



## ABSTRACTS

PULAMA I KE OLA HEALTH CONFERENCE, MAY 21-22, 2008  
"Approaching 2010 - Addressing Hawai'i's Health Disparities"  
University of Hawaii- Hilo University Classroom Building 100

### Session 1: Keynote Presentation

**Title: Health:** Health Disparities: A Human Rights Perspective

**Keynote Speaker:** Cheryl Easley, PhD, RN, American Public Health Association, President-Elect

**Length:** 60 minutes

**Abstract:** Although efforts to reduce or eliminate health disparities have been ongoing for several decades, not only have such differences persisted over time but in some cases seem to be increasing. This presentation will present the human rights bases for health as they are founded in international human rights documents. The intersections between and among health, human rights, and health disparities will be discussed and potential health actions to address these issues will be presented.

**Objectives:** Participants will be able to discuss the relationship between health and international human rights. Participants will be able to describe the intersections of human rights and health disparities.

### Session 2: Heart / Lung Issues Panel

**Title: HICLASS Asthma in Hawai'i**

**Moderator:** Gurdev Singh, MD, FACP

**Panel Speaker:** Theresa L. Divinski, BA, University of Hawaii at Hilo, HICLASS Research Group

**Length:** 45 minutes

**Abstract:** The overall goal of the HICLASS (Hawaii Island Children's Lung Assessment Scientific Study) project is to engage residents of the Big Island of Hawaii in research that explores the effects of volcanic air pollution ("vog") on their respiratory health. Scientists and community researchers, working in collaboration, are exploring the hypothesis that children who have been exposed to higher levels of volcanic pollution during most of their lives may suffer significantly more respiratory symptoms, decreased lung function, or diminished lung growth than children who reside in areas of low vog. Wind patterns, time of day and Hawaii Island's topography impact these levels along with the amount of volcanic activity and emissions released from Kilauea, Pu'u O'o and Halema'uma'u. Based on the study's own air monitoring stations, HICLASS tracked the concentration of major vog components including sulfur dioxide, sulfates and fine particulate matter from 2003-2006. During this period, HICLASS confirmed slightly high sulfur dioxide levels in Ka'u, highly acid sulfate aerosols in Kona, intermittently elevated vog in Hilo and Puna and virtually no volcanic air pollution in Kohala and Hamakua. More than 1,900 children residing in all of these areas have been studied almost every year since 2002 when the children were enrolled in the fourth and fifth grade. Early results showed asthma rates of 19-23% that were surprisingly highest in relatively vog-free areas. Upper respiratory symptoms such as cough and runny nose are more common in Ka'u and Kona; these symptoms are particularly increased among children who say they have asthma. Lung function will be compared with symptom findings.

With new funding, HICLASS plans to continue this research until our original test subjects reach the age of eighteen thereby capturing their maximum rate of lung growth. We will also study children who attend school in Volcano Village, to understand the effects of acute episodes of high volcanic air pollution.

**Objectives:** Participants will be able to describe what types and amounts of volcanic pollution are present in their individual communities. Participants will be able to identify the possible health effects of volcanic pollution that are being reported by children participating in the longitudinal HICLASS study.

**Title: Health in Hawai`i Stats Update**

**Speaker:** Joseph Balabis, MPH Hawaii State Department of Health

**Length:** 45 minutes

**Abstract:** Cardiovascular Disease (CVD) is the leading cause of death in the U.S. and in Hawaii. The Hawaii Department of Health recently published *The Burden of Cardiovascular Disease in Hawaii 2007*, which presents the most updated statistics of CVD mortality and risk factor prevalence. This presentation will highlight data from this report with an emphasis on the geographic, ethnic, and socioeconomic disparities that exist. Attendees are encouraged to use this data to guide planning and implementation of public health programs.

**Objectives:** Participants will be able to describe the burden of cardiovascular disease in the state in terms of mortality and risk factor prevalence. Participants will be able to identify populations that are disparately affected by cardiovascular disease in the state.

### Session 3: Cancer Spotlight

**Title: Dying Well: Palliative and End-of-life Care in Hawaii**

**Speaker:** Jeanette Koijane, MPH Cancer Information Service, Pacific Region, UH Cancer Research Center of Hawaii

**Length:** 60 minutes

**Abstract:** We come into this world surrounded by love and compassion. Shouldn't we leave in the same way? The end of life can be a stressful time for families, medical personnel, and the person who is dying. However research and experience shows that with advance care planning, including advance directives, and professional training in palliative care, much pain and suffering can be avoided and relieved. Kokua Mau is Hawaii's palliative and end-of-life care organization. We work statewide to educate the general public, policy makers, and healthcare providers on good palliative care. The session will provide an overview of Kokua Mau's activities including roles for public health professionals.

**Objectives:** Participants will list the roles for Hawaii's public health professionals in Kokua Mau's activities. Participants will name three research and experiential-based findings that outline strategies for public health professional to improve end-of-life care.

### Session 4: Cancer Issues Panel

**Title: Cultural Barriers/Health Literacy & Cancer Care in Immigrant Communities**

**Panel Speaker:** Yin Yan Leung, MPH, American Lung Association of Hawaii, Hilo, HI

**Length:** 25 minutes

**Abstract:** Although there is a wealth of information for the general public addressing the continuum of cancer prevention, screening and treatment, the cultural and language barriers in Hawaii's diverse immigrant communities pose both challenges and opportunities in our health care system. Especially for an individual facing a cancer diagnosis, access to timely and accurate information for their treatment is vital to their overall sense of control, well-being and survivorship. How can we use the strengths of immigrant communities to address the challenges of educating and supporting their community members with low health literacy levels?

**Objectives:** Participants will identify challenges in immigrant communities around health literacy and cancer prevention, screening & treatment. Participants will list 3 potential solutions to increasing access to information in diverse communities.

**Title: Cancer: A Magnifying Lens for Healthcare Disparities**

**Panel Speaker:** Kevin Wilcox, MD Hawaii Island Radiation Oncology, LTD

**Length:** 25 minutes

**Abstract:** Cancer care is often one of life's great challenges for the person and family afflicted. This can be true whether the cancer is managed briefly with a single procedure, requires 8 months of nearly continuous treatment, or is not cured but requires management for the rest of a person's life. Frequently, best management requires sudden, intense, and expensive access to multiple medical services. Thus, cancer care highlights whatever challenges exist in availability and access for healthcare.

**Objectives:** Participants will describe why cancer management is a special challenge when access to healthcare is challenged. Participants will ponder challenges and describe potential solutions in allocating societies resources to individuals with specific high utilization needs.

**Title: Health Disparities in Cancer Screening Prevention**

**Speaker:** Scott Grosskreutz, MD East Hawaii Women's Imaging Center University of Hawaii, School of Medicine

**Length:** 25 minutes

**Abstract:** Discussion of health disparities among different ethnic groups and patient populations. The various challenges ensuring equal access to care will be discussed as well as some unique issues that may limit participation in care within the various ethnic groups.

**Objectives:** Participants will recognize challenges in cancer screening in Hawaii and consider possible solutions in improving cancer screening.

### Session 5: Cancer Special Guest Speaker

**Title: Cancer Care and Health Disparities Briefing**

**Speaker:** Mark Clanton, MD, MPH, President of American Cancer Society

**Length:** 45 minutes

**Abstract:** The American Cancer Society (ACS) Fosters understanding and collective planning among leaders from the public, private and independent sectors by build awareness by developing and disseminating common messages about regional and global cancer burdens. ACS empowers individuals and institutions through information, training, advocacy and collaboration; to strengthen regional and country-based cancer control; and to serve as a catalyst to help get cancer on a regional and global agenda.

**Objectives:** Participants will list two examples of successful evidence based programs designed to overcome cancer health disparities and describe how these can be applied at a local level.

### Session 6: Hawaii Public Health Association: A local perspective

**Title: Hawaii Public Health: A local perspective**

**Speaker:** James Rarick, MPH, President, Hawaii Public Health Association

**Length:** 30 minutes

**Abstract:** As an affiliate of the American Public Health Association, the Hawaii Public Health Association (HPHA) serves an important role in keeping its members informed on public health issues of global and national importance. Through partnership with other organizations committed to improving our nation's health, HPHA also works to put critical public health issues into a uniquely local perspective. This presentation will enable participants to be able to highlight three critical public issues for both the nation and the state of Hawaii, and provides a call to action for public health professionals in Hawaii to become more actively engaged in addressing these issues at the local level.

**Objectives:** This presentation will enable participants to be able to highlight three critical public issues for both the nation and the state of Hawaii.

### Session 7: Spotlight on Diabetes

**Title: Diabetes: Obesity in Native Hawaiians**

**Speaker:** Dan Brown, PhD Professor of Anthropology, University of Hawai'i at Hilo

**Length:** 60 minutes

**Abstract:** Type 2 diabetes rates were quite low in the Pacific until after World War II, but have climbed precipitously since then, and these rates are now among the highest in the world. Research among Pacific Islanders has shown that the high rates are related to modernization and other cultural changes, but also may be due to an increased genetic propensity to become obese under modern conditions. Rates of childhood obesity are increasing rapidly throughout the developed world, and this is beginning to fuel a major epidemic of diabetes. Accordingly, a study has begun that measures diabetes risk factors in school children in East Hawaii. The study involves anthropometric measures of body size, but also measures body composition by use of both a BodPod and bioelectric impedance analysis. Children also perform a submaximal exercise test on a treadmill and have their heart rates recorded over a 48 hour period. Preliminary results show that the children are generally fatter than U.S. standards, and Native Hawaiian children are significantly fatter than their classmates. Children who are more physically fit are leaner than others. The ethnic differences are mediated by socioeconomic status, suggesting that well thought out, culturally relevant intervention strategies have a reasonable chance of success.

**Objectives:** Participants will be able to describe 3 key factors that contribute to the high risk of diabetes in Pacific Islanders. Participants will be able to describe two culturally relevant intervention strategies that have a reasonable chance of success for Hawaiians with obesity problems.

Session 8: Diabetes Issues Panel

**Abstract: Title: Effects of Diabetes on the Newborn Infant**

**Moderator:**

**Panel Speaker:** Sneha Sood, MD, Kapiolani Medical Center for Women and Children John A. Burns School of Medicine

**Length:** 30 minutes

**Abstract:** The potential effects of gestational diabetes on the offspring principally involve: growth, metabolism, respiratory function. Without well coordinated care between many groups of interdisciplinary health workers the outcome for babies of gestational diabetic mothers may be severely compromised.

**Objectives:** Participants will be able to list three effects of diabetes on the newborn infant and understand the need for coordinated treatment of these problems.

**Title: Physical Activity and Nutrition Coalition**

**Panel Speaker:** Martha Rider, PhD, MS, CHES University of Hawaii School of Medicine, Office of Public Health Studies

**Length:** 30 minutes

**Abstract:** The Tobacco Coalition has been instrumental in changing tobacco policies and supporting programs to decrease tobacco use. Can a Physical Activity and Nutrition (PAN) Coalition help to change policies and improve the public's health too? Current data and information on PAN issues in Hawaii and nationally will be discussed as well as aspects of physical activity and nutrition that relate to preventing diabetes through public health initiatives.

**Objectives:** Objectives: Participants will be able to describe the Physical Activity and Nutrition coalition and how it relates to preventing diabetes through public health initiatives. Participants will be able to discuss the potential impact of Hawaii's Physical Activity and Nutrition Coalition on the health of the Hawaiian people. (Lecture + Q &A)

Session 9: Spotlight on Mental Health

**Title: Youth Violence and Substance Use**

**Speaker:** Deborah Goebert, PhD University of Hawaii, John A. Burns School of Medicine, Department of Psychiatry

**Length:** 60 minutes

**Abstract:** The vast majority of research on adolescent risk and protective factors for violence and substance use has failed to include Asian American or Pacific Islander youth in ways that provide for suitable interpretation. Overall, Asian Americans and Pacific Islanders have been found to be at decreased risk. However, some subgroups have been shown to be at increased risk. Recent work has suggested that there is a need to disaggregate ethnicity. Local findings comparing the prevalence of drinking behaviors and violence among two Asian American (Filipino and Japanese) and two Pacific Islander (Native Hawaiian and Samoan) adolescent groups will be presented as well as current efforts to develop prevention programs.

**Objectives:** Participants will be able to cite two reasons to disaggregate ethnicity in studying adolescent substance use and violence. Participants will distinguish between the prevalence of substance use, violence and related behaviors among Asian and Pacific Islander adolescent subgroups. Participants will be able to describe three risk protective factors for substance use and violence among adolescents.

## Session 10: Mental Health Issues Panel

### **Title: Suicide Behaviors in Hawaii**

**Panel Speaker:** Iwalani R.N. Else, Ph.D. University of Hawaii, John A. Burns School of Medicine, Department of Psychiatry

**Length:** 20 minutes

**Abstract:** In Hawai‘i someone dies from suicide every three days (Galanis, 2006). Suicide remains a serious public health concern in the United States. In 2003, the suicide rates were 10.73 per 100,000, (Centers for Disease Control, 2006a) which are three times higher than homicides, and twice as high as deaths from HIV/AIDS (National Institute of Mental Health [NIMH], 2004). Males have higher rates of completed suicide (4:1) while females have higher rates for attempts (3:1) (NIMH, 2003). Youth suicide in the U.S. has nearly tripled from 1952-1996 alone, and from 1980-1996, suicide rates among 15-19 year olds increased by 14% and for 10-14 year olds increased 100% (U.S. Public Health Service, 1999). Similar patterns and trends exist among some indigenous Pacific Islander populations. For example, data comparing age patterns reveals a shift to younger suicides in Western Samoa and Micronesia (Booth, 1999) and in Hawai ‘i (Galanis, 2006). Related factors and interventions points for suicide in Hawaii will be discussed.

**Objectives:** Participants will be able to compare the suicide rates in Hawaii with the rest of the United States. Participants will be able to identify two intervention points for completed suicides.

### **Title: Socioeconomic Disparities in Mental Health Counseling**

**Panel Speaker:** Glenn Pressel, MA, MFT

**Length:** 20 minutes

**Abstract:** Discussion of the problems both financial and social that create difficulties in accessing appropriate mental health services on the Big Island of Hawaii.

**Objectives:** Participants will be able to describe the unique features of mental health disparities on the Big Island of Hawaii.

### **Title: Telepsychiatry in Rural Hawaii**

**Panel Speakers:** Daniel Alicata, MD, University of Hawaii, John A. Burns School of Medicine, Department of Psychiatry & Daniel Ulrich, MD, Central O‘ahu Family Guidance Center

**Length:** 20 minutes

**Abstract:** The Department of Psychiatry (DOP) at the University of Hawaii, John A. Burns School of Medicine, has provided general telepsychiatry services to health clinics in the communities of Maui and Molokai, and child and adolescent telepsychiatry services to the public school district of Molokai. Based on this development, we will evaluate the use of video teleconferencing (VTC) technology to augment existing general psychiatric and child and adolescent psychiatric services to medically underserved communities on the Big Island of Hawaii. We are developing collaborative relationships with The State of Hawaii, Department of Health, Adult Mental Health Division (AMHD) and Child and Adolescent Mental Health Division (CAMHD) and The Mayo Clinic (Department of Psychiatry and Psychology, Rochester, Minnesota). The telepsychiatry projects will achieve the following goals:

1) establish VTC linkages with the Department of Psychiatry (Queen's Medical Center), the Mayo Clinic and the Community Health Centers and Family Guidance Centers on the Big Island, and 2) to provide psychiatric services and consultation to patients, families, primary care providers and treatment staff directed by the Big Island AMHD and CAMHD leadership.

**Objectives:** Participants will be able to describe the use of telepsychiatry to supervise and collaborate with other clinical professionals in rural Hawaiian settings. Participants will be able to describe the role of telepsychiatry in training psychiatrists who will utilize technology to bring care to underserved communities.