

2022 Community Health Needs Assessment



Maui Health System (community hospitals affiliated with Kaiser Permanente)

License number: 3-H

Approved by Kaiser Foundation Hospitals Board of Director's Community Health Committee

September 27, 2022



Maui Health System 2022 Community Health Needs Assessment

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Maui Health System 2022 Community Health Needs Assessment

Summary

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America's leading health care providers and nonprofit health plans.

Every three years Maui Health System conducts a community health needs assessment (CHNA). The CHNA process is driven by a commitment to improve health equity and is intended to be transparent, rigorous, and collaborative. Our Community Health team has identified and prioritized needs unique to our service area, based on community-level secondary data and input from those who represent the broad interests of the community. Wherever possible, we have applied a racial equity analysis to data collection and analysis.

For the 2022 CHNA, Maui Health System has identified the following significant health needs, in priority order:

1. Access to care
2. Income & employment
3. Mental & behavioral health
4. Housing

To address those needs, Maui Health System has developed an implementation strategy (IS) for the priority needs it will address, considering both Kaiser Permanente's and the community's assets and resources. The CHNA report and three-year IS are publicly available at <https://www.kp.org/chna>.

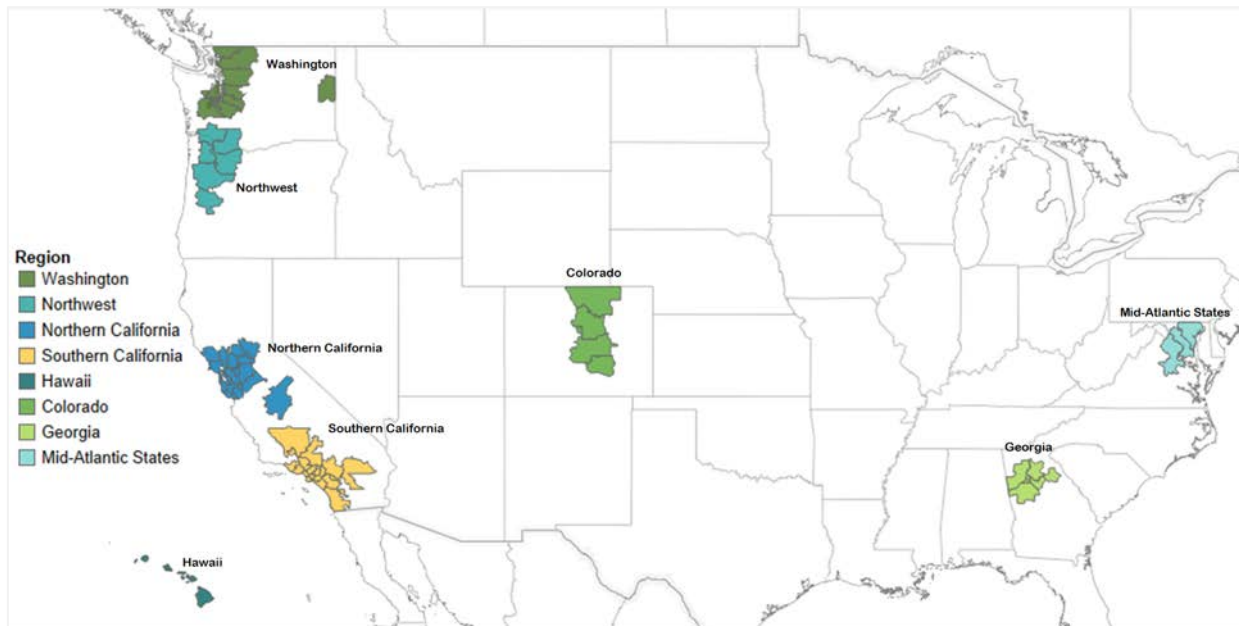
Introduction/background

About Kaiser Permanente

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America’s leading health care providers and nonprofit health plans.

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.4 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

Kaiser Permanente regions and CHNA service areas



About Kaiser Permanente Community Health

At Kaiser Permanente, we recognize that where we live and how we live has a big impact on our health and well-being. Our work is driven by our mission: to provide high-quality, affordable health care services and to improve the health of our members and our communities. It's also driven by our heritage of prevention and health promotion, and by our conviction that good health is a fundamental right.

As the nation's largest nonprofit, integrated health system, Kaiser Permanente is uniquely positioned to improve the health and wellbeing of the communities we serve. We believe that being healthy isn't just a result of high-quality medical care. Through our resources, reach, and partnerships, we are addressing unmet social needs and community factors that impact health. Kaiser Permanente is accelerating efforts to broaden the scope of our care and services to address all factors that affect people's health. Having a safe place to live, enough money in the bank, access to healthy meals and meaningful social connections is essential to total health. Now is a time when our commitment to health and values compel us to do all we can to create more healthy years for everyone. We also share our financial resources, research, nurses and physicians, and our clinical practices and knowledge through a variety of grantmaking and investment efforts.

As we reflect on how 2020 changed the world, we must recognize that communities everywhere are coping with unprecedented challenges magnified by the COVID-19 pandemic and a renewed struggle for racial equity and social justice.

Through our continued focus on expanding our community health approach we laid the foundation for an acceleration of work to meet the challenges posed by the public health crises we now face. We dedicated ourselves to improving the social health of our 12.4 million members and the millions of people who live in the communities we serve.

Learn more about Kaiser Permanente Community Health at <https://about.kaiserpermanente.org/community-health>.

Kaiser Permanente's approach to community health needs assessment

The Affordable Care Act (ACA) was enacted in March 2010 to make health insurance available to more people, expand the Medicaid program, and support innovative medical care delivery to lower health care costs. The ACA also requires that nonprofit hospitals conduct a community health needs assessment (CHNA) every three years and develop an implementation strategy (IS) in response to prioritized needs.



Kaiser Permanente's CHNA process is driven by a commitment to improve health equity. Our assessments place a heavy emphasis on how the social determinants of health — including structural racism, poverty, and lack of access to health-related resources such as affordable housing, healthy food, and transportation — are affecting the health of communities. By analyzing community-level data and consulting individuals with deep and broad knowledge of health disparities, the Community Health team in each Kaiser Permanente service area has identified and prioritized needs unique to the community served. Each service area has developed an IS for the priority needs it will address, considering both Kaiser Permanente's and the community's assets and resources.

The Maui Health System 2022 CHNA report and three-year IS are available publicly at <https://www.kp.org/chna>. In addition, the IS will be filed with the Internal Revenue Service using Form 990, Schedule H.

Community served

Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. The Maui Health System hospital service area includes residents in a defined geographic area surrounding its medical facilities, including the islands of Maui, Lanai, and Molokai, and does not exclude low-income or underserved populations.

Maui service area

 Maui Health hospital  Maui Health clinic  Kaiser Permanente medical offices



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Maui service area demographic profile

| | |
|--|---------|
| Total population: | 166,329 |
| American Indian/Alaska Native | 0.3% |
| Asian | 27.8% |
| Black | 0.7% |
| Hispanic | 11.4% |
| Multiracial | 19.7% |
| Native Hawaiian/other Pacific Islander | 9.9% |
| Other race/ethnicity | 0.1% |
| White | 30.1% |
| Under age 18 | 21.7% |
| Age 65 and over | 17.8% |

Impact of structural racism in our communities

Hundreds of public health departments and other government agencies across the U.S. have declared racism a public health crisis. By structuring opportunity and assigning value based on how a person looks, racism operates at all levels of society and denies many individuals and communities the opportunity to attain their highest level of health. Racism is a driving force in social determinants of health like housing, education, and employment, and is a barrier to achieving health equity.

The inequality and disparities that have existed for people of historically underrepresented groups, such as communities of color, women, and low-income communities, have been made more visible by the COVID-19 pandemic. Data show that Hispanic, Black and Indigenous populations are disproportionately affected by the disease and its economic impacts. In addition to the health crisis and amplification of existing health disparities, COVID-19 has also brought troubling reports of bias and discrimination against Asian Americans and others.

Since summer 2020, we've witnessed a raising of the consciousness of Americans and the world to a reality that we can no longer ignore: the treatment of Black Americans in our country is unacceptable. This is a moment in time when we must stand together against the racism and social injustice that remain endemic in our society and create long-term trauma that damages individuals' and communities' physical, mental, and social health. By pairing an acknowledgment of history with community-level data, we can work together to address the impacts of racism and discrimination.

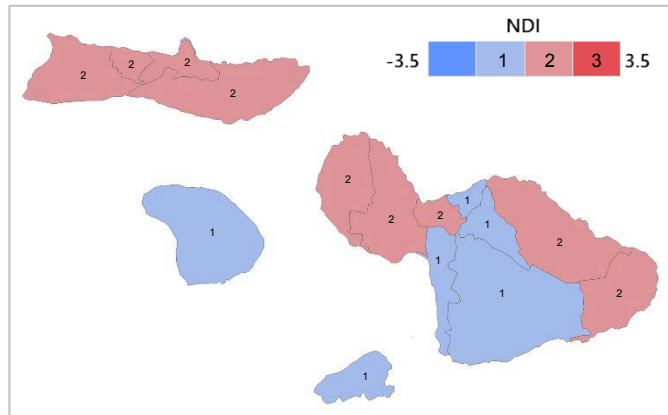
Neighborhood disparities in the Maui service area

The Neighborhood Deprivation Index (NDI) is a validated scale comprised of several of the social factors associated with lack of opportunity to be as healthy as possible. These measures are proxies for underlying determinants that disproportionately affect communities of color, including lack of employment opportunities, racist policies and practices, and unequal treatment by educational and criminal justice systems.

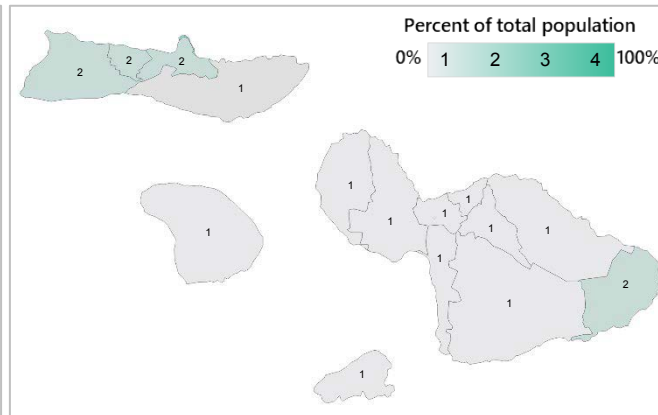
The map on the left shows the NDI for ZIP codes in the Maui service area. Areas with the highest NDI often are those with the highest proportion of people Native Hawaiian or other Pacific Islander, shown in the map on the right.

MAUI SERVICE AREA

Neighborhood Deprivation Index



Native Hawaiian or other Pacific Islander



Kaiser Permanente's CHNA process

The CHNA process allows Kaiser Permanente to better understand the unique needs, stories, and opportunities to advance health and health equity in each of our communities. We are committed to gathering community perspectives on the disproportionate impacts of the COVID-19 pandemic as well as the impact of structural racism. Wherever possible, we have applied a racial equity analysis to data collection and analysis.

Identifying the highest priority needs for CHNA with an equity lens informs our community investments and helps us develop strategies aimed at making long-term, sustainable change, allowing us to deepen the strong relationships we have with other organizations that are working to improve community health. For the purposes of the CHNA, Kaiser Permanente defines a “health need” as a health outcome and/or the related conditions that contribute to a defined health need.

Hospitals and other partners that collaborated on the CHNA

Hospitals

Kahuku Medical Center, Kuakini Medical Center, Wahiawa General Hospital, Kapiolani Medical Center for Women & Children, Pali Momi Medical Center, Straub Medical Center, Wilcox Medical Center, The Queen's Medical Center, Molokai General Hospital, North Hawaii Community Hospital, Rehabilitation Hospital of the Pacific, Adventist Health Castle, Sutter Health Kahi Mohala, Kaiser Permanente Moanalua Medical Center, Shriners Hospitals for Children, Kula Hospital, Lanai Community Hospital, Maui Memorial Medical Center

Other organizations

Aloha United Way, Department of Health for the State of Hawaii, Community First Hawaii, Hawaii Public Health Institute, Kauai District Health Office, Project Vision, County of Hawaii, Hawaii Children's Action Network, Residential Youth Services and Empowerment Hawaii, The Institute for Human Services, Inc., Marshallese Task Force, Hawaii Health and Harm Reduction Center, Hawaii Community Foundation, Papa Ola Lokahi, We Are Oceania, Honolulu County Executive on Aging, Domestic Violence Action Center

Consultants who were involved in completing the CHNA

The Healthcare Association of Hawaii (HAH) is a 170 member organization that includes the hospitals in Hawaii. HAH works with providers across the continuum of care toward a health care system that offers the best possible quality of care to the people of Hawaii. HAH obtained the services of Ward Research to prepare a statewide health needs assessment report. Ward Research, a Hawaii-based market research firm specializing in both qualitative and quantitative research, has worked with Hawaii's health care systems for decades in understanding client health and human service needs. The University of Hawaii Thompson School of Social Work and Public Health hosted panel discussions around the emerging priorities with faculty experts that informed the health needs. Solutions Pacific, a community-based planning company, supports the collaboration of community, industry, and government, has a particular focus within Native Hawaiian and other traditionally vulnerable and under-served communities, including Pacific Islander, immigrant communities, and those experiencing houselessness.

Methods used to identify and prioritize needs

Secondary data

Kaiser Permanente's innovative approach to CHNA includes the development of a free, web-based data platform. The data platform provides access to a core set of approximately 100 publicly available indicators to understand health using the County Health Rankings population health framework, which emphasizes social and environmental determinants of health. The data platform is available to the public at kp.org/chnadata. Specific sources and dates of secondary data are listed in Appendix A.

Community input

In addition to reviewing the secondary data available through the Community Health Data Platform and other local sources, each Kaiser Permanente service area collected primary data through key informant interviews with individuals and groups of individuals. To identify issues that most impact the health of the community, Kaiser Permanente Fresno Medical Center Community Health reached out to local public health experts, community leaders with expertise on local health needs, and individuals with knowledge and/or lived experience of racial health disparities. If available, insights from community partners' data collection were also considered in the assessment of needs. For a complete profile of community input, see Appendix B.

Written comments

Kaiser Permanente provides the public an opportunity to submit written comments on the service area's previous CHNA reports through CHNA-communications@kp.org. This email will continue to allow for written community input on the service areas' most recently conducted CHNA report. As of the time of this CHNA report development Maui Health System had not received written comments about the previous CHNA report. Kaiser Permanente will continue to track any submitted written comments and ensure that relevant submissions will be considered and addressed by the appropriate Maui Health System staff.

Identifying priority health needs

Each Kaiser Permanente service area analyzed and interpreted the primary and secondary data and used a set of criteria to determine what constitutes a health need in the community, including severity and magnitude of the need and evidence of clear disparities or inequities. Once all the community health needs were identified, they were prioritized, based on the criteria, resulting in a list of significant community health needs.

In conjunction with this report, Maui Health System has developed an implementation strategy (IS) for the priority health needs it will address. These strategies will build on Kaiser Permanente's assets and resources, as well as evidence-based strategies, wherever possible. The IS will be filed with the Internal Revenue Service using Form 990 Schedule H. Both the CHNA and the IS will be posted publicly on our website, <https://www.kp.org/chna>.

Identification and prioritization of the community's health needs

Process for identifying community needs in the Maui service area

Before beginning the prioritization process, Maui Health System chose a set of criteria to use in prioritizing the list of health needs:

- **Severity and magnitude of need:** Includes how measures compare to national or state benchmarks, relative number of people affected, impact of the pandemic on the need.
- **Community priority:** The community prioritizes the issue over other issues
- **Clear disparities or inequities:** Differences in health factors or outcomes by geography, race/ethnicity, economic status, age, gender, or other factors

Measures in the Community Health Data Platform were clustered into 16 potential health needs, which formed the backbone of a prioritization tool to identify significant health needs in each service area. The prioritization tool aligned data collection methods with the set of criteria and could be customized to reflect important considerations in each community.

For secondary data, a score was assigned to each need (4: very high, 3: high, 2: medium, 1: lower) based on how many measures were more than 20 percent worse than national and/or state benchmarks. Themes from key informant interviews and other data sources were identified, clustered, and assigned scores on the same scale. Both the data platform and primary data informed scores for geographic, racial/ethnic, and other disparities.

In conversations with Maui Health System stakeholders, each data collection method was assigned a weight, based on rigor of the data collection method, relative importance in ranking of needs (such as clearly identified racial disparities), and other considerations. Weighted values for each potential need were summed, converted to a percentile score for easy comparison, and then ranked highest to lowest to determine the four significant health needs.

Description of prioritized significant health needs in the Maui service area

1. Access to care: Access to comprehensive, quality health care services—including having insurance, local care options, and culturally relevant care—is important for ensuring quality of life for everyone. In the Maui service area, 5 percent of the population is uninsured, more than the state average of 3.8 percent uninsured. In parts of West and Central Maui, the rate of enrollment in Medicaid/public insurance programs is below the state rate of enrollment in Medicaid/public insurance programs by 3 to 7 percent. The percent of uninsured children is also higher than the state average in parts of West, East, and Upcountry Maui by about 3 percent. Among infants, the mortality rate for Maui County is 5 percent, which is higher than the national average of around 4 percent. Access to health care professionals can be limited in the Maui service area; there are 28 percent fewer dentists and 3 percent fewer primary care physicians per 100,000 people than the state average. A lack of trust in health care, low numbers of health specialists, and other factors such as internet access and language are reported as barriers to accessing care. Strengthening relationships between health care providers and residents through partnerships in communities and incorporating language and culture into care is seen as a way to coordinate and deliver better health services.

2. Income & Employment: Economic opportunity provides individuals with jobs, income, and a sense of purpose. People with steady employment are less likely to have an income below poverty level and are more likely to be healthy. Unemployment among residents in the Maui service area was especially high during the COVID-19 pandemic—over 1 in 5 residents were unemployed in 2020. High unemployment continues as impacts from the COVID-19 pandemic linger. Persistent economic disparities are also evident in certain communities and neighborhoods in the Maui service area. In the West End of Molokai and East Maui areas, where over 25 percent of the residents are Native Hawaiian/Pacific Islander, the unemployment rate is around 20 percent, compared to the North Shore and Upcountry Maui areas where the unemployment rate is lower. Income levels are relatively low while the cost of living in parts of the Maui service area are high. The median household income in East Maui is only \$55,357, which is over 35 percent below the state median for household income. More employment opportunities that offer a livable wage are key to achieving financial security. Some key informants mentioned that returning people to employment will be difficult if the wages are low.

3. Mental health & behavioral health: Mental health affects all areas of life, including a person’s physical well-being, ability to work and perform well in school, and ability to participate fully in family and community activities. In Maui County, mental health is a growing concern. The death rate due to intentional self-harm affects over 16 out of 100,000 residents, which is 23 percent worse than the state average. There is a gap between the need for mental health care and resources to meet that need. There are 174 mental health providers per 100,000 residents in Maui County, which is over 30 percent worse than the state rate. In remote regions of the Maui service area, access to mental health services is even lower. According to key informants, the COVID-19 pandemic increased social isolation, financial stress, substance use, homelessness, and barriers to accessing already inadequate mental health counseling and support services.

4. Housing: Families’ greatest single expenditure is often housing and the cost of housing has soared in recent years throughout Maui County. Having a safe and secure place to call home is strongly associated with health and essential for the wellbeing of individuals, families, and communities. In the Maui service area, over 17 percent of residents find that they need to pay more than half of their income on housing, a pervasive problem affecting residents from most neighborhoods. This is particularly evident on parts of Molokai, where one-quarter to one-third of residents experience this severe housing cost burden. Throughout the Maui service area, the housing affordability index, or the ability of a typical resident to purchase an existing home in the area, is worse than the national average. On parts of Molokai, the rate of home ownership is as low as 40 percent. Several key informants mentioned that people experiencing homelessness is a growing problem. People need help securing both permanent and affordable housing.

Health need profiles

Detailed descriptions of the significant health needs in the Maui service area follow.

Health need profile: Access to care



Access to comprehensive, quality health care services — including having insurance, local care options, and a usual source of care — is important for ensuring quality of life for everyone.

The Affordable Care Act (ACA) helped extend insurance coverage to many previously uninsured individuals and families, especially in Medicaid expansion states. Still, families with low income and people of color are more likely to be uninsured, and even with the ACA, many find insurance to be unaffordable.

Health insurance coverage increases use of preventive services and helps ensure people do not delay seeking medical treatment. Having an adequate number of primary care resources in a community also is important, including federally qualified health centers (FQHCs), which serve patients regardless of ability to pay.

Insurance by itself does not guarantee access to appropriate care, and many community members experience barriers related to language, transportation options, and differential treatment based on race, as well as access to fewer health care resources.

Furthermore, the COVID-19 pandemic has disrupted health care for millions of Americans as health care resources were diverted from primary and preventive care, with telehealth becoming an increasingly important source of care. Existing racial and health inequities have been brought to light by the pandemic, with people of color accounting for disproportionate shares of COVID-19 cases, hospitalizations, and deaths.

Hawaii offers some of the broadest health insurance coverage in the country. Enrollment in Medicaid/public insurance in Maui County is about the same as the state and national average (35 percent) but there is room for improvement, especially in some neighborhoods where enrollment rates are especially low:

- In West, Central, and South Maui, along the north shore and parts of Upcountry Maui, the rate of enrollment in Medicaid/public insurance among those eligible is worse than the national average.
- Key informants noted that enrollment in health insurance, even when available, is especially less among seniors, immigrant, Micronesian, and Filipino populations.

Children can be especially vulnerable and there are indications that a focus on care among infants and children in Maui County is warranted. Among children, the rate of uninsured is over 50 percent higher than the state average. Certain parts of Maui County have higher rates of uninsured children:

- In West Maui and parts of Upcountry and East Maui, the rates of uninsured children are up to 50 percent worse than the U.S. average and over 50 percent higher than the state average.

While rates of low birth weights in Maui County are slightly less than the state and national averages, the rate of infant deaths in Maui County (5 percent) is slightly less than the state average, but nearly 20 percent higher than the national average.

Access to care can also be limited by the lower numbers of health care professionals available to residents of Maui County. For example, there are 28 percent fewer dentists and 3 percent fewer primary care physicians per 100,000 people than the state average.

We have limits to access to care because we have trouble recruiting and retaining professional health staff.

– Nonprofit organization leader

Key informants mentioned concerns trusting health care enough so that residents actually use the health insurance they do have, low numbers of health specialists, and other barriers such as internet access and language.

They suggested that building relationships through community engagement and partnerships with community organizations is needed to strengthen access to care. Coordination of services can be difficult without it. Understanding local issues and incorporating cultural norms within the delivery of health services is needed.

They said the COVID-19 pandemic shined a spotlight on the lack of legitimacy some feel about the health care system. Rebuilding this trust will take deeper engagement through listening, incorporating language and culture into care, and working with community-based organizations that have established relationships.

Access to health care needs to be affordable and culturally relevant, meaningful, and relevant (with preventive care).

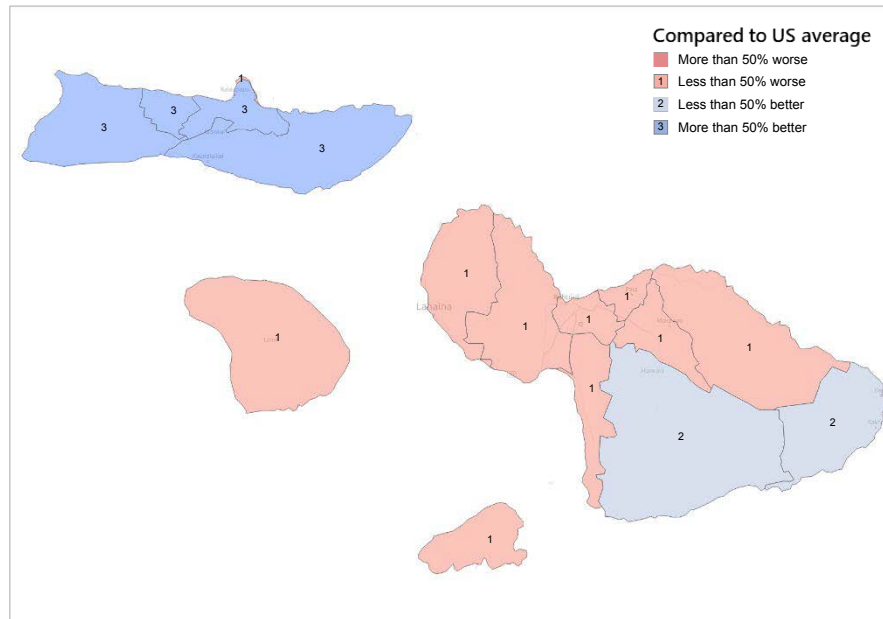
– Public health leader

Get medical/health care out of the offices and into the communities. This forms connections and this is needed to build trust, relationships, so people will use the health services they have access to.

– Nonprofit organization leader

MEDICAID/PUBLIC INSURANCE ENROLLMENT, MAUI SERVICE AREA, 2020

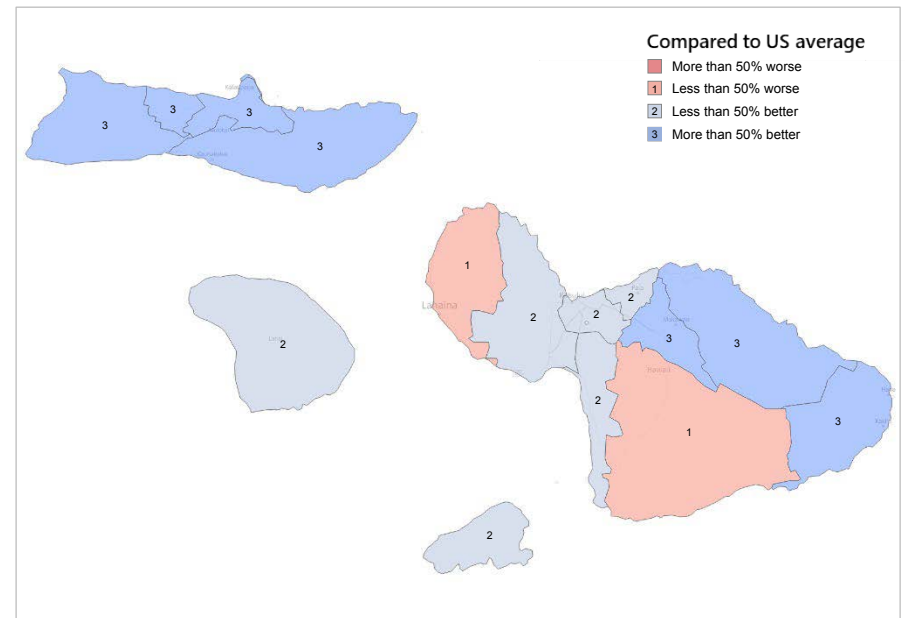
Areas shaded orange (1) are ZIP codes with Medicaid/public insurance enrollment rates that are worse than the national average.



Source: [Kaiser Permanente Community Health Data Platform](#)

UNINSURED CHILDREN, MAUI SERVICE AREA, 2020

Areas shaded orange (1) are ZIP codes with rates of uninsured children that are worse than the national average.



Source: [Kaiser Permanente Community Health Data Platform](#)

Economic opportunity provides individuals with jobs, income, a sense of purpose, and opportunities to improve their economic circumstances over time.

People with steady employment are less likely to have an income below poverty level and more likely to be healthy.

Currently around 11 percent of people living in Kaiser Permanente communities — and 14 percent of children — live in poverty. Those not having enough resources to meet daily needs such as safe housing and enough food to eat are more likely to experience health-harming stress and die at a younger age.

Americans with lower incomes are more likely to live in neighborhoods lacking access to healthy food and safe physical activity and have higher exposure to environmental pollutants. Compared to white Americans, people of color are more likely to have lower incomes, fewer educational opportunities, and shorter life expectancies.

Income inequality has been increasing over recent decades. During the first year of the COVID-19 pandemic, higher levels of economic inequality were associated with higher levels of COVID incidence and deaths.

The unemployment rate for Maui County during the COVID-19 pandemic was high – over 20 percent. This is close to 60 percent higher than the national average and over 6 percent higher than the state average in 2020.

There are areas of Maui County where unemployment and income are disproportionately worse than in other areas. This is particularly true in areas where the Native Hawaiian/Pacific Islander population is 25 percent or greater:

- In zip codes from the West End of Molokai and East Maui, unemployment rates were around 20 percent among those 16 years and above compared to other communities in Maui County in 2020.
- In East Maui, the median household income is only \$55,357, over 20 percent less than the national median household income and over 35 percent less than the state median household income.
- This rate is especially low in the neighborhoods of the West End of Molokai, where the median household income is only \$29,167, two-thirds less than the state median household income.

Key informants mentioned that employment and wages are the main concerns and will need to be addressed for the foreseeable future. The COVID-19 pandemic hit people's livelihoods especially hard because so many jobs were tied to the visitor industry that shut down during the lock-down phases of the pandemic.

Financial security is a huge need. Access to jobs is a need. It's due to language barriers. You don't get past the interview or you get hired in a low wage job because someone there can't speak your language.

– Micronesian community representative

Key informants said that financial security is an important part of meeting people’s basic needs so they can thrive. Low wages are a substantial barrier that inhibit people from returning to work; low wage jobs might be available but pay quite low wages compared to better paying jobs working for hotels, for instance.

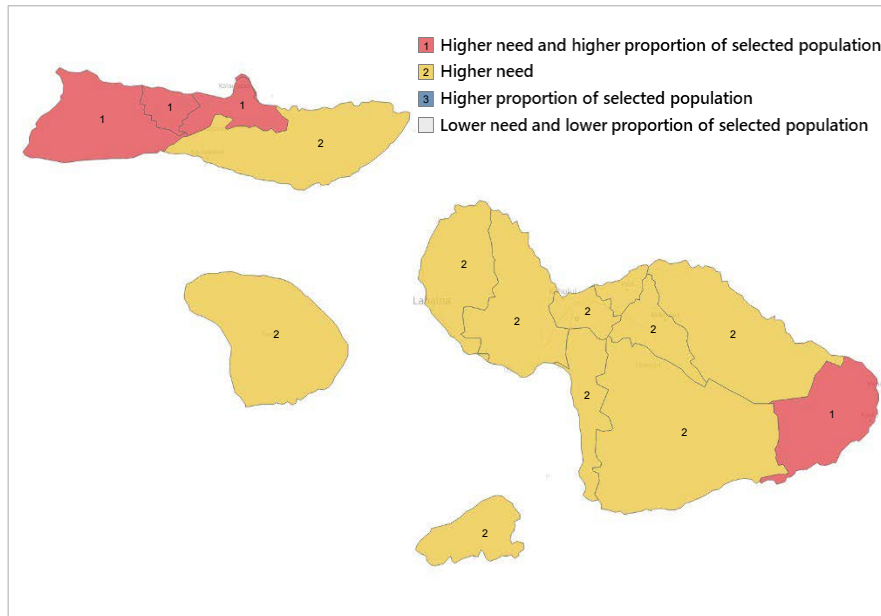
Some key informants called upon employers to create job opportunities, particularly in health care where the professional and support staffing needs are high.

People have to travel to Oahu or beyond for [health] services because they are not here. And this limits employment opportunity too because people are not trained in the skills we need to fill here.

– Community organization leader

UNEMPLOYMENT, MAUI SERVICE AREA, 2020

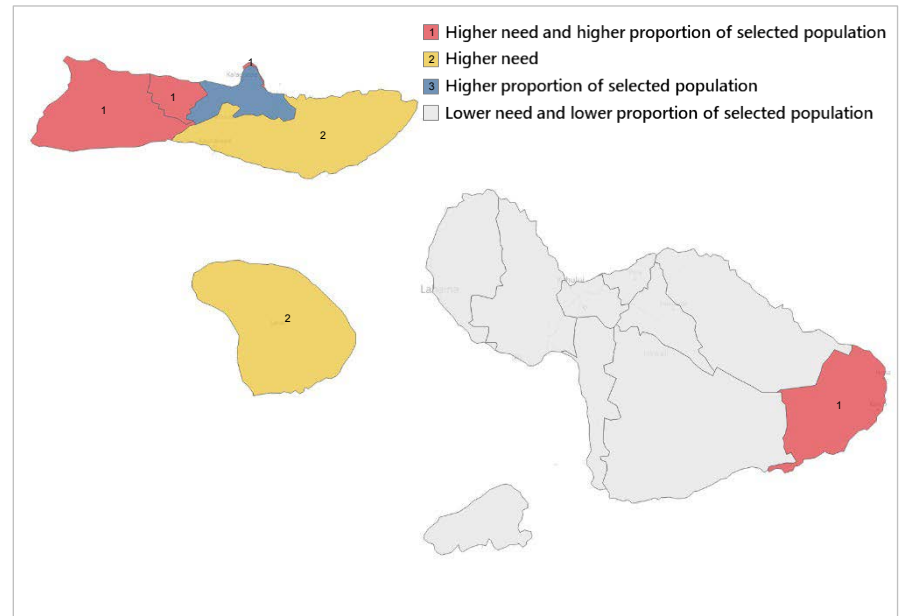
Areas shaded red (1) are Zip codes with **Native Hawaiian and Pacific Islander populations over 25%** and **higher unemployment rates** in Maui County.



Source: [Kaiser Permanente Community Health Data Platform](#)

HOUSEHOLD INCOME, MAUI SERVICE AREA, 2015-2019

Areas shaded red (1) are Zip codes with **Native Hawaiian and Pacific Islander populations over 25%** and **medium household incomes lower than national average** in Maui County.



Source: [Kaiser Permanente Community Health Data Platform](#)

Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school and to participate fully in family and community activities.

Anxiety, depression, and suicide ideation are on the rise due to the COVID-19 pandemic.

Those facing challenges related to lower economic opportunity often experience high levels of stress in their daily lives, coupled with fewer resources for coping. Children and youth experiencing stress have an increased likelihood of poorer mental and physical health.

Deaths of despair — those due to suicide, drug overdose, and alcoholism — are on the rise, and males and the unemployed are at greater risk.

Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. At the same time, rapid adoption of digital platforms for behavioral health services has helped reduce barriers to in-person mental health care.

Mental health is a growing concern throughout all of Maui County, which can have serious consequences for families. An alarming indicator of this is the rate of death due to intentional self-harm, 16 out of 100,000 people in Maui County, nearly 22 percent worse than the national average and 19 percent worse than the state average.

Distress and anxiety caused by the COVID-19 pandemic have contributed to this problem, according to key informants. Concerns about social isolation and disconnectedness, especially among children, the elderly, and those with disabilities, along with financial stress, were mentioned as situations that contribute to and lead to mental health issues.

Supports for mental health are much less accessible to Maui County residents according to key informants. There are 174 mental health providers per 100,000 people in Maui County, nearly 30 percent worse than the national average of the number of mental health providers and 43 percent worse than the state average. This is particularly true in remote regions of Maui County.

Support for mental and behavioral health was severely strained during COVID-19 according to key informants. For example, even among the case managers who were available, resorting to online counseling and support was a barrier to the increasing number of residents who need services but don't have access to a computer or an internet connection. The isolation brought on by measures to curb COVID-19 exposures continues as the pandemic persists. Key informants said they expect a crisis in mental health issues in the coming years.

Among the rising numbers of people in Maui County experiencing homelessness, mental health issues sometimes are a contributing factor to further isolation, drug addiction, and resistance to care. Key informants called on the need to streamline and coordinate basic mental health care services, including access to mental health support and treatment without having to travel to Honolulu for care.

Mental health—fear, loss of job, isolation—especially among the elderly and vulnerable already, became an issue. Our suicide rate increased.

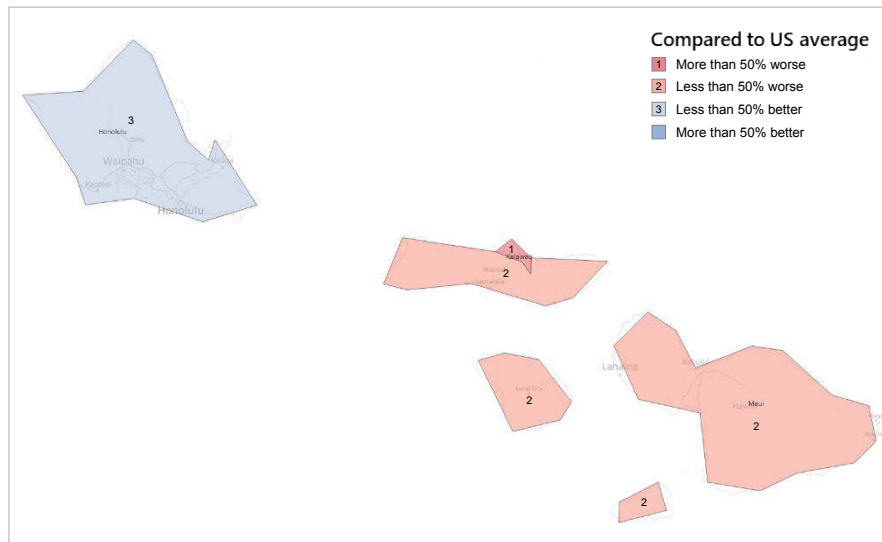
– County government leader

COVID impacts are long lasting. I really am concerned for the children, the elderly and the physically frail, who've been socially isolated and disconnected. It's a mental health concern.

– Health department leader

MENTAL HEALTH PROVIDERS, MAUI SERVICE AREA, 2020

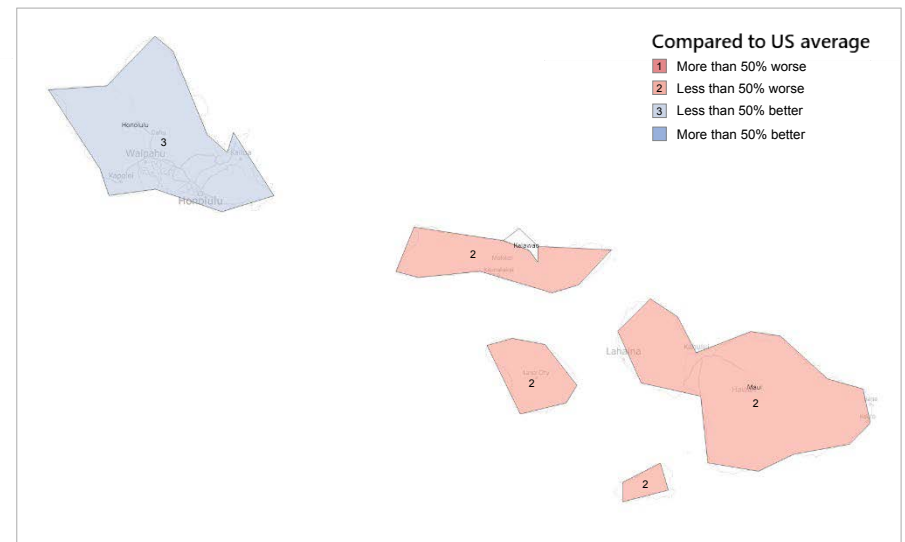
Maui County is shaded orange (2) indicating that the number of mental health providers per 100,000 residents is worse than the national average, compared to the Honolulu County rate that is better than the national average.



Source: [Kaiser Permanente Community Health Data Platform](#)

SUICIDE DEATHS, MAUI SERVICE AREA, 2020

Maui County is shaded orange (1) indicating that the number of age-adjusted rate of death due to intentional self-harm per 100,000 residents is worse than the national average, compared to the Honolulu County rate that is better than the national average.



Source: [Kaiser Permanente Community Health Data Platform](#)

Health need profile: Housing

Having a safe place to call home is essential for the health of individuals and families.

American families' greatest single expenditure is housing, and for most homeowners, their most significant source of wealth. Because of historic discriminatory lending policies and some current lending practices, people of color have been denied the opportunity to purchase a home, leading to enduring inequities.

Housing costs have soared in recent years, with many families experiencing difficulty paying for housing. Renters in particular are more likely to live in cost-burdened households and face housing instability. Job loss associated with the COVID-19 pandemic, coupled with expiration of the federal eviction moratorium, has made many renters' situation even more precarious.

Homelessness across the U.S. was on the rise before the pandemic, including for families with children. In 2020, the number of single adults living outdoors exceeded the number living in shelters for the first time. Even more moved outside because of the pandemic, leading to a crisis in street homelessness in many American cities.

High housing costs take up a significant portion of a household's income in Maui County and the inability to purchase a home has long-term consequences affecting stability, independence, and wealth building. In 2021, the Maui County median cost for a single-family home topped \$1 million. Throughout all of Maui County, the housing affordability index, or the ability of a typical resident to purchase an existing home in the area, is worse than the national average.

- Close to one out of five households (18 percent) in Hawaii spend greater than 50 percent of their income on housing costs, a severe burden for many families. On most of Maui, 16-22 percent of residents experience this severe housing cost burden.
- In Maui County neighborhoods where more than a quarter of residents identify as Native Hawaiian/Pacific Islander, the housing concerns are magnified. For example, compared to national benchmarks:
 - On parts of Molokai, a quarter to one-third of the residents have a severe housing cost burden, meaning they pay more than half of their income on housing costs.
 - On parts of Molokai and the remote region of Hana on Maui, the rate of home ownership is as low as 40 percent.

Crowded housing can often be caused by financial necessity and is not ideal. In the Hoolehua area of Molokai and the Hana side of Maui, the rate of overcrowded housing is about three times the national average. However, living in close quarters can also reflect a cultural preference to be together to support family members.

Housing—the cost is so high. It affects both the low- and middle-income people that we serve that all suffer from this.

– Community organization leader

While affordable housing is an important issue throughout Maui County, people experiencing homelessness is a growing problem according to key informants. They mentioned this is particularly true among those experiencing mental health issues or disabilities that require a lot of services. Meeting their basic needs with services is important, but resources are also needed to help people move into permanent housing. Prevention of homelessness, through more outreach and education, was also mentioned as important.

Key informants said that many people throughout Maui County need help with stable and affordable housing. They mentioned that many people are strained because they have to live in multigenerational housing situations where 1-2 people work and care for both the young and elderly, further straining the ability to meet basic needs.

People with severe disabilities that are also homeless have a hard time accessing services. It's so hard to find shelter for them.

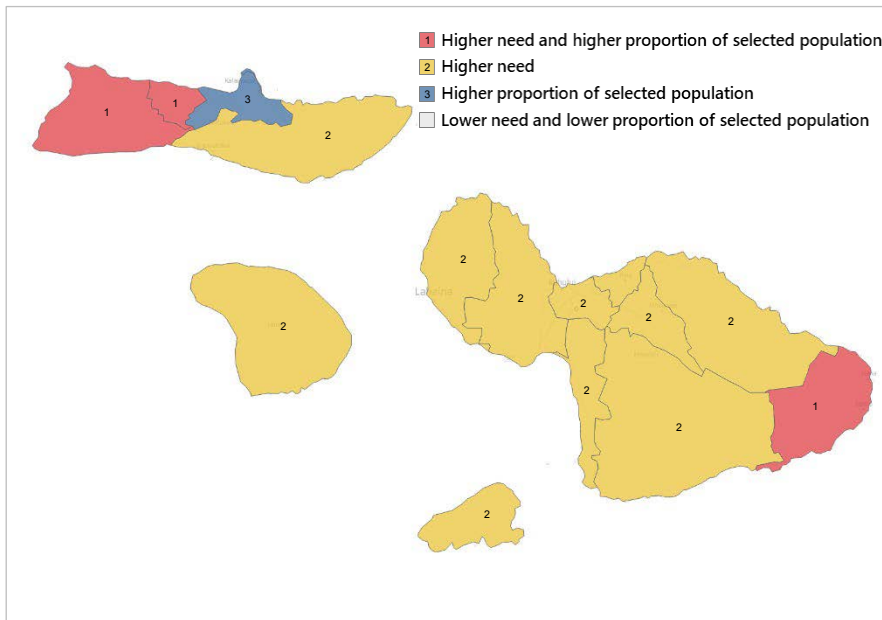
– County social services leader

Housing costs. If 50-60 percent is spent on housing, you can't spend on other things like healthy eating.

– County government leader

AFFORDABLE HOUSING, MAUI SERVICE AREA, 2020

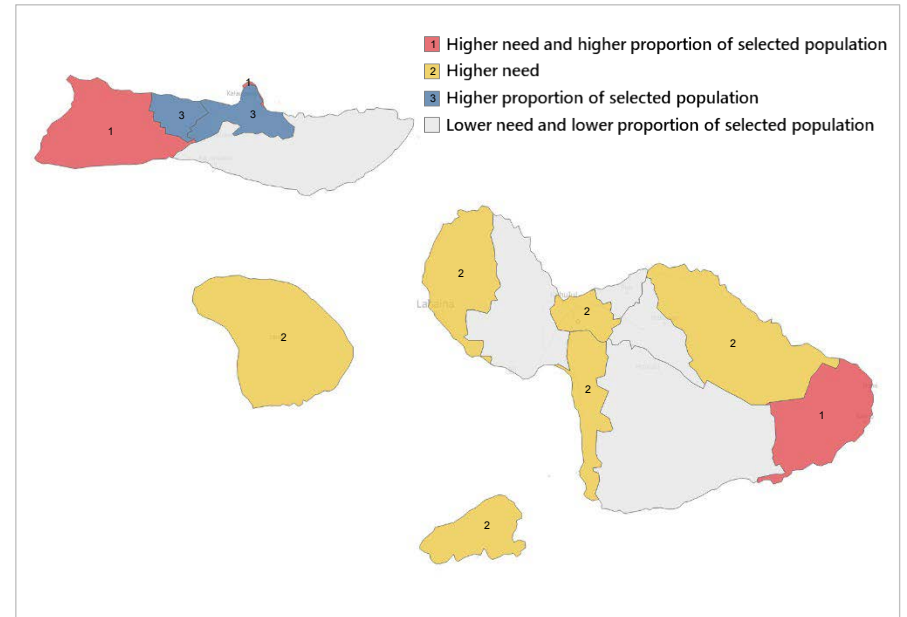
Areas shaded red (1) are Zip codes with **Native Hawaiian and Pacific Islander populations over 25%** and with **less ability to purchase an existing home in the area**.



Source: [Kaiser Permanente Community Health Data Platform](#)

HOME OWNERSHIP, MAUI SERVICE AREA, 2015-2019

Areas shaded red (1) are Zip codes with **Native Hawaiian and Pacific Islander populations over 25%** and **fewer residents who own their home**.



Source: [Kaiser Permanente Community Health Data Platform](#)

Community resources potentially available to respond to health needs

The CHNA process included an identification of existing community assets and resources to address health needs. The Maui service area includes community-based organizations, government departments and agencies, hospital and clinic partners, and other community members and organizations that address many community health needs.

Key resources available to respond to the identified health needs of the community are listed in Appendix C.

Maui Health System 2019 Implementation Strategy evaluation of impact

In the 2019 IS process, all Kaiser Permanente service areas planned for and drew on a broad array of resources and strategies to improve the health of our communities, such as grantmaking, in-kind resources, and partnerships, as well as several internal Kaiser Permanente programs including Medicaid, the Children's Health Insurance Program (CHIP) and other government-sponsored programs, charitable health coverage, medical financial assistance, health professional training, and research. In addition to our direct spend, we also leveraged assets from across Kaiser Permanente to help us achieve our mission to improve the health of communities. This comprehensive approach includes activities around supplier diversity, socially responsible investing, and environmental stewardship.

Maui Health System's 2019 Implementation Strategy (IS) report identified activities to address significant health needs prioritized in the 2019 CHNA report. The impact of those activities is described in this section; the complete 2019 IS report is available at <https://www.kp.org/chna>.

Maui Health System 2019 Implementation Strategy priority health needs

1. Access to Care
2. Violence and injury prevention

2019 Implementation Strategy evaluation of impact by health need

Support to community-based organizations is a key part of the contributions Maui Health System makes each year to address identified health needs, and we prioritize work intended to reduce health disparities and improve health equity. Maui Health System also serves the community through programs to improve access to care, including Medicaid, charitable health coverage, and medical financial assistance. At the time this CHNA report was completed, Maui Health System had information on the impact of these activities from 2020 and 2021 and will continue to monitor strategies implemented in 2022.

Maui Health System addresses community health needs in multiple ways, including grantmaking, access to care programs, and socially responsible investing. Several of those activities during 2020-2021 are highlighted in the table below.

As the health and economic toll of COVID-19 continued to mount, Kaiser Permanente accelerated efforts to broaden the scope of our care and services to address all factors that affect people's health. For example, in 2020 Kaiser Permanente provided grants totaling \$6.3 million to strengthen COVID-19 prevention and response for people experiencing homelessness across our regions and service areas. The Statewide Marshallese COVID-19 Task Force coordinated education and vaccination efforts to address the needs of the Marshallese and Micronesian Compact of Free Association (COFA) nations in Maui County and throughout Hawaii. In cooperation with the counsels general of the Republic of the Marshall Islands, Federated States of Micronesia, and Palau and non-profit organizations like We Are Oceana, the Marshallese Community Associations within each of the four state counties, and the Hawaii State Department of Health, Maui Health System participated in the translation of COVID-19 information packets into indigenous languages, facilitated meetings with local underrepresented minority (URM) group faith community leaders on Maui, and hosted several vaccination clinics at a local URM church. Over 250 vulnerable and URMs were vaccinated during these events and hundreds of contacts made to provide COVID-19 safety education and encourage vaccinations.

Maui Health System 2019 IS priority health needs and strategies

Access to care

Care and coverage: Maui Health System ensures health access by serving those most in need of health care through Medicaid and medical financial assistance.

| | Individuals served | | Amount | |
|----------------------------------|--------------------|---------------|---------------------|---------------------|
| | 2020 | 2021 | 2020 | 2021 |
| Medicaid | 9,425 | 10,604 | \$12,955,579 | \$28,433,287 |
| Medical Financial Assistance | 1,180 | 879 | \$2,457,253 | \$1,867,469 |
| Total care & coverage | 10,605 | 11,483 | \$15,412,832 | \$30,300,756 |

Other access to care strategies: Maui Health System contributed to the following community efforts to address access to care:

Examples and outcomes of most impactful other strategies

Housing Wait-listed patients at Maui Memorial Medical Center

Many hospitals in Hawaii have wait-listed patients who have been discharged from an acute care stay but require ongoing care in the acute care setting because of the lack of long-term or skilled-nursing care in a community, waiting for the disposition of guardianship determinations, or because family members are unable/incapable of accepting a family member post discharge. As MHS is a sole community provider system with one main full-service community hospital serving the island of Maui (population of 165,000), Maui Memorial Medical Center's (MMMC) frequently has an average of 40 patients wait-listed, representing between 15-20 percent of the hospital's total available beds. This wait-listed process has resulted in the hospital regularly at full census. Although a modest reimbursement is available for wait-listed patients, acute care staffing is still required to care for these patients.

COVID-19 Local Response and Vaccination Outreach Project

Maui Health System served as one of Maui County's main vaccination sites commencing in December 2020 and continuing into 2022. In coordination with the Hawaii State Department of Health and local Maui County DOH office, MMMC's main entrance lobby was converted into a community vaccination center, operating regularly Monday-Friday during normal business hours and often into the early evening. In addition to the MMMC location, Maui Health System's Kula Hospital and Lanai Community Hospital also served as vaccination sites as did specific community pop-up clinics in Kihei/Wailea. Over 82,000 vaccinations were administered.

Kokua for a Cause

Maui Health System, in association with its hospital foundation, provides free of charge mammograms to underserved women, many of whom are Native Hawaiian or other underrepresented minority members. The program is available to women on Maui and Lanai islands. In 2021, 75 free mammograms were completed, 48 of which were for women from Lanai. Of the 48 from Lanai, the program includes free transportation to and from Maui where the mammograms are completed. Breast health awareness is also included as part of the program.

Violence and Injury Prevention

During 2020-2021, Maui Health System contributed to the following community efforts to address violence and injury prevention:

Examples and outcomes of most impactful strategies

Stop the Bleed National Trauma Campaign

Stop the Bleed (STB) is a national American College of Surgeons trauma campaign design to teach lay community members how to recognize significant and life-threatening bleeding episodes and how to stem such bleeding until first responders or other emergency personnel can arrive on scene. Training and STB kits have been deployed to over 7 schools and in excess of 150 teachers and students even during the pandemic. The program is being expanded to governmental and non-profit agencies and large businesses.

Maui Ocean Safety Campaign

The Maui Ocean Safety campaign provides beach and water safety training and tips to members of the community throughout Maui locations during Beach Week recognition. Hundreds of community member interactions are recorded during these campaigns. Water injuries are the third highest mechanism of injury on Maui. The 2019 event took place before the pandemic, and while no campaign was held in 2020 because of the ongoing pandemic, the event did take place in mid 2021 just prior to the latest COVID-19 Omicron surge.

Appendix

A. Secondary data sources

B. Community input

C. Community resources

Appendix A: Secondary data sources

Kaiser Permanente Community Health Data Platform

| Source | Dates |
|---|--------------|
| 1. American Community Survey | 2015 - 2019 |
| 2. Behavioral Risk Factor Surveillance System | 2020 |
| 3. CDC, Interactive Atlas of Heart Disease and Stroke | 2016 - 2018 |
| 4. Center for Medicare & Medicaid Services | 2018 |
| 5. CMS National Provider Identification | 2019 |
| 6. Dept of Education ED Facts & state data sources | Varies |
| 7. EPA National Air Toxics Assessment | 2014 |
| 8. EPA Smart Location Mapping | 2013 |
| 9. Esri Business Analyst | 2020 |
| 10. Esri Demographics | 2020 |
| 11. FBI Uniform Crime Reports | 2014 - 2018 |
| 12. Feeding America | 2018 |
| 13. FEMA National Risk Index | 2020 |
| 14. Harvard University Project (UCDA) | 2018 |
| 15. HRSA Area Resource File | 2019 |
| 16. HUD Policy Development and Research | 2020 |
| 17. National Center for Chronic Disease Prevention and Health Promotion | 2018 |
| 18. National Center for Education Statistics | 2017 - 2018 |
| 19. National Center for Health Statistics | 2018 |
| 20. National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention | 2018 |
| 21. NCHS National Vital Statistics System | 2015 - 2019 |
| 22. NCHS US Small-area Life Expectancy Estimates Project | 2010 - 2015 |
| 23. NCI State Cancer Profiles | 2013 - 2017 |
| 24. NCI United States Cancer Statistics | 2013 - 2017 |
| 25. NHTSA Fatality Analysis Reporting System | 2014 - 2018 |
| 26. US Geological Survey; National Land Cover Database | 2016 |
| 27. USDA Food Environment Atlas | 2016 |

Additional secondary data sources

| | Source | Dates |
|----|---|--------------|
| 1. | Community Health Needs Assessment, Addendum of Secondary Data, Healthcare Association of Hawaii | 2021 |

Appendix B. Community input

| | Data collection method | Affiliation | Number | Perspectives represented | Role | Date |
|---|-------------------------|---|--------|--|----------------|------------|
| 1 | Key informant interview | Micronesian community | 1 | Micronesian communities | Member | 08/25/2021 |
| 2 | Key informant interview | County of Maui | 1 | Low-income communities | Leader | 08/31/2021 |
| 3 | Key informant interview | Imua Family Services | 1 | Maui, Molokai, and Lanai children and families | Representative | 09/02/2021 |
| 4 | Key informant interview | Family Health Services, Maui District Health Office, State of Hawaii, Department of Health | 1 | Public health | Leader | 09/03/2021 |
| 5 | Key informant interview | CORE (Critical Outreach and Response Through Education) Unit, Maui County Police Department | 1 | People experiencing homelessness, mental illness, or substance abuse | Leader | 09/07/2021 |
| 6 | Key informant interview | Department of Housing and Human Concerns, Maui County | 1 | People experiencing and homelessness and mental illness | Leader | 09/10/2021 |
| 7 | Key informant interview | Molokai General Hospital | 1 | Medically underserved | Representative | 08/16/2021 |
| 8 | Key informant interview | UH Maui College | 1 | People seeking education, training, employment, livable wage | Representative | 10/08/2021 |
| 9 | Key informant interview | Chronic Disease Division, Hawaii Department of Health | 1 | Public health | Leader | 08/17/2021 |

Appendix C. Community resources

| Identified need | Resource provider name | Summary description |
|---------------------|---|---|
| Access to care | Imua Family Services | Imua Family Services assists children and their families overcome developmental learning challenges and reach their full potential serving residents of Maui, Molokai, and Lanai. https://imuafamily.org/team-imua/ |
| | Malama Ke Ola | The Malama Ke Ola Health Center runs the Community Clinic of Maui, which provides culturally sensitive, coordinated primary care emphasizing education, prevention, and advocacy, regardless of one's ability to pay at the time of visit. https://ccmaui.org/administration/ |
| | Family Health Services Section, Maui District Health Office | Family Health Services provides access to preventive and protective health services for individuals and families, including promoting and protecting the health and well-being of mothers, infants, and children. https://health.hawaii.gov/maui/family-health-services/ |
| Income & employment | University of Hawaii Maui College | Maui College provides career pathways from over 20 innovative programs ranging from certificates, to associate degrees and bachelor's degrees for residents of Maui County. These programs are designed to enhance economic opportunities for residents. http://maui.hawaii.edu/ |
| | We Are Oceania | We Are Oceania centralizes a support system for all Micronesian communities, families and individuals that live in Hawaii. An increasing number of Micronesians are migrating to Hawaii and need help acculturating and accessing services to succeed. https://www.weareoceania.org/ |
| | County of Maui Workforce Development Board | The Maui County Workforce Development Board provides oversight of integrated programs under the Workforce Innovations and Opportunity Act (WIOA) for the County of Maui and leads efforts to engage with a diverse range of job seekers, training providers, program providers and businesses to implement career pathways for job seekers and essential services for employer businesses. https://www.maui-county.gov/202/Workforce-Development-Board |
| | Voices of Micronesians of Maui | This non-profit group provides outreach services to all Micronesians, including language, health care access, referrals, acculturation and employment trainings and a business course on how to start their own business. |
| Housing | Ka Hale A Ke Ola Homeless Resource Centers | Ka Hale A Ke Ola is a housing focused, comprehensive resource center that provides emergency shelter, life skills training, case management, a primary care medical clinic, and facilities for childcare to the homeless and hungry on Maui. https://www.khako.org/ |
| | House Maui Initiative, Hawaii Community Foundation | The House Maui initiative is a diverse group of community-minded organizations, business, and individuals dedicated to creating a sustainable housing market for Maui's families. The Initiative brings all levels of government, elected leaders, nonprofits, home-builders, businesses, philanthropists, and the community together to create affordable housing solutions on Maui so that local families can continue to call Maui home. https://www.hawaiicommunityfoundation.org/strengthening/housemaui |

| Identified need | Resource provider name | Summary description |
|----------------------------|--|---|
| | Na Hale O Maui | Na Hale O Maui is a community land trust and nonprofit housing developer of single-family homes. Their goal is to secure and preserve a permanent supply of affordable housing alternatives for low- and moderate-income households in Maui County. https://www.nahaleomaui.org/ |
| Mental & behavioral health | Critical Outreach and Response Through Education (CORE) Unit, Maui Police Department | The CORE Unit runs the Mobile Medical Educational Unit that provides community outreach for non-critical medical care, mental health services, and other preventative measures for people in crisis, suffering from mental illness, dealing with substance abuse, and/or houseless. https://m.facebook.com/MauiPoliceDepartment/photos/a.192096954170494/3910048799041939/?type=3&source=57 |
| | Hui No Ke Ola Pono | Nui No Ke Ola Pono provides health management and health care referrals for the community of Maui in a culturally caring manner that reflects Hawaiian values. They provide services to the Native Hawaiian Community on Maui through its Wailuku and Hana offices. https://hnpkop.org/ |
| | Maui Community Mental Health Center (CMHC), Department of Health, State of Hawaii | The CMHC on Maui provides crisis mobile outreach, day treatment, and outpatient treatment services to the residents of Maui, Lanai, and Molokai. https://health.hawaii.gov/maui/community-mental-health-centers-cmhc/ |