Historical, Social, and Cultural Determinants of Mental Health for Native Hawaiians

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Mauli Ola
A Tradition of Health

• “The natives of these islands are in general above the middle size, and well made; they walk very gracefully, run nimbly, and are capable of bearing great fatigue...” (Captain James King)

• “They have very mild & agreeable Tempers and in their dispositions are truly good natured, social, friendly, and humane, possessing much liveness and a constant flow of good Humour.” (David Samwell)
Depopulation, Occupation, and Discrimination

• In the 1800s – the native population was decimated by infectious diseases, such as cholera, influenza, mumps, measles and whooping cough, and smallpox.
  – Rapid and drastic changes to traditional social, political, and economic systems
  – Banning of traditional practices

• 1893 – U.S. supported coup d'état to depose the Sovereign and topple the Kingdom of Hawai‘i.
  – Annexed in 1898 and statehood in 1959
  – Under protest by Native Hawaiians

• Suppression of the native language and customs and marginalization that led to discrimination in education, employment, and housing that continue today.
“Beyond all doubt, psychological traumata of almost intolerable intensity and variety afflicted most Hawaiians after foreigners with their strange artifacts and alien values disrupted the indigenous society. Those new psychological stresses, as well as the new kinds of microbes [diseases], most certainly played important parts in the long dying of the Hawaiian race” (pp. 55–56).

Nā kānaka ‘okuʻu wale aku nō i kau ʻuhane (The people dismissed freely their souls and died)
Significant Mental Health Disparities

**National studies:**
- Suicide is the leading cause of death for NHPIs ages 15-24 (OMH, 2019).
- Higher rates of substance use, sexual activity, carrying a weapon, engaging in a physical altercation, and suicidal ideations/attempts among NHPI high school students other students (Lowry et al., 2011).
- NHPIs 3x less likely to receive mental health services or to receive prescription medications for mental health treatment than non-Hispanic whites (OMH, 2019).
- NHPIs more likely to report serious psychological distress in the past 30 days (4%) than Asians (2%) and the general US population (3%) (Galinsky et al., 2017).

**Hawai‘i studies:**
- NHPIs ages 65+ are 2 and 3x more likely to have severe or moderate depression compared to Asians and the general populations, respectively (Aczon-Armstrong et al., 2013).
- NHs report more adverse childhood events than other ethnic groups (Klest et al., 2013; Ye & Reyes-Salvail, 2014).
- Depression in NHPIs is strongly associated with anxiety, aggression (Makini Jr. et al., 1996), substance use (Kaholokula et al., 1999), and suicide ideation and attempts (Yuen et al., 2000).
- NH women report cultural loss and related stressors as a cause of their depression (Ta et al., 2010).
“Modern Hawaiians seem to suffer from a new kind of depression, a being ‘beaten down’, but not by rain, rather, by a sense of enormous personal loss….caused by two centuries of rapid change away from Hawaiian culture…” (p. 212).

The Native Hawaiian Educational Assessment Project (NHEAP; 1983)
Psychological Perspective

The Kaumaha (depression) Syndrome

- Rooted in a collective sadness and moral outrage for the loss of their culture and nation.
- Associated with oppression, discrimination, racism, poverty, homelessness, imprisonment, and cultural and spiritual disintegration.
- Sadness, sense of hopelessness, anger, and hostility.
Historical Trauma

- Psychological wounding because of past and current transgressions (Sotero, 2006).
  - Intergenerational trauma.

- A chronic race-based type of trauma with serious psychological consequences
  - Depression, anxiety, anger, shame, grief, and social isolation (Mohatt et al., 2014).
  - Survivor guilt, fixation on past trauma, hypervigilance about continued exploitation, and loyalty to ancestral suffering/loss.
Racism

- Over the past 12 months (Kaholokula, 2014)...
  - 48% of Native Hawaiians report feeling racially oppressed ‘often’ to ‘most of the time.’
  - 52% report feeling oppressed ‘sometimes.’

The Stanford Native community protesting the use of “Native” themes at campus frat parties in 2009.
Adverse Effects of Racism

• Among NHs, higher levels of perceived interpersonal racism is strongly associated with...
  – Lower diurnal cortisol levels (Kaholokula et al., 2014).
  – Hypertension risk (Kaholokula et al., 2010; Ing et al., 2019).
  – Depression symptoms (Antonio et al., 2016).
  – Greater psychological distress (Kaholokula et al., 2017).

• Greater cardiovascular reactivity and incomplete recovery in response to racial stressors, especially for subtle (vs. blatant) stressors (Hermosura et al., 2018).
Racism, Coping, and Psychological Distress

Historical Trauma and Substance Use

![Diagram showing the relationship between historical trauma, traumatic events, loss, perceived discrimination, and substance use.]

***p < .001; **p < .01; *p < .05

Note.
Coefficients presented are standardized. Age, sex, and income were entered as covariates in the model and treated as exogenous variables. The paths from age, sex, and income to perceived discrimination and substance use were statistically non-significant (p > .05; 2-tailed).

Pathways from Racism to Negative Health Outcomes

Cultural Resilience and Assets

• Revitalizing traditional values and practices (e.g., language; traditional diets and resource management; and ocean voyaging traditions).

• 93% of Native Hawaiians strongly identify with their Native Hawaiian heritage and culture (Kaholokula, 2017).

• 80% strongly believe it is important to maintain their unique cultural values and practices for psychological wellbeing (Kamehameha Schools, 2014).

• Despite more family adversity, Native Hawaiian adolescents report higher levels of family support, i.e., emotional support (Carlton et al., 2006).

• Culture-based educational strategies lead to better academic performance, cognitive and emotional engagement, education and community engagement, and greater cultural pride and sense of place (Kana‘iaupuni & Ishibashi, 2003, 2005).

Native Hawaiians are (re)turning to their cultural traditions to improve their health and wellbeing.
Culturally Responsive Services

• Client issues
  – Historical trauma and racism can be directly or indirectly related to a client’s health issues
    • Underlying and ever present stressor associated with other socio-environmental (e.g., economic deprivation and unsafe living conditions) and interpersonal stressors (e.g., family and work-related challenges).
    • A person can face multiple disadvantages based on their race, social status, and even gender that reduces his or her capacity for avoiding stress or defusing its effects (Perry et al., 2013).

• System/provider issues
  – Cultural competency or cultural safety
  – Addressing implicit biases and microaggressions

• Therapeutic issues
  – Traditional Hawaiian healing modalities (e.g., Ho‘oponopono)
  – Culturally-adapted evidence-based interventions
  – Culturally grounded interventions
Summary

• Colonization is a key determinant of mental health for Native Hawaiians.

• Racism, both institutional and interpersonal, is a key social determinant of health.
  – Fundamental to the psychological wellbeing of Native Hawaiians is a strong Native Hawaiian identity and the ability to freely express their identity without discrimination.

• Historical trauma and racism effects Native Hawaiians in direct and indirect ways.
Mahalo Nui