.7%
Declined	<5	-	-	-	-

Table 5. Questions related to Infectious Disease on the 2026 Kaua'i CASPER (n = 175)

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
Is your household aware of the ongoing measles outbreaks on the mainland or recent measles cases in Hawai'i?					
Yes	142	19,581	79.2%	70.0%	86.2%
No	27	4,228	17.1%	10.5%	26.6%
Unsure	6	902	3.7%	1.6%	8.2%
Declined	0	-	-	-	-
How concerned is your household about the impact of measles on Kaua'i?					
Very concerned	34	5,750	23.3%	14.9%	34.4%
Somewhat concerned	60	7,692	31.1%	23.4%	40.1%
Not concerned	70	9,814	39.7%	31.5%	48.5%
Unsure	11	1,455	5.9%	3.0%	11.1%
Declined	0	-	-	-	-
Is your household aware of the recent chickenpox outbreak on Kaua'i?					
Yes	80	10,928	44.2%	34.2%	54.7%
No	87	12,795	51.8%	41.3%	62.1%
Unsure	8	988	4.0%	1.6%	9.4%
Declined	0	-	-	-	-
How concerned is your household about the impact of chickenpox on Kaua'i?					
Very concerned	28	4,997	20.2%	11.9%	32.3%
Somewhat concerned	56	7,323	29.6%	21.7%	39.0%
Not concerned	72	10,069	40.7%	32.8%	49.2%
Unsure	18	2,204	8.9%	5.2%	14.8%
Declined	<5	-	-	-	-
How important does your household think it is to stay up to date on recommended vaccines?					
Very important	107	15,290	61.9%	53.6%	69.5%
Somewhat important	43	6,100	24.7%	18.1%	32.8%
Not important	15	1,863	7.5%	4.6%	12.0%
Unsure	6	792	3.2%	1.3%	7.9%
Declined	<5	-	-	-	-
How concerned is your household about mosquito-borne diseases such as dengue, Zika, and chikungunya becoming established in Hawai'i?					
Very concerned	65	10,093	40.8%	32.4%	49.8%
Somewhat concerned	61	8,273	33.5%	26.6%	41.1%
Not concerned	40	5,248	21.2%	15.2%	28.8%
Unsure	9	1,098	4.4%	2.1%	9.3%
Declined	0	-	-	-	-

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
How often does your household take measures to prevent mosquitoes from breeding on your property?					
Daily	50	7,504	30.4%	22.8%	39.1%
Weekly	52	7,308	29.6%	22.3%	38.1%
Monthly	23	2,981	12.1%	7.5%	18.9%
A few times a year	18	2,608	10.6%	6.6%	16.4%
Never	18	2,557	10.3%	6.4%	16.3%
Unsure	12	1,498	6.1%	3.8%	9.6%
Declined	<5	-	-	-	-

Table 6. General Health and Well-being Questions on the 2026 Kaua'i CASPER (n = 175)

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits		
Do your HH members have a specific doctor/clinic/health center they usually go to for care?						
All	152	21801	88.2%	83.8%	92.6%	
Most	11	1420	5.8%	2.5%	9.0%	
Some	6	745	3.0%	0.3%	5.7%	
None	<5	-	-	-	-	
Unsure	<5	-	-	-	-	
Declined	<5	-	-	-	-	
Have your household members seen their regular healthcare provider in the last year?						
All	140	20197	81.7%	74.9%	88.6%	
Most	12	1545	6.3%	2.7%	9.8%	
Some	12	1510	6.1%	1.7%	10.5%	
None	8	1087	4.4%	1.2%	7.6%	
Unsure	<5	-	-	-	-	
Declined	<5	-	-	-	-	
In the past 12 months, did any members of your household delay or skip medical care, prescription medication, or dental care because they couldn't afford it?						
Yes	25	3436	13.9%	8.3%	19.5%	
No	146	20738	83.9%	77.6%	90.3%	
Unsure	<5	-	-	-	-	
Declined	<5	-	-	-	-	
On a scale of 1-5, with 1 being very poor and 5 being very good: How would you rate your households current physical health and well-being?						
1	0	-	-	-	-	
2	0	-	-	-	-	
3	19	2,538	10.3%	6.1%	14.4%	
4	64	9,673	39.1%	29.2%	49.1%	
5	90	12,266	49.6%	40.5%	58.8%	
Unsure	<5	-	-	-	-	
Declined	0	-	-	-	-	
On a scale of 1-5, with 1 being very poor and 5 being very good: How would you rate your households current mental health and well-being?						
1	0	-	-	-	-	
2	<5	-	-	-	-	
3	14	1,914	7.8%	3.7%	11.8%	
4	48	7,084	28.7%	20.0%	37.4%	
5	107	14,968	60.6%	51.2%	70.0%	
Unsure	5	608	2.5%	0.4%	4.6%	
Declined	0	-	-	-	-	

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
On a scale of 1-5, with 1 being very disconnected and 5 being very connected: How connected does your household feel to the Kaua'i community?					
1 (very disconnected)	<5	-	-	-	-
2 (somewhat disconnected)	<5	-	-	-	-
3 (neutral)	31	3,824	15.5%	9.1%	21.9%
4 (somewhat connected)	49	6,511	26.4%	19.5%	33.2%
5 (very connected)	86	13,121	53.1%	43.8%	62.4%
Unsure	<5	-	-	-	-
Declined	0	-	-	-	-
How often does your household get together with friends, relatives, or neighbors?					
Daily	22	3,573	14.5%	7.1%	21.8%
A few times per week	43	5,731	23.2%	15.5%	30.9%
Weekly	48	6,402	25.9%	19.3%	32.6%
A few times per month	38	5,939	24.0%	15.6%	32.4%
Rarely	20	2,557	10.4%	5.3%	15.4%
Never	0	-	-	-	-
Unsure	<5	-	-	-	-
Declined	<5	-	-	-	-
How often does your household attend church, community groups, or club meetings?					
Daily	<5	-	-	-	-
A few times per week	19	2577	10.4%	5.2%	15.6%
Weekly	48	6288	25.4%	19.0%	31.9%
A few times per month	34	5617	22.7%	13.2%	32.3%
Rarely	41	5578	22.6%	15.8%	29.4%
Never	26	3695	15.0%	9.7%	20.2%
Unsure	<5	-	-	-	-
Declined	<5	-	-	-	-
How concerned is your household about your ability to pay the next month's rent or mortgage?					
Very concerned	14	1,812	7.3%	2.8%	11.9%
Somewhat concerned	21	2,730	11.1%	5.0%	17.1%
Not concerned	129	18,816	76.1%	68.4%	83.9%
Unsure	7	843	3.4%	1.1%	5.8%
Declined	<5	-	-	-	-

Response	Frequency	Estimated HH	% of HH	95% Confidence Limits	
During the past 12 months how often did the food that your household bought not last, and you didn't have money to get more?					
Always	<5	-	-	-	-
Usually	<5	-	-	-	-
Sometimes	9	1,145	4.6%	0.7%	8.5%
Rarely	20	2,597	10.5%	5.9%	15.1%
Never	137	19,832	80.3%	73.0%	87.5%
Unsure	<5	-	-	-	-
Declined	<5	-	-	-	-
During the past 12 months, has your household received food support through a government program such as SNAP/WIC or free groceries or meals from a charitable organization such as a food bank or pantry?					
Yes	33	4,193	17.0%	10.4%	23.6%
No	138	20,028	81.1%	73.9%	88.2%
Unsure	<5	-	-	-	-
Decline	<5	-	-	-	-
Naloxone is used to treat opioid drug overdoses. Is your household aware that naloxone is available for free on Kaua'i?					
Yes	71	10,234	41.4%	32.0%	50.8%
No	93	13,117	53.1%	43.6%	62.6%
Unsure	11	1,361	5.5%	1.8%	9.2%
Declined	0	-	-	-	-
Does your household have any concerns or needs that we have not already discussed?					
Yes	14	1773	7.2%	2.6%	11.7%
No	161	22939	92.8%	88.3%	97.4%
Unsure	0	-	-	-	-
Declined	0	-	-	-	-

APPENDIX B:

Table 7. Longitudinal analysis of 2019 - 2026 Kaua'i CASPERs

Compared Years	χ^2	N	DF	P-Value	Percent Difference**
Measures to to protect home from wildfires					
2024 vs 2026	5.5	339	1	0.03	+15%
Signed up to receive weather and other disaster-related alerts					
2019 vs 2026	4.3	341	1	0.05	+11%
Very important to stay up-to-date on recommended vaccines					
2019 vs 2025	6.1	357	1	0.01	-16%
2019 vs 2026	3.5	347	1	0.07	N/A

** Chi-square tests and percent differences were calculated using contingency tables. Answers 'Decline' and 'Unsure' were dropped for these calculations. Variables containing more than two categories were grouped into two categories.

APPENDIX C:

To be completed by team BEFORE the interview																																																			
Date (MM/DD/YY):		Cluster Number:																																																	
		Survey Number:																																																	
First, we would like to ask about basic household information																																																			
Q1. Including yourself, how many people live in your HH? _____ Including yourself, how many people are : <table border="1"> <tr> <td>Less than 2 years old</td> <td></td> </tr> <tr> <td>2 - 17 years old</td> <td></td> </tr> <tr> <td>18 - 64 years old</td> <td></td> </tr> <tr> <td>65 or over</td> <td></td> </tr> </table>		Less than 2 years old		2 - 17 years old		18 - 64 years old		65 or over		Q2a. What languages are spoken in your household? (List all that apply) - English - Other _____ - Unsure - Declined																																									
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Next, we would like to ask you about your household's emergency and evacuation plans																																																			
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4 (130 - 156 mph)																																																			
5 (157+ mph)																																																			
Q11. What main barrier might prevent your HH from evacuating for a disaster when advised to do so? (select one best answer) <table border="0"> <tr> <td> - Concern about leaving property vacant - Uncertainty about where to go - Traffic congestion - Evacuation routes blocked due to debris/flooding - Health or mobility issues - Concern about leaving pet(s) </td> <td> - No barriers (HH will evacuate) - No barriers (but HH would not evacuate) - Other _____ - Unsure - Declined </td> </tr> </table>				- Concern about leaving property vacant - Uncertainty about where to go - Traffic congestion - Evacuation routes blocked due to debris/flooding - Health or mobility issues - Concern about leaving pet(s)	- No barriers (HH will evacuate) - No barriers (but HH would not evacuate) - Other _____ - Unsure - Declined																																														
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Q12. Has your household planned for additional emergency and evacuation needs of vulnerable members such as children, the elderly, those with certain medical conditions, or pets? - Not Applicable - Yes - No - Unsure - Declined																																																			

Next, we would like to ask you a few questions related to infectious disease
Q13. Is your HH aware of the ongoing measles outbreaks on the mainland or recent measles cases in Hawaii? • Yes • No • Unsure • Declined
Q14. How concerned is your HH about the impact of measles on Kauai? • Very concerned • Somewhat concerned • Not concerned • Unsure • Declined
Q15. Is your HH aware of the recent chickenpox outbreak on Kauai? • Yes • No • Unsure • Declined
Q16. How concerned is your HH about the impact of chickenpox on Kauai? • Very concerned • Somewhat concerned • Not concerned • Unsure • Declined
Q17. How important does your HH think it is to stay up to date on recommended vaccines? • Very important • Somewhat important • Not important • Unsure • Declined
Q18. Mosquitoes in Hawaii do not currently carry diseases like dengue, zika and chikungunya. How worried is your HH about those diseases becoming established in Hawaii? • Very concerned • Somewhat concerned • Not concerned • Unsure • Declined
Q19. How often does your HH take measures to prevent mosquitoes from breeding on your property, such as getting rid of standing water? • Daily • Weekly • Monthly • A few times per year • Once a year • Never • Unsure • Declined
Lastly, we would like to ask you some questions about your general health and well-being
Q20. Do your HH members have a specific doctor, clinic, or health center they usually go to for care? • All • Most • Some • None • Unsure • Declined
Q21. Have your HH members seen their regular healthcare provider in the last year? • All • Most • Some • None • Unsure • Declined
Q22. In the past 12 months, did any members of your HH delay or skip medical care, prescription medicine, or dental care because they couldn't afford it? • Yes • No • Unsure • Declined
Q23. On a scale of 1-5, with 1 being very poor and 5 being very good... a) How would you rate your HH's current physical health and well-being? • 1 • 2 • 3 • 4 • 5 • Unsure • Declined b) How would you rate your HH's current mental health and well-being? • 1 • 2 • 3 • 4 • 5 • Unsure • Declined
Q24. On a scale of 1 – 5, with 1 being very disconnected and 5 being very connected, how connected does your HH feel to the Kauai community? • 1 (very disconnected) • 2 (somewhat disconnected) • 3 (neutral) • 4 (somewhat connected) • 5 (very connected) • Unsure • Declined
Q25. How often does your HH get together with friends, relatives, or neighbors? • Daily • A few times per week • Weekly • A few times per month • Rarely • Never • Unsure • Declined
Q26. How often does your HH attend church, community groups, or club meetings? • Daily • A few times per week • Weekly • A few times per month • Rarely • Never • Unsure • Declined
Q27. How concerned is your HH about your ability to pay the next month's rent or mortgage? • Veryconcerned • Somewhat concerned • Not concerned • Unsure • Declined
Q28. During the past 12 months how often did the food that your HH bought not last, and you didn't have money to get more? Was that... • Always • Usually • Sometimes • Rarely • Never • Unsure • Declined
Q29. During the past 12 months, has your HH received food support through a government program such as SNAP/WIC or free groceries or meals from a charitable organization such as a food bank or food pantry in order to meet your household's needs? • Yes • No • Unsure • Declined
Q30. Naloxone is used to treat opioid drug overdoses. Is your HH aware that naloxone is available for free on Kauai? • Yes • No • Unsure • Declined
Q31. Does your HH have any concerns or needs that we have not already discussed? • Yes • No • Unsure • Declined
Q32. We conduct this survey every year on Kauai. Does your HH have recommendations for improvement or any suggested topics you think we should include in future surveys? _____



STATE OF HAWAII
KA MOKU 'ĀINA O HAWAII

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA

DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO

DR. KENNETH FINK
DIRECTOR
KA LUNA HO'OKELE

**KAUA'I DISTRICT HEALTH OFFICE TO CONDUCT CASPER SURVEY
TO ASSESS EMERGENCY PREPAREDNESS**

25-067

FOR IMMEDIATE RELEASE
June 5, 2025

LĪHU'E, Hawai'i — The Hawai'i Department of Health's (DOH) Kaua'i District Health Office will conduct a Community Assessment for Public Health Emergency Response (CASPER) survey in June to assess the emergency preparedness level of Kaua'i households.

"By asking households about their emergency supplies and evacuation plans, CASPER surveys enable the Kaua'i District Health Office and the county to better meet our community's needs before, during and after a disaster," said Lauren Guest, the Kaua'i Epidemiology and Laboratory Capacity Program (ELC) deputy district health officer. "CASPER surveys also serve as a valuable training opportunity for our staff so that they are adequately trained to conduct rapid needs assessments in the field prior to a local disaster."

Survey teams will go door-to-door June 23-27 in 30 randomly selected census blocks. Seven houses within each block will be systematically selected and surveyed for a total of 210 attempted household-level surveys. Teams comprise DOH staff with support from the Kaua'i Medical Reserve Corps and the Kaua'i Emergency Management Agency.

The survey takes less than 10 minutes to complete, and participation is voluntary. All responses are confidential, no names or addresses will be collected. Selected households will be asked about their emergency and evacuation plans; concerns regarding climate change and infectious diseases; and general questions about life on Kaua'i.

Team members will wear vests identifying themselves as part of the DOH survey team and will carry identification cards. Selected households will be offered the opportunity to complete the survey over the phone, if preferred.

The CASPER survey methodology was developed by the Centers for Disease Control and Prevention (CDC) to rapidly assess the health and other resource needs of a community after a disaster.

"Mahalo to our residents for their support and participation," Guest said.

This will be the department's eighth CASPER survey conducted on Kaua'i. To view prior CASPER survey reports, please visit: <https://health.hawaii.gov/kauai/Casper/>

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Media contact:

Kristen Wong
Information Specialist
Communications Office, Hawaii State Department of Health, State of Hawai'i
Mobile: 808-953-9616
Email: kristen.wong@doh.hawaii.gov

APPENDIX E

JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII

STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO



KAUAI DISTRICT HEALTH OFFICE
3040 UMI STREET
LIHUE, HAWAII 96766

KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'OLELE

LAUREN T. GUEST, MPH
ACTING DISTRICT HEALTH OFFICER

In reply, please refer to:
File:

Community Assessment for Public Health Emergency Response

Hello, we are _____ and _____ with the Department of Health. We are doing a short survey to assess household emergency preparedness. Your house was randomly selected to participate, and the survey will take about 10 minutes. It is completely anonymous — we will not collect your name or address. Do you have a few minutes to complete the survey?

[WAIT FOR RESPONDENT TO CLEARLY ANSWER YES OR NO].

[IF NO, THANK THEM FOR THEIR TIME.] Thank you very much for your time. Here is some information you might find useful.

[IF YES, CONTINUE.] Thank you so much. Can you please confirm that you are over the age of 18 and live on Kauai at least 6 months per year?

[IF NO, THANK THEM FOR THEIR TIME.] Thank you for your interest. Unfortunately, you are not eligible to participate in this project. Here is some information you might find useful.

[IF YES, CONTINUE TO SURVEY.]

*If they would like confirmation that you were sent by the Hawaii State Department of Health, please call **Lauren Guest**, Acting Kauai District Health Officer at 808-241-3496.*

APPENDIX F

JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'ANA O KA MOKU'ĀNA O HAWAII

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KA LUNA HO'OLELE

LAUREN T. GUEST, MPH
ACTING DISTRICT HEALTH OFFICER

In reply, please refer to:
File:

Community Assessment for Public Health Emergency Response (CASPER) Survey

Aloha,

June 1st was the first official day of hurricane season. The Kauai District Health Office is conducting a survey from June 15th through June 19th to assess the emergency preparedness of Kauai residents. Your household is one of 210 randomly selected island-wide to participate. The survey will take about 10 minutes of your time. It is voluntary and anonymous — we will not collect your name or address.

We stopped by while you were out of the house, but we really need your participation. The information gathered will help us to improve DOH's response to emergencies.

Please call **(808)241-3555** between the hours of 6 am and 9 pm & provide the identification # on the outside of your envelope in order to:

- 1) complete your interview over the phone,
- 2) schedule a time for the survey team to stop by again in-person, or
- 3) let us know that you do not wish to participate

If we do not hear back from you, we will stop by again to see if we can reach you. If you don't receive this letter by June 19th, there is no need to call us back as the survey will already be completed.

Thank you for your consideration,

Lauren T. Guest, MPH
Acting Kauai District Health Officer

If you have questions regarding this survey, please call:
Lauren Guest, Acting Kauai District Health Officer, at 808-241-3496

APPENDIX C

Community Assessment for Public Health Emergency Response (CASPER) Tracking Form

County: _____ Cluster # (1-30): _____ Houses in the Cluster: _____ Team: _____ Date of Interview: ____ / ____ / ____

Instructions: Use one tracking form per cluster. Check where appropriate, but try to choose only one best option for each of the three categories.

Household Number	1	2	3	4	5	6	7	8	9	10	11	12
Survey Number (from questionnaire)												
Access												
House inaccessible	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Answer												
Appears vacant	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
First visit	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
No answer after Second Visit (indicate time)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Third visit	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Interview												
Interview Completed	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Refused to participate	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Ineligible to participate	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Partial interview completed (indicate return time)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
"Come back later" (indicate return time)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Translator needed (specify language)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

*REMINDER: You should not pass this line representing 7 selected (and interviewed) houses unless you replaced a household.

Houses are only eligible for replacement if:

- 1) House is inaccessible (due to locked gate, vicious dogs, damage to property, etc.)
- 2) House appears vacant (nobody lives here anymore)
- 3) Household refuses to participate
- 4) No one is home after three attempts made at least one hour apart
- 5) Household is not eligible to participate (e.g. tourist—to be eligible, they should live here at least 11 months of the year)

CASPER Referral Form

2026 Confidential Referral Form

Date: ____/____/2026 Time: __:__

Interviewer's Name: _____

Contact Information for the individual needing the referral:

Name: _____

Phone Number: _____

E-mail: _____

Referral Type (Check all that apply)

☐ Behavioral Health ☐ Medical/Dental ☐ Case Management ☐ Other

Summary of Needs (please provide as much information as possible so the appropriate referral can be made):

[illegible]

This section to be completed by the CASPER Operations Section

Referred to:



Hawaii CASPER Interview Tips



BEFORE THE INTERVIEW

- Practice with your partner
- Dress appropriately: comfortable clothing; closed-toed shoes; vest & ID
- Assign roles (e.g. driving, navigating, interviewing, etc.)

DURING THE INTERVIEW

- Introduce yourself
- Show empathy and respect
- Remind respondents that their responses are confidential and participation voluntary

ENDING THE INTERVIEW

- Look over the entire questionnaire for completeness
- Thank the respondent and provide educational materials
- Complete referral form when necessary

DOS AND DON'TS OF STANDARDIZATION

- **DO** ask the questions in the **same order** with the **exact wording**
- **DO** read the entire question
- **DO** record answers verbatim
- If respondent needs clarification, **repeat the question first**. If he/she still needs clarification, make sure that you are not changing the nature of the question.
- **DON'T** rephrase questions
- **DON'T** pre-fill answers
- **DON'T** try to finish the respondent's sentences

TRACKING FORM

- Used for tracking **every** household sampled (this means every house you attempt an interview at)
- Each cluster collected on a separate tracking form
- Allows for calculation of response rates - it is **very important** that it is correct and complete
- If necessary, write information to identify households to return to or any notes that you may need to take (e.g., why the household is inaccessible) on the back of the form

SYSTEMATIC SAMPLING OF HOUSEHOLDS

- Begin surveying at random starting point in cluster
- If specific interview addresses are not provided, select the nearest house and begin counting
- When you reach your first nth house (calculated by dividing households in cluster by 7), attempt an interview
- Complete tracking form **at every nth house** to indicate if interview was successful or if another attempt/replacement is needed
- Continue in serpentine manner, stopping at every nth house
- **Apartments/Condos/High Rises:** Count each apartment and condo units as individual houses
- **Commercial Buildings/Hotels:** Do not count commercial buildings or hotels when counting every nth house - these are not eligible for CASPER participation
- **Replacement:** Households can only be replaced if they meet one or more of the following categories:
 - 1) inaccessible,
 - 2) vacant,
 - 3) household refuses, or
 - 4) three attempts have been made with no answer

[Call OPS with questions related to sampling or replacement.](#)

SURVEY TIPS

- Navigate to HH address and knock
- If answered, read informed consent
- If no answer, leave letter with the cluster number and HH number (e.g. 30-5)
- Mark tracking sheet!

SURVEY TIPS

All Forms

- Begin survey following verbal consent
 - If household not accessible or refuses, note on tracking sheet (if refusal, provide important document bag to household)
- Note which survey number corresponds to which household on tracking sheet
- If helpful, present survey (on tablet or paper) to households to read along with survey team
- Indicate any issues on tracking form for review

SURVEY TIPS

Electronic Survey Forms

- Ensure tablets are charged before departure
 - Tablet passcode:
 - Electronic application: EpiCollect 5
- Save each survey entry following completion
- Upload data upon return to command center each day

Questions or concerns? Contact OPS:

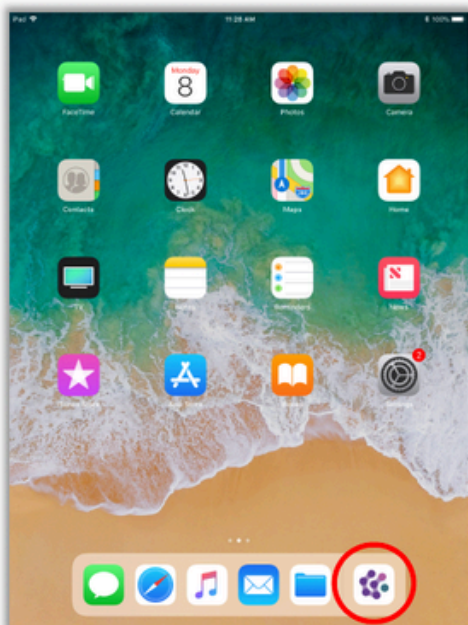
APPENDIX J

CASPER Electronic Data Collection Reference Sheet

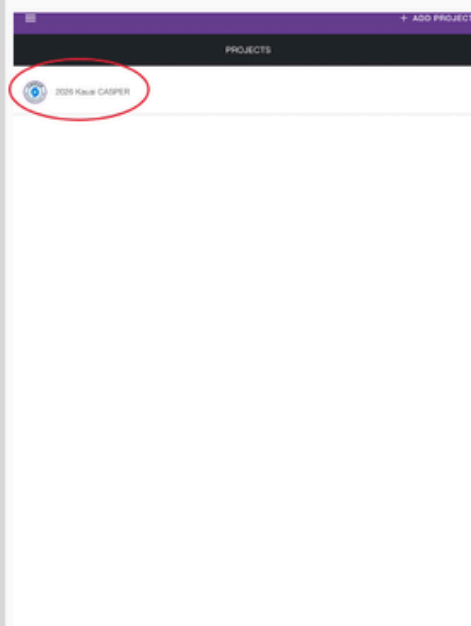
Tablet Passcode: 101010



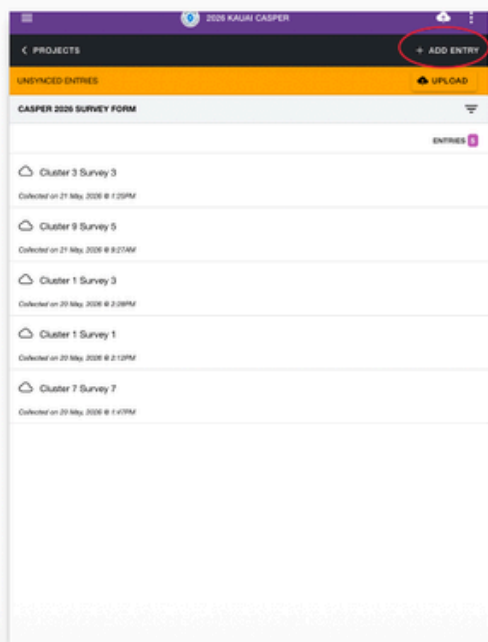
1 Open the Epi Collect application



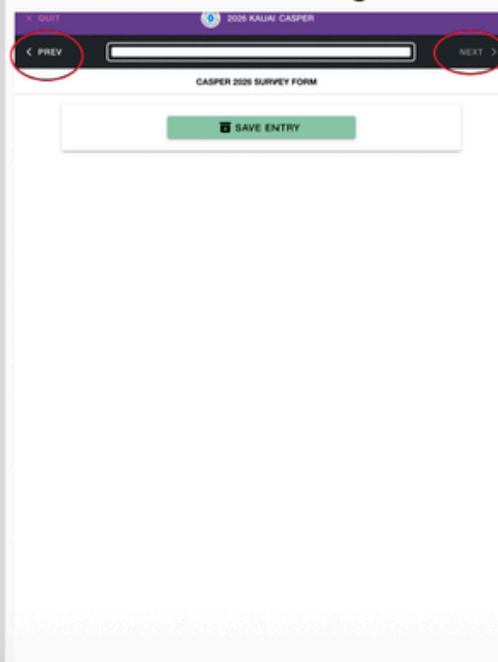
2 Select project titled "2026 Kauai CASPER"



3 To complete a new survey form, select "+ Add entry"



4 Begin the survey. Select "Next >" to move on and "< Prev" to go back



CASPER Electronic Data Collection Reference Sheet

Tablet Passcode: 101010



Missing Fields

The system will prompt you if something is left blank

Survey Tip

To save and return later (if survey is interrupted), click "Quit" and "Save"

- 5 When the questionnaire is complete, click "Save Entry"

- 6 To upload data (upon return to OPS), click "Upload Now"

APPENDIX K

The following items were included in drawstring backpacks that were provided to participating households...

- Basic first aid kit
- Waterproof bag for storage of important documents
- Educational materials:
 - Hawai'i Quality of Life Survey Flyer
 - KDHO 2025 CASPER Infographic
 - HDOH Take 10 Brochure
 - HDOH Wastewater Surveillance Flyer
 - HDOH Rat Lungworm Disease Flyer
 - HDOH Fight The Bite Flyer
 - HDOH Hawaii Cares 988
 - CAMHD Mental Resource Flyer
 - Kauai Community Resource Directory
 - Youth Supporting Youth Flyer
 - KIUC Emergency Power Planning Brochure
 - CDC Measles Infographic

