A BILL FOR AN ACT

RELATING TO THE COMPOSITION OF THE STATE COUNCIL ON MENTAL HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that native Hawaiians experience distinct health disparities that pervade their day-to-day well-being and hinder their overall health.

Data on native Hawaiian mental health evince the pressing need for state intervention and confirm that culturally-based programs are four times more successful in addressing those needs. For example, youth suicide attempt and death rates are highest among native Hawaiians, profoundly impacting their families and communities. Alarmingly, native Hawaiian youth and emerging adults are 2.3 times more likely to die by suicide compared to Caucasian youth in Hawaii. Furthermore, native Hawaiian youth are twice as likely to have made a suicide attempt in the last year compared to their Caucasian peers.

These mental health disparities, tragically, start in the early years of life. Native Hawaiian keiki are overrepresented as victims of abuse and neglect. By high school, female native
Hawaiian students experience feelings of sadness or hopelessness to a greater degree than their peers. Native Hawaiian youth also maintain some of the highest rates of drug use in the State. Not surprisingly, these mental health disparities persist for native Hawaiians through adulthood and even as senior citizens.

Unfortunately, native Hawaiians tend to underutilize existing mental health services, seek therapy only after their illness has become severe, or leave treatment prematurely. Cultural incongruence with western mental health approaches may be a driving factor in native Hawaiian underutilization of mental health services. Experts explain that clients are more likely to seek out and use mental health services when their values and beliefs are congruent with the interventions provided.

In 2014, the legislature codified a commitment to address health disparities throughout the State. Specifically, section 226-20(7), Hawaii Revised Statutes, directs decision-makers to "[p]rioritize programs, services, interventions, and activities that address identified social determinants of health to improve native Hawaiian health and well-being[.]" Additionally, the
legislature recognizes that eliminating health disparities and achieving health equity across demographics is a national priority, as unequal health outcomes and disparate well-being are pervasive even when people have health insurance and medical care.

The legislature finds that the state council on mental health is responsible for advising, reviewing, and evaluating the allocation and adequacy of mental health resources and services in the State. Accordingly, requiring the council to include members with knowledge of or work experience involving native Hawaiian concepts of well-being, culturally-grounded mental health methodologies, or traditional healing or health practices will help to systemically advance culturally responsive policies and programs that may be critical to addressing the dire mental health needs of Hawaii's native Hawaiian and Pacific Islander communities.

Accordingly, consistent with the commitment embodied in Act 155, Session Laws of Hawaii 2014, the legislature finds that it is in the best interest of the State to provide appropriate native Hawaiian cultural representation on the state council on mental health.
The purpose of this Act is to require a certain number of members of the state council on mental health to have demonstrated knowledge of or work experience involving native Hawaiian concepts of well-being, culturally-grounded mental health methodologies, or traditional healing or health practices.

SECTION 2. Section 334-10, Hawaii Revised Statutes, is amended to read as follows:

"§334-10 State council on mental health. (a) There is established, within the department of health for administrative purposes, a state council on mental health. The council shall consist of twenty-one members appointed by the governor as provided in section 26-34. In making appointments to the council, the governor shall ensure that all service area boards of the State are represented, and that a majority of the members are nonproviders of mental health or other health services, and that a majority of the members are not state employees. The number of parents of children with serious emotional disturbances shall be sufficient to provide adequate representation of such children in the deliberations of the
council. The council shall be composed of residents of the State, including individuals representing:

(1) The principal state agencies with respect to mental health, education, vocational rehabilitation, criminal justice, housing, medicaid, and social services;

(2) Public and private entities concerned with the need, planning, operation, funding, and use of mental health services and related support services;

(3) Adults with serious mental illnesses who are receiving, or have received, mental health services;

(4) The families of such adults or families of children with serious emotional disturbances; and

(5) The Hawaii advisory commission on drug abuse and controlled substances who shall be a person knowledgeable about the community and the relationships between mental health, mental illness, and substance abuse.

(b) At least members of the council shall have demonstrated knowledge of or work experience involving native Hawaiian concepts of well-being, culturally grounded mental
health methodologies, or traditional healing or health practices
as evidenced by:

(1) A college or university degree in a relevant field
such as psychology, social work, public health,
nursing, Hawaiian studies, health administration, or
medicine, with a focus on native Hawaiian and
indigenous health, transgenerational trauma, or
traditional healing or health practices such as
hooponopono, laau lapaau, or lomilomi;

(2) Work history that demonstrates an appropriate level of
knowledge of or involvement in native Hawaiian and
indigenous health, transgenerational trauma, or
traditional healing or health practices such as
hooponopono, laau lapaau, or lomilomi;

(3) Health, social, or advocacy work history addressing
native Hawaiian inequities; or

(4) Substantial community experience as a native Hawaiian
traditional and customary practitioner in healing
treatments, techniques, services, or practices.

[+[b+]} (c) The council shall elect a chairperson from among
its members. All members shall serve without compensation but
shall be paid their necessary expenses in attending meetings of
the council.

[+e+] (d) The council shall advise the department on
allocation of resources, statewide needs, and programs affecting
two or more service areas. The council shall review and comment
on the statewide comprehensive integrated service plan and shall
serve as an advocate for adults with serious mental illness,
children with serious emotional disturbances, other individuals
with mental illnesses or emotional problems, and individuals
with combined mental illness substance abuse disorders.

[+e+] (e) If the department's action is not in conformance
with the council's advice, the department shall provide a
written explanation of its position to the council.

[+e+] (f) The council shall prepare and submit an annual
report to the governor and the legislature on implementation of
the statewide comprehensive integrated service plan. The report
presented to the legislature shall be submitted at least twenty
days prior to the convening of each regular session.

[+e+] (g) A quorum for purposes of doing business shall
consist of a majority of the members serving on the council
immediately before a meeting begins.
[+g+] (h) If a quorum is present when a vote is taken, the affirmative vote of a majority of members present shall constitute a valid act of the council unless this chapter, part I of chapter 92, the articles of incorporation, or the bylaws require a greater number of affirmative votes."

SECTION 3. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 4. This Act shall take effect on July 1, 2050; provided that the composition of the state council on mental health shall comply with this Act no later than July 1, 2050.
Report Title:
State Council on Mental Health; Native Hawaiian Health Practices

Description:
Requires the State Council on Mental Health to include an unspecified number of members with demonstrated knowledge of or work experience involving native Hawaiian concepts of well-being, culturally grounded mental health methodologies, or traditional healing or health practices. Effective 7/1/2050. (SD2)

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