

ADVISORY COMMISSION ON DRUG ABUSE AND CONTROLLED SUBSTANCES (HACDACs)

Alcohol and Drug Abuse Division (ADAD), Department of Health (DOH), State of Hawai'i

Kākuhihewa Building, 601 Kamokila Boulevard, Room 360, Kapolei, Hawai'i

January 28, 2025

9:00 am – 11:00 am

Members Present: Ku ulei Salzer-Vitale, MSW, Co-Chair; Lilinoe Kauahikua, MSW, Co-Chair; Diana Felton, MD, Vice Chair; Emily Andrade; Jon Fujii, MBA; John Paul Moses III, APRN-R; Jawana Ready, MD; Greg Tjapkes.

Members Absent: Erika Vargas, LCSW.

Staff Present: Robyn Loudermilk, AICP; Merrick Lambaco

Guests Present: Bree Kapilii, Jeanell Corpuz.

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ ACTIONS/ CONCLUSIONS	PERSON(S) RESPONSIBLE	DUE DATE
1. Call to Order:	The meeting was called to order at 9:02 am.			
2. Presentation on the DOH Syringe Exchange Program and latest data on Hepatitis C in Hawaii	<p>Mr. Thaddeus Pham of the DOH Harm Reduction Services Branch presented on the DOH Syringe Exchange Program and provided latest data on Hepatitis C in Hawaii.</p> <ul style="list-style-type: none"> • Approximately 88% of Hawaii residents with hepatitis C died earlier than the rest of the State with almost 40% dying before retirement age. Among DOH syringe service program (SSP) participants, more than half were exposed to hepatitis C. Additionally, six out of ten SSP participants with hepatitis C did not seek care. • “I Wanna Live a Full Life” Perceptions of Hepatitis C Treatment Access Among People Who Use Drugs in Honolulu Hawaii”; provides findings of a 2023 qualitative study conducted with SSP participants on the streets of Chinatown. The purpose of the study was to understand: 1) thoughts of people using drugs about hepatitis C; i.e. perceptions, resources, and treatment; 2) provide an opportunity to elevate the voices of marginalized persons who normally do not get to share; and 3) develop and distribute reports and data products to elevate qualitative research. The title is from a study participant response: “I wanna live a full life”. • Culturally congruent research utilizing a “Talk Story” interview approach with 15 adults. Asking about what they knew about hepatitis C disease, its treatment, challenges encountered, opportunities, and other thoughts they wanted to share. • A number of themes emerged for each topic; <ul style="list-style-type: none"> ○ Disease: personal connection, inconsistent knowledge, and concern about health ○ Treatment: personal connection, aware of old regime, and unaware of but not interested in new regimen ○ Challenges: perceived stigma, ongoing substance use, and logistics of making an appointment ○ Opportunities: co-locate services at syringe exchange, have print campaign materials at the syringe exchange; and use urgent, direct, and short messaging for the print materials. 			

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	<ul style="list-style-type: none"> ○ Other Insights: appreciation for syringe exchange as service hub and request to address basic needs. ● Highlighted study methodology and limitations of qualitative research. ● Report findings were incorporated into HepFree 2030, a statewide strategy to address hepatitis C; used to develop a series of reports, data products, and media dissemination easily accessible to the public; and collaborated with SSP participants to develop the suggested print campaign. ● Also resulted in funding for a pilot program to develop a syringe exchanged based treatment, testing, and peer navigation program. <p>Co-Chair Salzer led the group discussion on the presentation.</p> <p>In response to questions, Mr. Pham noted no additional barriers were identified for Native Hawaiian and Pacific Islanders. There was one request for culturally congruent services, however, transportation logistics was an issue. There were also no language barriers, though many people spoke pidgin or Mahu pidgin, which uses very specific terms. This would be a challenge for another interviewer not familiar w/pidgin or Mahu pidgin. If someone wants to attempt a similar study would recommend being in the community as much as possible, to learn and understand its dynamics, and help build trust. Thus, having people open up as qualitative data provides context to quantitative data. Did not specifically ask about health co-morbidities, however, it came up informally when talking about other issues.</p> <p>Vice Chair Fenton commented that the focus is often on evidence based or trials data. A small sample size provides more insight than a larger more traditional study. Qualitative data can lead towards solutions.</p> <p>Mr. Pham recommendations for inclusion in HACDACS annual report to the Hawaii State Legislature are; center the voices of the people most affected by policy decision, and include youth voices when talking about prevention – What are they seeing and proposing?</p> <p>Commissioner Fujii commented that he is interested to know how Med Quest health plans be more effective in providing treatment to this is curable disease. He also shared that Med Quest does allow for treatment outside of an office.</p> <p>Mr. Pham is aware of, and appreciative of Med Quest allowing for treatment outside of the office. He will be gathering quantitative data on location-based care through the SSP. Such as providing treatment where social services are already being provided. Looking at mobile health vans to serve rural areas to not only screen but also treat. Considering spaces outside of clinics to provide the opportunity to linking people with treatment. Have found that once a person begins hepatitis C treatment and has been successfully cured, it demonstrates that they can engage with a health care provider and that they can successfully achieve something for themselves.</p>			
3. Consideration and approval of meeting minutes of October 22, 2024, and November 26, 2024.	Motion by Commissioner Tjapkes and seconded by Co-Chair Kauahikaua to adopt minutes from the	Motion approved.		

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	October 22, 2024, and the November 26, 2024, meetings. Motion approved.			
<p>4. Community Input:</p> <p>[Pursuant to section 92-3, Hawaii Revised Statutes, all interested persons will have three (3) minutes to speak, i.e., per person, per item, or written testimony can be submitted on agenda items]</p>	<p>No community comments provided.</p>			
<p>5. Alcohol and Drug Abuse Division (ADAD) Report</p> <ul style="list-style-type: none"> • Hawaii Overdose Initiative (HOI) <ul style="list-style-type: none"> o Share observations on the two-day gathering for the launch of the HOI held on January 8 and 9, 2025 at the DOH Developmental Disabilities Division Training Room located in Pearl City, Hawaii. • 2025 Legislative Session <ul style="list-style-type: none"> o ADAD is identifying and reviewing bills related to substance use prevention and treatment. 	<p>Ms. Loudermilk reported on the HOI Launch and the beginning of the 2025 Legislation Session.</p> <ul style="list-style-type: none"> • Thought that the HOI Launch went well. It was well attended with a lot of discussion and engagement amongst the participants. Targeting February 7, 2025, to distribute draft plan. • The last day to introduce bills for the 2025 Legislative Session was January 23, 2025, last Thursday. ADAD continues to identify and review substance use prevention and treatment related bills. And finalizing a list of bills in which ADAD will either provide testimony or follow for information purposes. • A number of cannabis legalization bills have been introduced. ADAD is not the lead program within the DOH for testimony. However, there is a lot of collaboration amongst the DOH divisions and when asked will provide any support to develop testimony. <p>Co-Chair Salzer lead the group discussion on ADAD’s Report.</p> <p>Co-Chair Kauahikaua attended the HOI Launch and commented that it was good. She is concerned that the cultural aspect will be confined to the cultural committee, not throughout the HOI. Suggested that there be an overall cultural committee whose members can go to other working groups for collective conversation. And that this committee also provide</p>			

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	<p>input to HOI projects. Lastly, though not part of the HOI, expressed the need to have a cultural seat on Hawaii Opioid Settlement Advisory Committee (HOSAC).</p> <p>Co-Chair Salzer also attended the HOI Launch and commented that there was good energy, data, and topics. She also shares the same concerns as Co-Chair Kauahikaua about culture. Hopes that there are future meeting; possibly held at least quarterly and on also on the Neighbor Islands. Lastly, noted that HACDACS members can be involved in the HOI through the various working groups.</p> <p>Commissioner Tjapkes also attended the HOI Launch and relayed that post event emails to participants included feedback mechanisms.</p> <p>At the request of Commissioner Andrade, the following clarification between HACDACS, HOI, HOSAC was provided. The HACDACS is established by state law and provides advice to ADAD. While HOSAC was established to distribute and spend Hawaii's share of the National opioid settlement funds. Lastly, the HOI was an initiative by the previous Governor to develop a community-based response for when the opioid crisis on the mainland hit Hawaii.</p> <p>For the Launch, ADAD and HOI did a good job of providing space for culture. Want to ensure that culture becomes the foundation for HOI to build on rather than being a separate entity. Not only Native Hawaiians but all cultures.</p> <p>In response to a question, Ms. Loudermilk confirmed that the report from the HOI Launch is a draft plan. And that there will be an opportunity for participants</p>			

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	<p>to review and provide comments prior to the plan being finalized.</p> <p>Mahalo to ADAD for the relaunch and supporting many voices in the room.</p> <p>In response a request, a listing of bills being followed by ADAD will be part of the February 25, 2025, meeting packet.</p>			
<p>6. Update on meeting topics and presentations for HACDACS meetings in:</p> <ul style="list-style-type: none"> • February 2025 • March 2025 • April 2025 • May 2025 <p>Potential topics include Medical Cannabis Safety and Testing Policies; Harm Reduction Review based on substance use; Status of Residential Treatment Programs and their trends and needs, Prevention Initiatives, Medication Assisted Treatment for Methamphetamine Use Disorder, the intersection of substance use treatment and the criminal justice system. New topic ideas are encouraged.</p>	<p>Chair Salzer led the group discussion related to planning and any schedules or topics that the group would like to discuss:</p> <ul style="list-style-type: none"> • February 2025: VA Pacific Islands Health Care System • March 2025: Harm Reduction Overview and Hawaii Health and Harm Reduction Center • April 2025 Meeting: Findings from the Hawaii Opioid Initiative Needs Assessment • May 2025 Meeting: Primary Prevention Strategic Plan • June 2025 Meeting: Hawaii Opioid Settlement Program • July 2025 Meeting: Harm Reduction Counseling • August or September 2025 Meeting: `Aina Based Harm Reduction 	<p>Contact VA Pacific Islands Health Care System</p> <p>Contact HHHRC</p> <p>Contact Mapuna Labs</p> <p>Contact ADAD</p> <p>Contact ADAD</p> <p>Contact Counselor</p>	<p>Commissioner Ready confirmed</p> <p>Commissioner Moses and ADAD confirmed.</p> <p>ADAD confirmed.</p> <p>ADAD confirmed</p> <p>ADAD</p> <p>Co-Chair Salzer</p>	

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7. Open Forum: Public comments on issues not on the agenda, for consideration for Commissions agenda at its next meeting.	No community comments provided.			
8. Adjournment	The meeting was adjourned at 10:35 am			

Next Meeting: **February 25, 2025**
9:00 am to 11:00 am
Zoom Meeting