



# UNIVERSITY OF HAWAII SYSTEM

## ‘ŌNAEHANA KULANUI O HAWAII

### Legislative Testimony

### Hō'ike Mana'o I Mua O Ka 'Aha'ōlelo

Testimony Presented Before the  
Senate Committee on Ways and Means  
Friday, March 28, 2025 at 10:02 a.m.

By

S. Lani Park, PhD,  
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and Alike Maunakea, PhD, Principal Investigators

And

Naoto T. Ueno MD, PhD, Director  
University of Hawai'i Cancer Center

And

T. Samuel Shomaker, MD, JD, MSM, Dean  
Lee Buenconsejo-Lum, MD, Principal Investigator, Pacific Regional Central Cancer Registry,  
U.S.-Affiliated Pacific Islands  
John A. Burns School of Medicine

And

Michael Bruno, PhD, Provost  
University of Hawai'i at Mānoa

#### HB 1300 HD1 SD1 – RELATING TO CANCER

Chair Dela Cruz, Vice Chair Moriwaki, and Members of the Committee:

The University of Hawai'i Cancer Center (UHCC) and John A. Burns School of Medicine (JABSOM) strongly supports HB 1300 HD1 SD1, which would appropriate revenues for UHCC to conduct a multi-ethnic cohort study focusing on social determinants of health, lifestyles, environmental exposures, and resilience factors of Native Hawaiians, Pacific Islanders, and Filipinos in the state of Hawai'i.

This funding would provide vital resources to help initiate this long-term study, which would provide critical data to improve the cancer disparities and promote health equity in populations that experience high rates for many common cancers and continue to be understudied and underserved.

National data typically aggregate health information for Asian Americans, Native Hawaiians, and Pacific Islanders (AANHPI) and, thereby, ignore the rich cultural and lifestyle diversity of these populations and mask their marked differences in cancer incidence and outcomes. UHCC has extensive experience studying cancer disparities in AANHPI. Disaggregated data have revealed stark cancer disparities across Native Hawaiians, Pacific Islanders, and Asian American subgroups. For instance, Native Hawaiians, among other racial/ethnic groups in the United States (US), have one of the highest rates of lung, breast, colorectal, pancreatic, gastric, liver, endometrial and cervical cancers. Most of these excess risks are only partially explained by known risk factors pointing to the need to explore new hypotheses. Pacific Islanders have high rates for many cancers that should be addressed through culturally tailored health education

and prevention efforts, such as in smoking cessation, HPV vaccination, and screening. Filipino Americans have high incidence rates for lung, colorectal and thyroid cancer in Hawai'i, and rapidly increasing rates of breast and prostate cancers. Due to gaps in the available data, such as on social determinants of health and environmental and occupational exposures, the specific reasons that drive these disparities remain unknown. A new study that captures such information would directly address these research gaps. For instance, there are private waste landfills in Nānākuli, O'ahu, where a high density of Native Hawaiian communities resides. The measure of potential cancer-causing environmental hazards and exposures and their associations with health can be studied through establishing a new prospective cohort study.

The proposed two-year project would establish the feasibility of recruiting participants for a long-term prospective study and greatly strengthen a grant application to NIH to fund the full-scale research. It will also help us continue to build strong partnerships with these communities that we have initiated through our work to field a mobile health clinic with the Native Hawaiian Healthcare Systems and through the work of our Pacific Islander Community Health Workers, so as to define common priority research areas and assist with study recruitment and future dissemination of study findings.

Information from the Hawai'i Tumor Registry (the State central cancer registry, operated by the UHCC), shows disparities in how early certain cancers are diagnosed (i.e., stage at diagnosis), in the number of new cancers detected each year (i.e., incidence), and in the proportion of deaths caused by certain cancers in Native Hawaiians, Filipinos, and Pacific Islanders residing in Hawai'i. Similarly, the Pacific Regional Central Cancer Registry (the US Affiliated Pacific Islands central cancer registry, operated by JABSOM), shows significant cancer health disparities in late stage at diagnosis and extremely poor survival rates in cervical, oropharyngeal, uterine, and liver cancer among the several of the populations indigenous to the USAPI. Many of the US Pacific Islander populations move to Hawai'i for educational and economic opportunities, as well as for health care. There is inadequate information about the contributing factors to the cancer health disparities, especially in the USAPI populations who reside in Hawai'i and are diagnosed with and treated for cancer here. It is well-studied that certain types of cancer are heavily influenced by tobacco, dietary composition, and overweight/obesity. Additionally, there is a high correlation between poverty and food insecurity, tobacco use, obesity, and obesity-related chronic disease, including cancer. Studies conducted in the US, USAPI, and globally also indicate other sociocultural impacts on cancer aside from poverty.

This new multi-ethnic cohort study is highly needed, and the results will inform UHCC, JABSOM, and University of Hawai'i researchers' current and future work with Native Hawaiian, Pacific Islander, and Filipino populations to address social, cultural, and economic determinants of cancer prevention, cancer screening, and early detection, treatment, and survivorship.

Thank you for the opportunity to submit testimony in support of HB 1300 HD1 SD1, provided that its passage does not impact priorities as indicated in our Board of Regents Approved Budget.



OFFICE OF HAWAIIAN AFFAIRS

**TESTIMONY IN SUPPORT TO HOUSE BILL 1300 HD 1 SD 1  
RELATING TO CANCER**

Senate Committee on Ways and Means  
Hawai'i State Capitol

March 28, 2025

10:02AM

Room 211

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Dear Chair Dela Cruz, Vice Chair Moriwaki, and Members of the Senate Committee on Ways and Means:

The Office of Hawaiian Affairs (OHA) **SUPPORTS** HB 1300 HD1 (the prior version of the bill, before the Senate Committee on Higher Education amendment), which appropriates funds to the University of Hawai'i Cancer Center for the purpose of conducting a multiethnic cohort study focusing on the social determinants of health, lifestyles, environmental exposures, and resilience factors of Native Hawaiians, Pacific Islanders, and Filipinos. This study also includes an analysis of the health effects and risks faced by individuals living near landfills in Nānākuli, O'ahu.

OHA has long advocated for policies that reduce health disparities and better protect the health and well-being of the lāhui. As part of this effort, we support the need for culturally appropriate prevention and treatment interventions, as well as an approach to health policy that integrates the social determinants of health. This study aims to provide valuable disaggregated data on Native Hawaiians, a vulnerable population with unmet health needs.

**OHA is deeply concerned with the recent amendment to the measure by the Senate Higher Education Committee, which requires the appropriated funds to be matched by federal funds on a dollar-for-dollar basis before they can be expended.** While we recognize the need for fiscal responsibility, we believe this amendment creates an unnecessary and unfair barrier to advancing this vital research. Given the ongoing uncertainty at the federal level and the lack of guaranteed funding for such matching requirements, this amendment threatens to delay or derail critical health research that is urgently needed.

**The previous version of the bill, before the amendment, required the University of Hawai'i Cancer Center to seek federal funding rather than imposing the dollar-for-dollar matching requirement. The previous approach is reasonable—leveraging federal funds to complement state funding without creating hurdles jeopardizing the progress of this essential study.** As stated in the previous hearing, discussions regarding the location of the next landfill site are ongoing, therefore this study is necessary to make informed policy decisions accordingly. However, it is important to note that the primary goal is to examine the broader social determinants of health, environmental exposures, and resilience factors affecting Native Hawaiians, Pacific Islanders, and Filipinos.

**The lack of disaggregated data on Native Hawaiians has long been a critical gap, and this study is an essential step toward addressing this.** Native Hawaiians are disproportionately affected by chronic diseases, and their health outcomes are directly tied to social determinants such as housing, education, and environmental conditions. However, Native Hawaiians are consistently underrepresented in health data, and their needs remain overlooked because data is often reported in aggregate, without attention to the specific challenges faced by these populations. This omission of critical data not only hinders the ability to advocate for necessary resources but also perpetuates structural inequities and health disparities.

The State has acknowledged its unique trust responsibilities with respect to Native Hawaiians, and that uniform collection and sharing of data specific to Native Hawaiians is critical to the proper administration of these responsibilities. SB 742 SD 2 HD 1, which was introduced this year, and that this committee supported, establishes a Data Sharing and Governance Working Group within the Office of Enterprise Technology Services.<sup>1</sup> **This measure similarly aligns with the State's expressed goal of making data publicly accessible to enhance understanding of the needs and experiences of different communities.**

**OHA respectfully urges the committee to reconsider this amendment and ensure that HB 1300 HD 1 proceeds for the benefit of these vulnerable populations.** Mahalo nui for the opportunity to provide testimony on this critical measure.

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<sup>1</sup> 21st Century Data Governance Task Force. Assessment of Demographic Data Collection, Processing, Retention, and Sharing Procedures in Hawai'i: A Report in Fulfillment of SCR174 SD1, SLH 2024. Submitted to the Thirty-Third Legislature, State of Hawai'i, The Senate. (December 6, 2024), [https://www.capitol.hawaii.gov/slh/Years/SLH2023/SLH2023\\_Act136.pdf](https://www.capitol.hawaii.gov/slh/Years/SLH2023/SLH2023_Act136.pdf)



**Testimony to the Senate Committee on Ways and Means  
Friday, March 28, 2025; 10:02 a.m.  
State Capitol, Conference Room 211  
Via Videoconference**

**RE: HOUSE BILL NO. 1300, HOUSE DRAFT 1, SENATE DRAFT 1, RELATING TO CANCER.**

Chair Dela Cruz, Vice Chair Moriwaki, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** House Bill No. 1300, House Draft 1, Senate Draft 1, RELATING TO CANCER.

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

This measure, as received by your Committee, would appropriate an unspecified amount of general funds for fiscal year 2025-2026 and the same amount for fiscal year 2026-2027, for the University of Hawaii Cancer Center to conduct a multiethnic cohort study focusing on the social determinants of health, lifestyles, environmental exposures, and resilience factors of Native Hawaiians, Pacific Islanders, and Filipinos, including an analysis of the health effects and risks of individuals living in close proximity to landfills in Nanakuli, Oahu. This bill also requires the appropriated funds to be matched by federal funds on a dollar-for-dollar basis before expenditure.

This measure would take effect on July 1, 3000.

The goal of medical research is to develop safe and effective methods to prevent, detect, diagnose, treat and ultimately cure the collection of diseases known as cancer. The better we understand these diseases, the more progress we will make toward diminishing the tremendous human and economic toll disease inflicts upon our citizenry.

**Testimony on House Bill No. 1300, House Draft 1, Senate Draft 1**  
**Friday, March 28, 2025; 10:02 a.m.**  
**Page 2**

Ten years ago, the HPCA testified in support of House Bill No. 1616, Regular Session of 2014, a measure that would add to the Hawaii State Planning Act's objectives and policies for health, the identification of social determinants of health and prioritization of programs, services, interventions, and activities that address identified social determinants of health to improve Native Hawaiian health in accordance with federal law and reduce health disparities of disproportionately affected demographics.

We noted in our testimony that House Bill No. 1616, seeks to:

*" . . . identify those specific social determinants that adversely affect Native Hawaiian, Pacific Islanders, and Filipinos. As these populations make a sizeable percentage of patients seen by community health centers, the HPCA strongly supports this measure."*

This bill was enacted as Act 155, Session Laws of Hawaii 2014.

Eleven years later, we continue to recognize the importance of research on the health care outcomes and quality of life for all of Hawaii's people. The more we learn the better we are able to act.

**For these reasons, the HPCA urges your favorable consideration of this measure.**

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or [eabe@hawaiiipca.net](mailto:eabe@hawaiiipca.net).



## THE QUEEN'S HEALTH SYSTEMS

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To: The Honorable Donovan M. Dela Cruz, Chair  
The Honorable Sharon Moriwaki, Vice Chair  
Members, Senate Committee on Ways and Means

From: Kanilehua Kim, Native Hawaiian Health and Community Engagement, Queen's Health Systems

Jace Mikulanec, Director, Government Relations, The Queen's Health Systems

Date: March 28, 2025

Re: Support for HB1300 HD1 SD1 - Relating to Cancer

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The Queen's Health Systems (Queen's) is a nonprofit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, and more than 10,000 affiliated physicians, caregivers, and dedicated medical staff statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to provide testimony in support of HB1300 HD1 SD1, which appropriates funds to the University of Hawai'i Cancer Center to conduct a multiethnic cohort study focusing on the social determinants of health, lifestyles, environmental exposures, and resilience factors of Native Hawaiians, Pacific Islanders, and Filipinos, including an analysis of the health effects and risks of individuals living in close proximity to landfills in Nanakuli, Oahu.

The Queen's Medical Center is a long-standing member of the University of Hawaii Cancer Consortium, of which members have a common goal to eliminate cancer through research. The UH Cancer Center is one of only 71 institutions in the United States that hold the prestigious National Cancer Institute (NCI) designation and is the only NCI-designated center in the Pacific – making it particularly appropriate to undertake this study.

This proposed effort is in alignment with QHS's mission and vision while also underscoring the work that our Native Hawaiian Health program is undertaking to address systemic inequalities related to pollutant exposure and other environmental stewardship issues. Furthermore, the proposed study's holistic approach (including social determinants of health, resilience factors, and environmental exposures) ensures that community connections to land, culture, etc. are taken into account.

*The mission of The Queen's Health System is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.*

Thank you for the opportunity to testify in support of this measure.



Committee on Ways and Means  
Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair

Hearing Date: Friday, March 28, 2025

**ACS CAN SUPPORTS HB 1300 HD1 SD1 – RELATING TO CANCER.**

Cynthia Au, Government Relations Director – Hawai‘i Guam  
American Cancer Society Cancer Action Network

Thank you for the opportunity in **SUPPORT** HB 1300 HD1 SD1 – RELATING TO CANCER which appropriates funds to the University of Hawaii Cancer Center to conduct a multi-ethnic cohort study focusing on the social determinants of health, lifestyles, environmental exposures, and resilience factors of Native Hawaiians, Pacific Islanders, Filipinos and environmental factors.

The American Cancer Society Cancer Action Network (ACS CAN), the nonprofit, non-partisan advocacy affiliate of the American Cancer Society advocates for public policies that reduce death and suffering from cancer.

We are concerned about the amended language in SD1 due to the uncertainty of federal funding required to be expended first for the multi-ethnic cohort study.

Cancer is the second leading cause of death in Hawaii with over 2,000 deaths each year. This year over 9,000 residents of Hawaii will be diagnosed with the disease. Cancer incidence and mortality rates have decreased in Hawaii over the last decade, but despite this overall reduction, the disparities between ethnic populations continue to be of concern. Cancer is the leading cause of death among Asian Americans and the second-leading cause (after heart disease) among Native Hawaiian and other Pacific Islander individuals. Native Hawaiians and Pacific Islanders have one of the highest incidence rates of breast, lung, colorectal, cervical, pancreatic, gastric and liver cancers among all U.S. racial/ethnic populations.

#### Hawaii Statistics:

- Cancer is the leading cause of death in females and the second leading cause of death after heart disease for males over the age of one.<sup>i</sup>
- Cancer is the leading cause of death in Filipino women and the second leading cause of death after heart disease for Filipino men.<sup>ii</sup>
- Cancer is the leading cause of death in Native Hawaiian women and the second leading cause of death after heart disease for Native Hawaiian men.<sup>iii</sup>
- Cancer is the leading cause of death in Pacific Islander women and the second leading cause of death after heart disease for Pacific Islander men.<sup>iv</sup>

To aid in research, collecting data on Native Hawaiians, Pacific Islanders and Asian groups including Filipinos will help to provide information on the contributing factors to cancer disparities that currently exist. Data collection will aid in future research to improve health outcomes for these minority populations.

The cancer death rate is 20% higher for individuals from the US counties with the lowest average of incomes compared to counties with a higher average of incomes. According to the US Census, there are currently over 200,000 Filipinos in the state. Research is critical to understanding and reducing cancer disparities, as well as examining gaps in cancer prevention and care delivery that contribute to these disparities.

The University of Hawaii Cancer Center is one of 72 research organizations in the U.S. designated by the National Cancer Institute (NCI) and the only one in the Hawaii Pacific region.<sup>v</sup> Its mission is to reduce the burden of cancer through research, education, patient care and community outreach with an emphasis on the unique ethnic, cultural and environmental characteristics of Hawaii and the Pacific. Cancer research focusing on Native Hawaiians, Pacific Islanders, and Filipinos is unique to Hawaii and the University of Hawaii Cancer Center and cannot be easily conducted anywhere else in the world. Findings will further help with receiving future research grants from National Cancer Institute specific to these minority populations.

ACS CAN supports the legislature to fund \$1 million over two years for the University of Hawaii Cancer Center to conduct a multi-ethnic cohort study for the population of Native Hawaiians, Pacific Islanders, and Filipinos unique to the state. All individuals should have equitable access to quality cancer care and an equal opportunity to live a healthy life. However, cancer does not affect everyone equally. Our ability to continue to make progress against cancer relies heavily on eliminating the inequities that exist in cancer care, including in research.

Thank you again for the opportunity to provide testimony in SUPPORT on this important matter. Should you have any questions, please do not hesitate to contact Government Relations Director Cynthia Au at 808.460.6109, or [Cynthia.Au@Cancer.org](mailto:Cynthia.Au@Cancer.org).

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<sup>i</sup> Leading Causes of Death by Sex and Race/Ethnicity State of Hawaii, 2018-2022, Dec. 1, 2023  
<https://hhdw.org/wp-content/uploads/2023/12/Leading-Cause-Death-RaceEth-Sex-2018-2022.pdf>

<sup>ii</sup> Leading Causes of Death by Sex and Race/Ethnicity State of Hawaii, 2018-2022, Dec. 1, 2023 <https://hhdw.org/wp-content/uploads/2023/12/Leading-Cause-Death-RaceEth-Sex-2018-2022.pdf>

<sup>iii</sup> Leading Causes of Death by Sex and Race/Ethnicity State of Hawaii, 2018-2022, Dec. 1, 2023  
<https://hhdw.org/wp-content/uploads/2023/12/Leading-Cause-Death-RaceEth-Sex-2018-2022.pdf>

<sup>iv</sup> Leading Causes of Death by Sex and Race/Ethnicity State of Hawaii, 2018-2022, Dec. 1, 2023  
<https://hhdw.org/wp-content/uploads/2023/12/Leading-Cause-Death-RaceEth-Sex-2018-2022.pdf>

<sup>v</sup> University of Hawaii Cancer Center <https://www.uhcancercenter.org/50years>



Aloha State Legislator,

My name is McKayla McCullah and I'm a young Native Hawaiian woman, member of the Wai'anae community, and volunteer with the American Cancer Society Cancer Action Network (ACS CAN). The negative impact of health disparities is something I'm used to seeing. Cancer, heart disease, and diabetes are some of the leading causes of death among Native Hawaiians. I am a granddaughter and niece to those who have fought these diseases and a family member to others who have lost their lives or are still fighting.

This is why I support HB 1300 HD1, which would fund a multiethnic cohort study by the University of Hawaii Cancer Center. The study would focus on understanding the social determinants of health, lifestyles, environmental exposures and resilience factors of Native Hawaiians, Pacific Islanders and Asian groups, including Filipinos in Hawaii relating to cancer outcomes. The collected data will aid in future research to improve health outcomes for underrepresented populations.



The statistics are staggering. In 2018, the UH Cancer Research Center found Hawai'i men and women experienced higher incidence of cancers of the liver and intrahepatic bile duct and stomach compared to other populations in the United States. Furthermore, breast cancer incidence and mortality were highest among Native Hawaiian women compared to any other racial or ethnic group in Hawaii. Also, lung cancer incidence is higher among Native Hawaiians, as well as Filipinos. Thyroid cancer incidence is highest in Filipino women.

We have experts who want to focus more on the people of their land. Why wouldn't we want to invest in that kind of research? With your help, we can make a difference and identify necessary data needed to make changes.

By finding and researching these facts of our Native Hawaiian communities, we can get to the root of these problems and hopefully identify solutions to benefit future generations. As a Kamehameha Alumni and beneficiary child of Bernice Pauahi Bishop, a Hawaiian princess who served her people before passing from breast cancer, I ask you to help us fight – fight for her and for our communities.

Sincerely,  
McKayla McCullah  
Makaha, HI

[Community Voice](#)

# More Data Needed To Help Reduce Cancer Disparities

House Bill 1301 would fund a study that focuses on Native Hawaiians, other Pacific Islanders and Asian communities in Hawaii.

By [Patricia Kalolaine Cornett](#)

March 17, 2023 · 3 min read



UH Cancer Center

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Cancer disparities are a significant public health issue in Hawaii, and our state legislators have the chance, and kuleana, to take a vital step toward helping everyone have a fair and just opportunity to prevent, detect, treat and survive cancer.

Cancer affects everyone but it does not affect everyone equally. Breast cancer incidence and mortality are highest among Native Hawaiian women compared to any other racial or ethnic group in



Hawaii. American Samoan men are **eight times more likely** to develop liver cancer.

The most recent Hawaii Cancer at a Glance report (2014-2018) indicates that lung and bronchus cancer incidence among males is highest among Native Hawaiian and Filipinos. And Filipinos have the highest proportions of late-stage prostate cancers.

I am a breast cancer survivor, so I know screenings can help detect cancer at an earlier stage and save lives. As part of my journey and my work as a health-care worker, I’m committed to helping women get their mammograms and will drive them to their appointment and then back home.

In 2021, I was sitting on my chemo chair when I noticed that among the people who were receiving treatment, I was the only Tongan.

**Top Cancer Sites for Native Hawaiians/Pacific Islanders (1998-2002)**

Cancer	Native Hawaiian	Samoan	Tongan	Non-Hispanic White (NHW)	Native Hawaiian/NHW Ratio	Samoan/NHW Ratio	Tongan/NHW Ratio
All Sites	531.6	566.7	428.8	587.0	0.9	1.0	0.7
Colorectal	65.7	43.1	--	65.6	1.0	0.7	--
Liver & IBD	16.3	54.5	--	6.7	2.4	8.1	--
Lung	109.8	111.9	107.0	89.2	1.2	1.3	1.2
Prostate	119.7	144.1	85.0	170.0	0.7	0.8	0.1
Stomach	18.8	53.0	--	9.9	1.9	5.4	--

Cancer	Native Hawaiian	Samoan	Tongan	Non-Hispanic White (NHW)	Native Hawaiian/NHW Ratio	Samoan/NHW Ratio	Tongan/NHW Ratio
All Sites	488.5	472.0	504.7	448.5	1.1	1.1	1.1
Breast	175.8	102.5	118.0	145.2	1.2	0.7	0.8
Cervical	12.3	18.1	--	8.1	1.5	2.2	--
Colorectal	44.0	38.6	--	47.6	0.9	0.8	--
Lung	69.7	56.9	--	59.0	1.2	1.0	--
Stomach	14.5	--	--	4.3	3.4	--	--

\*IBD = Intrahepatic Bile Duct

Source: NCI 2008. Cancer Incidence and Mortality Patterns among Specific Asian and Pacific Islander Populations in the U.S. <http://seer.cancer.gov/publications/apicancer/index.html>

A screenshot from a U.S. Department of Health and Human Services report.

“Where are my people and why am I the only one getting treatment?” I asked my husband.

So, I decided to look for them and was hired to reach out to my Tongan Community on the Koolau side, Waiahole, Kahaluu, Punaluu, Hauula, Kahuku, Laie and beyond, to share my story

and the importance of mammograms with them.

I currently have an information booth that provides information to mostly Pacific Islander women about the University of Hawaii Cancer Center and how to get a mammogram. For many of them, this is the first time they have signed up to get screened for the first time in several years.

Cancer research also saves lives. It is thanks to a clinical trial that I am now in remission after being diagnosed with cancer for a second time. In addition to helping women get their mammograms, I talk to my community about how crucial cancer research and clinical trials are to help improve cancer outcomes.

### **Cancer research also saves lives.**

As an American Cancer Society Cancer Action Network volunteer, I understand that besides doctors and researchers, our elected officials also play a pivotal role in improving the lives of people with cancer and their families.

**House Bill 1301** aims to provide funds that will allow the University of Hawaii Cancer Center to conduct a multiethnic cohort study that will focus on the different factors that contribute to higher incidence and higher mortality rates in certain cancers among Native Hawaiians and other Pacific Islanders, and Asian communities including Filipinos in Hawaii.

These are communities that face cultural, language and structural barriers to cancer care — including lack of transportation — and are largely understudied.

The collected data will help better understand cancer disparities and identify gaps in cancer prevention and care delivery that contribute to these disparities as well as how to address them.

In Hawaii, we believe in living pono. I urge our state lawmakers to honor this concept and approve the funding for the multiethnic study that can help end cancer as we know it, for everyone.

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Community Voices aims to encourage broad discussion on many topics of community interest. It's kind of a cross between Letters to the Editor and op-eds. This is your space to talk about important issues or interesting people who are making a difference in our world. Column lengths should be no more than

# Multiethnic study to reduce cancer disparities, promote equity

By Drs. Alika Maunakea,  
Loïc Le Marchand  
and S. Lani Park

Cancer is a complex disease that affects different ethnic groups in various ways, and studying these disparities can help develop effective prevention, early detection and treatment strategies to promote healthy lifestyles and health equity.

In Hawaii, cancer incidence and mortality rates have declined over the past decade, but cancer disparities remain a concerning issue. Native Hawaiians continue to have the highest cancer incidence and mortality rates among men and women and have higher incidences of breast and ovarian cancers. Similarly, Filipino Americans have high incidence rates for lung, colorectal and thyroid cancer and rapidly increasing rates of breast and prostate cancers.

National data typically aggregate health information for Asian Americans, Native Hawaiians and Pacific Islanders, ignoring the cultural and lifestyle diversity of these groups and masking their

marked differences in cancer incidence and outcomes. Studies primarily conducted in Hawaii, using disaggregated data, have shown that known risk factors, such as tobacco use and obesity, do not fully account for cancer disparities alone.

Additional factors, such as social determinants of health — including income and social stress — and environmental and occupational exposures, may contribute to differences in cancer occurrence and survival rates. However, due to gaps in the available data, additional risk and protective factors that may drive cancer disparities remain unknown. Likewise, little is known regarding the biological mechanisms that explain these disparities.

To address these critical gaps, a new multiethnic study in Hawaii that includes representation from affected communities is urgently

## ISLAND VOICES



*Dr. Alika Maunakea, left, is a professor of epigenetics and health disparities at John A. Burns School of Medicine, and director of the Consortium of Research Advancement Facilities and Training; Dr. Loïc Le Marchand, center, is a researcher focusing on the role of biological and environmental factors of cancer; Dr. Lani Park's research focuses on genetic, health behavioral and environmental factors that contribute to the racial/ethnic differences in cancer risk.*

needed. The University of Hawaii Cancer Center is one of 71 National Cancer Institute-designated cancer centers in the country and is uniquely positioned to conduct research on cancer disparities among Native Hawaiians, Pacific Islanders and Filipinos that cannot be easily conducted anywhere else in the world.

The Hawaii Legislature can support and help fund such a study, via House Bill 1301, which would help fill gaps in the available data

and provide a more comprehensive understanding of cancer risk and outcomes among different ethnic groups in the Islands. The multiethnic cohort study would focus on social determinants of health, lifestyles, environmental and occupational exposures, as well as resilience factors among Native Hawaiians, other Pacific Islanders and Filipinos.

If funded, this preliminary study would bolster chances of securing a National Institutes of Health grant and foster new valuable partnerships with communities to identify shared research priorities and support recruitment efforts. Findings from this multiethnic cohort study could lead to the development of culturally appropriate prevention and treatment strategies to reduce the risk of cancer-related health behaviors

and the occurrence of cancers. These strategies may be more effective as they are tailored to meet the specific needs of these communities, ultimately promoting health equity in Hawaii.

As researchers and advocates with the American Cancer Society Cancer Action Network (ACS CAN), we know that investing in the study of cancer disparities could ultimately reduce the burden of cancer in populations that have been underserved and underrepresented by bringing new insights into the social, environmental and biological factors that lead to these disparities. Thus, this study will ultimately provide Hawaii public health practitioners and the community with the necessary data to advance health equity for Filipinos, Native Hawaiians and Pacific Islanders.

We urge Hawaii legislators to support and fund the feasibility study by the UH Cancer Center, a critical step in building a future where all communities in Hawaii have an equal opportunity to prevent, detect and survive cancer.

**HB-1300-SD-1**

Submitted on: 3/27/2025 9:59:46 AM

Testimony for WAM on 3/28/2025 10:02:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Llasmin Chaine	Testifying for Hawaii State Commission on the Status of Women	Support	Written Testimony Only

Comments:

I stand in support of HB1300, HD1, SD1, appropriating funds for the UH Cancer Center to conduct its multiethnic cohort study, identifying the social, cultural, environmental, and economic determinants of cancers that are leading causes of death for Hawaii's women, and improving our community's ability to prevent, screen, detect, treat and increase survivorship.

**HB-1300-SD-1**

Submitted on: 3/26/2025 3:21:36 PM

Testimony for WAM on 3/28/2025 10:02:00 AM

Submitted By	Organization	Testifier Position	Testify
Master Shelby "Pikachu" Billionaire	Testifying for Ohana Unity Party & Kingdom of The Hawaiian Islands	Support	Written Testimony Only

Comments:

Subject: Urgent Support for H.B. No. 1300 – Fighting Cancer with Aloha and Equity

Aloha Kākou, Esteemed Lawmakers of the Thirty-Third Legislature,

I write with profound support for House Bill No. 1300, a vital appropriation to fund the University of Hawaii Cancer Center’s multiethnic cohort study on cancer disparities among Native Hawaiians, Pacific Islanders, and Filipinos. As the only National Cancer Institute-designated center in the Pacific (H.B. 1300, Section 1), it’s our beacon for understanding why our kānaka maoli face the highest cancer rates—e.g., breast cancer at 141/100,000 for Native Hawaiian women vs. 122/100,000 statewide (UH Cancer Center, 2023)—and why Nanakuli’s landfills may poison our ‘ohana. This bill is pono—a righteous step toward health equity and mālama ‘āina. I urge you to pass it, effective July 1, 2025—not the placeholder July 1, 3000—saving lives with knowledge and aloha.

**A Crisis of Disparity**

Cancer’s burden in Hawaii is easing—mortality dropped 15% since 2010 (DOH, 2023)—but not for all. Native Hawaiians lead in incidence (489/100,000) and deaths (188/100,000, UH Cancer Center, 2023), with Filipino women topping ovarian (14/100,000) and thyroid (21/100,000) rates (SEER, 2023). In Nanakuli, 8,000+ residents (Census, 2023), 60% Native Hawaiian (OHA, 2023), live near two landfills—county and private—where leachate risks (e.g., benzene, EPA, 2022) may spike cancer odds 20-30% (NIEHS, 2023). H.B. No. 1300 funds the UH Cancer Center to dig into these roots—social, lifestyle, and environmental—delivering answers no other center can.

**Why This Matters**

- Health Equity: Studying 10,000+ participants (est. cohort size, UH past studies) could pinpoint why Native Hawaiian women face 30% higher breast cancer risk (UH, 2023), saving 50-100 lives yearly (est., 5% mortality drop).

- Environmental Justice: Nanakuli’s soil and water tests (Section 2) may link landfill toxins to 200+ cancer cases (est., 25/100K incidence rise), pushing cleanup—\$10M saved in future care (DOH cost avg.).
- Local Resilience: Understanding Filipino thyroid spikes (2x U.S. average, SEER, 2023) or Pacific Islander strengths (e.g., diet resilience) could cut 300+ diagnoses (est., 10% reduction) across 400,000+ residents (Census, 2023).
- Economic Boost: Matching federal funds (Section 2) doubles impact—\$5M state + \$5M federal (est.) creates 20-30 jobs (UH scale) and \$1M in research spending (DBEDT multiplier).

### A Vision Grounded in Aloha

Picture a Nanakuli mom, free of cancer fears because we traced landfill risks, or a Hilo Filipina spared ovarian surgery thanks to early detection insights. H.B. No. 1300’s study—building on UH’s 20-year cohort legacy (UH Cancer Center, 2023)—is our kuleana to 120,000 Native Hawaiians, 30,000 Pacific Islanders, and 170,000 Filipinos (Census, 2023). It’s not just data; it’s dignity for 1,000+ families yearly (est., 10% at-risk).

### A Call to Refine and Act

This bill is gold, but its July 1, 3000, start (Section 3) delays justice—cancer won’t wait centuries. I humbly propose:

1. Fund It Right: Appropriate \$5M (2025-2026, 2026-2027)—matching \$5M federal (NCI avg.)—for 10,000 participants, Nanakuli tests, and staff (\$500K/year, UH est.).
2. Start Now: Shift to July 1, 2025—50-100 lives (est.) and \$20M in care costs (DOH scale) hang in the balance over five years.
3. Pass It Swiftly: Approve this session—results by 2028 could cut disparities 10-15% (UH projection).

H.B. No. 1300 is Hawaii’s chance to lead—researching our people, our way, for our future. Mahalo nui loa for your dedication—let’s fund this fight with aloha and urgency!

Me ka Mahalo a me ke Aloha,

Master Shelby "Pikachu" Billionaire, HRM

Ohana Unity Party, Chairman

[www.Ohanaunityparty.com](http://www.Ohanaunityparty.com)

Kingdom of The Hawaiian Islands, H.I.

**HB-1300-SD-1**

Submitted on: 3/25/2025 3:38:18 PM

Testimony for WAM on 3/28/2025 10:02:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
B.A. McClintock	Individual	Support	Written Testimony Only

Comments:

Please support this important bill. Mahalo.

**HB-1300-SD-1**

Submitted on: 3/25/2025 6:48:48 PM

Testimony for WAM on 3/28/2025 10:02:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Lynn Murakami Akatsuka	Individual	Support	Written Testimony Only

Comments:

I strongly support HB 1300, HD 1, SD 1 to appropriate funds to the University of Hawai'i Cancer Center to conduct a multiethnic cohort study that will examine social determinants of health, lifestyles, environmental exposures, and resilience factors of Native Hawaiians, Pacific Islanders, and Filipinos.

Cancer disparities are a significant public health issue and this study will provide evidence-bssed data to prevent, detect, treat, and survive cancer. Cancer does not affect everyone equally or have the same kind of treatment outcomes. This study will take us to the next level of knowledge and treatment options that would be appropriate for the individual.

Please pass this important bill HB 1300, HD 1, SD 1. Thank you for the opportunity to testify on this measure.

**HB-1300-SD-1**

Submitted on: 3/27/2025 8:19:33 AM

Testimony for WAM on 3/28/2025 10:02:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Andrew Lum	Individual	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Vice Chair Moriwaki, and Members of the Committee,

My name is Andrew Lum, and I am the Director of Fiscal Administration at the University of Hawai'i Cancer Center, though I am submitting this testimony as an individual and not as a representative of the University of Hawai'i or the UH Cancer Center.

I strongly support HB1300 HD1 SD1, which provides funding for a multiethnic cohort study to examine the social determinants of health, lifestyle factors, environmental exposures, and resilience factors affecting Native Hawaiians, Pacific Islanders, and Filipinos, including an analysis of the health effects and risks of individuals living in close proximity to landfills in Nanakuli, Oahu.

Cancer disparities remain a significant public health concern in Hawai'i, and this research is essential for understanding how environmental and social factors contribute to health outcomes. By supporting this bill, the Legislature will help advance solutions to address health inequities and improve the well-being of Hawai'i's communities.

I respectfully urge you to support HB1300 HD1 SD1 to ensure that this critical research moves forward.

Mahalo for the opportunity to provide testimony.

**Cheryl K. Okuma**  
**Wailuku, 96793**

To: Committee on Ways and Means  
Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair

RE: Support of HB 1300 HD1 SD1 – RELATING TO CANCER.

Hrg: Friday, March 28, 2025

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My name is Cheryl K. Okuma and I am an advocate for the American Cancer Society Cancer Action Network. I am in **SUPPORT** of HB 1300 HD1 SD1 – RELATING TO CANCER. Cancer affects everyone, but it does not affect everyone equally.

Cancer has touched myself, family members across generations, as well as friends in its many different forms. A multi-ethnic research is a positive step towards understanding challenges of cancer impacts in our ethnically diverse population. Research is a step towards progress in achieving equity in our fight against cancer.

Cancer is the second leading cause of death in Hawaii and the leading cause of death among Asian Americans and the second-leading cause (after heart disease) among Native Hawaiian and other Pacific Islander individuals.

Research is critical to understanding and reducing cancer disparities, as well as examining gaps in cancer prevention and care delivery that contribute to these disparities for minority populations unique to Hawaii.

I humbly ask for your SUPPORT and pass HB 1300 HD1 SD1 for state funding of \$1 million over two years on a multi-ethnic cohort study by the University of Hawaii Cancer Center of Native Hawaiians, Pacific Islanders and Asian groups including Filipinos.

Sincerely,  
Cheryl K. Okuma  
Wailuku, 96793

Rebecca “Becki” Ward  
Honolulu, 96816

To: Committee on Ways and Means  
Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair

RE: Strong Support of HB 1300 HD1 SD1 – RELATING TO CANCER.

Hrg: Friday, March 28, 2025

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My name is Rebecca “Becki” Ward and I am an advocate for the American Cancer Society Cancer Action Network and the University of Hawaii Cancer Center. I thank you for the opportunity to **SUPPORT** HB 1300 HD1 SD1 – RELATING TO CANCER, as fighting cancer is an issue I strongly support, based on personal experience.

I lost my husband to prostate cancer in 2006, and this experience has motivated me to get involved so that declining numbers of families ever have to deal with this illness and loss. I was in volunteer leadership with the American Cancer Society for 10 years, served on a national ACS Research Grant Peer Review Committee, and now serve on the Community Advisory Board of the UH Cancer Center. I know firsthand that research is critical to understanding and reducing cancer disparities, as well as examining gaps in cancer prevention and care delivery that contribute to these disparities.

I ask that you support funding for the University of Hawaii Cancer Center to conduct a multi-ethnic cohort study focusing on the social determinants of health, lifestyles, environmental exposures, and resilience factors of Native Hawaiians, Pacific Islanders, and Asians including Filipinos.

Cancer is the second leading cause of death in Hawaii, with over 2,000 deaths each year. It is the leading cause of death among Asian Americans and the second-leading cause (after heart disease) among Native Hawaiian and other Pacific Islander individuals.

Everyone should have equitable access to quality cancer care and an equal opportunity to live a healthy life. Our ability to continue to make progress against cancer relies heavily on eliminating the inequities that exist in cancer care, including research. Data collection will aid future research to improve health equity for minority populations unique to the people of Hawaii. Please support and pass HB 1300 HD1 SD1.

Sincerely,  
Rebecca “Becki” Ward  
Honolulu, 96816