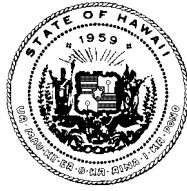


JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



CATHY BETTS
DIRECTOR
KA LUNA HO'OKELE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

STATE OF HAWAII
KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELAWE KANAKA
Office of the Director
P. O. Box 339
Honolulu, Hawaii 96809-0339

TRISTA SPEER
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

February 1, 2024

TO: The Honorable Senator Glenn Wakai, Chair
Senate Committee on Public Safety & Intergovernmental and Military Affairs

The Honorable Senator Joy A. San Buenaventura, Chair
Senate Committee on Health & Human Services

FROM: Cathy Betts, Director

SUBJECT: **SB 2486 – RELATING TO MISSING PERSONS.**

Hearing: February 2, 2024, 3:00 p.m.
Conference Room 225, State Capitol & Video Conference

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports this measure, offers comments, and defers to the Department of Law Enforcement, the Department of the Attorney General, and the Executive Office on Aging.

PURPOSE: Establishes a silver alert program within the Department of Law Enforcement to help locate and safeguard missing vulnerable adults with developmental disabilities or mental impairments who pose a credible threat to the health and safety of themselves or others.

There are drafting differences between this bill and SB 2305; this measure does not include an appropriation.

DHS acknowledges that establishing a Silver Alert system raises privacy concerns for the individual as well as the individual's family and may not be very effective if the system is not sufficiently resourced and coordinated. However, a [recent article](#) analyzing Silver Alert

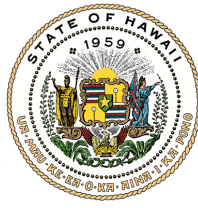
February 1, 2024

Page 2

activations in Texas from 2017-2022 described high activations involving older men using vehicles on holidays and Wednesdays during the hours of 10 p.m. and 3 a.m. Perhaps additional resources and strategies for providers and families could be developed to raise awareness about access to cars.

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

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



JORDAN LOWE
DIRECTOR

MICHAEL VINCENT
Deputy Director
Administration

JARED K. REDULLA
Deputy Director
Law Enforcement

SYLVIA LUKE
LT GOVERNOR
KE KE'ENA

STATE OF HAWAII | KA MOKU'ĀINA O HAWAII
DEPARTMENT OF LAW ENFORCEMENT

Ka 'Oihana Ho'okō Kānāwai

715 South King Street
Honolulu, Hawaii 96813

TESTIMONY ON SENATE BILL 2486
RELATING TO MISSING PERSONS
Before the Senate Committees on
Public Safety and Intergovernmental and Military Affairs
and
Health and Human Services
Friday, February 2, 2024; 3:00 p.m.
State Capitol Conference Room 225, Via Videoconference
Testifiers: Michael Vincent, or Jared Redulla

Chairs Wakai and San Buenaventura, Vice Chairs Elefante and Aquino, and members of the Committees:

The Department of Law Enforcement (DLE) **supports** Senate Bill 2486, but is asking that **Senate Bill 2305** which is also on the agenda for this hearing is passed out.

This bill establishes a Silver Alert program within the DLE to give the community a critical tool to help locate and protect missing kupuna and those who may be cognitively impaired or developmentally disabled. We currently have the Amber Alert program to serve the same function for endangered children and youth. However, a similar tool currently does not exist for the elderly, cognitively impaired, or developmentally disabled. This bill helps fill this extremely needed void for the protection of these people.

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



JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII

KENNETH FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'OKELE

STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
EXECUTIVE OFFICE ON AGING
NO. 1 CAPITOL DISTRICT
250 SOUTH HOTEL STREET, SUITE 406
HONOLULU, HAWAII 96813-2831

CAROLINE CADIRAO
DIRECTOR
Executive Office on Aging

Telephone
(808) 586-0100

Fax
(808) 586-0185

Testimony COMMENTING on SB2486
RELATING TO MISSING PERSONS

COMMITTEE ON PUBLIC SAFETY AND INTERGOVERNMENTAL AND MILITARY AFFAIRS
SENATOR GLENN WAKAI, CHAIR
SENATOR BRANDON J.C. ELEFANTE, VICE CHAIR

COMMITTEE ON HEALTH AND HUMAN SERVICES
SENATOR JOY A. SAN BUENAVENTURA, CHAIR
SENATOR HENRY J.C. AQUINO, VICE CHAIR

Testimony of Caroline Cadirao
Director, Executive Office on Aging
Attached Agency to the Department of Health

Hearing: Friday, February 2, 2024, 3:00 P.M., Conference Room 225

- 1 **EOA Position:** The Executive Office on Aging (EOA), an attached agency to the Department of
- 2 Health (DOH) providing comments on this measure and defers to the Department of Law
- 3 Enforcement.
- 4 **Fiscal Implications:** None.
- 5 **Purpose and Justification:** Like SB2305, this measure establishes a silver alert program within
- 6 the Department of Law Enforcement to help locate and safeguard missing persons who are
- 7 sixty-five years of age or older, cognitively impaired, or developmentally disabled. The

1 Executive Office on Aging is very grateful to the State Legislature for the multiple bills that
2 reflect the need we see in the community when someone with a cognitive impairment goes
3 missing.

4 **Recommendation:** EOA recommends SB2305 to be the preferred vehicle for this measure and
5 deferred to the Department of Law Enforcement for more information.

6 Thank you for the opportunity to testify.



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
1010 RICHARDS STREET, Room 122
HONOLULU, HAWAII 96813
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543
February 02, 2024

The Honorable Senator Joy A. San Buenaventura, Chair
Senate Committee on Health and Human Services
The Thirty-Second Legislature
State Capitol
State of Hawai'i
Honolulu, Hawai'i 96813

Dear Senator Buenaventura and Committee Members:

SUBJECT: SB2486 RELATING TO MISSING PERSONS

The Hawaii State Council on Developmental Disabilities **STRONGLY SUPPORTS SB2486**, which establishes a silver alert program within the Department of Law Enforcement to help locate and safeguard missing vulnerable adults with developmental disabilities or mental impairments who pose a credible threat to the health and safety to themselves or others.

A Silver Alert is activated when an elderly, developmentally, or cognitively impaired person has gone missing and is determined to be at risk. These Silver Alerts have proven effective in providing immediate information to the public, facilitating a prompt response and enhancing the chances of locating individuals who meet the specified criteria. The implementation of a Silver Alert system aligns with the best practices observed in thirty-seven states and the District of Columbia, as indicated by the National Association of State Units on Aging (NASUA).

By passing SB2486, the State Council and Alzheimer's Association can collaborate to apply for a grant under the Silver Alert Grant Program Act of 2008, which authorized the Attorney General to award grants to states to implement or improve a Silver Alert system.

Thank you for the opportunity to submit testimony in **strong support of SB2486**.

Sincerely,

Daintry Bartoldus
Executive Administrator

The Senate
The Thirty-Second Legislature
Committee on Public Safety and Intergovernmental and Military Affairs
Committee on Health and Human Services
Friday, February 2, 2024
3:00 p.m.

To: Senator Glenn Wakai, Chair, Public Safety and Intergovernmental and Military Affairs, and
Senator Joy San Buenaventura, Chair, Health and Human Services
Re: SB 2486, Relating to Missing Persons

Aloha Chairs Glenn Wakai and Joy San Buenaventura, Vice-Chairs Brandon Elefante and Henry Aquino, and Members of the Committees,

I am Lila Mower, President of Kokua Council, one of Hawaii's oldest advocacy groups with over 800 members and affiliates in Hawaii.

I also serve on the board of the Hawaii Alliance for Retired Americans, which has a local membership of over 20,000 retirees who are members of AFL-CIO, HSTA, ILWU, UPW, HGEA, IAM, CAN, and other organizations.

Mahalo for allowing me to submit testimony in **strong support of SB 2486** that seeks to establish a Silver Alert program in Hawaii, much like the thirty-seven states and the District of Columbia have implemented to locate missing kupuna.

Twenty-eight states and the District of Columbia have programs formally called "Silver Alert," and an additional nine states have similar programs that go by other names and serve to help locate missing kupuna in their communities.¹ Ten of these states have missing person alert systems that apply to larger categories of endangered persons or apply to all missing persons, regardless of age or impairment.²

"By 2035, when the last baby boomer reaches retirement age, nearly 1 in 3 Hawaii residents will be over the age of 60. The more significant change, demographers say, will be a sharp increase in the number of residents over 80 — an age at which people are more likely to have one or more disabilities and need additional health care and assistance with the basics of everyday life."³

As our population ages, the prevalence of dementia will grow, giving reason to support this measure. "Approximately 6 out of 10 people with dementia wander at least once. Up to half of wandering older adults with dementia will be seriously injured or die if not detected within 24 hours."⁴ "Community-aided immediate search activities are often successful at finding missing individuals with dementia."⁵

For the reasons cited above, I request that SB 2486 be passed. Mahalo!

¹ https://en.wikipedia.org/wiki/Silver_Alert

² <https://academic-accelerator.com/encyclopedia/silver-alert>

³ <https://www.civilbeat.org/2023/06/hawaiis-population-is-aging-fast-the-impacts-will-be-significant/>

⁴ <https://academic-accelerator.com/encyclopedia/silver-alert>

⁵ Analysis of Silver Alert Reporting System Activations for Missing Adults With Dementia in Texas, 2017 to 2022, Anthony D. McDonald, PhD, Valerie Danesh, PhD, RN, John M. Ray, PhD, and Alan B. Stevens, PhD



HIPHI Board

Misty Pacheco, DrPH
Chair
University of Hawai'i at Hilo

JoAnn Tsark, MPH
Secretary
John A. Burns School of Medicine,
Native Hawaiian Research Office

Debbie Erskine
Treasurer
ARCH-MEPS Consulting LLC, Owner

Keshia Adolpho, LCSW
Na'au Healing Center

Camonia Graham - Tutt, PhD
University of Hawai'i - West O'ahu

Carissa Holley, MEd
Hale Makua Health Services

Jennifer José Lo, MD
Hawai'i Pacific Health

Dina Shek, JD
Medical-Legal Partnership
For Children in Hawai'i

Garret Sugai
HMSA

Kathleen Roche, MS, RN, CENP
Kaiser Permanente

May Okihiro, MD, MS
John A. Burns School of Medicine,
Department of Pediatrics

Titiimaea Ta'ase, JD
State of Hawai'i, Deputy Public
Defender

HIPHI Initiatives

Coalition for a
Tobacco-Free Hawai'i

Community Health
Worker Initiative

COVID-19 Response

Hawai'i Drug & Alcohol Free
Coalitions

Hawai'i Farm to School Hui

Hawai'i Oral Health Coalition

Hawai'i Public Health Training Hui

Healthy Eating + Active Living

Kūpuna Collective

Date: January 31, 2024

To: Senator Glenn Wakai, Chair
Senator Brandon J.C. Elefante, Vice Chair
Members of the Committee on Public Safety &
Intergovernmental & Military Affairs

Senator Joy A. SanBuenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair
Members of the Committee on Health & Human Services

Re: Support for **SB2486** Relating to Missing Persons

Mtg: Friday, February 2, 2024, 3:00 PM

Hawai'i Public Health Instituteⁱ is in **Support of SB2486**, which would establish a silver alert program within the Department of Law Enforcement to help locate and safeguard missing persons who are 65 of age or older, cognitively impaired, or developmentally disabled.

By next year, the number of people living with Alzheimer's disease, the most common form of dementia, is expected to rise to over 35,000, a more than 20% increase from 2020. Caregivers to those with Alzheimer's disease provide more than 91 million hours of unpaid care valued at \$1.9 billion.ⁱⁱ

A person with dementia may not remember his or her name or address. Even in a familiar setting they can become disoriented. Six in ten people with dementia will wander at some point. When individuals with dementia are lost, they may show signs of anxiety, fear, or hostility. These can escalate to more aggressive behaviors. As the disease progresses, and individuals with dementia forget family members and societal norms, there may be cases of false reports and victimization, indecent exposure, and shoplifting.

We support policies that help to ensure the safety of loved ones. Even when caregivers do everything possible, the unexpected happens, and through this bill a strong support network can be developed and thereby support health and well being. Our communities should work together to keep our ohanas safe.

We applaud the Legislature for helping to strengthen our our communities. And thank this committee for this opportunity to submit supportive testimony for SB2486. We respectfully ask you to pass this measure.

Mahalo,

A handwritten signature in black ink that reads "Peggy Mierzwa". The signature is written in a cursive style and is positioned above the printed name.

Peggy Mierzwa
Director of Policy & Advocacy
Hawaii Public Health Institute

ⁱ Hawai'i Public Health Institute (HIPHI) is a hub for building healthy communities, providing issue-based advocacy, education, and technical assistance through partnerships with government, academia, foundations, business, and community-based organizations.

ⁱⁱ <https://www.hawaiiadrc.org/Data/Sites/1/media/HADSSP/booklet-state-plan-drd-3-23-web.rev102323.pdf>



January 31, 2024

To: COMMITTEE ON PUBLIC SAFETY AND INTERGOVERNMENTAL AND MILITARY AFFAIRS
Senator Glenn Wakai, Chair
Senator Brandon J.C. Elefante, Vice Chair
COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

Re: SUPPORT of SB2486 - Relating to Missing Persons (Silver Alert Program)

Hrg: Friday, February 2, 2024, 3:00 PM

The Hawai'i Public Health Association (HPHA) is a group of over 450 community members, public health professionals, and organizations statewide dedicated to improving public health. Our mission is to promote public health in Hawai'i through leadership, collaboration, education and advocacy. Additionally, HPHA aims to call attention to issues around social justice and equity in areas that extend beyond the traditional context of health (e.g., education, digital equity, cultural sensitivity), which can have profound impacts on health equity and well-being. Therefore, as stewards of public health, HPHA is also advocating for equity in all policies.

HPHA supports SB2486 as the bill aims to establish a silver alert program to help locate and safeguard missing persons who are sixty-five years of age or older, cognitively impaired, or developmentally disabled.

By next year, the number of people living with Alzheimer's disease is expected to rise to over 36,000. A person with dementia may not remember his or her name or address—and can become disoriented, even in familiar places. Six in ten people with dementia will wander at some point. When individuals with dementia are lost, they may show signs of anxiety, fear, or hostility—all of which can escalate to more aggressive behaviors. As the disease progresses and individuals with dementia forget family members and societal norms, there may be cases of false reports and victimization, indecent exposure, and shoplifting.

Hawaii is one of the few states in the nation that does not have a formalized silver alert. HPHA strongly supports SB2486 and respectfully asks that you pass this measure. Thank you for the opportunity to provide testimony on this important public health issue.

Respectfully submitted,

Holly Kessler
Executive Director



**Testimony to the Senate Joint Committee on Public Safety and Intergovernmental and
Military Affairs and Health and Human Services
Friday, February 2, 2024; 3:00 p.m.
State Capitol, Conference Room 225
Via Videoconference**

RE: SENATE BILL NO. 2486 – RELATING TO MISSING PERSONS.

Chair Wakai, Chair San Buenaventura, 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** Senate Bill No. 2486, RELATING TO MISSING PERSONS.

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 bill, as received by your Committee, would establish a “Silver Alert” Program within the Department of Law Enforcement to alert the public of missing persons for whom there is a credible threat to their health and safety.

We note that this bill is substantively similar to another measure on this agenda, Senate Bill No. 2305.

According to the Center for Disease Control:

- Alzheimer’s disease is one of the top 10 leading causes of death in the United States;
- The 6th leading of death among US adults; and
- The 5th leading cause of death among adults aged 65 years or older.

In 2023, an estimated 6.7 million Americans aged 65 year or older had Alzheimer's disease. **This number is projected to nearly triple to 14 million people by 2060.**

Further, death rates for Alzheimer's disease are increasing, unlike heart disease and cancer death rates that are on the decline. Dementia, including Alzheimer's disease, has shown to be under-reported in death certificates and therefore the proportion of older people who die from Alzheimer's may be considerably higher.

In Hawaii, Alzheimer's disease is a growing public health crisis:

- 29,000 people aged 65 and older are living with Alzheimer's in Hawaii;
- 6.7% of people aged 45 and older have subjective cognitive decline;
- 60,000 family caregivers bear the burden of the disease in Hawaii;
- 91 million hours of unpaid care are provided by Alzheimer's caregivers;
- \$1.9 billion is the value of the unpaid care; and
- \$240 million is the cost of Alzheimer's to the State Medicaid Program.

For these reasons, during the interim prior to the 2024 Regular Session, the HPCA worked closely with the Hawaii Chapter of the Alzheimer's Association in researching, drafting, and providing outreach on the bill that is presently before you. Accordingly, we are honored to partner with the Alzheimer's Association on this important measure and urge your favorable consideration.

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.

SB-2486

Submitted on: 1/31/2024 5:41:43 PM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Louis Erteschik	Testifying for Hawaii Disability Rights Center	Support	Remotely Via Zoom

Comments:

We think this is a great idea and are in strong support. At the hearing I will relay a personal experience which illustrates the need for greater coordination in situations such as this.



Testimony to
the Senate Committee on Public Safety and Intergovernmental and Military Affairs
and the Senate Committee on Health and Human Services
Friday, February 2, 2024, 3:00 p. m.
State Capitol Conference Room 225 and via videoconference

Re: SB 2486 Relating to Missing Persons

Dear Chair Wakai, Vice Chair Elefante, Honorable Members of the Senate Committee on Public Safety and Intergovernmental and Military Affairs, Chair San Buenaventura, Vice Chair Aquino, and Honorable Members of the Senate Committee on Health and Human Services:

I am Gary Simon, a member of the board of the Hawai'i Family Caregiver Coalition, whose mission is to improve the quality of life of those who give and receive care by increasing community awareness of caregiver issues through continuing advocacy, education, and training. I am testifying as an individual who has worked in healthcare for over thirty-five years, and I am offering testimony on behalf of the Hawai'i Family Caregiver Coalition.

The **Hawai'i Family Caregiver Coalition strongly supports SB 2486**, which establishes a silver alert program within the Department of Law Enforcement to help locate and safeguard missing vulnerable adults with developmental disabilities or mental impairments who pose a credible threat to the health and safety to themselves or others.

The silver alert program can save lives.

We urge you to support the silver alert program and SB 2486, and we urge you to recommend its passage.

Mahalo for seriously considering the bill.

Very sincerely,

A handwritten signature in black ink that reads "Gary Simon".

Gary Simon



Email gsimon@aarp.org

2024 Hawaii Leadership Board

Lori McCarney, Chair
Community Advocate

Dr. Pokii Balaz, Immediate
Past Chair
*Obama Foundation
Kokua Kalih Valley*

Tricia Medeiros, Past Chair
*Chief Operating Officer
The Plaza Assisted Living*

Gina Fujikami, MD
*The Queen's Medical
Center*

Travis Kikuchi
*Senior Vice President
Central Pacific Bank*

Kai Ohashi
*Financial Advisor
Edward Jones*

Michael Robinson
*Vice President
Hawaii Pacific Health*

Kimberly Soares
*Vice President
Atlas Insurance*

Gino Soquena
*Executive Director
Hawaii Building and
Construction Trade Council*

Gordon Takaki
*Past President
Hawaii Island Chamber of
Commerce*

Cary Tanaka
*Past President
Island Insurance
Companies*

Caroline Witherspoon
*President
Becker Communications*

LJ R. Duenas
*Executive Director
Alzheimer's Association*

Testimony to the Senate Committee on Public Safety and Intergovernmental and Military Affairs and

the Senate Committee on Health and Human Services

Friday, February 2, 2024; 3:00 p.m.

Hawaii State Capitol, Conference Room 225, and Videoconference

RE: SENATE BILL NO. 2486 – RELATING TO MISSING PERSONS

Chairs Wakai and San Buenaventura, Vice Chairs Elefante and Aquino, and Members of the Committees:

I am Ron Shimabuku, Director of Public Policy and Advocacy for the Alzheimer's Association. We testify in **STRONG SUPPORT**.

The Alzheimer's Association was established to assist those facing Alzheimer's disease and other dementias by providing local support groups and educational resources while advancing crucial research and public policy initiatives.

Alzheimer's disease is a public health crisis across the country. In Hawaii, approximately 29,000 individuals aged 65 and older live with Alzheimer's disease. This figure is projected to increase to over 35,000 by next year. A person with dementia may not remember his or her name or address—and can become disoriented, even in familiar places. Six in ten people with dementia will wander at some point. When individuals with dementia are lost, they may show signs of anxiety, fear, or hostility—all of which can escalate to more aggressive behaviors. As the disease progresses and individuals with dementia forget family members and societal norms, there may be cases of false reports and victimization, indecent exposure, and shoplifting.

The bill, as received by your Committee, would establish a silver alert program within the Department of Law Enforcement to help locate and safeguard missing vulnerable adults with developmental disabilities or mental impairments who pose a credible threat to the health and safety of themselves or others.

We would like to acknowledge the multiple measures on the agenda that serve a similar purpose to establish a silver alert program in Hawaii: Senate Bill Nos. 2486 and 2305. We appreciate the introducers for ensuring there is a discussion on the issue.

Our research indicates that Hawaii is the only state that does not have a formalized silver alert program. There is no federal funding or mandate for it. It is the onus of the state or jurisdiction to establish the alert in statute, policy, or procedure. Across the nation, we have seen varying population criteria used, which include those who are at the age of sixty-five or older, with cognitive impairments, or with developmental disabilities such as autism spectrum disorder, cerebral palsy, fetal alcohol spectrum disorders, Down syndrome, attention deficit hyperactivity disorder (ADHD), or epilepsy.

We would like to note our discussions with various community and business organizations, government agencies, and public and private sector unions, including, but not limited to, the Department of Law Enforcement (DLE), the State Council on Developmental Disabilities, the Executive Office on Aging (EOA), Department of Transportation (HDOT), Department of Human Services (DHS), Hawaii Primary Care Association (HPCA), AARP Hawaii, Papa Ola Lokahi, Hawaii Public Health Association (HPHA), Hawaii Public Health Institute (HIPHI), the Association of Hawaii Civic Clubs, Catholic Charities Hawaii, Hawaii Disability Rights Center, Kokua Council, Hawaii Parkinson Association (HPA), Hawaii Association for Behavioral Analysis (HABA), United Public Workers (UPW), Hawaii Government Employees Association (HGEA), and UNITE HERE! Local 5. We recognize their support on this issue, exemplified through testimony submitted on House Bill No. 1774, passed out of the House Committee on Human Services on January 30, 2024.

The Alzheimer's Association remains steadfast in its position to seek a comprehensive approach that addresses the needs of persons living with dementia and their families and effectively disseminates relevant information about missing individuals with Alzheimer's disease or other dementias to the appropriate local law enforcement and community support networks. **We ask you to pass Senate Bill No. 2486 or 2305** for continued discussions.

Mahalo for the opportunity to testify. If you have questions, please contact me at 808.451.3410 or rkshimabuku@alz.org.



Ron Shimabuku
Director, Public Policy and Advocacy
Alzheimer's Association – Hawaii



Testimony before the Senate
Committee on Public Safety and Intergovernmental and Military Affairs
Committee on Health and Human Services

SB 2305 RELATING TO MISSING PERSONS
SB 2486 RELATING TO MISSING PERSONS

Friday, February 2, 2024 at 3:00 pm
Conference Room 225
State Capitol

By Glen Higa, President
Hawaii Parkinson Association

Chair Glenn Wakai, Chair Joy San Buenaventura, and Members of the Committees:

The Hawaii Parkinson Association strongly supports SB 2305 and SB 2486. Both bills aim to establish a silver alert program to help locate and safeguard missing persons who are cognitively impaired or developmentally disabled.

Parkinson's is one of the fastest growing neurological diseases, with someone in the US diagnosed every 6 minutes. Hawaii's approximately 8,000 diagnosed, is expected to double by 2030. Many of them will also suffer from cognitive impairment or dementia.

In Hawaii, we take care of our kupuna and it is vitally important that we have a system in place to keep them safe. Hawaii is one of the few states in the nation that does not have a formalized system in place. We strongly urge the Committees to pass either bill to enable us to begin to put one together.

Mahalo for the opportunity to testify.

The Hawaii Parkinson Association is a local all-volunteer nonprofit organization and was established in 1996. The Association's primary mission is to positively impact the lives of those affected by Parkinson's Disease through support, education, programs, and other services.



Cade Watanabe, Financial Secretary-Treasurer

Gemma G. Weinstein, President

Eric W. Gill, Senior Vice-President

February 1, 2024

Senate Committee on Public Safety and Intergovernmental and Military Affairs
Chair Wakai, Vice Chair Elefante & Members of the Committee
Senate Committee on Health and Human Services
Chair San Buenaventura, Vice Chair Aquino & Members of the Committee

Re: **Bill SB 2305 & SB 2486 – RELATING TO MISSING PERSONS**

Chairs Wakai and San Buenaventura, Vice Chairs Elefante and Aquino and Members of the Committees,

UNITE HERE Local 5 represents working people throughout Hawaii's hotel, food service and healthcare industries. We are in SUPPORT of SB 2305 & SB 2486. Bills and programs aimed to help locate and safeguard missing persons who are sixty-five years of age and older, cognitively impaired, or developmentally disabled should be established and funded.

There are approximately 29,000 individuals in Hawaii living with Alzheimer's disease and that number is projected to increase to 35,000 by next year. Many of our members have already been touched by this heart-breaking disease. Others will likely to be affected in the future.

The elderly, cognitively impaired and developmentally disabled are among the most vulnerable in our community. We appreciate the introducers of these bills. Please pass Bills SB 2305 & SB 2486.

Thank you for the opportunity to testify.



February 1, 2024

TESTIMONY IN SUPPORT OF SB2305 AND SB2486

TO: Senate Committee on Public Safety and Intergovernmental and Military Affairs

Senate Committee on Health and Human Services

As an elder care attorney who currently represents a number of older individuals with Alzheimer's disease (or other form of dementia), I am writing in strong support of SB2305 and SB2486.

We have a rapidly increasing number of elders in our community living with Alzheimer's disease. Many are left home alone by well-meaning family members who do not realize the risk to their loved one. Others live alone and can no longer appreciate their own impairment. When alone and outside of their home, these elders can become confused, disoriented and unable to find their way home. In this vulnerable state, they become lost, may miss essential medications, and may be victimized by criminals who will empty their wallets and take advantage of their confusion.

The people of Hawaii value our kupuna and therefore must establish a Silver Alert program to help locate and safeguard these older individuals. With our culture and collective values, Hawaii should not remain one of the few states without this important emergency tool.

I ask that members of this committee remember their own kupuna and pass SB2305 and SB2486.

LAURIE T.S. ADAMSHICK

SB-2486

Submitted on: 1/30/2024 10:43:01 PM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dara Yatsushiro	Individual	Support	Written Testimony Only

Comments:

Please support, thank you.

SB-2486

Submitted on: 1/31/2024 8:42:14 PM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Calvin Hara	Individual	Support	Written Testimony Only

Comments:

Chairs Glenn Wakai and Joy San Buenaventura, Vice Chairs Brandon Elefante and Henry Aquino, and Members of the Committees:

My name is Calvin Hara and I am in STRONG SUPPORT of SB2486. The bill aims to establish a silver alert program to help locate and safeguard vulnerable missing persons.

In my thirty years of senior care, I have seen situations where a person wanders from home and is missing for a long time. Such situation necessitates an concerted effort to locate the person. The Silver Alert system will help.

By next year, the number of people living with Alzheimer’s disease is expected to rise to over 36,000. A person with dementia may not remember his or her name or address—and can become disoriented, even in familiar places. Six in ten people with dementia will wander at some point. When individuals with dementia are lost, they may show signs of anxiety, fear, or hostility—all of which can escalate to more aggressive behaviors. As the disease progresses and individuals with dementia forget family members and societal norms, there may be cases of false reports and victimization, indecent exposure, and shoplifting.

Hawaii is one of the few states in the nation that does not have a formalized silver alert. I request that SB 2486 be passed.

Thank you.

Calvin Hara

Honolulu, Hawaii

cmhara@comcast.net

SB-2486

Submitted on: 1/31/2024 11:47:25 PM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Cindy Aban	Individual	Support	Written Testimony Only

Comments:

Subject: Testimony in Support of SB2305 and SB2486 - Establishment of a Silver Alert Program

To Chairs Glenn Wakai and Joy San Buenaventura, Vice Chairs Brandon Elefante and Henry Aquino, and Members of the Committees:

My name is Cindy Aban, a Medical Assistant and Executive Board Member of the Healthcare Division at Unite Here Local 5, expressing **STRONG SUPPORT** for SB2305 and SB2486.

The proposed bill is crucial as it seeks to establish a silver alert program, providing a vital mechanism to locate and ensure the safety of vulnerable missing persons.

I remember when I was a child, my family faced the challenge of locating my late great-grandfather, Tomas Dolormente, who suffered from dementia. We were fortunate to promptly locate him by utilizing local Filipino radio stations, the support of friends and family, and assistance from HPD. This program's implementation will prove invaluable for future generations.

Anticipating a significant increase in Alzheimer's cases to over 36,000 next year, the urgency cannot be overstated. Individuals with dementia, susceptible to disorientation even in familiar settings, often exhibit signs of anxiety, fear, or aggression. With a projected six in ten individuals with dementia wandering at some point, the potential for false reports, victimization, indecent exposure, and shoplifting escalates.

This initiative will also honor hardworking families juggling multiple jobs and caring for their loved ones. Recognizing the challenges faced by these families, the silver alert program provides essential support.

Notably, Hawaii lacks a formalized silver alert despite being one of the few states without such a system. I earnestly request the passage of SB2305 and SB2486 to address this gap.

Thank you for providing me with the opportunity to testify.

Mahalo!

Cindy Aban

Waipahu, HI
Email: caban54@gmail.com

SB-2486

Submitted on: 2/1/2024 8:23:12 AM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kathleen Wyatt	Individual	Support	In Person

Comments:

Dear Chair, Vice-Chair, and Members of the Committee:

My name is Kathy Wyatt, and I am the President of Hale Hau`oli Hawai`i, an adult day care group. At Hale Hau`oli Hawai`i we care for over 80 clients that are living with Alzheimer's and other dementias.

Those living with Alzheimer's and other dementias are most times confused or disoriented if they are not in their normal surroundings. If they have left their safe place, either from home, or a nursing home, or other facilities where they stay for safety, they may not know how to get back or to be able to ask for help. I have been working with these people for over 25 years and I have seen the devastating effects of someone being out alone and not knowing how to get home. They get lost, they get frightened, and sometimes they end up in unsafe locations. They may find a comfortable place to just sit or lay down and they stay there, hoping someone will find them. Many have not been found until it is too late and they have perished either from exposure to inclement weather or other situations. I have seen this happen here in Hawai`i and other states. It is traumatic for families and caregivers because they were unable to find their person.

Issuing a Silver Alert, similar to an Amber Alert for children, is really important to the effort of quickly finding someone who is lost before it is too late, enabling more people to help find these folks.. I ask that SB2486 be passed for the safety of our citizens.

Thank you for allowing me to testify.

Kathy Wyatt

808-292-4665

Waipahu, HI

kwyatt01@aol.com

SB-2486

Submitted on: 2/1/2024 9:31:30 AM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Nancy Rose	Individual	Support	Written Testimony Only

Comments:

Testimony on Senate Bill No. SB2486

RELATING TO MISSING PERSONS

Friday, February 2, 2024 at 3:00 pm

Conference Room 329 & Videoconference

State Capitol

415 South Beretania Street

Chairs Glenn Wakai and Joy San Buenaventura, Vice Chairs Brandon Elefante and Henry Aquino, and Members of the Committees:

My name is Nancy Rose and I am a volunteer with the Alzheimer’s Association. I am in STRONG SUPPORT of SB2486. The bill aims to establish a silver alert program to help locate and safeguard vulnerable missing persons.

My father lived with some form of dementia for 10-15 years until he passed away in 2016. Before his disease became severe, he would take walks in his neighborhood and sometimes come home to his wife saying that he saw Ben Rothlisberger, the (then) quarterback for the Pittsburgh Steelers. She knew this wasn’t true and accepted his version of reality. As his disease progressed, he fortunately stopped taking those walks! I shudder to think of him walking and becoming disoriented and lost. I’d sure like to know that in Hawaii we could have a Silver Alert program to assist families when our loved ones may wander.

By next year, the number of people living with Alzheimer’s disease is expected to rise to over 36,000. A person with dementia may not remember his or her name or address—and can become disoriented, even in familiar places. Six in ten people with dementia will wander at some point. When individuals with dementia are lost, they may show signs of anxiety, fear, or hostility—all of which can escalate to more aggressive behaviors. As the disease progresses and individuals with dementia forget family members and societal norms, there may be cases of false reports and victimization, indecent exposure, and shoplifting.

Hawaii is one of the few states in the nation that does not have a formalized silver alert. I request that SB2486 be passed.

Mahalo for the opportunity to testify!

Nancy Rose

Pukalani, Maui, Hawaii

808-264-2663

SB-2486

Submitted on: 2/1/2024 11:44:09 AM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Greg Misakian	Individual	Support	Written Testimony Only

Comments:

My name is Greg Misakian and I currently serve as the 2nd Vice President of Kokua Council.

I support SB2486.

DOMESTIC VIOLENCE AND DISABILITIES

WHY IT MATTERS

Women with developmental disabilities have among the highest rates of physical, sexual and emotional violence perpetrated by intimate partners and family members.¹ Disabled individuals are at greater risk of severe physical and sexual violence than non-disabled persons, and many disabled victims of violence experience multiple assaults.^{2,3} Domestic abuse victims with disabilities are often more dependent on their caretakers than victims without disabilities, and face many barriers to reporting abuse and seeking services.⁴ Victims who do report abuse or seek services often do not find adequate help, since many programs that serve domestic violence victims are not equipped or trained to offer proper care to disabled victims.⁴

DID YOU KNOW?

- Women with disabilities had a 40% greater risk of violence than women without disabilities.⁵
- Women with disabilities are at particular risk for severe violence.⁵
- The most common perpetrators of violence against women with disabilities are their male partners.⁵
- Studies estimate that 80% of disabled women have been sexually assaulted.⁶
- Women with disabilities are three times more likely to be sexually assaulted than women without disabilities.⁷
- One study showed that 47% of sexually abused women with disabilities reported assaults on more than ten occasions.⁸
- Approximately 48% of substantiated cases of abuse involve elder adults who are not physically able to care for themselves.⁹
- Disabled children are more than twice as likely as children without disabilities to be physically abused, and almost twice as likely to be sexually abused.¹⁰
- Virtually all women with disabilities who were sexually assaulted also reported social, emotional, and behavioral harm.¹¹

REPORTING ABUSE

- Studies estimate that between 70% and 85% of cases of abuse against disabled adults go unreported.¹²
- One study found that only 5% of reported crimes against people with disabilities were prosecuted, compared to 70% for serious crimes committed against people with no disabilities.¹²
- Disabled victims are more vulnerable to threats by their abusers if they report the abuse.¹³

BARRIERS TO SEEKING SERVICES

- People with disabilities often lack accessible services due to limited resources, lack of transportation (especially in rural communities), or structural limitations of service facilities.¹⁴
- Some disabled victims lack the skills or abilities necessary to act independently to seek help.¹³
- Many disabled victims lack knowledge about services. Public information and awareness education are generally not distributed in Braille, large print, or audio tape and do not define domestic violence in ways that people with disabilities can relate to.¹³
- Disabled victims of violence are heavily dependent on their abusive primary caretakers and run the risk of losing their caretaker if they report abuse.¹³
- Victims may experience an increased risk of being institutionalized or losing their basic decision-making rights if they are viewed as unable to take care of themselves without the help of their abuser.¹³
- Disabled victims may be at greater risk for losing child custody if they are viewed as being unable to care for children independently from an abusive primary caretaker.¹³

DISABILITY TRAINING

- Only 35% of shelters surveyed have disability awareness training for their staff and only 16% have a dedicated staff person to deliver services to women with disabilities.¹⁵
- Service providers often lack the training and sensitivity necessary to serve victims with disabilities.¹⁴
- Some people see people with disabilities as less credible than nondisabled victims.²⁶
- Some people think abusive treatment is necessary to manage people with disabilities or blame disabled victims for the abuse they suffer, and because they hold these beliefs they consider domestic violence against people with disabilities to be justified.¹³

PROTECTIONS FOR DISABLED VICTIMS OF VIOLENCE¹⁶

The Violence Against Women Act and Victims with Disabilities

The Violence Against Women Act (VAWA) provides support to victims with disabilities. Although the original version of VAWA did not provide funding for victims with disabilities, the 2000 reauthorization authorized a grant program to provide education and technical assistance to service providers to better meet the needs of disabled victims of violence.

The 2005 reauthorization of VAWA further expanded coverage for disabled victims. The 2005 reauthorization:

- Expanded education, training, and services grant programs.
- Included added construction and personnel costs for shelters that serve disabled victims of domestic violence to the purpose areas that can receive VAWA funding.
- Focused on the development of collaborative relationships between victim service organizations and organizations that serve individuals with disabilities.
- Provided funding for the development of model programs that implement advocacy and intervention services within organizations servicing disabled individuals.

Protection and Services for Disabled Victims:

Although the Department of Justice authorized \$10 million per year for FY 2007 through FY 2011, only \$7.1 million was allocated for protections and services for disabled victims in FY 2007. The Campaign for Funding to End Domestic and Sexual Violence requests \$10 million for FY 2008 and subsequent years to be allocated to serve victims with disabilities.

FOR MORE INFORMATION

For more information or to get help, please contact:
The National Domestic Violence Hotline at 1-800-799-SAFE
The National Sexual Assault Hotline at 1-800-656-HOPE

SOURCES

¹ Abramson, W., et al. (Ed). "Violence Against Women with Developmental or Other Disabilities." *Impact*. 13(3).

² Brownridge, Douglas. (2006) "Partner Violence Against Women With Disabilities: Prevalance, Risk, and Explanations." *Violence Against Women*. (12)9.

³ Abramson, W., et al. (Ed). "Violence Against Women with Developmental or Other Disabilities." *Impact*. 13(3).

⁴ West Virginia Coalition Against Domestic Violence. "People With Disabilities." Resources. Accessed online at http://www.wvcadv.org/people_with_disabilities.htm, July 2007.

⁵ Brownridge, Douglas. (2006) "Partner Violence Against Women With Disabilities: Prevalance, Risk, and Explanations." *Violence Against Women*. (12)9.

⁶ Protection and Advocacy, Inc. (2003) "Abuse and Neglect of Adults with Developmental Disabilities: A Public Health Priority for the State of California."

⁷ Brownridge, Douglas. (2006) "Partner Violence Against Women With Disabilities: Prevalance, Risk, and Explanations." *Violence Against Women*. (12)9.

⁸ Abramson, W., et al. (Ed). "Violence Against Women with Developmental or Other Disabilities." *Impact*. 13(3).

⁹ Metropolitan Life Insurance Company. (2004) "Preventing Elder Abuse." *Since You Care* Guide. New York.

¹⁰ Abramson, W., et al. (Ed). "Violence Against Women with Developmental or Other Disabilities." *Impact*. 13(3).

¹¹ Abramson, W., et al. (Ed). "Violence Against Women with Developmental or Other Disabilities." *Impact*. 13(3).

¹² Protection and Advocacy, Inc. (2003) "Abuse and Neglect of Adults with Developmental Disabilities: A Public Health Priority for the State of California."

¹³ West Virginia Coalition Against Domestic Violence. "People With Disabilities." Resources. Accessed online at http://www.wvcadv.org/people_with_disabilities.htm, July 2007.

¹⁴ Chang, J. C., et al. (2003). "Helping women with disabilities and domestic violence: Strategies, limitations, and challenges of domestic violence programs and services." *Journal of Women's Health*. 12(7): 699-708.

¹⁵ Nosek, Ph.D. Margaret A. et al. "Violence Against Women with Disabilities—Fact Sheet #1: Findings from Studies 1992-2002." Baylor College of Medicine.

¹⁶ National Coalition Against Domestic Violence. (2006) "Comparison of VAWA 1994, VAWA 2000 and VAWA 2005 Reauthorization Bill." Accessed online at http://www.ncadv.org/files/VAWA_94_00_05.pdf, July 2007.

For more information please see our website at ncadv.org



The Public Policy Office of the National Coalition Against Domestic Violence (NCADV) is a national leader in the effort to create and influence Federal legislation that positively affects the lives of domestic violence victims and children. We work closely with advocates at the local, state and national level to identify the issues facing domestic violence victims, their children and the people who serve them and to develop a legislative agenda to address these issues. NCADV welcomes you to join us in our effort to end domestic violence.

SURVIVORS WITH DISABILITIES FACTS

Gender-based violence impacts the lives of countless women and their families across the United States. Women and girls of all ages, income levels, racial and ethnic communities, sexual orientations and abilities experience violence in the form of sexual assault, domestic violence, dating violence, trafficking and stalking. Women and girls with disabilities are more at risk for violence, experience violence more often, more severely, and have more barriers to getting support.

The Americans with Disabilities Act (ADA), enacted in 1990, provides protections from discrimination for individuals with disabilities. Under Titles II and III of the ADA, domestic violence shelters must be accessible. To be accessible, shelters and offices are required to: admit people with disabilities into their shelter, provide reasonable accommodations, and eliminate structural barriers to access.

At YWCA, we know that not all violence is acknowledged or responded to equally and that some victims go unrecognized altogether. Women and girls with disabilities are often left out of the mainstream dialogue about gender-based violence altogether despite their heightened risk. YWCA is the largest network of domestic violence service providers in the country and is also dedicated to promoting women's health and safety through a variety of local programs, legislative advocacy, and issue education.

FACTS

- More than 80 percent of women with disabilities have been sexually assaulted. 50 percent of those women have been assaulted more than ten timesⁱ. In addition, research suggests that women with disabilities experience more frequent and more severe acts of violenceⁱⁱ.
- Between 97 percent - 99 percent of abusers are known and trusted by survivors, and may include family members (32 percent) or other caretakers, home health aides and living facility attendants (44 percent)ⁱⁱⁱ. Some data has shown that abusers see people with disabilities as “ideal victims” because they are less likely to report, and less likely to be believed^{iv}.
- Domestic violence can cause disability—it is the leading cause of injury to women between the ages of 15 and 44 in the United States^v
- In 2013, the rate of violent victimization against persons with disabilities was at least double the rate for those without disabilities for every age group measured except those 65 and older^{vi}.
- Only three percent of sexual abuse cases involving people with developmental and cognitive disabilities are ever reported^{vii}. Yet, people with cognitive disabilities experience the highest rates of violence of all people with disabilities^{viii}.
- Women with disabilities have a 40 percent greater chance of intimate partner violence than women without disabilities^{ix}.

- Survivors with disabilities face additional types of abuse^x. They may:
 - Have their medications intentionally withheld or overdosed.
 - Experience financial abuse and extortion.
 - Receive threats of abandonment.
 - Experience inappropriate sexual touching during baths, and dressing.
 - Have access to adaptive equipment restricted or taken away.
 - Have communication or mobility devices taken away.
 - Have their service animals threatened or harmed.
 - Have caretakers intentionally ignore personal care and hygiene.
- Survivors have barriers to seeking support from outside sources, including isolation, lack of communication devices and interpretation, lack of transportation, lack of privacy^{xi}, community spaces that are architecturally inaccessible, and societal attitudes about disability^{xii}.

HOW ADVOCATES AND NONPROFITS CAN HELP

- Believe survivors when they communicate their experiences in whatever way works for them, whether through interpretation, drawing or speech.
- Don't make assumptions about people's disabilities and what they need based on appearance or communication style—Let them communicate what they need from you.
- Partner with disability rights and service organizations in your community to ensure survivors with disabilities are able to physically and conceptually access your services.
- Respect their privacy while also understanding reporting mandates for your jurisdiction. While states have varying laws regarding privacy, especially for guardianship rights and abuse of vulnerable populations including some adults with disabilities, always check it out first and get the survivor's consent before talking to anyone else.
- Ensure that your safety planning measures include considerations for disability, service animals, and medical needs.
- Invest in recruitment, training and leadership development of people with disabilities on your boards, on staff and in advisory roles.

ⁱ Sobsey, D. & Doe, T. Sex Disability (1991) 9: 243. doi:10.1007/BF01102395

ⁱⁱ Violence against women with disabilities, Office on Women's Health, U.S. Department of Health and Human Services (2015)

ⁱⁱⁱ Davis, L., *M.S.S.W., M.P.A.* (2009) People with Intellectual Disability and Sexual Violence, The Arc, Washington, DC
<http://www.thearc.org/page.aspx?pid=2457>

^{iv} Hughes, K. Bellis, M.A., Jones, L., Wood, S. Bates, G., Eckley, L., McCoy, E., ... Officer, A. (2012). Prevalence and risk of violence against adults with disabilities: A systematic review and meta-analysis of observational studies. *The Lancet*, 379, 1621-1629. doi: 10.1016/S0140-6736(11)61851-5

^v *Serving Survivors of Domestic Violence who have a Disability* (2010), Equal Rights Center

http://www.equalrightscenter.org/site/DocServer/Serving_Survivors_of_Domestic_Violence_who_have_a_Disabi.pdf?docID=261

^{vi} Harrel, E. *Crime Against Persons with Disabilities, 2009–2013 - Statistical Tables*, U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics (2015)

^{vii} Valenti-Hein, D., Schwartz, L. 1995. *The Sexual Abuse Interview for those with Developmental Disabilities.*)

^{viii} Harrel, E. *Crime Against Persons with Disabilities, 2009–2013 - Statistical Tables*, U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics (2015)

^{ix} American Psychological Association, *Abuse of Women with Disabilities Fact Sheet* Retrieved 2017 from

<http://www.apa.org/topics/violence/women-disabilities.pdf>

^x National Center on Domestic and Sexual Violence, *Power and Control Wheel: People with Disabilities and their Caretakers*, Based on the model by the Domestic Violence Intervention Project, Duluth, MN.

http://www.springtideresources.org/sites/all/files/People_with_Disabilities_and_Caregivers_Wheel.pdf

^{xi} Elman, A. (2005, January). *Confronting the Sexual Abuse of Women with Disabilities*. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence. Retrieved month/day/year, from:

<http://www.vawnet.org>

^{xii} Elman, A. (2005, January). *Confronting the Sexual Abuse of Women with Disabilities*. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence.

RESOURCES

www.thehotline.org/get-help

2422-8322
1-800-799-SAFE (3723)
1-800-787-3222
TTY 1-800-799-SAFE (3723)
1-800-787-3222
www.thehotline.org/get-help

116 TTYL If you are being abused right now, call

ADWAS: ABUSED DEAF WOMEN'S ADVOCACY SERVICES—provides comprehensive services to deaf and deaf-blind victims/survivors of sexual assault, domestic violence, and stalking:
www.adwas.org

APAS PSYCHOLOGIST LOCATOR—makes it easy for you to find practicing psychologists in your local area: <http://locator.apa.org>

NATIONAL COALITION AGAINST DOMESTIC VIOLENCE

—works to educate the public on how to recognize domestic violence and what to do about it; teen dating violence; the impact of family violence on children; and domestic violence against individuals with disabilities, older adults, and other marginalized populations:
www.ncadv.org

VAWnet: THE NATIONAL ONLINE RESOURCE CENTER ON VIOLENCE AGAINST WOMEN

—provides a comprehensive and easily accessible collection of full-text, searchable electronic materials and resources on domestic violence, sexual violence, and related issues:
www.vawnet.org

WOMEN OF COLOR NETWORK (WOCN)—promotes and supports the leadership of women of color advocates: <http://womenofcolornetwork.org>

FACTS & RESOURCES

ABUSE OF WOMEN WITH DISABILITIES

DID YOU KNOW THAT . . .

▶ Women with disabilities have a **40%** greater chance of intimate partner violence than women without disabilities?

▶ Women with disabilities may experience unique forms of abuse that are difficult to recognize—making it even harder to get the kind of help they need. Such abuse may include:

- ▶ Removing or destroying a person's mobility devices (e.g., wheelchairs, scooters, walkers)
- ▶ Denying access to and/or taking prescribed medication from someone
- ▶ Forcing someone to take medication against her will
- ▶ Forcing someone to lie in soiled undergarments
- ▶ Preventing access to food
- ▶ Inappropriately touching a person while assisting with bathing and/or dressing
- ▶ Denying access to disability-related resources in the community and/or to health care appointments



SAFETY ALERT!

Computer use can be monitored and is impossible to completely clear. If you are afraid your Internet and/or computer use might be monitored, use a safer computer and/or use a telephone/cell phone that allows you to erase your call log.



AMERICAN PSYCHOLOGICAL ASSOCIATION PUBLIC INTEREST DIRECTORATE
Women's Programs Office
750 First Street, NE
Washington, DC 20002-4242
202-336-6044
www.apa.org/pi/women



AMERICAN PSYCHOLOGICAL ASSOCIATION

Sources for the facts and information in this brochure can be found online at <http://www.apa.org/topics/violence/women-disabilities.aspx>.



AMERICAN PSYCHOLOGICAL ASSOCIATION PUBLIC INTEREST DIRECTORATE
Women's Programs Office
750 First Street, NE
Washington, DC 20002-4242
202-336-6044
www.apa.org/pi/women

fold second

fold first

TYPES OF ABUSE

Abuse is not always easy to identify, but it can help to learn about the different kinds of abuse:

- ▶ **Physical abuse** (e.g., hitting, slapping, and/or restraining)
- ▶ **Emotional abuse** (e.g., isolating someone from friends and family, humiliating or ignoring a person)
- ▶ **Sexual abuse** (e.g., forcing someone to engage in sexual acts)
- ▶ **Financial exploitation** (e.g., taking and/or controlling a person's money)
- ▶ **Verbal abuse** (e.g., name calling, cursing)

WHERE DOES ABUSE OCCUR AND BY WHOM?

Abuse can occur anywhere—but more often when a woman has limited access to help or witnesses.

Abusers can be:

- ▶ Caregivers
- ▶ Transportation providers
- ▶ Personal care attendants and other disability support providers
- ▶ Family members
- ▶ Intimate partners

GETTING HELP

Getting help and reporting the abuser is not easy. Women with disabilities often do not report their abuser because:

- ▶ Signs of abuse may not be apparent to others
- ▶ They may feel embarrassed, guilty, or ashamed
- ▶ They may fear losing their home or independence, especially if the abuser is the caregiver and/or intimate partner
- ▶ They may not know where to get help—or help may not be easy to get
- ▶ Communication barriers may stand in the way, especially for deaf women
- ▶ Service providers often have limited knowledge about disability needs and abuse
- ▶ The abuser may be well known and respected

ALSO CONSIDER CONTACTING AND/OR TELLING:

- ▶ Adult Protective Services
- ▶ Your psychologist or counselor
- ▶ Your doctor
- ▶ Your local disability resource center

WHAT YOU CAN DO

If you know someone who is being abused or if you are being abused, it is important to know there is **HELP**. But you may need to be open to a **team approach to help you connect with local agencies addressing both disability and abuse.**

ORGANIZATIONS THAT CAN HELP

Consider the following national organizations that may be able to refer you to local resources:

CENTER FOR RESEARCH ON WOMEN

WITH DISABILITIES

1333 Moursund Avenue, Suite A221
Houston, TX 77030
Phone: 713-799-5086

Toll Free: 800-44-GROWD (276993)

<https://www.bcm.edu/research/centers/research-on-women-with-disabilities>

DEAF WOMEN UNITED

<http://dvwu.org>

INDEPENDENT LIVING CENTERS

<http://www.ilru.org/html/publications/directory/index.html>

NAMI: NATIONAL ALLIANCE ON MENTAL ILLNESS

1-800-950-6264

Vera Institute of Justice

www.vera.org

WHAT YOU CAN DO TO HELP YOURSELF

- ▶ Connect with supportive and caring people, not those who might blame you for the abuse.
- ▶ Secure a restraining or protective order if necessary—it prohibits an individual from harassing, threatening, approaching, accosting, or even contacting you. Always keep it with you.
- ▶ Seek help from a psychologist or other licensed mental health provider; contact your doctor or other primary health care provider; engage the services at centers or shelters for battered women.

SAFETY PLANNING

- ▶ If possible, have a phone handy at all times and know what numbers to call for help.
- ▶ Don't be afraid to call the police.
- ▶ Pack a bag (include money, an extra set of keys, copies of important documents, extra clothes and medicines) and leave it in a safe place or with someone you trust. Don't forget to consider critical disability-related devices and/or aids.
- ▶ Let trusted friends and neighbors know of your situation, and develop a plan and visual signal for when you need help.
- ▶ Teach your children how to get help. Instruct them not to get involved in the violence between you and your partner. Plan a code word or sign to signal to them that they should get help or leave the house.
- ▶ Practice how to get out safely. Practice with your children.



FAQs: The ADA, Small Business and Face Mask Policies

The ADA and Small Business: Frequently Asked Questions About Face Mask Policies and Serving Customers with Disabilities.

The Great Plains ADA Center has received many questions regarding face mask policies and the ADA from the business community. We have collected a summary of these questions and our responses to guide businesses wanting to ensure their face mask policies comply with the ADA.

Please note: No specific guidance on face mask policies and the ADA has been issued by the U.S. Dept. of Justice at the present time. Our technical assistance on this particular issue is based on our understanding of the ADA as well as guidance and recommended practices from other regional ADA Centers, attorneys, disability organizations, and federal agencies. This document will continue to be updated to reflect new information.

FAQs

1) I've heard that a person carrying a card issued from the U.S. Dept. of Justice does not have to wear a face mask, and I could be fined if I do not let this person shop freely without a face mask.

This information is false. The U.S. Department of Justice released the statement below in response to this particular misleading information circulating on the internet.

[The Department of Justice Warns of Inaccurate Flyers and Postings Regarding the Use of Face Masks and the Americans with Disabilities Act](#)

Assistant Attorney General for the Civil Rights Division Eric Dreiband reiterated today that cards and other documents bearing the Department of Justice seal and claiming that individuals are exempt from face mask requirements are fraudulent.

Inaccurate flyers or other postings have been circulating on the web and via social media channels regarding the use of face masks and the Americans with Disabilities Act (ADA) due to the COVID-19 pandemic. Many of these notices included use of the Department of Justice seal and ADA phone number.

As the Department has stated in a previous [alert](#), the Department did not issue and does not endorse them in any way. The public should not rely on the information contained in these postings.

The ADA does not provide a blanket exemption to people with disabilities from complying with legitimate safety requirements necessary for safe operations.

2) My business is very small, and I only have one employee. Am I covered by the ADA? Do I have to make accommodations to customers with disabilities?

Businesses are covered by Title III of the Americans with Disabilities Act. There is no exception in Title III based on the number of employees or facility size. Businesses covered by the ADA must not discriminate based solely on a customer's disability. Businesses must also provide:

- Reasonable modifications to their policies and practices to ensure customers with disabilities can access their goods and services.
 - Effective communication through auxiliary aids and services ensuring that communication with people with disabilities is as effective as communication with people without disabilities.
 - Access to goods and services through the removal of physical barriers such as steps, narrow doorways, and high thresholds, when readily achievable.
-

3) Does the ADA require me to have customers wear face masks in my store?

No. The ADA applies to **how** face mask policies are carried out to ensure they are not discriminatory against people with disabilities. Many states and local governments have issued regulations and/or ordinances that require people to wear face masks in public places. Other states and local governments have left policies up to individual businesses. The Great Plains ADA Center highly recommends that businesses stay up to date on face mask policy recommendations and rules issued by their state and local governments. Businesses may use this FAQ and other resources to determine how to apply face mask policies in a way that does not discriminate against people with disabilities.

4) If a customer can't wear a mask because of their disability, do I have to make an exception to the face mask policy?

The U.S. Department of Justice has stated that "The ADA does not provide a blanket exemption to people with disabilities from complying with legitimate safety requirements necessary for safe

operations."(See question 1) A business owner does not have to automatically waive a face mask requirement unless there is a local ordinance or state law specifically requiring the business to do so.

5) Are there people who really can't wear face masks because of their disabilities?

Yes. For many individuals with different types of disabilities the effects of wearing a mask are far more severe than being slightly uncomfortable. Wearing a face mask can have a significant impact on their health, wellbeing, and ability to function. For example, a person with a respiratory disability such as asthma or chronic obstructive pulmonary disease (COPD) may not be able to wear a face mask because doing so causes difficulty in breathing. People with anxiety disorders and post-traumatic stress disorder (PTSD) may develop severe anxiety when wearing a face mask. People who have sensory issues may find the constant sensation of a mask on their face very difficult to tolerate.

6) What should I do if a person requests to not wear a face mask because of their disability?

At this time, we recommend that a business follow the same criteria that the ADA requires in any other request for modification of policy. That is, determine if the modification is "reasonable" based on whether providing it would be an undue financial burden, change the fundamental nature of the business, or cause a direct threat to the health and safety of others.

Denying a Modification in Policy based on "Direct Threat"

Title III regulations of the ADA state that “denying a policy modification request because it would pose a direct threat to the health and safety of others must be based on legitimate evidence”. Sources for evidence of a legitimate threat can include guidance from public health authorities such as the U.S. Public Health Service, the Centers for Disease Control, and the National Institutes of Health, including the National Institute of Mental Health. (Title III Section 36.28). Based on this guidance in the regulations, current public health guidelines can be used to establish that there is legitimate evidence that face masks are necessary to slow or stop the spread of COVID-19 in public places. Public health guidelines regarding the coronavirus pandemic may change over time, and business policies should reflect the changes.

However, even if face mask exemptions may be denied on the basis of “direct threat”, there is still an obligation under the ADA to determine if there are other modifications that could be provided to access goods and services.

Some examples include but are not limited to:

- Providing customers with curbside pick-up or no contact home delivery.
 - Allow a customer to wear a full face shield instead of a face mask. Scarves or looser coverings may also be appropriate.
 - Letting customers order services online or by phone.
 - Conducting individual appointments, such as a tax consultation, remotely.
-

7) My business does not have a face mask policy, but our local government just passed an ordinance requiring people to wear face masks in public places. Because there is a local ordinance that our business must follow, do we still have to provide reasonable modifications to people who can't wear a face mask due to a disability?

Yes. ADA regulations would still require your business to offer alternative ways to provide access to goods and services. However, you are not required to take any actions that would result in an undue financial hardship, change the fundamental nature of the business, or cause a direct threat to health and safety to others, including your employees.

8) Our business provides a face mask to customers that are not wearing masks as they enter the store. A customer told me that she can't wear a face mask. Am I allowed to ask if the reason is because of a disability?

Yes, you may ask a customer if they cannot wear a face mask due to disability. But be careful not to ask questions about the nature or severity of the disability. This response is based on general guidance regarding modification of policy in Title III of the ADA. Currently, there is no specific guidance regarding face mask inquiries and people with disabilities from the U.S. Department of Justice.

9) A few individuals have requested curbside service because they can't wear a mask due to disability. I'm not so sure if this is really the case. Can I require a note from a doctor or some other form of documentation?

We recommend that businesses treat requests for modifications to a face mask policy as they would other requests for policy modification. Generally, when a person with a disability asks for a relatively simple modification, the individual is not required to provide any type of documentation. As a rule people with disabilities do not carry documentation of disability or a doctor's note. Considering that many customers have different kinds of needs that may require

additional customer service, singling out people with disabilities to provide documentation may appear discriminatory.

This interpretation is supported by a recent article, A ['Get Out of Masking Free' Card Based on the ADA?](#), which appeared in the National Law Review. Authors Metcalf and Paul, state “In the non-employment context (i.e., a customer relationship), a business generally cannot demand documentation confirming that an individual is disabled or needs a particular accommodation, so businesses may run the risk of alienating customers with disabilities, or even draw a bona fide complaint to the DOJ or a lawsuit, by requiring a showing of such proof.”

More on Documentation:

Please note that the questions and answers in this document are targeted to small businesses such as retail stores, restaurants, and theaters. Many other types of entities are covered by Title II and III of the ADA including schools, hospitals and clinics, daycare facilities, and camps. These entities may have instances when requiring documentation of disability and/or medical testing would be appropriate under the ADA. Future Q & A's from the Great Plains ADA Center will address documentation and broader ADA related issues for these entities.

10) We require identification for items such as alcohol and cigarettes at the check-out counter. If I provide curbside service to someone who can't wear a face mask, can I still require identification?

Yes. These types of legal requirements still apply to people with disabilities, just like everyone else. You also have a right to set up procedures which make contact as minimal as possible. For example, you may have the person drop their Driver's license or ID card in a box rather than hand it directly to staff.

11) My business offers eyebrow waxing and other spa services. We have a customer who says she can't wear a mask due to disability and doesn't want to use any other type of face-covering or face shield. We can't provide these services online or through delivery. Does that mean we must make an exception to our face mask policy?

The ADA requires businesses to assess what types of modifications they can provide that are reasonable. Depending upon the nature of the business, there may be no reasonable alternative method to provide goods and services to the customer. If this is the case, your business does not have to change its face mask policy provided it is based on a legitimate threat to others' health and safety.

12) Until a couple of weeks ago, our business had no face mask policy and left the choice to wear a mask up to our customers. Due to increased cases in our area, we want to begin requiring face masks in our store. A couple of our customers have told us they weren't wearing masks due to their disabilities. They believe that it is both unfair and discriminatory that they must now wear face masks to come into the store when so many other people were not required to wear masks.

This scenario is a good example of why it is highly recommended that businesses communicate their face mask policies clearly to their customers. If there is a change in policy, a written notice in the front of the business stating the new policy and when it will go into effect is good practice. This information could also be posted on the business website and social media.

Businesses should also be careful to apply their policies equally to all customers. For example, if young, healthy looking customers shop openly without a mask while, in contrast, a customer who appears to have a disability is questioned about their disability and then asked to wear a face mask--the discrimination complaint may be legitimate.

13) A young man who is deaf and read lips frequently shops at our store. Should we require our staff to wear face masks with clear plastic inserts to allow lip reading?

According to the National Association of the Deaf (NAD), face masks pose real communication challenges for deaf and hard of hearing individuals. Face masks with clear plastic shielding to make the mouth visible are one way to meet the needs of people who read lips. These masks would not have to be worn all of the time by employees, but simply be available as needed to communicate with customers who read lips. A full face shield is another option that allows more visibility of the entire face, making lip-reading easier. (Of course, sanitation protocols should be used rather than just letting different employees share the same mask or shield!) Not everyone who is deaf or hard of hearing lip-reads. Other alternative methods of simple communication include text messaging, Skype or Face time, dry erase boards, and disposable pens and paper.

Developed by the Great Plains ADA Center. July 10, 2020

SB-2486

Submitted on: 2/1/2024 12:38:36 PM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Anthony Christe	Individual	Support	Written Testimony Only

Comments:

I support the creation of a silver alert. Alzheimer's run in my family and I would like to know that we could utilize very resource available to help find those that wonder off.

SB-2486

Submitted on: 2/1/2024 2:50:25 PM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Todd Yukutake	Individual	Support	Written Testimony Only

Comments:

Hawaii needs a silver alert system to protect our elderly citizens.

TO THE SENATE
KA 'AHA KENEKOA
THE THIRTY-SECOND LEGISLATURE
REGULAR SESSION OF 2024

LATE

COMMITTEE ON PUBLIC SAFETY AND INTERGOVERNMENTAL AND MILITARY AFFAIRS
Senator Glenn Wakai, Chair
Senator Brandon J.C. Elefante, Vice Chair

COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

HEARING **SB2486**
DATE: Friday, February 2, 2024
TIME: 3:00 PM

Bill No: **SB2486**

POSITION: **STRONG SUPPORT**

Aloha, Chair, Vice Chair, and Committee Members

I urge the committee to approve SB2486 which seeks to establish a silver alert program to help locate and safeguard missing persons who are sixty-five years of age or older, cognitively impaired, or developmentally disabled. Projections have indicated that the number of people living with Alzheimer's disease is expected to rise to over 36,000 within the State of Hawaii.

Unfortunately, Alzheimer's disease is a progressive degenerative disease and individuals with dementia forget family members and societal norms. There might be cases of false reports and victimization, indecent exposure, and shoplifting. Six in ten individuals with dementia will wander at some point. When individuals with dementia are lost, they may show signs of anxiety, fear, or hostility—all of which can escalate to more aggressive behaviors. Thus, the importance of SB2486 cannot be stressed enough to increase the health, safety, and welfare of the community.

SB2486 intends to establish a silver alert program akin to other states that have implemented such a program to help locate and safeguard missing persons who are sixty-five years of age or older. It is important to note that Hawaii is one of the few states in the nation that does not have a formalized silver alert. Yet, we have one of the largest senior populations per capita in the nation.

Local relevance toward establishing a silver alert in Hawaii can be found on the neighboring island of Hawaii, where a woman aged 65 located in Kailua-Kona went missing in the Old Airport area. The woman in question has been missing since 11/20/2023. It can be inferred that if there were a coordinated system such as the silver alert, missing seniors have the possibility of being found more quickly and safely.

In summation, I am in support of SB2486 and request that this bill pass out of this committee and that all changes to this bill should be in keeping with the introducer's intent. The passage of this bill will increase the safety of all seniors here in Hawaii.

Thank you for reading and allowing me to submit my testimony.

Mahalo,

Ken Farm

Chair Emeritus,
Former Chair Neighborhood Board No. 15
Speaking in my personal capacity,



HAWAII GOVERNMENT EMPLOYEES ASSOCIATION

AFSCME Local 152, AFL-CIO

RANDY PERREIRA, Executive Director • Tel: 808.543.0011 • Fax: 808.528.0922

LATE

The Thirty-Second Legislature, State of Hawaii
The Senate
Committee on Health and Human Services
Committee on Public Safety and Intergovernmental and Military Affairs

Testimony by
Hawaii Government Employees Association

February 2, 2024

S.B. 2486 — RELATING TO MISSING PERSONS

The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO supports the purpose and intent of S.B. 2486, which establishes a silver alert program within the Department of Law Enforcement to help locate and safeguard missing persons who are sixty-five years of age or older, cognitively impaired, or developmentally disabled.

It is imperative that we look-out for the safety and wellbeing of our kupuna and if they go missing it is critical that they be found as soon as possible. Implementing a silver alert program provides law enforcement with better tools to locate and rescue our kupuna. Community awareness and involvement can aid law enforcement by providing critical and lightning-fast information on the whereabouts of a kupuna, which can be extremely beneficial in the unfortunate event that they go missing.

Thank you for the opportunity to provide testimony in support of S.B. 2486.

Respectfully submitted,

Randy Perreira
Executive Director

LATE

Testimony on Senate Bill No. SB 2486

RELATING TO MISSING PERSONS

Friday, February 2, 2024 at 3:00 pm

Conference Room 329 & Videoconference

State Capitol

415 South Beretania Street

My name is Ohad Amidor, and I am a student in the social work program at UH Manoa. I am in STRONG SUPPORT of HB 1774. The bill aims to establish a silver alert program to help locate and safeguard missing persons who are sixty-five years of age or older, cognitively impaired, or developmentally disabled. We are the only state in the country that has no silver alert, and I believe it is time for us to join the rest. This bill is crucial, and it can save many lives and help many families in times of desperate need.

My Grandmother-in-law is an Alzheimer's patient; she is in an advanced stage of the disease, and her level of confusion is sad to watch. She can wander and lose her way as he has no cognitive abilities that will help her know her way back home or the ability to contact her loved ones. She lives in Georgia, where the silver alert is in place. I hope our state can give this service to all of its Kupunas.

By next year, the number of people living with Alzheimer's disease is expected to rise to over 36,000. A person with dementia may not remember their name or address—and can become disoriented, even in familiar places. As the disease progresses and individuals with dementia forget family members and societal norms, there may be cases of false reports and victimization, indecent exposure, and shoplifting.

I request that SB 2486 be passed; it is long overdue.

Mahalo for the opportunity to testify!

Ohad Amidor,

Haiku, HI

Amidor@hawaii.edu

LATE

SB-2486

Submitted on: 2/2/2024 8:13:20 AM

Testimony for PSM on 2/2/2024 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Rosemarie Johnson	Testifying for Pono Consulting	Support	Written Testimony Only

Comments:

Dear Chairs Glenn Wakai and Joy San Buenaventura, Vice Chairs Brandon Elefante and Henry Aquino, and Members of the Committees:

My name is Rosemarie Johnson, and the findings from data collected by my firm, PONO Consulting, over the last 5 years, which were presented at the capital on August 9th, show a gross lack of resources for safety and prevention in the state.

Hawai'i is one of the few states in the nation that does not have a formalized silver alert.

Hawai'i is also one of the few states in the nation that does not have a state Search And Rescue (SAR) system.

This bill, which establishes a silver alert program within the Department of Law Enforcement to help locate and safeguard missing persons who are sixty-five years of age or older, cognitively impaired, or developmentally disabled, is very important and vital.

Last year, solutions were provided to improve safety and decrease the number of callouts and SAR incidents in Hawai'i.

Safety and prevention are the initial steps toward reducing the number of incidents. **SB2486 represents a significant stride in achieving this goal.**

Furthermore, **for many bills to be fully implemented and enforced during this legislative session, it is crucial to establish a solid foundation for a State SAR System to build upon.**

As it stands now, in addition to Hawai'i being one of the few states in the nation that does not have a formalized silver alert or a state Search And Rescue (SAR) system, it is also one of the few states in the country without a:

- State SAR Coordinator
- State SAR Plan
- State SAR fund
- State SAR board to distribute any funds

As Hawai'i is tied for second in the nation for Missing Persons, along with the eyes of the world on us after the wildfires, we cannot afford to defer these issues any longer.

Every year, bills are proposed and lots of time, resources, and energy are exhausted for the same results. Let's learn from the best and honor our police and firemen/women who work so hard to protect us and create a safer Hawai'i together!

I request that SB2486 be passed within the Department of Law Enforcement and that everyone seriously considers HB 2300, which is proposing an entire statewide system. similar to what other states have.

In order for Hawai'i to be on par to other states with similar and fewer threats, these bills are a way to accomplish complete implementation without impacting the already stretched resources of the DLNR, Police, & Fire departments.

Mahalo for the opportunity to testify.

Rosemarie Johnson

Maui, Hawai'i

Rosemarie@Pono-consulting.com



Papa Ola Lokahi
Nana I Ka Pono Na Ma

894 Queen Street
Honolulu, Hawaii 96813
Phone: 808.597.6550
www.papaolalokahi.org

LATE

Senate Committee on Public Safety and Intergovernmental and Military Affairs

Senator Glenn Wakai, Chair
Senator Brandon J.C. Elefante, Vice Chair

Committee on Health and Human Services

Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

Friday, February 2, 2024, 3:00 PM, Conference Room 225 & Videoconference

RE: SB 2486 – RELATING TO MISSING PERSONS

Position: SUPPORT

Dear Chairs Wakai and San Buenaventura, Vice Chairs Elefante and Aquino, and Members of the Committees,

Papa Ola Lokahi testifies **in support** of SB 2486, which establishes a silver alert program within the Department of Law Enforcement. A [2021 Department of Business, Economic Development and Tourism report](#) found that nearly one in five people in the State of Hawai'i is 65 or older. As this population continues to grow and age, the need to increase services and programs such as the proposed silver alert becomes increasingly important.

The safety of kūpuna, those with cognitive impairments, and the developmentally disabled are often left to their immediate family members. [Publication from the National Institutes of Health](#) regarding familial caregiving notes that “accumulating caregiving demands and the costs of long-term services and supports (LTSS) can overwhelm and undermine other dimensions of one's life.” A silver alert program can directly save lives and can also provide a stronger sense of safety and connectedness for those who care for their family or community members.

Thank you for the opportunity to testify in **SUPPORT** of this critical legislation.

Papa Ola Lōkahi, the Native Hawaiian Health Board, authorized by the federal Native Hawaiian Health Care Improvement Act, is charged with raising the health status of Native Hawaiians to the highest possible level, which we achieve through strategic partnerships, programs, and public policy.



LATE

CATHOLIC CHARITIES HAWAII

TESTIMONY IN SUPPORT OF SB 2486: RELATING TO MISSING PERSONS

TO: Senate Committee on Public Safety and Intergovernmental and Military Affairs/ Senate Committee on Health and Human Services

FROM: Rob Van Tassell, President and CEO, Catholic Charities Hawaii

Hearing: **Friday, 2/2/24; 3:00 pm; via Videoconference or CR 225**

Chair Wakai, Vice Chair Elefante, Chair San Buenaventura, Vice Chair Acquino, and Members, Committee on Public Safety and Intergovernmental and Military Affairs, and Committee on Health and Human Services:

Thank you for the opportunity to testify in support of **SB 2486**, which establishes a silver alert program to help locate and safeguard vulnerable missing persons. I am Rob Van Tassell with Catholic Charities Hawaii. We also support SB 2305 on this agenda today.

Catholic Charities Hawaii (CCH) is a tax exempt, non-profit agency that has been providing social services in Hawaii for over 75 years. CCH has programs serving elders, children, families, homeless and immigrants. Our mission is to provide services and advocacy to the most vulnerable of the people in Hawaii.

Hawaii is one of the few states in the US that does not have a formalized silver alert program. Kupuna in Hawaii are rapidly increasing. More kupuna with dementia and Alzheimer's disease can result in more behaviors that put these vulnerable people at great risk. This can bring trauma and anxiety both to the individual and families who care for these increasingly frail and vulnerable elders. Six in ten people with dementia will wander off at some point. They may not know their name or address and especially who their caregiver is.

A silver alert program would help to identify missing kupuna who are 65 years of age or older, cognitively impaired, or developmentally disabled. It would help to provide a safe return of these lost individuals to their families and caregivers. What a relief for families to have a silver alert program to contact when they cannot locate their missing loved ones.

Take action now! Please help protect our vulnerable kupuna by passing this bill.

If you have any questions, please contact our Legislative Liaison, Betty Lou Larson at (808) 527-4813.

