

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



DEPT. COMM. 100-230
KENNETH S. FINK, M.D., M.P.H., M.G.A.
DIRECTOR OF HEALTH
KA LUNA HO'OKELE

STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
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In reply, please refer to:
File:

December 31, 2025

The Honorable Ronald D. Kouchi,
President and Members of the Senate
Thirty-Third State Legislature
State Capitol, Room 409
Honolulu, Hawaii 96813

The Honorable Nadine K. Nakamura,
Speaker
and Members of the House of
Representatives
Thirty-Third State Legislature
State Capitol, Room 431
Honolulu, Hawaii 96813

Dear President Kouchi, Speaker Nakamura, and Members of the Legislature:

For your information and consideration, I am transmitting a copy of the Annual Report on Elder Programs from the Executive Office on Aging to the Legislature, pursuant to Chapter 349, Section 5, Hawaii Revised Statutes.

In accordance with Section 93-16, Hawaii Revised Statutes, I am also informing you that the report may be viewed electronically at:

<https://health.hawaii.gov/opppd/department-of-health-reports-to-2026-legislature/>

Sincerely,

A handwritten signature in black ink, appearing to read "Ken Fink".

Kenneth S. Fink, M.D., M.P.H., M.G.A.
Director of Health

Enclosures

c: Legislative Reference Bureau
Hawaii State Library System (2)
Hamilton Library

**REPORT TO THE THIRTY-THIRD HAWAI'I STATE
LEGISLATURE 2026 SESSION**

Executive Office on Aging Annual Report for SFY 2025

**IN ACCORDANCE WITH THE PROVISIONS CHAPTER 349-5(b)(2), HAWAII
REVISED STATUTES, REQUIRING THE EXECUTIVE OFFICE ON AGING TO
PROVIDE AN ANNUAL REPORT ON ELDER PROGRAMS FOR THE GOVERNOR
AND THE LEGISLATURE**

**Prepared by
Department of Health
Executive Office on Aging
State of Hawai'i**

December 2025

EXECUTIVE SUMMARY

The Executive Office on Aging (EOA), an attached agency of the Department of Health, respectfully submits this annual report in compliance with Section 349-5(b)(2), Hawaii Revised Statutes. This report highlights EOA's programs, services, and initiatives from July 1, 2024, through June 30, 2025.

The year began with significant challenges, including a 60-day federal funding freeze implemented in January by the new administration. Several programs supporting Hawaii's older adults faced potential budget reductions. In response, EOA prioritized clear communication to reassure staff and the community, maintained continuity of services, and initiated data collection and risk assessments to guide strategic decisions. These efforts helped mitigate potential funding losses and identify alternative funding sources.

In March 2025, the Department of Health and Human Services announced plans to reorganize the Administration for Community Living (ACL), including redistributing its programs under the newly formed Administration for Children, Families, and Communities. While specific changes are still pending, EOA continues to monitor developments and prepare contingency strategies to ensure uninterrupted support for Hawaii's aging population.

Despite these uncertainties, EOA achieved significant progress in serving Hawaii's kupuna:

- **Hawai'i Aging and Disability Resource Center** handled 38,586 contacts for information and assistance and assessed 2,441 participants for long-term services and supports.
- **Kupuna Care Program** delivered home and community-based services to 5,217 participants and provided 56,836 hours of respite care statewide.
- **Long-Term Care Ombudsman Program** conducted 1,081 facility visits and investigated 241 complaints.
- **Hawaii SHIP** assisted 13,434 residents with Medicare counseling, outreach, and application support—a 17% increase from 2024.
- **Senior Medicare Patrol (SMP)** educated 12,000 residents on Medicare-related fraud, errors, abuse, and non-health scams.
- **Healthy Aging Partnership** offered 3,015 hours of evidence-based education and expanded EnhanceFitness to 508 participants.
- **Veterans Directed Choice** increased the number of veterans served by 43%.
- **Hawaii Dementia Initiative** launched the Healthy Brain Tracker, implemented a public awareness campaign, fostered collaboration, and leveraged data to improve the lives of individuals with dementia and their families.

EOA remains committed to promoting independence, dignity, and well-being for Hawaii's older adults through innovative programs and collaborative partnerships.

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Part I. Background Information

A. Vision, Mission, and Statutory Basis

Vision: Hawai'i is the best place to grow old

Mission: To optimize the health, safety, and independence of Hawai'i's older adults and people with disabilities. We support kūpuna and their caregivers through planning, development, advocacy, and coordination of policies, programs, and services.

The Older Americans Act (OAA) as amended, promotes the development and implementation of a comprehensive and coordinated system of long-term services and supports (LTSS) in home and community-based settings to enable older adults and persons with disabilities to live in their homes and communities. We carry out our mission and vision through our State Plan on Aging 2023-2027.

The U.S. Administration on Community Living (ACL) of the U.S. Department of Health and Human Services (DHHS) designates state units on aging (SUAs) to lead the implementation of the OAA.

Chapter 349, Hawaii Revised Statutes (HRS) created the Executive Office on Aging (EOA) to function as the SUA in the state and carry out the responsibilities as described in the OAA.

Part II. EOA's State and Federal Funding for SFY 2025

Table 1

In SFY 2025, the total operating budget for the EOA was \$20,818,762. Table 1 shows a breakdown of the source of funding between State (61%) and Federal (39%) monies.

SOURCE	SFY 2025	PERCENT
State	\$12,714,792	61%
Federal	\$8,104,970	39%
Total	\$20,818,762	100%

Part III. Long-Term Services and Supports

In alignment with federal and state laws, EOA oversees a coordinated continuum of care for older adults across all settings. Title III of the Older Americans Act is the key federal legislation defining Hawai'i's comprehensive array of services and supports.

A. Aging and Disability Resource Center

The Hawai'i ADRC helps older adults, individuals with disabilities, and family caregivers find options for long term supports and services. The goal is to enable individuals to maintain independence in their home and communities while preserving their dignity and quality of life.

Table 2. Outcomes of Consumer Contacts with the ADRC for SFY 2025

Services	SFY 2024	SFY 2025
Number of Contacts Received by the ADRC*	42,666	38,586
Number of Assessments Conducted by the ADRC	3,021	2,441

*Contacts include phone calls, emails, and walk-ins.

In SFY 2025, ADRC contacts decreased from 42,666 in SFY 2024 to 38,586, a 9.5 percent decline. Assessments conducted also decreased from 3,021 to 2,441, a 19.2 percent decline. The modest decrease in contacts along with the sharper reduction in assessments suggests that more inquiries were resolved through information and assistance. ADRC remains a key entry point for statewide information, referral, and access to long-term services and supports.



B. State Kūpuna Care Program

State Kūpuna Care (KC) provides older adults affordable and quality home and community-based services. KC goals are two-fold: 1) support elders to live at home for as long as possible, avoiding premature and costly placement in a long-term care facility, and 2) provide working caregivers with services and support for their loved ones so they can maintain employment.

KC served 5,217 participants in SFY2025. Of the 5,217 participants, 50% were over 80 years of age and 89% were 70+. Additionally, nearly 30% of participants needed help with more than 3 activities of daily living and over 30% of participants were homebound.

Compared to SFY2024 there was an increase in older adults receiving in-home services for personal care, homemaker, adult day care, and assisted transportation. The rise in service utilization reflects the growing demand from an aging population, increased provider awareness and referrals, and efforts to expand access. The decrease in chore and case management services may be attributed

to staffing shortages among providers, as challenges in recruiting and retaining care workers and case managers directly limits a provider’s service capacity.

Table 3. Kūpuna Care Service Utilization SFY 2024 and SFY 2025

KC Services*	Persons Served SFY 2024	Service Units SFY 2024	Persons Served SFY 2025	Service Units SFY 2025
Personal Care	476	36,061	507	42,070
Homemaker	529	25,606	592	29,213
Chore	42	473	22	361
Home Delivered Meals	2,124	330,534	1,947	345,739
Adult Day Care	315	241,944	321	250,182
Case Management	2,974	13,771	2,444	12,581
Assisted Transportation	192	6,022	240	8,202
Transportation	2,366	90,480	2,316	90,576

C. Title III of the Older Americans Act Services

In addition to Kūpuna Care, older adults and caregivers have access to other services and supports through the Older Americans Act (OAA), Title III Services. OAA programs and services are a cornerstone of the U.S. aging network. They aim to create a comprehensive, coordinated, and cost-effective system that supports older adults in living independently and maintaining their health within their homes and communities.

- 1) **Title III-B: Supportive Services** provides transportation, information and assistance, outreach, and legal assistance.

Legal Assistance Services of Hawai’i (LASH), the state’s sole civil legal aid provider since 1950, delivered 6,502 hours of assistance to 2,228 older adults statewide. The most common requests involved estate and advance planning—such as healthcare directives, wills, and powers of attorney—followed by housing and family law issues and help with public benefits like Social Security. LASH also expanded outreach through community trainings on topics ranging from estate planning to landlord-tenant disputes and foreclosure, while Hawai’i and Kaua’i counties focused on helping houseless individuals secure vital documents.

Complementing these efforts, the Executive Office on Aging (EOA) advanced elder abuse prevention through a new elder law booklet, statewide fraud awareness training, and specialized sessions on worker self-care for Adult Protective Services staff. EOA also

strengthened collaboration via inter-agency groups, including Elder Justice Teams on Maui and Kaua’i and a Guardianship Working Group dedicated to improving systems and promoting alternatives.

- 2) **Title III-C: Nutrition Services** provides congregate and home-delivered meals and related nutrition services. 148,652 congregate meals were provided to 1,946 participants.
- 3) **Title III-D: Disease Prevention and Health Promotion Services** promotes activities that support healthy lifestyles and promote healthy behaviors through the implementation of evidenced based interventions. Health education reduces the need for more costly medical interventions. 2,878 hours of health education and promotion were delivered.
- 4) **Title III-E: National Family Caregiver Support Program (NFCSP)** offers a range of services to support family caregivers. Services to caregivers include the following: information to caregivers about available services and supports, assistance to accessing services, individual counseling, organization of support groups, and caregiver training, respite care, and supplemental services.

D. Service Utilization Statewide: Table 4 shows the number of unduplicated persons served, service units delivered, and the unit measure.

Table 4. Utilization of Services in SFY 2025

SERVICES	PERSONS SERVED (Unduplicated)	UNITS OF SERVICE	MEASURE
Legal Services	2,228	6,970	Hours
Congregate Meals	1,946	148,652	Meals
Health education and promotion		2,878	Hours
Caregiver Services			
Respite Care	166	56,836	Hours
Counseling/Support Groups/Training	505	2,772	Hours

Part IV: Safety Net Programs and Special Initiatives

EOA offers programs and special initiatives that improve the lives of older adults by enhancing their health, safety, well-being, and independence and increasing their access to services.

A. Other Federal Programs

- 1) **Older Americans Act, Title VII: Long-Term Care Ombudsman Program (LTCOP)** serves as an advocate for residents of nursing homes (NF), adult residential care homes (ARCH), expanded ARCHs (E-ARCH), community care foster family homes (CCFFH), and assisted living facilities (ALF). The number of facilities statewide is approximately 1,790 with 12,942 beds.

The LTCOP investigate complaints from residents and work with the staff and the resident to resolve their concerns. The top complaints were related to resident care (e.g. assistance and care plan follow up/update), the facility/home environment (e.g. unpleasant odors, noise, room and shower temperature, and poor housekeeping), and discharge issues (e.g. concerns related to readiness and long-term care services including additional therapy, home renovation for accessibility, and access to care at home). Facility policies, specifically poor administrative oversight and staff training resulted in the violation of resident rights.

In SFY25, 5 LTCO staff and 15 volunteers conducted 1,081 facility visits and investigated 241 complaints, verifying 166. Of these 166 complaints, 116 were resolved, 48 were unresolved, and 22 were withdrawn.

- 2) **Long-Term Care Ombudsman (LTCO) Volunteer Program** trains and certifies volunteers to assist the State Long-Term Care Ombudsman. In SFY 2025, 15 volunteers were certified as Volunteer Ombudsman (VO). VO conducted 255 in-person visits and investigated and resolved 65 complaint cases. An additional 12 VOs were trained for outreach at 17 community events and administrative support (e.g. language translation, data entry, printing and prepping outreach and training materials). Volunteers provided 1,371 service hours valued at \$47,697 (based on 2025 national volunteer hourly rate).

Table 5. Accomplishments for LTCO Volunteer Program

Activity	SFY 2024	SFY 2025
Volunteers	31	27
Volunteer Service Hours	1,593	1,371
Facility Visits	333	255
Resident/Family Consultations	6,610	8,821
Cases Opened/Closed	101/83	115/65

- 3) **Hawai'i State Health Insurance Assistance Program (SHIP)** is a federally funded, volunteer-based program that educates and empowers Medicare beneficiaries, caregivers, and soon-to-be retirees to make informed, cost-effective healthcare decisions based on their medical

needs and financial circumstances. SHIP volunteer counselors provide free, confidential, and unbiased assistance with Medicare plan options, enrollment, and eligibility for low-income subsidy programs.

Table 6. Hawai'i SHIP Activities for SFY 2025

Activity	SFY 2024	SFY 2025
Volunteers	91	93
Volunteer Service Hours	3,683	5,227
Persons Reached Through Outreach	12,644	13,434
Outreach Activities	127	81
Application Assistance for Medicaid/MSP or Extra Help	166	171

In SFY 2025, Hawai'i SHIP served 13,434 residents, a 17% increase from 2024, through Medicare counseling, outreach, and application assistance. Growth was driven by strategic partnerships, notably with AARP Hawai'i, which hosted eight statewide Medicare Open Enrollment events, reaching 404 kūpuna and caregivers—66% first-time attendees, nearly half from rural areas. 95% reported greater confidence in navigating Medicare.

SHIP also collaborated with the Daniel K. Inouye College of Pharmacy to train students on Medicare, resulting in a 95% knowledge increase. Students assisted 200+ older adults with plan reviews, Extra Help applications, and screenings; 68% had never received counseling, and 35% discovered new subsidy eligibility. This initiative expanded access and provided students with culturally competent, real-world experience.

Challenges included delayed federal funding, with only 50% received initially, forcing reductions in volunteer and community engagement. Continued funding uncertainty threatens SHIP's ability to sustain and grow services for Hawai'i's older residents.

- 4) ***Hawai'i Medicare Improvements for Patients and Providers Act (MIPPA)*** MIPPA is a federally funded grant supporting Hawai'i SHIP to improve access and enrollment in low-income subsidy programs that reduce Medicare costs. It focuses on underserved groups: low-income, limited English speakers, rural residents, Native Hawaiians, individuals under 65 with disabilities, and those with limited digital literacy.

For SFY2025, EOA prioritized expanding partnerships to enhance service delivery and meet rising demand. SHIP experienced increased inquiries from MedQuest (Medicaid loss) and SSA (Extra Help loss or new Medicare eligibility).

Challenges include rising demand, limited funding, stalled ADRC collaborations (due to post-

pandemic and wildfire priorities), leadership changes, and staff shortages. Federal funding uncertainty keeps positions temporary, hindering recruitment.

- 5) **Senior Medicare Patrol (SMP) Hawai'i** is a federally funded, volunteer-based program that has educated and empowered older adults for 26 years to prevent Medicare-related fraud, errors, and abuse. Volunteers statewide provide presentations, counseling, and fraud referrals, contributing 6,685 service hours (valued at \$232,571). SMP expanded its reach to 12,000 residents and broadened its focus to include non-healthcare scams, addressing rising internet crime losses (\$52M in 2023) and increased online activity among seniors.

Table 7. Accomplishments for SMP

Activity	SFY 2024	SFY 2025
Active Volunteers	75	56
Individual Interactions	330	207
Persons Reached through Outreach	10,350	12,000
Volunteer Service Hours	7,767	6,685
Value of Volunteer Hours (2025 national volunteer hourly rate)		\$232, 571

In SFY 2025, SMP received only 60% of its grant, causing cuts to outreach, marketing, and rural travel, and losing 20 volunteers. To sustain services, SMP implemented initiatives such as:

- **County Volunteer Leads** for local support and recruitment.
- **Expanded Partnerships** with private, local, and government entities.
- **Collaboration with UH School of Social Work** for practicum student support.
- **Streamlined Policies** for onboarding and cross-training across volunteer programs.

Despite funding challenges, SMP remains committed to protecting older adults through strategic partnerships and capacity-building efforts.

B. Special Initiatives

- 1) **Hawai'i Healthy Aging Partnership (HHAP)** is a collaboration between the EOA, the DOH Chronic Disease Prevention & Health Promotion Division, and the UH Center on the Family to improve the health and wellbeing of older adults thru two evidence-based health programs: Enhance Fitness and Better Choices Better Health—Ke Ola Pono. 84.9% of Hawai'i residents aged 60+ live with chronic conditions, making these programs vital for health and cost savings.

In SFY 2025 a total of 571 participants received 3,015 hours of services. Additionally, HHAP also conducted seven outreach efforts to boost program participation and BCBH trainer recruitment.

Enhance Fitness (EF) is an evidence-based, group exercise program for older adults. In SFY2025 EF achieved significant growth in participation with 508 EF participants, a 64% increase over SFY2024 (348 participants). This growth was primarily driven by the addition of seated classes and more EF sites. Program results reported improved strength, balance, and mobility, as well as increased exercise frequency, and fewer falls.

Program outcomes demonstrated significant benefits to participant's well-being and healthcare utilization. Participants reported improved symptom management, experiencing heightened confidence and notable reductions in fatigue, pain, stress, and shortness of breath.

- 2) **Community Living Program (CLP)** is a participant directed program with similar eligibility requirements as Kūpuna Care. CLP differs from the Kūpuna Care in that older adults serve as their own case managers, hire and direct their own care workers (who may include family or friends), manage a monthly budget, and complete necessary paperwork.

In SFY 2025, CLP enrollment increased by 21% from 19 to 23 participants. All the new enrollments are from the neighbor islands. This growth is largely attributed to more referrals from the neighbor islands, expanding the program's reach in rural areas where access to services is often limited. Sustained efforts to increase referrals is necessary to expand services in these underserved, rural areas.

- 3) **Veteran-Directed Choice (VDC) Program** is a participant-directed program administered by the Veteran's Administration (VA). VDC is for eligible veterans of all ages with functional limitations that would otherwise require nursing home placement. VDC empowers participants to choose their own care providers and services.

In SFY 2025, EOA received 62 VA referrals and enrolled 33 veterans, a 43% increase compared to SFY 2024 (23 enrolled veterans). Total participation grew from 105 to 113. Twenty referrals did not enroll due to VA ineligibility and death, and nine are still in the enrollment process. For SFY 2026, the EOA projects 55–65 referrals and aims to enroll 30–40 veterans. The program also trained and onboarded two new assessor/coaches, strengthening its capacity to support veterans through enrollment and ongoing participation. With increased referrals and participation and new assessor/coaches onboarded, the VDC program is successfully expanding its reach and capacity to serve more veterans effectively.



- 4) **Hawai'i Dementia Initiative (HDI)** strives to address Alzheimer's Disease and Related Dementias (ADRD) on a state level by fostering collaboration, leveraging data, and implementing strategies to improve the lives of individuals with dementia and their families. The initiative focuses on implementing the Hawai'i 2035: State Strategic Plan on ADRD. Convened by the EOA, the HDI coalition consists of 150 community members and stakeholders from across the state. The coalition is organized into Action Teams through 7 targeted initiatives: 1) Dementia Caregiving, 2) Workforce Development, 3) Early Detection of Dementia, 4) Brain Health and Risk Reduction, 5) Public Awareness and Education, 6) Community Clinical Linkages, and 7) Data Action.

The Building Our Largest Dementia Infrastructure (BOLD) grant from the CDC funds HDI activities. EOA partnered to deliver dementia education to rural, underserved, low-income communities. Programs included caregiver training, community awareness sessions, talk story listening, and HDI workgroup meetings. EOA also collaborated with UH Center on Aging, AARP, Brain Matters, Kokua Mau, and other partners for outreach and remote/in-person trainings. In SFY 2025, 6,306 community members and 2,618 professionals received dementia-related education and resources.

To raise dementia awareness EOA ran a preliminary media campaign in partnership with Hawaii News Now, Spectrum Reach, and 'Olelo Community Media in SFY2025. This campaign reached 10,544,418 impressions statewide with PSAs on television and online. These PSAs featured messages to promote brain health, educate on early signs of dementia, local resources, support services, and encourage viewers to talk to their health care provider.

EOA developed the first dementia data dashboard in Hawai'i, the Healthy Brain Tracker, in partnership with the UH Center on Aging, Hawai'i Health Data Warehouse, DOH, and Hawai'i Dementia Initiative coalition members. The Tracker features over 30 indicators measuring dementia prevalence, subjective cognitive decline, risk factors, and caregivers and depicts data changes and demographic statistics. This data can inform policies and programs to improve care and support for people living with dementia and their caregivers. To learn more visit <https://hawaiidementia.org/healthy-brain-tracker/>.

EXHIBIT A:
2025 Biennial Update:
State Strategic Plan for Alzheimer's
Disease and Related Dementia



Hawai'i 2035

STATE STRATEGIC PLAN

On Alzheimer's Disease & Related Dementias

3



Hawai'i State Department of Health

Executive Office on Aging

September 2023

2025 Biennial Update



OVERVIEW

The Hawai'i 2035: State Strategic Plan on Alzheimer's Disease and Related Dementias was published at the end of 2023 and has been in implementation since 2024. It was fashioned after the inaugural Hawai'i 2025: State Plan on Alzheimer's Disease and Related Dementias published in 2013 and aligned with the Centers for Disease Control and Prevention (CDC) Healthy Brain Initiative 2018–2023 Roadmap. This plan was intended to be a blueprint to strengthen the capacity of our state agencies and community partners to build a strong infrastructure that will improve care for people living with dementia, reduce the risk of cognitive decline, promote brain health, and support caregivers.

This Plan is the accumulation of stakeholder voices and community input on recommendations over three years in the planning period. The strategies are organized into 5 main sections: Data, Program & Policy, Workforce Development, Public Awareness & Education, and Sustainability. This Plan is quite comprehensive including 22 goals, 81 strategies, and 161 actions to accomplish those goals and strategies. The State Strategic Plan includes both short-term and long-term goals for the coalition to work on over this 12-year period.

The beginning sections of the Plan features the background on Alzheimer's Disease and Related Dementias, statistics on prevalence, risk factors for dementia, challenges and considerations for implementation. It is highly encouraged to review that foundational information in the beginning of the State Strategic Plan (pp. 3-20) prior to reading this update. The Hawai'i 2035: State Strategic Plan on Alzheimer's Disease and Related Dementias can be downloaded at this website: <https://hawaiidementia.org/about-us/>

The coordination of these efforts has been supported by the CDC as part of its Building Our Largest Dementia Infrastructure (BOLD) Public Health Programs to Address Alzheimer's Disease and Related Dementias (ADRD). The Executive Office on Aging (EOA) received the BOLD Program planning grant in 2020-2023 and implementation grant in 2023-2028. Every year, EOA submits a continuation application for the next year of funding.

The CDC BOLD Grant includes several strategies to coordinate a coalition, educate the public, educate professionals, improve data utilization, and more. The Hawai'i Dementia Initiative is the coalition of community stakeholders convened by the EOA, Hawai'i State Department of Health, to collaboratively implement the Hawai'i 2035: State Strategic Plan on Alzheimer's Disease and Related Dementias.

During the planning phase, workgroups met to develop the strategies for these priority areas in the Plan: Public Awareness and Education, Data, Program & Policy, and Workforce Development. In 2024-2025, the coalition met via Zoom Video Conference Calls in Action Teams that focused on implementation in these priority areas: Dementia Caregiving, Data, Brain Health & Risk Reduction, Public Awareness and Education, Early Detection of Dementia,

Workforce Development, Community Clinical Linkages. As the needs in the community change, these priorities and teams will also change.

In September 2025, the Hawai'i Dementia Initiative Coalition met in-person at the John A. Burns School of Medicine to talk with the coalition members and partners about the collective accomplishments, to learn about the latest dementia-related updates (i.e. in local research, care, policy, etc.), and to plan for the next year of implementation for the Plan. Coalition members shared about their personal experiences as family members of individuals living with ADRD. Medical professionals educated the coalition about current best practices for early detection of dementia, risk reduction, and dementia care in local health systems.



This biennial update offers a qualitative snapshot of statewide efforts to address Alzheimer's Disease and Related Dementias (ADRD), highlighting initiatives led by action teams and community stakeholders. While not all goals and strategies in the Hawai'i 2035: State Strategic Plan have been fully addressed, this first update reflects meaningful progress and a strong foundation for the decade ahead. The growing momentum in the dementia space—driven by committed partners, coalition members, caregivers, and advocates—underscores the collective dedication to a dementia-friendly Hawai'i. More community members are stepping forward to care for kūpuna, support caregivers, and champion brain health.

In these unprecedented times, as priorities evolve and new opportunities arise, this update stands as a testament to the resilient aloha and dedicated collaboration of people across Hawai'i. Together, we remain committed to the mission: "We embrace and support with Aloha all of Hawai'i's people who are touched by Alzheimer's Disease and Related Dementias—from prevention and early detection to end of life—always keeping alive the hope of an eventual cure, and aiming for the best quality of life for all."

ADRD STATE STRATEGIC PLAN GOALS & UPDATES

In the Hawai'i 2035: State Strategic Plan on Alzheimer's Disease and Related Dementias, the goals, strategies, and actions are on pages 24 - 61. There are personal stories of local people living with dementia and their caregiving journeys and includes partner spotlights. This section of the 2025 update will include brief highlights on progress made throughout the plan. Feel free to click the links to learn more and contact EOA if you're interested in getting involved in these initiatives.

DATA

See pages 24-27 in the Hawai'i 2035: State Strategic Plan

Data Vision Statement: To increase the utilization of available data and develop data sources that would allow for increased understanding of community achievements and where ADRD public health burdens exist, facilitated evolution of initiatives, and overall sustainability of activities over time.

GOAL I. Build statewide and national networks to contribute to the science and understanding of ADRD in Hawai'i's diverse communities worldwide.

- The Hawai'i Dementia Initiative continues to build relationships with national research partners such as the BOLD Public Health Centers of Excellence, the State Alzheimer's Research Support (StARS) Center, and Alzheimer's Association.
- The University of Hawai'i Center on Aging (COA) continues to lead the evaluation of the BOLD grant, the Workforce Development Action Team and the Data Action Team. COA is leading the efforts to increase representation of Asian American, Native Hawaiian, and Pacific Islanders (AANHPI) in research registries (i.e., CARE– Collaborative Approach for Asian Americans and Pacific Islanders Research and Education). Coalition members partner with the CAREs outreach for community educational events.
- EOA contracted with Brave New Media to develop the Hawai'i Dementia Initiative website <https://hawaiidementia.org/> to serve as the public central repository for ADRD resources. EOA staff update the resources on this website and collaborate with coalition members to develop more locally relevant educational content for the website.
- EOA worked with the Department of Health for access to the Laulima Data Alliance for Hawai'i hospital data. This statewide health information supports decision making and policies, safeguards confidential individual patient and healthcare provider information, and provides insights on the hospitalization of those living with ADRD.
- During the 2025 legislative session, HB 700 passed, establishing standardized cognitive assessments for qualified Medicare beneficiaries and an unfunded two-year Dementia Data Pilot Program within EOA to collect and analyze cognitive assessment data. EOA is continuing to explore partnerships with local organizations who specialize in data and healthcare in order to creatively facilitate this unfunded data pilot.

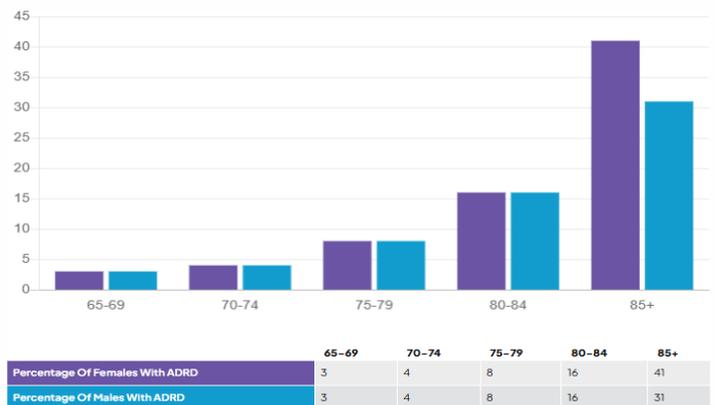
GOAL II. Use data effectively for continuous quality improvement and to inform providers, program development, and policy.

- EOA utilizes state general funds to support the biennial administration of the cognitive decline and caregiver modules in the Hawai'i Behavioral Risk Factor Surveillance Survey (BRFSS). The latest data available is from 2023. In 2024, EOA completed the BRFSS Questionnaire Request Form for the 2025 data. EOA staff continue to participate in the quarterly BRFSS meetings with DOH and community partners. (Action 1a)
- EOA and COA continue to maintain collaboration with UH TASI (Telecommunications and Social Informatics Research Program), All-Payer Claims Database, and Alzheimer's Association Hawai'i Chapter to continue to analyze service utilization and costs by comparing the ADRD population and the non-ADRD population. (Action 1b)
- EOA contracted with Brave New Media to develop interactive data visualizations of this Medicare service utilization data from UH TASI on the Hawaii Dementia Initiative Website <https://hawaiidementia.org/healthy-brain-tracker/>. These interactive visualizations are accessible online for individuals who use screen readers due to low vision. Here are examples below:

Average Cost per Medicare Beneficiary by Diagnosis Status and Year



ADRD Prevalence (%) by Age Group and Gender



- COA and EOA have explored potential areas of alignment with partner agencies to supplement gaps in ADRD data (e.g. Hawaii Health Information Exchange, State Health Planning and Development Agency, Alzheimer's Association Hawai'i, Hawai'i Health Data Warehouse, Hawai'i Health Matters, etc.) and develop a better statewide surveillance system for dementia. Through these collaborations, EOA aims to strengthen the statewide surveillance system for dementia. As broader healthcare data transformation efforts continue across the state, EOA remains committed to engaging with partners and contributing where appropriate to ensure a more comprehensive and coordinated approach to ADRD data collection and analysis. (Strategy 2)

GOAL III. Use data and evaluation to monitor progress on the implementation of the state plan and set new goals to further Hawai'i's dementia capability.

- As part of the Plan implementation, the Healthy Brain Tracker was developed. This is Hawai'i's first dementia data dashboard. Thanks to collaboration with the University of Hawai'i Center on Aging (COA), the Hawai'i Health Data Warehouse, the Building Our Largest Dementia Infrastructure (BOLD) grant, and the Hawai'i Dementia Initiative Data Action Team. The Healthy Brain Tracker displays key data trends on brain health, cognitive decline, dementia prevalence, dementia risk factors, and caregiving. This tracker can be used to monitor Hawai'i's progress, guide key stakeholders, and inform the community as we work together to promote brain health and improve the quality of life for people affected by memory loss or dementia. By clicking on the indicator, viewers can learn more about why it's important and how it is tracked in Hawai'i. There are subcategory buttons to see the data by different demographic variables to examine at-risk populations. The next pages include data highlights from the Healthy Brain Tracker. Visit <https://hawaiidementia.org/brain-health/> to learn more and view the full data dashboard. The Data Action Team plans to update the Healthy Brain Tracker, develop data policy briefs, and dementia-related data projects. (Strategy 1)



2025 POLICY BRIEF

BRAIN HEALTH



EXECUTIVE OFFICE ON AGING



Cognitive Decline in Hawai'i

Subjective signs of cognitive decline can be an early indicator to be screened for dementia.¹

11.1%

of **adults 45+ years** in Hawai'i report experiencing **cognitive decline**.^{a,b}

Among those with confusion or memory loss,



39% reported it affected daily household activities/chores.^b

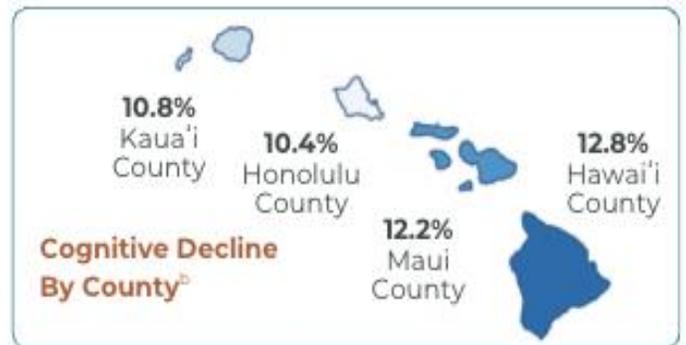
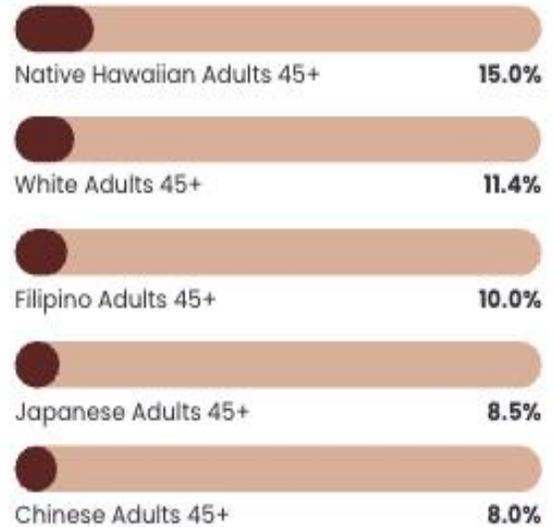


28.3% needed assistance with daily activities^b



27.2% reported it interfered with ability to work, volunteer, or engage in social activities^b

Cognitive Decline by Race/Ethnicity^b



^a Cognitive decline: Confusion or memory loss that is happening more often or is getting worse in the past 12 months

^b Behavioral Risk Factor Surveillance System (2021), Hawai'i Health Data Warehouse

Dementia and Alzheimer's Disease in Hawai'i

Dementia comprises of a group of symptoms of declining cognitive functions such as memory and problem-solving skills due to abnormal changes to the brain. Alzheimer's disease is the most common form of dementia.¹

7.0%

of Medicare beneficiaries are treated for Alzheimer's disease or dementia.^c

21.4%

the age-adjusted death rate due to Alzheimer's disease.^d

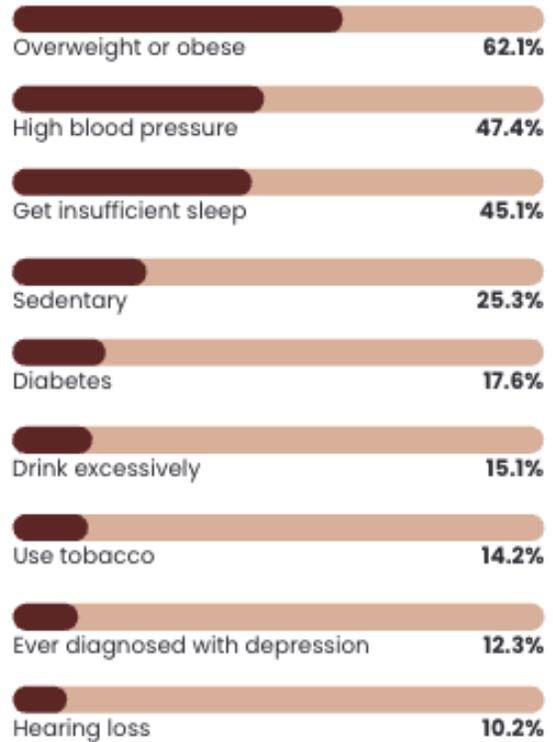
The **death rate** due to **Alzheimer's disease** has **increased significantly** between 2000 and 2023.^d



Dementia Risk Factors in Hawai'i

Risk factors for dementia include chronic diseases, social determinants of health, and health disparities.¹

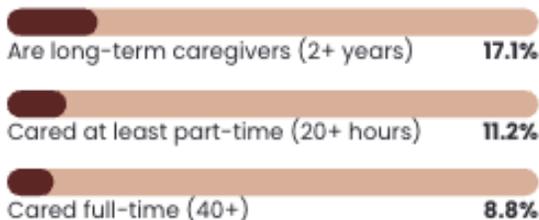
Risk Factors among Adults 45+^b



Caregiving in Hawai'i

Caregivers are essential in the care of individuals with dementia and Alzheimer's disease.

Among adult caregivers of someone living with dementia:^b



16.4% of adults **expect to provide care or assistance** in the next 2 years to **a friend or family member** who has a health problem or disability^b

¹Hawai'i 2035 State Strategic Plan on Alzheimer's Disease & Related Dementias. Hawai'i State Department of Health, Executive Office on Aging, September 2023
²Behavioral Risk Factor Surveillance System (2021), Hawai'i Health Data Warehouse
³Centers for Medicare & Medicaid Services (2023), Hawai'i Health Data Warehouse
⁴Hawai'i State Department of Health, Vital Statistics (2023), Hawai'i Health Data Warehouse

View more data:
bit.ly/hlthybrain



Program & Policy Change

See pages 30-42 in the Hawai'i 2035: State Strategic Plan

Program & Policy Change Vision Statement: To develop integrated and dementia-capable systems in Hawai'i.

GOAL I. Encourage statewide availability and utilization of early detection and regular screening methods.

- Many community partners, medical professionals and local subject matter experts have provided dementia capability training to staff statewide for many years to improve early detection and regular screening.
- The University of Hawai'i John A. Burns School of Medicine Department of Geriatric Medicine leads the way for training the next generation geriatric workforce, presenting the latest evidence based best practices, and educating the community. Their Geriatric Workforce Enhancement Program (GWEP) funded by the Health Resources and Services Administration (HRSA) educates and trains the primary care and geriatrics workforces and other appropriate specialties to provide age-friendly and dementia-friendly care for older adults in integrated geriatrics and primary care sites/delivery systems. (Strategy 1)
 - Website: <https://geriatrics.jabsom.hawaii.edu/geriatric-workforce-enhancement-program/index.html>
- Catholic Charities Hawai'i, Hale Kū'ike, and Positive Approach to Care collaborate on facilitating many excellent workshops that provide valuable education on dementia care including specialized topics like behavioral challenges, delirium, depression, dysphagia, intellectual disabilities and developmental disabilities, and other topics presented by their expert panels. (Action 3b)
 - View past workshops: <https://www.catholiccharitieshawaii.org/caring-for-persons-living-with-dementia-webinars-and-presentations/>
- Alzheimer's Association Hawai'i Chapter and many advocates championed legislation (HB 700) to standardize cognitive assessments for all Medicare Annual Wellness Visits. In the past, cognitive screenings could be included but not required if the provider observed no cognitive concerns during the outpatient visit. Many caregiver advocates and coalition members reported that their family member living with dementia may present well during the appointment, but at home there may be many signs or symptoms of cognitive impairment. This legislation will ensure that all Medicare beneficiaries receive access to cognitive assessments annually to establish a baseline and to monitor their cognitive health from year to year. (Strategy 4)
- The Hawai'i Dementia Initiative Coalition convened community stakeholders for an Early Detection Action Team consisting of medical professionals, public health professionals, community members and advocates. This action team found that there is a long history of early detection education in our state thanks to the many community leaders who laid this foundation. However, health systems and health care providers use many kinds of

cognitive assessments at varying points in the care continuum. There was no standardized recommendation. This action team participated in discussions about HB 700 to standardize cognitive assessments annually and also provided feedback for implementation considerations for this legislation. This action team provided valuable feedback on a Providers Toolkit in progress with the Alzheimer's Association. The goal of this toolkit is to empower primary care providers in Hawai'i by sharing the importance of early detection of dementia and providing resources to help them implement this in their practice. (Strategy 4)

GOAL II. Promote informed, coordinated care and services for persons living with dementia.

- EOA facilitated a competitive procurement for website development and contracted with Brave New Media to develop an accessible online hub of dementia educational resources. The University of Hawai'i Center on Aging (COA), Dr. Kevin Kawamoto, Dr. Christy Nishita, and Whitney Katsutani reviewed numerous educational resources related to Alzheimer's disease and related dementias (ADRD). They vetted these sources to create a master curriculum, so that educators statewide could pull content from this master curriculum to incorporate ADRD in their class curriculum. This master curriculum has been digitized and is now available on the dementia website: <https://hawaiidementia.org/education/>. This resource library will continue to be updated by EOA staff, Brave New Media, and COA in collaboration with coalition members. (Strategy 1)

GOAL III. Advance risk reduction and brain health awareness and education.

- The Hawai'i Dementia Initiative Brain Health & Risk Reduction Action Team consists of community stakeholders, trainers, and local subject matter experts who have been meeting for about 2 years to advance risk reduction and brain health awareness and education in Hawai'i. This Action Team has developed Brain Health Booklets with dementia risk reduction education in layman's language and local resources for brain healthy activities tailored to each county. EOA assisted with printing and distributing these Brain Health booklets to community members in Maui, Honolulu, Kaua'i and Hawai'i county. This action team also developed a Brain Healthy tips one-pager for a simplified version of the booklet. This one-pager was translated to Japanese and Korean by Advisory Council member, Dr. Jane Lee and her team. (Strategy 1)
- This Action Team developed a Brain Health Public Service Announcement video with Spectrum Reach and this PSA video was broadcast on local television stations in 2024-2025. This Action Team collaborated on the content development for the Brain Health educational information on the Hawai'i Dementia Initiative website which can be viewed here: <https://hawaiidementia.org/brain-health/>. This Action Team continues to lead brain health workshops in the community. They have tailored this brain health workshop materials to the Filipino community and Japanese community, due to the higher population in these ethnic communities and willingness of community partners and cultural consultants who collaborated in the process. The Hawai'i Dementia Initiative looks forward to continuing engaging with diverse ethnic communities on culturally sensitive approaches for brain health promotion. (Strategy 1 and 2)

- Amy Kelley, founded [Brain Matters](#), a new organization in Hawai'i dedicated to making brain health accessible for all people in the islands, so that everyone has the knowledge and tools to prevent or slow cognitive decline. Amy's brain health presentations are in high demand, along with her brain health activities for care home residents and brain health hui groups that guide participants through a learning program on the six pillars of brain health. (Strategy 2)

GOAL IV. Promote the use of effective interventions and best practices to protect brain health and address cognitive impairment for persons living with dementia.

- ADRD Coordinator and BOLD Coordinator continue to stay updated on the latest best practices in brain health and dementia care. They continue communication with national experts like the BOLD Public Health Centers of Excellence on Dementia Caregiving, Early Detection, and Risk Reduction, the National Association of Chronic Disease Directors, and more. Coordinators share these educational resources with coalition members and community partners. (Action 1a)
- The Brain Health & Risk Reduction Action Team has been focused on developing culturally relevant resources for brain healthy nutrition, like contextualizing the MIND diet for multicultural communities in Hawai'i. The team members reviewed and tested many local recipes to encourage people to eat a diet that promotes brain health as well as resonates with the multicultural, local palate. Heidi Wulzen, founder of [Heritage Health](#), is a Registered Dietitian and public health professional who is providing invaluable dietary guidance to the team. The team is following the Mediterranean diet model and plans to share these resources with the public in 2026. (Strategy 3)
- At the Hawai'i Dementia Initiative Coalition Meeting, Suzanne Chun Oakland presented about the programs at Lanakila Multipurpose Senior Center that are promoting brain health. They provide annual cognitive screenings for their members and connect them to resources as needed. They also offer many free classes that educate about brain health and facilitate activities that reduce risk for dementia (i.e. socialization, exercise, learning new things, etc.). Lanakila is continuing to develop new brain health programs and feature guest speakers to provide meaningful content for their senior center members. (Strategy 4)

GOAL V. Provide adequate and timely support for caregivers of persons living with dementia.

- Several community-based organizations are leading the way and providing a range of caregiver programs in Hawai'i. These are some of the programs being offered across the state: Resources for Enhancing All Caregivers Health (REACH), SHARE (Support, Health, Activities, Resources, Education), Savvy Caregiver, 'Auamo Ke Kuleana 'O Nā Ma'i Poina, Powerful Tools for Caregivers, Empowered Caregiver, and many other educational programs. (Strategy 1)
- Another organization recognized the need for caregivers to have timely access to reliable resources and tangible tools. Alzheimer's Caregiving and The Caregivers developed Caregiver Kits for caregivers, by caregivers. They're a nonprofit organization

whose goal is to provide a digital community where caregivers get answers, find support and fellowship to help navigate the challenges. The Hawai'i Dementia Initiative Caregiving Action Team had the opportunity to collaborate with Alzheimer's Caregiving and The Caregivers to review their Caregiver Kits contents and co-create Dementia Champion Pins & I Am Here stickers to be included. The kits include practical tips, vetted resources, and encouragement for caregivers who are caring for someone living with dementia. Caregiver Kits are now being distributed to caregivers statewide. (Strategy 2)

- The University of Hawai'i Center on Aging leads intergenerational activities that bring together keiki and kupuna for mutual learning opportunities. Their Kupuna Workforce Innovation Hub partners with Punahale Pathways to bring eldercare curriculum to high school health academies. They're creating work-based learning opportunities and career pathways to inspire the next generation to pursue careers in aging. (Strategy 4)

GOAL VI. Encourage the dignity and safety of persons living with dementia.

- ADRD Coordinator provided a dementia awareness presentation for the condo association because they have many older adults and people living with dementia aging-in-place. (Action 5a)
- Thrive for Life and Palolo Chinese Home are providing the Older Adult Home Modification Program (OAHMP) that is made possible by a grant from the U.S. Department of Housing and Urban Development (HUD) through the Office of Lead Hazard Control and Healthy Homes (OLHCHH). (Action 5b)
- Catholic Charities Hawaii and Hale Kū'ike facilitate expert panels and caregiver workshops, including topics such as dealing with difficult behaviors, psychotropic medications, and nonpharmacological approaches. (Strategy 2)
- The Executive Office on Aging Legal Services Developer partnered with the UH Elder Law Program to develop and print an updated edition of the Elder Law Hawai'i Handbook. The handbooks are available online PDF and hard copy. They cover legal issues on elder abuse, dementia and capacity concerns, and estate and advance care planning (e.g. power of attorney, simple wills, and trusts) (Strategy 4)

GOAL VII. Strive for diversity, equity, and inclusion in services and supports for individuals impacted by dementia.

- Kula No Na Po'e Hawai'i (KULA) is leading the implementation efforts for the Native Hawaiian Road Map Navigating the Impacts of Nā Ma'i Poina Alzheimer's Disease and Related Dementias Among Native Hawaiians. KULA facilitates Talk Story Sessions in native Hawaiian communities across the state to provide indigenous, culturally relevant education about Alzheimer's disease and related dementias. KULA also listens to each community about their needs, strengths, and priorities to inform the implementation of

the Road Map. KULA has facilitated multiple cohorts of the 'Auamo Ke Kuleana 'O Nā Ma'i Poina (Carrying responsibilities associated with dementia), the Native Hawaiian adaptation of the Savvy Caregiver Program. (Strategy 1)

- EOA partners with the Hawai'i Neurotrauma Program and the Hawai'i State Council for Developmental Disabilities on their Bridging Aging and I/DD grant. Individuals living with Down syndrome and individuals with traumatic brain injury are at higher risk for developing dementia. (Action 2a)
- EOA partnered with the Hawai'i State Rural Health Office to support these programs to reach rural communities on neighbor islands: Alzheimer's educational programs for rural, underserved, low-income communities, community clinical linkages for ADRD, and the Native Hawaiian Road Map implementation (Strategy 2).
- The Dementia Friends Workbook was tailored for Hawai'i with inspiration from the Native Hawaiian Road Map, the Dementia Friends workbooks adapted for Guam and Native Americans. Dementia Friends Champions continue to present informational sessions in the community and plan to train new Champions to increase sustainability and reach of this initiative in creating dementia friendly communities. (Strategy 4)

GOAL VIII. Elevate care planning for persons living with dementia at all stages to prepare for care across the life course.

- EOA partnered with Kokua Mau to provide educational presentations about Advance Care Planning, Advance Healthcare Directives, and the Provider's Orders for Life Sustaining Treatment (POLST) form. Kokua Mau presented to the public and to professionals in Waianae, Hawai'i island, and Kaua'i in Fall 2025. Kokua Mau continues to lead the way for advance care planning education and resources. (Strategy 1)
- Hui Pohala is a growing coalition of diverse stakeholders working to improve access to high quality palliative care throughout Hawaii. They've developed and curated many palliative care resources. Recently, they celebrated a win for Hawai'i being one of the first states to cover palliative care through the Medicaid program. Med-QUEST Hawai'i was recognized for this innovative step forward. HMSA also covers palliative care in Hawai'i. In May 2024, Hui Pohala received a \$3.6 Million Grant from the State of Hawai'i Department of Human Services Med-QUEST Division to Expand Palliative Care in the Community. Through this grant, Hui Pohala is working on several projects that are increasing awareness of palliative care services in Hawai'i. (Strategy 2)
 - Visit their website to learn more: <https://huipohala.org/>
- The State Health Planning and Development Agency (SHPDA) leads the Kupuna Advisory Council as well as a Permitted Interaction Group (PIG) that is focused on long-term care financing. This group of subject matter experts, community members, and advocates are working together to research viable long-term care financing modules from other states and develop policy strategies to transform long-term care financing in Hawai'i. (Strategy 3)

Public Awareness and Education

See pages 43-51 in the Hawai'i 2035: State Strategic Plan

Public Awareness and Education Vision Statement: Develop culturally competent communication pathways that honor the diverse and unique communities of Hawai'i to raise awareness about ADRD to the general public, especially caregivers and potential caregivers.

GOAL I. Partner with established community organizations and initiatives to develop cultural awareness and tailored strategies to engage target ethnic groups on matters of brain health and ADRD.

- The University of Hawai'i Center on Aging (COA) studied the cultural backgrounds and communication pathways of the larger ethnic communities in Hawai'i, like the Filipino community and Japanese community, and developed recommendations for outreach, education, and public awareness in sharing dementia care resources with these ethnic communities. In addition to the recommendations and historical immigration background, they also included a list of cultural organizations or associations for the coalition to engage with for culturally relevant health promotion. (Strategy 1 and 5)
- Hawai'i Dementia Initiative Brain Health & Risk Reduction Action Team members tailored the brain health education to Japanese and Filipino communities. In 2025, these presentations were delivered at the Japanese Cultural Center of Hawai'i (JCCH) and at the Filipino UCC in Waipahu. Much thanks to Amy Kelley (Brain Matters), Dr. Kevin Kawamoto (COA), Marcus Asahina (Hale Kū'ike), Phebe Amodo (Filipino UCC), Alina Katase and Beth Iwata (JCCH). (Strategy 2 and 4)
- Kula No Na Po'e Hawai'i (KULA) was contracted to lead the implementation of the Native Hawaiian Road Map in 2024-2025. KULA has conducted "Talk Story" sessions in communities across the islands to provide culturally relevant education about Alzheimer's disease and related dementias as well as to listen to the community. Community members shared their personal experiences with dementia, the strengths or resources in the community, the needs they have related to dementia, and their priorities for implementing the Native Hawaiian Road Map. (Strategy 4)
- The University of Hawai'i Center on Aging (COA) is the Hawai'i lead for the CARE 2.0 team, an NIA-funded project called CARE, (Collaborative Approach for AANHPI Research and Education) has expanded to its next phase known as CARE 2.0. This is a multi-year project in collaboration with researchers at the University of California San Francisco (UCSF), the University of California Irvine (UCI), and other institutions to help increase the number of Asian Americans, Native Hawaiians, and Pacific Islanders (AANHPI) who participate in scientific research studies on aging. COA is partnering with community organizations, key stakeholders and cultural informants to explain the value of scientific research in aging, convey importance of having diverse research participation, and elevate culturally appropriate models of research and engagement. COA will also offer educational resources to the AANHPI communities in Hawaii to

enhance access to information about healthy aging such as tips for maintaining brain health and support services for caregivers and people living with dementia. (Strategy 6)

- <https://manoa.hawaii.edu/aging/care-research-registry/>

GOAL II. Utilize conventional and creative channels to disseminate relevant ADRD messaging.

- Thanks to passionate advocates and the Hawai'i State Legislature, a bill passed to fund a Statewide Public Health Awareness Campaign on Alzheimer's Disease and Related Dementias, led by the Executive Office on Aging, aimed at educating the public and promoting early detection of dementia. Through competitive sealed proposals procurement, Anthology Marketing Group was contracted to develop and facilitate the awareness campaign. They conducted both quantitative and qualitative market research to understand public perceptions, gaps in knowledge, and opportunities for impact. They developed culturally relevant, resonant messaging and visuals that speak directly to Hawai'i's diverse communities. Half of the funds were designated for the media buys to ensure maximum reach and frequency, so that this important message would reach as many people as possible. Anthology projected over 49 million impressions statewide through television, radio, Spotify, Facebook, Instagram, online advertisements, and newspaper. The campaign ran from August 2025 through November 2025. (Strategy 1)

GOAL III. Develop culturally tailored ADRD messaging and resources for implementation in pilot public awareness campaigns.

- The Dementia Signs & Symptoms information is available online in Traditional Chinese, Simplified Chinese, Japanese, Korean, Tagalog, Marshallese, Pohnpeian, and Samoan. The Brain Healthy Tips are available in Korean and Japanese, thanks to Advisory Council member Dr. Jane Lee and colleagues. The Hawai'i Dementia Initiative coalition, Advisory Council, and BOLD contractors are continuing to supplement existing materials with language inclusive formats. (Strategy 1)
- The University of Hawai'i Center on Aging (COA) spoke with key cultural informants to gain an understanding of the historical differences between the various generations of specific ethnic communities in Hawai'i. This work informed the communication pathways recommendations for Filipino and Japanese communities in Hawai'i. (Strategy 5)

GOAL IV. Promote outreach and awareness on micro, mezzo, and macro levels (i.e., state, county, community, family, individual).

- The Executive Office on Aging (EOA), the Alzheimer's Association Hawai'i Chapter, and community partners have presented to the Kupuna Caucus on ADRD and brain health in 2024 and 2025. EOA sent legislators an update on the public awareness efforts, including the Alzheimer's awareness campaign, media release, and social media toolkit. Hawai'i Dementia Initiative will continue to keep policymakers aware of public awareness efforts and the latest developments in dementia care. (Strategy 1)
- The Geriatric Workforce Enhancement Program (GWEP) hosts monthly ECHO sessions to empower care home operators who run Adult Residential Care Homes and Community Care Foster Family Homes. The GWEP Care Home ECHO includes "Mind" or "Mentation" sessions every year and provides dementia-related education to the Care Home Operators. (Strategy 3)

GOAL V. Engage the public in ways that raise intergenerational awareness of brain health, ADRD, and caregiving across the lifespan.

- Hā Kūpuna, University of Hawai'i, National Resource Center for Native Hawaiian Elders, published the short storybook "Pōmai and Her Papa." This story tells of a young girl who sees her Papa show signs of dementia and their family comes together to support one another. Pōmai and Her Papa was distributed to libraries statewide, to many schools and community partners as a resource for intergenerational awareness of ADRD. The storybook was also turned into an animation video which can be viewed on the YouTube channel @HāKūpuna. (Strategy 1)
- Alzheimer's Association Hawai'i Chapter's Kauai and Maui County Regional Coordinator, Cindy Fowler, has partnered with local schools for the Kaua'i Keiki Dementia Initiative. Cindy works with high school students to volunteer and teach elementary school students about dementia and brain health. Together, they facilitate engaging presentations and learning activities. (Strategy 2)

GOAL VI. Continue informed development of brain health and ADRD public awareness strategies.

- Progress on Goal VI is intentionally phased for later stages of the plan. This approach allows for groundwork to be laid through current awareness initiatives, establishing readiness for future action, development, and expansion.

Workforce Development

See pages 53-58 in the Hawai'i 2035: State Strategic Plan

Workforce Development Vision Statement: To develop a workforce in Hawai'i with the capability and skills to deliver high-quality services and supports to the growing population with dementia and which can effectively address the complex and progressive impacts of dementia at all levels of society and recommend solutions.

GOAL I. Pre-training: Develop ADRD resources and build career pathways and dementia capability modules into the training and education of aspiring health and human service workers.

- The master dementia-related curriculum was developed by the University of Hawai'i Center on Aging. This master curriculum is a comprehensive listing of vetted educational resources about Alzheimer's disease and related dementias. It was designed as a repository to empower educators and trainers to select resources from and incorporate it into their classes' curriculum. The Executive Office on Aging (EOA) worked with Brave New Media to turn the master curriculum into an online database that can be easily searched and filtered. Positive feedback has been received from the community on the master curriculum. (Strategy 1)
- The University of Hawai'i John A. Burns School of Medicine Department of Geriatric Medicine produced a short video that captures the joys and benefits of working in the rewarding field of geriatrics. The video features local healthcare professionals sharing about their experiences to inspire the next generation to pursue careers in gerontology. (Strategy 3)
- The University of Hawai'i Center on Aging leads intergenerational activities that bring together keiki and kupuna. Their Kupuna Workforce Innovation Hub partners with Punahale Pathways to bring eldercare curriculum to high school health academies. They're creating work-based learning opportunities and career pathways to inspire the next generation to pursue careers in the field of aging. (Strategy 4)

GOAL II. Ongoing training: Promote accessibility and utility of continuing education in ADRD capability training for current health and human service professionals and para-professionals.

- The Executive Office on Aging contracted with Hawai'i Public Health Institute (HIPHI) and their Hawai'i Public Health Training Hui to promote continuing education credit opportunities for brain health and dementia capability education. HIPHI coordinated the application and dissemination of continuing education credits for professional training sessions offered via Zoom, in-person at the Hawai'i Dementia Initiative Coalition meeting in September 2025 and in-person for healthcare professionals on Moloka'i. These partners plan to continue collaborating on offering continuing education opportunities in dementia capability training in 2026. (Strategy 1)

GOAL III. Encourage the growth of dementia-friendly systems and dementia-informed communities.

- The Executive Office on Aging has a long history of partnering with AARP Hawai'i, a social mission organization serving the needs of over 150,000 adult residents and their families in Hawai'i. AARP advocates at the state legislature, offers access to information and resources, and provides meaningful volunteer opportunities that empower people to create positive change in their lives. EOA collaborated with AARP and Brain Matters on educational Brain Health events on Maui, O'ahu, and Hawai'i island in 2025. EOA looks forward to continuing to partner with AARP Hawai'i on community education efforts and aging advocacy initiatives. (Strategy 2)

GOAL IV. Organizational policy: Create supportive organizational environments.

- The Straub Benioff Medical Center Geriatrics Clinic was selected as a GUIDE (Guiding an Improved Dementia Experience) Model participant. This voluntary nationwide test is funded by the Centers for Medicare & Medicaid Services (CMS) to enhance quality of care for people living with dementia and their unpaid caregivers. With Medicare funding, the GUIDE model provides comprehensive services and supports for people with dementia and their caregivers, including a comprehensive assessment by a geriatrician, care navigation by a social worker, 24/7 telephone advice line, and referral for respite services with limited funds to help pay for these services. (Strategy 1)
 - <https://www.hawaiipacifichealth.org/straub/locations/geriatrics-clinic/>
- The Executive Office on Aging (EOA) contracted with the University of Hawai'i Center on Aging (COA) to develop this plan entitled *Strengthening Hawai'i's Long-Term Direct Care Workforce*. It provides data, best practices, and recommendations for improving the local recruitment and retention of direct care workers. EOA and COA continue to connect with and learn from local organizations leading other workforce development initiatives, such as Healthcare Workforce Initiatives with Hawai'i Healthcare Association of Hawai'i, Bridging Aging and Intellectual/Developmental Disabilities Internship Program with the Hawai'i State Council on Developmental Disabilities, and Hawai'i State Workforce Development Council with the Department of Labor and Industrial Relations. (Strategy 2)
 - <https://manoa.hawaii.edu/aging/kupuna-workforce-innovation-hub/>

GOAL V. Public policy: Shape and advocate for public policy that helps to meet the needs of persons living with dementia and caregivers.

- While progress has been made on most goals, Goal V remains an area of opportunity. With ten years remaining in the plan, these public policy strategies are well-positioned for future development and strategic focus.

GOAL VI. Break down and reframe the current stigmas related to cognitive decline to empower persons living with dementia and their support systems.

- The Hawai'i Dementia Initiative and the Executive Office on Aging (EOA) continue to lead efforts to elevate Alzheimer's Disease and Related Dementias (ADRD) as a critical public health issue—one that affects individuals, families, and communities across every level of society and throughout the healthcare continuum. This message was strongly reinforced at the 2025 Coalition Meeting, where stakeholders united around the shared

goals of reducing stigma, promoting understanding, and empowering individuals living with dementia to lead meaningful lives. (Strategy 2)

Sustainability

See pages 58-61 in the Hawai'i 2035: State Strategic Plan

Sustainability Vision Statement: To sustain and grow ADRD services and supports statewide for many years to come.

GOAL I. Maintain and expand an engaged statewide coalition to improve implementation of the goals identified in the Hawai'i 2035: State Strategic Plan for ADRD.

- The Executive Office on Aging (EOA) continues to convene a multi-sector coalition called “Hawai'i Dementia Initiative” to collaborate on the implementation of the goals in this State Strategic Plan. The ADRD Services Coordinator and BOLD Coordinator work with BOLD subcontractors to assist in the facilitation of coalition action teams and projects to advance these goals. The coalition continues to build partnerships with stakeholders in Hawai'i and abroad to collaborate on shared goals to benefit the people of Hawai'i. (Strategy 1 and 2)
- If anyone is interested in getting involved, please email DOH.Dementia@doh.hawaii.gov or visit the website: <https://hawaiidementia.org/about-us/join-us/>

GOAL II. Pursue alternative funding sources for ADRD-related services and supports.

- EOA, COA, and partners continue to monitor new grant opportunities related to ADRD efforts, such as the Administration for Community Living's Alzheimer's Disease Programs Initiative (ADPI). Catholic Charities Hawai'i (CCH) is an ADPI grantee who has brought many meaningful learning opportunities to caregivers, professionals, and older adults in Hawai'i. CCH's Circle of Care for Dementia is a wealth of resources and key lead in connecting ADRD community-based services to clinical partners. (Strategy 2)
- As previously mentioned in the Program & Policy Change section of this update, Hawai'i became the first state in the nation to offer community-based palliative care for Medicaid (Med-QUEST) beneficiaries. HMSA has also covered community-based palliative care for many years. Dementia is included as a “comorbid condition” in the palliative care eligibility criteria. EOA and COA participated in the Hui Pohala coalition meeting and following work groups to collaborate on expanding palliative care for people in Hawai'i. (Strategy 4)
 - Learn more at Kōkua Mau's website: <https://kokuamau.org/palliative-care-services-benefit/>

TOWARD A DEMENTIA-FRIENDLY HAWAII' RECOMMENDATIONS

Strategic Recommendations for Implementation

Community stakeholders at the Hawai'i Dementia Initiative Coalition Meeting in September 2025 shared their input on the State Strategic Plan and their priorities for implementation in the upcoming years. A few of those priorities include but are not limited to: Expand caregiver education, training, and supports; Facilitate interdisciplinary training and interagency collaborations to breakdown silos; Promote innovation in dementia-friendly efforts such as incorporating intergenerational activities and bringing in unconventional partners.

The importance of addressing the needs of people with dementia who are living alone was also emphasized by stakeholders at the 2025 Hawai'i Dementia Initiative Coalition Meeting. Navigating healthcare and day-to-day life is already challenging for a person living with dementia and their care partners or caregivers. This becomes extremely challenging for people living alone without family support to navigate. Oftentimes this causes delays in accessing needed services and these individuals may not get in contact with the support they need until it's an emergency. Multiple social service agencies have shared their experiences trying to support individuals in these types of unique situations and the struggles when the person no longer has the capacity to make sound decisions about their health and financial well-being. Catholic Charities Hawai'i led a Living Alone Summit in 2025 that brought together national experts and local professionals to discuss ways to better support people living alone with dementia. EOA and Catholic Charities Hawai'i plan to initiate a new Action Team focused on collaborating to better support those living alone with dementia.

In recent years, landmark research developments have increased the evidence behind dementia risk reduction. The Lancet Commission 2024 published 14 potentially modifiable risk factors that could be addressed through policy changes and lifestyle changes to promote brain health. The U.S. Pointer Study was published in 2025 with positive results on lifestyle interventions for older adults at risk for dementia over a two-year clinical trial period. There are numerous articles supporting the brain healthy benefits of exercising regularly, getting restorative sleep, staying social, managing stress, engaging the mind, eating a heart and brain healthy diet. Dementia risk reduction was only mentioned a few times in the original State Strategic Plan, but with these research developments, it is recommended to prioritize brain health in future State Strategic Plan implementation efforts.

Policy Recommendations for Consideration

These recommendations are informed by the Hawai'i Dementia Initiative Coalition and reflect best practices from successful programs implemented across the nation.

- **Expand Caregiver Education, Training, and Support Services**
Caregivers throughout Hawai'i are experiencing significant burnout and have expressed a critical need for accessible education, training, support, and respite services. It is recommended to expand and fund comprehensive caregiver support programs to ensure caregivers are adequately prepared and supported in their roles.
- **Establish Sustainable State Funding for ADRD Programs and Implementation**
Current efforts to implement this State Strategic Plan are supported by the BOLD implementation grant (2023-2028), which provides essential but temporary resources. To ensure the long-term success of Alzheimer's Disease and Related Dementias (ADRD) initiatives, the establishment of a dedicated and sustainable state special fund is

necessary to support program implementation, infrastructure development, community education, and workforce capacity building.

- **Increase Dementia-Specific Training for Professionals**

Enhancing the quality of care for individuals living with dementia requires targeted, quality training for healthcare providers, first responders, direct care workers, and other professionals. Recommended policy actions include funding for professional training programs, incorporation of dementia care into continuing education requirements, and the establishment of professional certification standards that include dementia.

- **Implement Dementia Care Navigation and Dementia Care Specialists**

The process of getting to a dementia-related diagnosis and navigating care management is often complex and overwhelming for individuals and families. The introduction of dementia care navigation services and Dementia Care Specialists in each county are recommended to provide personalized guidance, care coordination, and ongoing support throughout the disease trajectory. This has proved successful in multiple states, including but not limited to Wisconsin, Tennessee, Georgia, California, South Carolina.

- **Establish Memory Clinics on Every Island**

There is limited access to early detection, diagnosis, and disease-modifying treatments on neighbor islands, requiring residents to travel to O'ahu for care. To promote healthcare access and quality dementia care for all, it is recommended that memory clinics be established on each island, offering comprehensive services including cognitive assessments, treatments, care planning, and ongoing disease management.

- **Develop Geriatric Psychiatric Units and Community-Based Crisis Support Models**

Individuals with dementia who experience behavioral health crises often lack appropriate care settings. The development of specialized geriatric psychiatric units and community-based crisis intervention models is recommended to address these needs and reduce reliance on emergency departments and law enforcement.

- **Launch a Statewide Brain Health Awareness Campaign**

Public education is a key strategy in reducing the risk of dementia and promoting healthy aging. A statewide brain health awareness campaign is recommended to inform communities about modifiable risk factors, encourage early screening, and promote lifestyle changes that support cognitive well-being.

The coalition acknowledges upcoming fiscal constraints and proposes strategic, long-term goals to strengthen Hawai'i's response to Alzheimer's Disease and Related Dementias (ADRD). While immediate implementation may not be possible, these recommendations should be considered within a phased approach that aligns with budget priorities and avoids negative impacts on other programs. The coalition is committed to collaborative efforts for sustainable, dementia-friendly policies statewide.

Concluding Thoughts

With ten years left in the Hawai'i 2035 State Strategic Plan, the coalition emphasizes continued collaboration, innovation, and community-driven action to create a dementia-friendly Hawai'i. Gratitude is extended to all contributors for their dedication and resilience. Stakeholders are invited to keep engaging and advocating for a future where individuals with ADRD are supported and brain health is prioritized. Together, lasting change is possible.