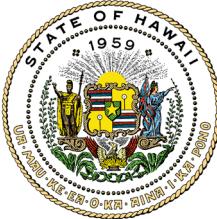


JOSH GREEN, M.D.  
GOVERNOR OF HAWAII  
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII



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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

**Testimony in SUPPORT of HB1976  
RELATING TO DEMENTIA**

COMMITTEE ON HEALTH  
REP. GREGG TAKAYAMA, CHAIR  
REP. SUE L. KEOHOKAPU-LEE LOY, VICE CHAIR

COMMITTEE ON HEALTH AND HUMAN SERVICES  
REP. LISA MARTEN, CHAIR  
REP. IKAIKA OLDS, VICE-CHAIR  
Testimony of Caroline Cadirao  
Director, Executive Office on Aging  
Attached Agency to the Department of Health

Hearing: Wednesday, February 4, 2026, 9:00 A.M.

Conference Room: 329

- 1 **EOA Position:** The Executive Office on Aging (EOA), an attached agency to the Department of
- 2 Health (DOH) supports the intent of this measure and offers comments.
- 3 **Purpose:** This measure mandates dementia-specific training annually for all first responders in
- 4 Hawai'i, including law enforcement officers, fire first responders, and emergency medical
- 5 services personnel. Additionally, it requires the Executive Office on Aging to review and
- 6 recommend curricula focused on recognizing the signs of Alzheimer's and related dementias.
- 7 Hawai'i's aging population continues to grow, and our community, including first responders,
- 8 needs the situational awareness and skills necessary to effectively interact with individuals who
- 9 may have Alzheimer's disease or related dementias.

1     **Recommendations:** EOA respectfully requests the following recommendations:

2           **1. Training Start Date Adjustment**

3     EOA recommends extending the training start date by six months, from January 1, 2027,

4     to July 1, 2027. Given EOA's current workforce limitations, this additional time will

5     allow EOA or its designee to adequately review and recommend appropriate training

6     curricula. It will also provide the Law Enforcement Standards Board sufficient time to

7     review training options as required in §139 Dementia Training (page 6, lines 15–20).

8     Accordingly, beginning on page 4, Section 2, line 12-13 should be amended to read,

9     “...shall begin offering dementia-specific training to agency personnel by January 1,

10    2027 [July 1, 2027].” Conforming amendments are also needed on page 5, line 17; page

11    7, line 3; and page 8, line 9.

12           **2. Alignment of Annual Training Cycle Completion Date**

13     With the adjusted start date, EOA recommends aligning the annual training cycle

14     completion date on page 4, Section 2 (b), line 16 to read:

15     “training cycle shall be completed by December 31, 2027 [June 30, 2028].”

16     Conforming amendments are also needed on page 5, line 21; page 7, line 7; and page 8,

17     line 13.

18           **3. Recommendations for Amendments to HRS §349**

19     EOA recommends amending page 9, Section 6, line 6 to read:

20     “The executive office on aging or the office's designee shall review and recommend [a

21    list of] dementia-specific training curricula for agencies that employ first responders to

22    ensure statewide consistency and alignment with best practices. The dementia-specific

1 training shall address recognition of and response to persons having Alzheimer's disease  
2 and related types of dementia. The executive office on aging shall make available a list of  
3 recommended dementia-specific training curricula options that meet the requirements of  
4 this section."

5 Additionally on page 9, Section 6(b) strike lines 15–20 and lines 1-2 on page 10 “The  
6 ~~executive office on aging shall seek low- to no-cost dementia-specific training curricula~~  
7 ~~from nonprofit organizations in addition to any fee-based dementia-specific training~~  
8 ~~curricula. To the extent possible, at least one of the recommended dementia-specific~~  
9 ~~training curricula shall be available to first responders at no charge. If available, the no-~~  
10 ~~cost dementia-specific training curricula shall be funded by private contributions from~~  
11 ~~relevant non-profit organizations.~~” and replace with:

12 “The executive office on aging shall seek low- to no-cost dementia-specific training  
13 curricula. The Executive Office on Aging shall identify whether each training option has  
14 an associated fee or is available at no cost when developing the curriculum list.”

15 To allow flexibility in meeting the five components outlined in the bill, amend  
16 Section 6(c), line 3 to read:

17 “The dementia-specific training curricula shall [may] include:”

18 EOA is attaching to its testimony the written recommended amendments to the bill.

19 Thank you for the opportunity to testify.

---

# A BILL FOR AN ACT

RELATING TO DEMENTIA.

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

1 SECTION 1. The legislature finds that Alzheimer's disease  
2 and related dementias are an urgent and growing public health  
3 challenge in Hawaii. Between 2020 and 2025, the number of  
4 Hawaii residents living with Alzheimer's disease is estimated to  
5 have increased by 20.7 per cent. Approximately 31,200 Hawaii  
6 residents aged sixty-five years or older currently live with  
7 Alzheimer's. Long-term trends indicate that this figure could  
8 double to approximately sixty-two thousand individuals by 2050.

9 This significant growth in the number of individuals living  
10 with Alzheimer's disease is expected to increase emergency  
11 department utilization, hospital readmissions, and overall  
12 health care costs. Data show that individuals having dementia  
13 experience 1,248 emergency department visits per one thousand  
14 persons annually, reflecting a high rate of re-admittance and  
15 frequent interaction with emergency medical services personnel.

16 The legislature further finds that six in ten people living  
17 with dementia will wander, often repeatedly, and may forget



1 their name or address or become disoriented even in familiar  
2 places. When individuals with dementia are lost, they may  
3 exhibit anxiety, fear, or hostility, which may escalate into  
4 aggressive behaviors. As the disease progresses and societal  
5 norms are forgotten, incidents may include filing false police  
6 reports, victimization, indecent exposure, and shoplifting.  
7 People with Alzheimer's disease may appear uncooperative,  
8 disruptive, or combative if they have difficulty communicating  
9 and understanding what is happening. First responders often  
10 lack the training needed to effectively assist these  
11 individuals, which may lead to confusion and unnecessary  
12 escalation.

13 The legislature further finds that police, emergency  
14 medical services, and fire department personnel are frequently  
15 the first responders who encounter wandering individuals or  
16 respond to dementia-related incidents. In particular, fire  
17 department personnel are often the first on scene for medical  
18 emergencies and fires and may need to rescue individuals living  
19 with dementia who are uncooperative or disoriented. The  
20 importance of managing these situations appropriately will  
21 become even more critical as Hawaii experiences an increase in



1 the frequency and intensity of wildfires that require rapid  
2 evacuations and specialized communication strategies for  
3 vulnerable populations.

4 The legislature finds that dementia-specific training for  
5 first responders is cost effective and readily available. For  
6 example, the Alzheimer's Association offers free, one-hour  
7 online trainings for first responders. The Hawaii chapter of  
8 the Alzheimer's Association has partnered with the Honolulu  
9 police department to provide in-person dementia training to new  
10 recruits at no cost. These resources enable agencies to build  
11 dementia capability without additional appropriations.

12 The legislature further finds that evidence-based dementia  
13 training improves recognition, communication, and de-escalation  
14 skills, reducing preventable hospitalizations, emergency  
15 interventions, and crises, while strengthening community safety  
16 and resilience.

17 Accordingly, the purpose of this Act is to require annual  
18 dementia-specific training for all first responders in Hawaii  
19 and to ensure that training content addresses recognition,  
20 assessment, and communication; abuse and neglect identification;  
21 caregiver engagement; disaster response; and safe return.



1 SECTION 2. Chapter 127A, Hawaii Revised Statutes, is  
2 amended by adding a new section to be appropriately designated  
3 and to read as follows:

4 **"S127A-** **Dementia-specific training.** (a) The director  
5 or the director's designee shall review the list of  
6 dementia-specific training options recommended by the executive  
7 office on aging pursuant to section 349- and provide at  
8 least one hour of dementia-specific training from that list to  
9 agency personnel. The dementia-specific training offered shall  
10 be accessible at no cost to the agency personnel. The director  
11 or the director's designee shall begin offering  
12 dementia-specific training to agency personnel by ~~January 1,~~  
13 ~~2027~~ [July 1, 2027].

14 (b) All agency personnel shall complete a minimum of one  
15 hour of dementia-specific training annually. The first annual  
16 training cycle shall be completed by ~~December 31, 2027~~ June 30, 2028

17 (c) The dementia-specific training provided under this  
18 section shall not create or impose any civil or criminal  
19 liability upon any agency personnel, agency, or department.

20 (d) For purposes of this section, "dementia-specific  
21 training" means training curricula recommended by the executive



1 office on aging for the purpose of first responder training  
2 pursuant to section 349- ."

3 SECTION 3. Chapter 132, Hawaii Revised Statutes, is  
4 amended by adding a new section to be appropriately designated  
5 and to read as follows:

6 **"S132- Dementia-specific training.** (a) Each county  
7 fire chief and the fire chief of the Hawaii state aircraft  
8 rescue fire fighting unit, or the respective fire chief's  
9 designee, shall review the list of dementia-specific training  
10 options recommended by the executive office on aging pursuant to  
11 section 349- and provide at least one hour of  
12 dementia-specific training from that list to fire first  
13 responders within the fire chief's department or unit. The  
14 dementia-specific training shall be accessible at no cost to the  
15 fire first responders. Each respective chief shall begin  
16 offering dementia-specific training to fire first responders by  
17 ~~January 1, 2027~~ July 1, 2027

18 (b) All fire first responders within the State and  
19 counties shall complete a minimum of one hour of  
20 dementia-specific training annually. The first annual training  
21 cycle shall be completed by ~~December 31, 2027~~ June 30, 2028



1                   (c) The dementia-specific training provided under this  
2                   section shall not create or impose any civil or criminal  
3                   liability upon any fire first responder personnel, agency, or  
4                   department.

5                   (d) For purposes of this section:

6                   "Dementia-specific training" means training curricula  
7                   recommended by the executive office on aging for the purpose of  
8                   first responder training pursuant to section 349-      .

9                   "Fire first responders" means first responder personnel  
10                  employed by state and county fire protection agencies and  
11                  departments."

12                  SECTION 4. Chapter 139, Hawaii Revised Statutes, is  
13                  amended by adding a new section to be appropriately designated  
14                  and to read as follows:

15                  §139- Dementia training. (a) The board or the  
16                  board's designee shall review the list of dementia-specific  
17                  training options recommended by the executive office on aging  
18                  pursuant to section 349-      and require at least one hour of  
19                  dementia-specific training from that list to be provided to law  
20                  enforcement officers. The dementia-specific training shall be  
21                  accessible at no cost to the law enforcement officers. The



1    board shall require law enforcement agencies to begin offering  
2    dementia-specific training to law enforcement officers by  
3    January 1, 2027~~J~~ July 1, 2027

4        (b) All law enforcement officers within the State and  
5    counties shall complete a minimum of one hour of  
6    dementia-specific training annually. The first annual training  
7    cycle shall be completed by December 31, 2027~~J~~ June 30, 2028

8        (c) The dementia-specific training provided under this  
9    section shall not create or impose any civil or criminal  
10   liability upon any law enforcement officer, agency, or  
11   department.

12       (d) For purposes of this section, "dementia-specific  
13   training" means training curricula recommended by the executive  
14   office on aging for the purpose of first responder training  
15   pursuant to section 349-\_\_\_\_\_."

16       SECTION 5. Chapter 321, Hawaii Revised Statutes, is  
17   amended by adding a new section to part XVIII to be  
18   appropriately designated and to read as follows:

19       "§321-\_\_\_\_\_ Dementia-specific training. (a) The director  
20   of health or the director's designee shall review the list of  
21   dementia-specific training options recommended by the executive



1 office on aging pursuant to section 349- and provide at  
2 least one hour of dementia-specific training from that list to  
3 emergency medical services personnel and first responder  
4 personnel. The dementia-specific training shall be accessible  
5 at no cost to the emergency medical services personnel and first  
6 responder personnel. The director of health or the director's  
7 designee shall begin offering dementia-specific training to  
8 emergency medical services personnel and first responder  
9 personnel by January 1, 2027~~July 1, 2027~~

10 (b) All emergency medical services personnel and first  
11 responder personnel shall complete a minimum of one hour of  
12 dementia-specific training annually. The first annual training  
13 cycle shall be completed by December 31, 2027~~June 30, 2028~~.

14 (c) The dementia-specific training provided under this  
15 section shall not create or impose any civil or criminal  
16 liability upon any emergency medical services personnel, first  
17 responder personnel, employer, agency, or department.

18 (d) For purposes of this section, "dementia-specific  
19 training" means training curricula recommended by the executive  
20 office on aging for the purpose of first responder training  
21 pursuant to section 349- ."



1 SECTION 6. Chapter 349, Hawaii Revised Statutes, is  
2 amended by adding a new section to part I to be appropriately  
3 designated and to read as follows:

4 **"§349- Dementia-specific first responder training**

5 **curriculum content review.** (a) The executive office on aging  
6 or the office's designee shall review and recommend [a list of]  
7 dementia-specific training curricula for agencies that employ  
8 first responders to ensure statewide consistency and alignment  
9 with best practices. The dementia-specific training curricula  
10 shall address the recognition of and response to persons having  
11 Alzheimer's disease and related types of dementia. The  
12 executive office on aging shall make available a list of  
13 recommended dementia-specific training curricula options that  
14 meet the requirements of this section.

15 **(b) [The executive office on aging shall**  
16 seek low-to no cost dementia-specific  
17 training curricula and identify whether each  
18 training option has an associated fee or  
19 is available at no cost]. The executive office  
20 on aging shall seek low to no cost dementia specific training  
curricula from nonprofit organizations in addition to any  
fee based dementia specific training curricula. To the extent  
possible, at least one of the recommended dementia specific  
training curricula shall be available to first responders at no  
charge. If available, the

1 ~~no-cost dementia-specific training curricula shall be funded by~~  
2 ~~private contributions from relevant non-profit organizations.~~

3 (c) The dementia-specific training curricula ~~[may]~~ shall  
4 include:

5 (1) Strategies for recognizing key signs of Alzheimer's  
6 disease and related types of dementia;  
7 (2) Strategies for assessing cognition;  
8 (3) Best practices for interacting with persons having  
9 Alzheimer's disease or related types of dementia,  
10 including during disaster response;  
11 (4) Strategies to identify and intervene in situations in  
12 which persons having Alzheimer's disease or related  
13 types of dementia may be at risk of abuse or neglect;  
14 and  
15 (5) Best practices to ensure the safe return of persons  
16 having Alzheimer's disease or related types of  
17 dementia.

18 (d) All dementia-specific training curricula recommended  
19 by the executive office on aging shall include at least one hour  
20 of instruction time.



**9** SECTION 7. Section 321-229.2, Hawaii Revised Statutes, is  
**10** repealed.

11 [ "§321-229.2] **First responder personnel; dementia**  
12 **training.** (a) The employers of first responder personnel may  
13 obtain dementia training for first responder personnel, which  
14 may include:

15 (1) Recognizing the key signs of Alzheimer's disease and  
16 related types of dementia; -  
17 (2) Strategies for assessing cognition;  
18 (3) Best practices for interacting with persons with  
19 Alzheimer's disease and related types of dementia; and  
20 (4) Strategies to best identify and intervene in  
21 situations where persons with Alzheimer's disease and



1 related types of dementia may be at particular risk of  
2 abuse or neglect.

3 (b) The training shall be offered at no cost to the  
4 applicable first responder personnel and shall be funded by  
5 private contributions from relevant non-profit organizations.

6 (c) The executive office on aging may coordinate the  
7 training schedules and standards, as necessary, with all public  
8 and private entities and agencies responsible for services  
9 provided by first responder personnel, including entering into  
10 agreements or memoranda of agreement with nonprofit  
11 organizations to provide funding pursuant to subsection (b).

12 (d) The employers of first responder personnel may utilize  
13 existing educational and training resources available in the  
14 public and private sectors when developing the training required  
15 under this section.]

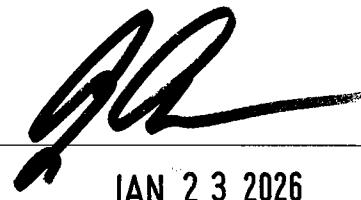
16 SECTION 8. Statutory material to be repealed is bracketed  
17 and stricken. New statutory material is underscored.



1 SECTION 9. This Act shall take effect upon its approval.

2

INTRODUCED BY:



A handwritten signature in black ink, appearing to read "J.D.", is written over a horizontal line. Below the line, the date "JAN 23 2026" is printed in a standard font.



# H.B. NO. 1976

**Report Title:**

Dementia; Alzheimer's Disease; First Responder Training; Executive Office on Aging; HIEMA; Counties; Law Enforcement Standards Board; DOH

**Description:**

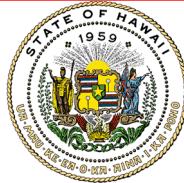
Requires the Hawaii Emergency Management Agency, fire chiefs, Law Enforcement Standards Board, and Department of Health to provide or require the provision of at least 1 hour of dementia-specific training for first responders, including law enforcement officers, fire first responders, and emergency medical services personnel. Requires the Executive Office on Aging to review and recommend dementia-specific training curricula that address the recognition and signs of Alzheimer's disease and related types of dementia.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*



LATE \*Testimony submitted late may not be considered by the Committee for decision making purposes.

JOSH GREEN, M.D.  
GOVERNOR  
KE KIA'ĀINA



STEPHEN F. LOGAN  
MAJOR GENERAL  
ADJUTANT GENERAL  
KA 'AKUKANA KENELALA

JAMES DS. BARROS  
ADMINISTRATOR OF  
EMERGENCY MANAGEMENT  
KAHU HO'OMALU PÔULIA

STATE OF HAWAII  
KA MOKU'ĀINA O HAWAII  
**DEPARTMENT OF DEFENSE**  
**KA 'OIHANA PILI KAUĀ**  
HAWAII EMERGENCY MANAGEMENT AGENCY  
4204 DIAMOND HEAD ROAD  
HONOLULU, HAWAII 96816-4420

**LATE**

STATE OF HAWAII  
DEPARTMENT OF DEFENSE  
HAWAII EMERGENCY MANAGEMENT AGENCY

TESTIMONY ON HOUSE BILL 1976  
RELATING TO DEMENTIA

BEFORE THE HOUSE COMMITTEE ON  
HEALTH

BY

JAMES DS. BARROS  
ADMINISTRATOR  
HAWAII EMERGENCY MANAGEMENT AGENCY

February 4, 2026

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee:

Thank you for the opportunity to submit **COMMENT** testimony on House Bill 1976.

While HIEMA supports the intent of this bill to provide dementia-specific training to first responders – to improve recognition, communication, and safety for individuals living with dementia, we note that HIEMA does not have first responder personnel. Its role is primarily focused on emergency management coordination, planning, and support rather than direct emergency response operations.

Assigning training responsibilities for first responders to an agency without first responder staff may create confusion in implementation and accountability. It may be more appropriate for this mandate to rest solely with agencies and departments that directly employ first responders, such as county fire departments, law enforcement agencies, and emergency medical services.

Thank you for your consideration of this important clarification to ensure effective and practical implementation of dementia-specific training requirements, and for the opportunity to provide comment testimony for House Bill 1976.

James Barros: [james.barros@hawaii.gov](mailto:james.barros@hawaii.gov); 808-733-4300

**HB-1976**

Submitted on: 1/30/2026 6:40:48 PM  
Testimony for HLT on 2/4/2026 9:00:00 AM

| <b>Submitted By</b> | <b>Organization</b>             | <b>Testifier Position</b> | <b>Testify</b>         |
|---------------------|---------------------------------|---------------------------|------------------------|
| Louis Erteschik     | Hawaii Disability Rights Center | Support                   | Written Testimony Only |

**Comments:**

This training would be very valuable to those who interact with these individuals, particularly so they don't mistake the symptoms for something else that could lead to very negative consequences.



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[aarp.org/hi](http://aarp.org/hi) | [aarphi@aarp.org](mailto:aarphi@aarp.org) | [twitter.com/AARPHawaii](http://twitter.com/AARPHawaii)  
[facebook.com/AARPHawaii](http://facebook.com/AARPHawaii)

**The State Legislature**  
**House Committee on Health**  
**House Committee on Human Services and Homelessness**  
**Wednesday, February 4, 2026**  
**Conference Room 329, 9:00 a.m.**

TO: The Honorable Gregg Takayama, Chair  
The Honorable Lisa Marten, Chair  
FROM: Keali'i S. López, State Director  
RE: Support for H.B. 1976 Relating to Dementia

Aloha Co-Chairs Takayama and Marten, and Members of the Committees:

My name is Keali'i Lopez, and I am the State Director for AARP Hawai'i. AARP is a nonpartisan, social impact organization that advocates for individuals age 50 and older. We have a membership of nearly 38 million nationwide and nearly 135,000 in Hawaii. We advocate at the state and federal level for the issues that matter most to older adults and their families.

AARP Hawai'i is in support of House Bill 1976, which ensures that law enforcement officers, firefighters, and emergency medical services personnel have the practical skills needed to respond safely to dementia-related situations. Individuals living with dementia often display confusion, fear, or agitation—not resistance or intentional noncooperation. Proper training enables first responders to identify these behaviors, avoid unnecessary escalation, and support safer outcomes for both the individual and the responding team.

First responders regularly encounter individuals with dementia, often without the benefit of specialized training. HB 1976 provides them with tools that enhance safety, reduce stress, and improve decision-making during high-pressure incidents. People living with dementia experience disproportionately high rates of emergency department visits—many of which are avoidable with appropriate on-scene assessment and response. Dementia-specific training helps first responders determine when transport is necessary and when other care pathways are more appropriate, reducing strain on hospitals and improving outcomes for families.

With increased wildfire threats and emergency evacuation scenarios across Hawai'i, dementia training becomes essential. Individuals with dementia may not understand evacuation instructions or may resist leaving familiar surroundings. Equipping first responders with

appropriate communication and safety strategies ensures better protection of vulnerable kūpuna during disasters.

Thank you for the opportunity to testify in support of H.B. 1976.

## 2026 Hawaii Leadership Board

Travis Kikuchi, *Chair*  
Senior Vice President  
Central Pacific Bank

Lori McCarney, *National Board Member Community Advocate*

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

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

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 House Committee on Health Wednesday, February 4, 9:00 AM, Room 329 and Videoconference

### RE: House Bill No. 1976 – RELATING TO DEMENTIA

Chair Takayama, Vice Chair Keohokapu-Loy, and Members of the Committees:

My name is Coby Chock, Director of Public Policy and Advocacy for the Alzheimer's Association, and we strongly support HB1976 to require one hour of dementia-specific training annually for all first responders statewide.

This is a public safety bill. Dementia is already part of first responders' day-to-day work and the risk is growing. Today, an estimated 31,200 Hawai'i residents aged 65+ live with Alzheimer's and this number is rising. People living with dementia have 1,248 emergency department visits per 1,000 persons annually, reflecting frequent encounters with police, EMS, and fire personnel. Up to 60 percent will wander at some point, often repeatedly, and can become lost, anxious, afraid, agitated, or aggressive. These realities create avoidable crises when responders have not been trained to recognize symptoms, communicate effectively, and de-escalate.

Hawai'i's first responders are also facing more frequent and intense wildfires and disaster evacuations. In these high-stress events, a person with dementia may not understand commands, resist evacuation, or become combative out of fear. A one-hour, evidence-based annual refresher gives responders practical tools to keep everyone safer.

HB1976 is practical, **no-cost**, and ready now. The bill directs the Executive Office on Aging (EOA) to review and recommend at least one no-cost, one-hour training that aligns with best practices, including recognition, assessment, communication, de-escalation, abuse and neglect identification, caregiver engagement, disaster response, and safe return. The Alzheimer's Association already offers a free one-hour online training for first responders, and our Hawai'i chapter has partnered with Honolulu Police Department to provide in-person dementia training to new recruits at no cost. Agencies can meet this requirement without new appropriations while ensuring statewide consistency.

Implementation is straightforward:

- EOA publishes a vetted list that includes at least one no-cost option.
- Departments select from the list and deliver a minimum of one hour annually to all personnel.
- The bill sets clear timelines so implementation is reasonable while also ensuring training begins promptly, with completion by the end of the first annual cycle in 2027.

Why this matters now: With more kūpuna living with dementia in our communities, first responders are the front line of safety. A missed diagnosis on a call can escalate quickly into injuries, restraints, or unnecessary transports. A short, standardized training improves recognition, reduces conflict, prevents avoidable ED visits, and supports faster safe reunification when someone wanders. It also protects responders by giving them proven strategies to manage behavior and communicate under stress.

HB1976 delivers immediate public safety benefits at no cost to departments, improves outcomes for families, and strengthens Hawai'i's disaster readiness. I respectfully urge the Committee to pass HB1976.

Mahalo for your consideration. Please contact Coby Chock at 808-451-3410 or [ckchock@alz.org](mailto:ckchock@alz.org) with any questions.



Coby Chock  
Director, Public Policy and Advocacy  
Alzheimer's Association - Hawaii



**HPCA**

HAWAII PRIMARY CARE ASSOCIATION

**Testimony to the House Joint Committee on Health, and Human Services and  
Homelessness**

**Wednesday, February 4, 2026; 9:00 a.m.  
State Capitol, Conference Room 329  
Via Videoconference**

**RE: HOUSE BILL NO. 1976, RELATING TO DEMENTIA.**

Chair Takayama, Chair Marten and Members of the Joint 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. 1976, RELATING TO DEMENTIA.

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 require annual dementia-specific training for all first responders in Hawaii and ensure that training content addresses: recognition, assessment, and communication; abuse and neglect identification; caregiver engagement; disaster response; and safe return.

The bill would take effect upon its approval.

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 6<sup>th</sup> leading of death among US adults; and
- The 5<sup>th</sup> leading cause of death among adults aged 65 years or older.

**Testimony on House Bill No. 1976**  
**Wednesday, February 4, 2026; 9:00 a.m.**  
**Page 2**

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, the HPCA has worked closely with the Hawaii Chapter of the Alzheimer's Association on this issue. We are honored to partner with them 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@hawaiipca.net](mailto:eabe@hawaiipca.net).

**HB-1976**

Submitted on: 2/3/2026 10:18:24 AM  
Testimony for HLT on 2/4/2026 9:00:00 AM

**LATE**

| Submitted By | Organization                 | Testifier Position | Testify                |
|--------------|------------------------------|--------------------|------------------------|
| Glen Higa    | Hawaii Parkinson Association | Support            | Written Testimony Only |

Comments:

Chair Takayama and members of the committee,

My name is Glen Higa, and I live in Honolulu. As president of the Hawaii Parkinson Association, I am aware of the lack of understanding of Parkinson's Disease among first responders and I am in strong support of HB1976 which would create the establishment of dementia training for first responders across the state to ensure the safety of those living with Alzheimer's.

Hawai'i has more than 8,000 residents living with Parkinson's Disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

At the same time, Hawai'i's first responders are dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

This bill simply requires one hour of dementia-specific training each year for first responders. The Alzheimer's Association already provides this training at no cost, and it covers communication techniques, de-escalation strategies, recognizing signs of dementia, and how to safely assist a person who is lost or distressed. This short training can prevent injuries, reduce unnecessary hospitalizations, and help responders bring people home safely.

I respectfully urge you to support this bill so that Hawai'i's first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,

Glen Higa



February 2, 2026

Aloha Chair, Vice Chair, and Members of the Committee,

My name is Tori Carapelho, and I am submitting testimony on behalf of Hear 4 Hope in **strong support of HB1976.**

Hear 4 Hope works with individuals and families impacted by hearing loss, and we are deeply aware of the growing body of research showing that untreated hearing loss is associated with an increased risk of cognitive decline and dementia. In many cases, individuals may be in the early stages of cognitive impairment without a formal diagnosis, yet begin to act out of character due to confusion, fear, or difficulty understanding what is happening around them.

In emergency or high-stress situations, these communication and cognitive challenges can easily be misunderstood as noncompliance, agitation, or inappropriate behavior. When this occurs, individuals may be treated harshly or unfairly, not because of intent, but because their condition is not recognized.

HB1976 takes an important and compassionate step by ensuring first responders receive dementia-specific training that supports recognition, communication, and de-escalation. This type of training helps protect the dignity and safety of individuals experiencing cognitive or communication challenges, while also supporting first responders in doing their jobs safely and effectively.

For these reasons, Hear 4 Hope supports HB1976 and appreciates the Legislature's attention to this growing public health and public safety issue.

Mahalo for the opportunity to submit testimony.

Respectfully,

A handwritten signature in black ink, appearing to read "Tori Carapelho".

Tori Carapelho  
Hear 4 Hope

HAWAII ALLIANCE FOR RETIRED AMERICANS  
An Affiliate of Alliance for Retired Americans

**LATE**

**STATEMENT IN SUPPORT OF H.B. 1804**  
Relating to Long-Term Care Financing

Hearing: Wednesday, February 4, 2026; 9:00 a.m.  
Hawaii State Capitol, Conference Room 329  
Via video conference

House Committee on Health  
Rep. Gregg Takayama, Chair  
Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

Chair Takayama, Vice Chair Keohokapu-Lee Loy, Members of the House Committee on Health:

The Hawaii Alliance for Retired Americans (HARA) **supports** H.B. 1804, which establishes a joint legislative Long-Term Care Financing Advisory Commission to examine the feasibility of financing options for long-term care services and support. The bill appropriates funds for the option to contract a part-time project director and consultants to support the Commission's purposes.

***HARA is an organization of senior organizations that represent some 16,000 retirees in Hawaii. HARA's affiliates include retired members of HGEA, HSTA, ILWU, UPW, Kokua Council, and the Hawaii Caregivers Coalition.***

Long-term care has been a concern for Hawaii since the 1990s—and even earlier—as the threat of the “silver tsunami” then loomed with the first “Baby Boomers” approaching the age of 65 in 2011. Today, those age 65 and older make up a quarter of Hawaii’s population—and the costs of long-term care for loved ones are threatening to bankrupt families, the State of Hawaii. and seniors themselves.

H.B. 1804 will establish a Long-Term Care Financing Advisory Commission to consider options to help make long-term care more affordable for seniors and families. The State has established commissions in the past and considered programs like Family Hope to institute mechanisms to finance long-term care services and supports. None of them produced a remedy, leaving families to bear the burden themselves or to hope they can qualify for Medicaid, which is funded fully by taxpayer dollars from the State and the Federal government. H.B. 1804 could be a game changer.

While we understand the State Administration’s concerns about legislative measures that will require new funding, we can’t keep “kicking the can down the road”—as was done with rail. The rail project could have started 20 years ago, but lawmakers hesitated, resulting in grossly increased costs. H.B. 1804 is not even asking to fund long-term care—it’s simply a first step to explore options (many of which have already been considered) to support a plan to move the needle on helping to finance long-term care for seniors and their families.

Long-term care—whether institutional care or caregiver support at home or adult day care programs—is an inevitable reality that seniors, families, and lawmakers must face. Hawaii’s population is aging, and the “silver tsunami” that many warned about 30 years ago, must be addressed. The alternative is a generation of seniors, forced to leave the workforce to care for loved ones, facing their own “golden years” without resources with which to live or a massive increase in taxes to cover continually rising Medicaid costs. Action today will help spare many a gloomy future.

The Hawaii Alliance for Retired Americans **supports H.B. 1804 and urges passage of this measure to establish a Long-Term Care Financing Advisory Commission to develop options to address the long-term care affordability crisis.**

Thank you for considering our testimony.

**HB-1976**

Submitted on: 2/3/2026 10:00:02 PM  
Testimony for HLT on 2/4/2026 9:00:00 AM

**LATE**

| Submitted By   | Organization                            | Testifier Position | Testify                |
|----------------|---|--------------------|------------------------|
| Tony Vericella | Alzheimer's Caregiving & The Caregivers | Support            | Written Testimony Only |

Comments:

Testimony on HB1976

RELATING TO DEMENTIA

Wednesday, February 4, 9:00 AM

Conference Room 329 & Videoconference

State Capitol - 415 South Beretania Street

Chair Takayama and Members of the Committee,

My name is Tony Vericella, and I live primarily in Waimea on the Big Island. My wife, Dana Mehau-Vericella, was diagnosed with early onset Alzheimer's in 2018. She is now in the late stages and has been unable to do any activity of daily life for the last five years. Our family provides her complete care at our home here on the Big Island.

In September, 2023, I launched an approved tax-exempt 501 (c)(3), called Alzheimer's Caregiving & the Caregivers. Our goal is simple – to pass on the healing, the strength, and the power that comes from understanding and sharing experiences. initiative, and has but one mission – *to prepare, equip, and provide evolving support to “families” caregiving for loved ones diagnosed with the progressive and debilitating effects of Alzheimer's/Dementia.*

I am in strong support of HB1976 which would the establishment of dementia training for first responders across the state to ensure the safety of those living with Alzheimer's.

Hawai‘i has more than 31,000 residents living with Alzheimer's disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

At the same time, Hawai‘i’s first responders are dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

This bill simply requires one hour of dementia-specific training each year for first responders. The Alzheimer’s Association already provides this training at no cost, and it covers communication techniques, de-escalation strategies, recognizing signs of dementia, and how to safely assist a person who is lost or distressed. This short training can prevent injuries, reduce unnecessary hospitalizations, and help responders bring people home safely.

I respectfully urge you to support this bill so that Hawai‘i’s first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,

Tony Vericella

Alzheimer's Caregiving & The Caregivers

[www.alzcaregiving.org](http://www.alzcaregiving.org)

**HB-1976**

Submitted on: 1/30/2026 6:54:59 PM  
Testimony for HLT on 2/4/2026 9:00:00 AM

| Submitted By  | Organization | Testifier Position | Testify                |
|---------------|--------------|--------------------|------------------------|
| Kira Miyatake | Individual   | Support            | Written Testimony Only |

**Comments:**

Chair Takayama and members of the committee,

My name is Kira Miyatake, and I live in Enchanted Lake, Kailua.

Alzheimer's has affected me deeply through my family. My aunty's father lived with the disease, and it was heartbreaking to watch him become increasingly lost and confused, even though he couldn't help it. Our family supported him as much as we could until he eventually passed. Experiencing this showed me how devastating Alzheimer's is, not only for those diagnosed but also for the families who care for them. Supporting this bill would help us better understand the disease and move closer to effective treatment and, ultimately, an end to its impact on families like mine. I am in strong support of HB1976 which would the establishment of dementia training for first responders across the state to ensure the safety of those living with Alzheimer's.

Hawai'i has more than 31,000 residents living with Alzheimer's disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

At the same time, Hawai'i's first responders are dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

This bill simply requires one hour of dementia-specific training each year for first responders. The Alzheimer's Association already provides this training at no cost, and it covers communication techniques, de-escalation strategies, recognizing signs of dementia, and how to safely assist a person who is lost or distressed. This short training can prevent injuries, reduce unnecessary hospitalizations, and help responders bring people home safely.

I respectfully urge you to support this bill so that Hawai'i's first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,  
Kira Miyatake

To: Chair Takayama  
Vice Chair Keohokapu-Lee Loy  
Members of the Committee on Health

Re: **HB 1976 – RELATING TO DEMENTIA**  
**Wednesday, February 4, 2026**  
**Testimony in Strong Support**

My name is Steven Tam, and I am submitting testimony in strong support of HB 1976, which would require annual dementia-specific training for first responders across Hawai‘i. I support this bill in memory of my father and three uncles, all of whom passed away from Alzheimer’s disease. Like many families in Hawai‘i, we often found ourselves in situations where confusion or disorientation could quickly become stressful or unsafe. Those experiences are why it’s so important to me that first responders have the tools they need when they meet someone living with dementia.

Today, more than 31,000 people in Hawai‘i are living with Alzheimer’s, and over 62,000 family caregivers are helping them every day. As our population ages, these numbers will continue to rise. First responders will be called on more often to help families like mine. But right now, Hawai‘i does not have a statewide requirement for dementia-specific training. This means responders may not have the same level of preparation, and families may not get the support they need during a crisis.

HB 1976 would change that by making sure all first responders receive consistent dementia training. In 2025, as an Alzheimer’s Association volunteer Community Educator, I had the chance to provide this type of training to Honolulu Police Department recruits. We talked about communication, de-escalation, recognizing signs of Alzheimer’s, and how to safely help someone who is lost or distressed. What stood out to me was how much the recruits appreciated learning these skills. It was clear that this training can make encounters safer and less stressful for everyone involved.

The Alzheimer’s Association Hawai‘i Chapter already offers this training at no cost, and agencies can use these resources without needing additional funding. This makes the bill both practical and affordable.

HB 1976 will help keep our communities safe, support first responders, and protect our kūpuna and their families. It is a simple, meaningful step that will make a real difference.

I respectfully urge you to pass HB 1976.

Mahalo for the opportunity to testify.

**Steven Tam**

Bill: HB1976

Date: Wednesday, February 4, 2026

Time: 9:00 AM

Place: VIA VIDEOCONFERENCE

Conference Room 329

**STRONG SUPPORT - HB1976**

Dear Chair and Committee Members,

My name is Angela Ejida and this testimony reflects support for HB1976 in regards to strengthening skills and developing more knowledge about dementia. This bill will enable those who are serving the community to build a stronger understanding of how an individual is affected by different factors relative to their health. In addition, this would provide more efficiency towards working with those who have dementia. For example, the provided training offered by the agency would be a useful resource to educate those who work in these professions to competently communicate with those dealing with dementia. As someone who is studying a helping career and has encountered individuals with dementia, the ability to understand their thoughts enabled me to think and reflect on my own approach. Furthermore, the importance of recognizing and understanding dementia would be helpful to prevent unnecessary conflicts as well.

As a result, I extend my full support of this bill. Thank you for taking the time to read this written testimony and allowing me the opportunity to testify.

Respectfully,  
Angela Ejida

**HB-1976**

Submitted on: 2/2/2026 3:53:00 PM  
Testimony for HLT on 2/4/2026 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| Madeline Kim | Individual   | Support            | Written Testimony Only |

Comments:

**HB1976**

**Committee: Hawaii House Committee on Health & Homelessness (HLT)**

**Hearing Date: February 4, 2026**

**Position: Support**

Aloha Chair and Members of the Committee,

My name is Madeline Kim, and I am a Master of Social Work (MSW) student in Hawai‘i who works with kūpuna and individuals living with dementia. Through my academic training and hands-on experience in social services, I regularly support older adults and families navigating cognitive decline, caregiver stress, and crises that often involve emergency responders.

In my work, I have seen how dementia-related confusion or wandering can lead to emergency calls, and how an elder’s fear or inability to communicate can unintentionally escalate an encounter. When responders are trained to recognize dementia symptoms and use de-escalation and compassionate communication strategies, outcomes are safer, calmer, and more dignified for kūpuna and their families. HB1976 would ensure that first responders statewide have the knowledge and skills needed to respond effectively, reduce trauma, and protect vulnerable elders. This bill aligns with Hawai‘i’s commitment to honoring kūpuna and strengthening community-based, culturally grounded care.

Please pass HB1976 to strengthen dementia-informed emergency response in Hawai‘i and to honor our collective responsibility to mālama and protect kūpuna.

Mahalo for the opportunity to submit testimony.

Respectfully,

Madeline Kim

MSW Student and Community Health Worker



**HB-1976**

Submitted on: 2/2/2026 4:35:46 PM  
Testimony for HLT on 2/4/2026 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| Lila Mower   | Individual   | Support            | Written Testimony Only |

**Comments:**

I support this proposal.

**Testimony on HB1976  
RELATING TO DEMENTIA  
Wednesday, February 4, 9:00 PM  
Conference Room 329 & Videoconference  
State Capitol - 415 South Beretania Street**

Chair Takayama and members of the committee,

My name is Liane Briggs, and I live in Kāne‘ohe. **I am in strong support of HB1976** which would the establishment of dementia training for first responders across the state to ensure the safety of those living with Alzheimer's.

I help co-facilitate a caregiver support group, and speaking with caregivers, I am aware that Alzheimer's may manifest with different symptoms for different people. Some patients with Alzheimer's can become combative, some wander away with no memory of their home, some may be without their medication causing symptoms that may be related to Alzheimer's or to their underlying conditions. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places.

When 9-1-1 is called, first responders may encounter someone with dementia who is scared or unable to understand commands, and the situation can escalate quickly. At the same time, Hawai‘i's first responders are also dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

HB1976 simply requires one hour of dementia-specific training each year for first responders. The Alzheimer's Association already provides this training at no cost, and it covers communication techniques, de-escalation strategies, recognizing signs of dementia, and how to safely assist a person who is lost or distressed. This short training can prevent injuries, reduce unnecessary hospitalizations, and help responders bring people home safely.

**I respectfully urge you to support HB1976** so that Hawai‘i's first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,  
Liane Briggs

**HB-1976**

Submitted on: 2/3/2026 12:51:46 AM  
Testimony for HLT on 2/4/2026 9:00:00 AM

| Submitted By     | Organization | Testifier Position | Testify                |
|------------------|--------------|--------------------|------------------------|
| Kekuawela Tauala | Individual   | Support            | Written Testimony Only |

**Comments:**

To: Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee on Health

Subject: HB 1976 – Relating to Dementia & Dementia-Specific First Responder Training

Position: Support

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee on Health,

My name is Kekuawela Tauala, I am a graduate student in the Master of Social Work program at the University of Hawai‘i at Mānoa. I also help with caretaking for my grandmother who is living with Alzheimer’s dementia. I am submitting this testimony in support of HB 1976.

Populations of people older than 65+ years old are slowly growing and are projected to grow in the next few decades (DBEDT, 2021). The population of individuals living with dementia is also continuing to grow as our life expectancy increases. This would possibly increase the chances of first responders having to engage with individuals with cognitive impairments or Alzheimer’s Disease and Related Dementias (ADRD). With approved training from the Executive Office on Aging, first responders will be able to identify, assess, and support individuals living with dementia in appropriate ways.

The disease itself affects many individuals and families in negative ways. Slowly or even rapidly losing a loved one over time can be traumatizing. Individuals with this disease often experience a mental decline where they forget their loved ones, their favorite hobbies, their life experiences, and possibly who they are. They may also experience confusion, agitation, depression, delusions, and other strong emotions more often. In Hawai‘i, Alzheimer’s disease is the 5th leading cause of death (CDC, 2024). Many local families are experiencing the struggles of caretaking and the negative impact it may have on their health and wellbeing. In Hawaii, there are around 62,000

caregivers that are caring for a family member with dementia (Alzheimer's Association, n.d.). Having this bill implemented could reduce the potential harm that untrained first responders could cause when engaging with these individuals and/or their caregivers. This bill is not only important to the safety of people living with dementia, their families, and their caregivers but also important to the safety of the first responders as well. Proper education and training can ensure that both parties can resolve any conflict in a safe manner.

Personally, I would like to share my appreciation to the first responders who have to do various trainings all the time. I believe that an hour of dementia-specific training is appropriate for them to complete within their given time frame. As a caregiver, I would like to know that there would be a responder that knows how to properly address the situation and the individuals involved because of HB 1976 being passed and implemented.

Thank you for your consideration and opportunity to provide my support for HB 1976.

Mahalo nui loa,

Kekuawela Tauala

#### References:

Alzheimer's Association. (n.d.). Alzheimer's and public health action in Hawaii. Alzheimer's Association. <https://www.alz.org/professionals/public-health/state-overview/hawaii#:~:text=31%2C000,Contact%20us>

Centers for Disease Control and Prevention. (2024, August 17). About dementia. U.S. Department of Health & Human Services. <https://www.cdc.gov/alzheimers-dementia/about/index.html>

Department of Business, Economic Development and Tourism, State of Hawaii. (2021). The elderly population in Hawaii: Current living circumstances and housing options (Research and Economic Division).

[https://files.hawaii.gov/dbedt/economic/reports/Elderly\\_Population\\_in\\_Hawaii-Housing\\_Dec2021.pdf](https://files.hawaii.gov/dbedt/economic/reports/Elderly_Population_in_Hawaii-Housing_Dec2021.pdf)

**Testimony on HB1976  
RELATING TO DEMENTIA  
Wednesday, February 4, 9:00 PM  
Conference Room 329 & Videoconference  
State Capitol - 415 South Beretania Street**

Chair Takayama and members of the committee,

My name is Barbara Black and I live in Ninole on the Big Island. My spouse, Peter, is living with Alzheimer's and I am his caretaker. I strongly support HB1976 which would require annual dementia training for first responders across the state to ensure the safety of those living with Alzheimer's. And I note that this training is provided by the Alzheimer's Association at no cost to the State.

It breaks my heart to think of Peter wandering somewhere, confused and possibly frightened, being treated harshly and without compassion. I remember a neighbor, out walking and clearly unaware of who we were but who took our hands with a smile as we walked her to her home. And while most people are kind and caring when they see an uncertain and possibly lost person, and I am always grateful to be living on this wonderful island, that may not always be the case.

Hawai'i has more than 31,000 residents living with Alzheimer's disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

At the same time, Hawai'i's first responders are dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

This bill simply requires one hour of dementia-specific training each year for first responders. The Alzheimer's Association already provides this training at no cost, and it covers communication techniques, de-escalation strategies, recognizing signs of dementia, and how to safely assist a person who is lost or distressed. This short training can prevent injuries, reduce unnecessary hospitalization, and help responders bring people home safely.

I respectfully urge you to support this bill so that Hawai'i's first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,  
Barbara Black

**Testimony on HB1976  
RELATING TO DEMENTIA  
Wednesday, February 4, 9:00 PM  
Conference Room 329 & Videoconference  
State Capitol - 415 South Beretania Street**

Chair Takayama and members of the committee,

My name is Peter Black and I have Alzheimer's. My home is in Ninole on the Big Island where I live with my wife and caretaker, Barbara. I strongly support HB1976 which would require annual dementia training for first responders across the state to ensure the safety of those of us living with Alzheimer's. And I note that this training is provided by the Alzheimer's Association at no cost to the State.

I have no clear idea of what my future will be, but if I live long enough for my dementia to render me incompetent to be on my own, I really hope any encounter I might have with a first responder, be it policeman or fireman, is an encounter with someone who is ready to deal with me appropriately.

Hawai'i has more than 31,000 residents living with Alzheimer's disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

At the same time, Hawai'i's first responders are dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

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I respectfully urge you to support this bill so that Hawai'i's first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,  
Peter Black

**HB-1976**

Submitted on: 2/3/2026 9:12:27 AM  
Testimony for HLT on 2/4/2026 9:00:00 AM

**LATE**

| Submitted By  | Organization | Testifier Position | Testify                |
|---------------|--------------|--------------------|------------------------|
| Gina Fujikami | Individual   | Support            | Written Testimony Only |

Comments:

**Testimony on HB1976**

**RELATING TO DEMENTIA**

**Wednesday, February 4, 9:00 PM**

**Conference Room 329 & Videoconference**

**State Capitol - 415 South Beretania Street**

Chair Takayama and members of the committee,

My name is Dr. Gina Fujikami, and I live in Honolulu, HI. Alzheimer's has affected my family, and as a Geriatrician, I mainly see kupuna with cognitive issues and their caregivers. I have had patients suffering with dementia who have a lot of agitation and mood disorders, whom first responders have had to triage and manage in the field.

I am in strong support of HB1976 which would establish dementia training for first responders across the state to ensure the safety of those living with Alzheimer's.

Hawai'i has more than 31,000 residents living with Alzheimer's disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

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I respectfully urge you to support this bill so that Hawai‘i’s first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,

Dr. Gina Fujikami

**HB-1976**

Submitted on: 2/3/2026 10:54:43 AM  
Testimony for HLT on 2/4/2026 9:00:00 AM

**LATE**

| Submitted By  | Organization | Testifier Position | Testify                |
|---------------|--------------|--------------------|------------------------|
| Lori McCarney | Individual   | Support            | Written Testimony Only |

Comments:

**Testimony on HB1976**

**RELATING TO DEMENTIA**

**Wednesday, February 4, 9:00 PM**

**Conference Room 329 & Videoconference**

**State Capitol - 415 South Beretania Street**

Chair Takayama and members of the committee,

My name is Lori McCarney of Honolulu. I am in strong support of HB1976 which would the establishment of dementia training for first responders across the state to ensure the safety of those living with Alzheimer's.

Hawai‘i has more than 31,000 residents living with Alzheimer’s disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

At the same time, Hawai‘i’s first responders are dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

This bill simply requires one hour of dementia-specific training each year for first responders. The Alzheimer's Association already provides this training at no cost, and it covers communication techniques, de-escalation strategies, recognizing signs of dementia, and how to safely assist a person who is lost or distressed. This short training can prevent injuries, reduce unnecessary hospitalizations, and help responders bring people home safely.

I respectfully urge you to support this bill so that Hawai'i's first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,

Lori L McCarney

**LATE**

**Testimony on HB1976  
RELATING TO DEMENTIA  
Wednesday, February 4, 9:00 AM  
Conference Room 329 & Videoconference  
State Capitol - 415 South Beretania Street**

Dear Chair Takayama and members of the committee,

My name is Calvin Hara, and I live in Kaimuki. I am in support of HB1976. During my thirty-year career in long term care, I have seen many people with Alzheimer's disease along with their family caregivers. I have been a caregiver myself for loved ones. As we know, Alzheimer's disease is a difficult disease and there is no cure.

I am in strong support of HB1976 which would the establishment of dementia training for first responders across the state to ensure the safety of those living with Alzheimer's when first responders are called upon to help a person in need.

While first responders encounter many situations upon arrival, for someone with dementia, it can be scary and unsettling. Having first responders with training in dementia will allow better care for someone in distress.

Please support HB1976 so statewide, first responders will be better equipped to serve people with dementia.

Mahalo,

Calvin Hara

**HB-1976**

Submitted on: 2/3/2026 7:31:05 PM  
Testimony for HLT on 2/4/2026 9:00:00 AM

**LATE**

| Submitted By   | Organization | Testifier Position | Testify                |
|----------------|--------------|--------------------|------------------------|
| Brian Seabaugh | Individual   | Support            | Written Testimony Only |

Comments:

Chair Takayama and members of the committee,

My name is Brian Seabaugh, and I live in Kailua. I had a grandmother that passed away from dementia and am currently a caregiver for a father and two aunties with Alzheimers. I am in strong support of HB1976 which would the establishment of dementia training for first responders across the state to ensure the safety of those living with Alzheimer's.

Hawai‘i has more than 31,000 residents living with Alzheimer’s disease, and many remain in their homes and communities. As dementia progresses, people may become confused, disoriented, frightened, or unable to communicate clearly. Six in ten people living with dementia will wander, often repeatedly, and may get lost even in familiar places. When first responders encounter someone with dementia who is scared or unable to understand commands, situations can escalate quickly.

At the same time, Hawai‘i’s first responders are dealing with increasing medical emergencies, natural disasters, and more frequent wildfires, all of which require rapid action and clear communication. A person with dementia may not respond in expected ways during an evacuation, a traffic stop, or a medical call, placing both the individual and responders at risk.

This bill simply requires one hour of dementia-specific training each year for first responders. The Alzheimer’s Association already provides this training at no cost, and it covers communication techniques, de-escalation strategies, recognizing signs of dementia, and how to safely assist a person who is lost or distressed. This short training can prevent injuries, reduce unnecessary hospitalizations, and help responders bring people home safely.

I respectfully urge you to support this bill so that Hawai‘i’s first responders have the tools they need to interact safely and effectively with people living with dementia, and so families can feel more confident that their loved ones will be treated with understanding and care during an emergency.

Thank you for the opportunity to testify.

Mahalo,

Brian Seabaugh

**LATE**

**HB-1976**

Submitted on: 2/3/2026 10:11:59 PM  
Testimony for HLT on 2/4/2026 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| Stacy Kilty  | Individual   | Support            | Written Testimony Only |

Comments:

## Testimony on HB1976

### Relating to Dementia

**Wednesday, February 4 | 9:00 PM**  
**Conference Room 329 & Videoconference**  
**State Capitol**

Chair Takayama and members of the committee,

My name is Stacy Kilty, and I live in Kailua, Hawai‘i. I am testifying in strong support of **HB1976**, which would establish dementia-specific training for first responders across the state to help ensure the safety of individuals living with Alzheimer’s disease and related dementias.

Dementia has had a profound impact on my family. Both of my parents were diagnosed in their late 80s—my father with Lewy body dementia and my mother with dementia—and both passed away within two years of diagnosis. As their conditions progressed, confusion, disorientation, and anxiety became more common. Situations that might appear routine to others could quickly become frightening or overwhelming for them, particularly when unfamiliar people or stressful circumstances were involved.

One of the most difficult aspects of dementia is the risk of wandering and becoming lost. Individuals may leave home unexpectedly, fail to recognize familiar surroundings, or be unable to communicate where they live or what they need. When a person with dementia encounters a first responder while frightened or confused, they may not understand instructions or respond in expected ways. Without proper training, these interactions can escalate unintentionally, placing both the individual and responders at risk.

At the same time, Hawai‘i’s first responders are operating in increasingly complex environments—responding to medical emergencies, evacuations, natural disasters, and wildfires that require rapid decision-making and clear communication. A person living with dementia may not comply with evacuation orders, may resist assistance, or may appear uncooperative when they are simply unable to process what is happening. Dementia-specific training can make a critical difference in these moments.

HB1976 offers a practical, low-cost solution by requiring just one hour of annual dementia training for first responders. The Alzheimer's Association already provides this training at no cost, covering communication techniques, de-escalation strategies, recognizing signs of dementia, and safely assisting individuals who are lost or distressed. This small investment of time can prevent injuries, reduce unnecessary hospitalizations, and help reunite people with their families more safely and quickly.

I respectfully urge you to support HB1976 so that Hawai'i's first responders have the tools and understanding they need to interact safely and effectively with people living with dementia, and so families can feel greater confidence that their loved ones will be treated with care, patience, and dignity during emergencies.

Thank you for the opportunity to testify.

Mahalo,  
Stacy