



STATE OF HAWAII
DEPARTMENT OF EDUCATION
KA 'OIHANA HO'ONA'AUAO
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 04/07/2026

Time: 11:15 AM

Location: 329 VIA VIDEOCONFERENCE

Committee: HSH

Department: Education

Person Testifying: Keith T. Hayashi, Superintendent of Education

Title of Bill: HCR102, URGING THE DEPARTMENT OF EDUCATION, IN COLLABORATION WITH THE DEPARTMENT OF HEALTH AND OFFICE OF WELLNESS AND RESILIENCE, TO ESTABLISH A STATEWIDE PEER COUNSELOR PROGRAM TO ADDRESS YOUTH LONELINESS AND SOCIAL DISCONNECTION IN HAWAII'S SCHOOLS.

Purpose of Bill: Urging The Department Of Education, In Collaboration With The Department Of Health And Office Of Wellness And Resilience, To Establish A Statewide Peer Counselor Program To Address Youth Loneliness And Social Disconnection In Hawaii's Schools.

Department's Position:

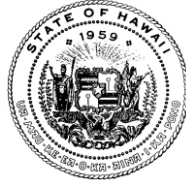
The Hawai'i State Department of Education (Department) supports HCR 102, HD1 as it aligns with our goals to strengthen student well-being, connection, and access to mental health resources.

The Department recognizes the urgent concerns outlined in the resolution, including rising loneliness, social isolation, and disconnection among youth, exacerbated by the COVID-19 pandemic. These factors are strongly associated with increased risks of anxiety and depression, with particularly concerning trends among Native Hawaiian and Pacific Islander youth. We also acknowledge the central role of relationships and connection in supporting well-being across Hawai'i's communities.

The Department agrees that peer counselor programs and peer support are valuable and effective strategies. Students often seek help from trusted peers, and well-implemented programs can strengthen school climate and connectedness. The Department is advancing this work through partnerships, including ongoing collaboration with the Department of Health and the Office of Wellness and Resilience, and is exploring established national programs such as Hope Squad and Erika's Lighthouse, which offer structured training pathways and implementation support. In addition, the Department is developing a pilot workforce pathway that begins with high school students providing peer support and extends into future employment in school-based mental health positions, supporting both student well-being and long-term workforce development.

The Department appreciates that the amendments included in HCR 102, HD1 allow for a phased implementation approach beginning with pilot programs in select schools. This amendment reflects the Department's recommendation to allow time for program development, evaluation, and alignment with existing school-based mental health supports, and will help support effective and sustainable statewide implementation.

Thank you for the opportunity to provide testimony on this measure.



STATE OF HAWAII
OFFICE OF WELLNESS AND RESILIENCE
KE KE'ENA KÚPA'A MAULI OLA
OFFICE OF THE GOVERNOR
415 S. BERETANIA ST. #415
HONOLULU, HAWAII 96813

Testimony in SUPPORT of H.C.R. 102 HD1

URGING THE DEPARTMENT OF EDUCATION, DEPARTMENT OF HEALTH, AND OFFICE OF WELLNESS AND RESILIENCE TO ESTABLISH A STATEWIDE PEER COUNSELOR PROGRAM TO ADDRESS YOUTH LONELINESS AND SOCIAL DISCONNECTION IN HAWAII'S SCHOOLS.

Representative Lisa Marten, Chair
Representative Gregg Takayama, Chair
House Committee on Human Services and Homelessness
House Committee on Health

April 7th, 2026, at 11:15 a.m.; Room Number: 329

The Office of Wellness and Resilience (OWR) **SUPPORTS** H.C.R. 102 HD1, Urging the Department of Education, Department of Health, and Office of Wellness and Resilience to Establish a Statewide Peer Counselor Program to Address Youth Loneliness and Social Disconnection in Hawaii Schools and respectfully defers to the Department of Education (DOE).

Peer support is a proven, practical approach to addressing mental health challenges. Nationally, peer support is recognized as an evidence-based practice and a critical component of an effective mental health system. Federal agencies such as the Substance Abuse and Mental Health Services Administration (SAMHSA), along with leading professional organizations including Mental Health America (MHA) and the National Alliance on Mental Illness (NAMI), affirm the value of formal peer support programs. These programs have been shown to improve outcomes related to depression, substance use, empowerment, and hope.¹

¹ Substance Abuse and Mental Health Services Administration. (2017). *What is peer support?*
https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tac/peer-support-2017.pdf

This effectiveness extends to youth mental health. Young people naturally turn to their peers for understanding and connection, and many prefer self-help tools that allow them to build confidence and emotional well-being.² Peer support can help reduce the risk of future mental health challenges in adulthood and contribute to improved quality of life.³

Peer support is also a core principle of the trauma-informed care framework. We believe this measure offers a concrete and meaningful pathway to develop and implement a statewide program—not only through collaboration across state agencies, but also by intentionally including and partnering with youth. As the state lead in advancing trauma-informed and healing-centered approaches, OWR stands ready to support coordination with the DOE and the Department of Health (DOH), provide guidance aligned with trauma-informed principles, and ensure that youth voices and lived experiences are centered in the design, implementation, and evaluation of the program.

Mahalo for the opportunity to testify.

Tia L.R. Hartsock, MSW, MSCJA
Director, Office of Wellness & Resilience

² Mental Health America. (2025). *Youth and young adult peer support: Expanding community-driven mental health resources*. <https://mhanational.org/wp-content/uploads/2025/03/Youth-and-Young-Adult-Peer-Support.pdf>

³ Devoe, D., Jomha, A., Campbell, C., Hews-Girard, J., Anderson, A., Savadlou, A., Jarenova, M., Munir, A., Ramirez Pineda, A., Patten, S., Shah, J., Iyer, S., & Dimitropoulos, G. (2024). *Peer support for youth with mental health concerns: A scoping review* [Manuscript in preparation]. Authorea. <https://www.authorea.com/users/864930/articles/1246127-peer-support-for-youth-with-mental-health-concerns-a-scoping-review?commit=05310823f3f3e6f188549fe1e990e04517d633bd>



www.AlohaILHawaii.org

Apr 7, 2026

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Aloha Independent Living Hawaii (AILH) dedicated to providing independent living programs and services for persons with disabilities in Hawaii.

We work together with the community and consumers to improve the quality of life through individual choices and access to services.

EXECUTIVE DIRECTOR

Roxanne U. Bolden

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The Honorable Lisa Marten, Chair
House Committee on Human Services & Homelessness
The Honorable Gregg Takayama, Chair
House Committee on Health
The Thirty-Third Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

SUBJECT: HCR102 HD1 – Urging the Department of Education, in Collaboration with the Department of Health and Office of Wellness and Resilience to Establish a Statewide Peer Counselor Program to Address Youth Loneliness and Social Disconnection in Hawaii’s Schools.

Chair and Members of the Committee:

Aloha Independent Living Hawaii (AILH) submits this testimony **in support of HCR102 HD1**, which urges the Department of Education, in collaboration with the Department of Health and Office of Wellness and Resilience, to establish a statewide peer counselor program to address youth loneliness and social disconnection in Hawaii’s schools. AILH is a statewide, cross-disability organization grounded in the Independent Living (IL) philosophy, and from that perspective, peer support is not a side strategy but one of the core foundations of community inclusion, self-determination, and resilience.

AILH appreciates that the amended measure retains the bill’s central commitment to peer connection, culturally responsive approaches, trauma-informed and healing-centered practices, and youth voice in program design and evaluation. Those elements remain important for all students, but they are especially important for youth with disabilities, who often experience compounded loneliness due to stigma, exclusion,



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communication barriers, segregated settings, disrupted social continuity, and unmet accommodation needs.

Building on prior testimony, AILH continues to urge that any statewide peer counselor program be designed from the outset as disability-inclusive and cross-disability. Youth with disabilities should be included not only as students receiving support, but also as peer counselors, advisors, and co-designers of the program. If disability inclusion is treated as an afterthought, the program risks reproducing the same barriers that already isolate many disabled students from school life, mental health supports, and meaningful peer relationships.

AILH especially notes the key amendment in HD1 requesting phased implementation beginning with pilot programs in select schools and allowing an extended timeline for adaptation, evaluation, and alignment with ongoing efforts. This change can strengthen the measure if the pilot phase is used intentionally to test accessibility, evaluate disability inclusion, and gather feedback from students with diverse disabilities across different school communities. A phased approach should not narrow the program's vision; it should create an opportunity to build the model correctly from the beginning.

From an Independent Living perspective, that means the pilot and any broader rollout should include accessible training materials, multiple communication methods, disability-aware referral pathways, and meaningful consultation with disabled youth and disability organizations. It should also recognize that some students may feel safest and most understood when they can connect with peers who share similar disability experiences, especially when isolation is tied to ableism, bullying, medical trauma, inaccessible environments, or exclusion from school activities.

AILH therefore supports HCR102 HD1 and respectfully urges the Committees to advance the measure while making clear that equity must include disability equity. A successful statewide peer counselor program should strengthen belonging for all students, including those with physical, sensory, intellectual, developmental, psychiatric, chronic health, and



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neurodivergent disabilities, and should reflect the IL values of peer support, consumer voice, self-direction, and full participation in community life.

Thank you for the opportunity to testify.

Mahalo,

Roxanne Bolden

Executive Director

To: Honorable Rep. Lisa Marten, Chair
Honorable Rep. Ikaika Olds, Vice Chair
Members, Committee on Human Services & Homelessness

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

From: Katie Ann Smith

Re: HCR 102, HD1 / HR 94, HD1

Date: Tuesday, April 7, 2026
11:15am Conference Room 329

Aloha Chairs Marten and Takayama, Vice Chairs Olds and Keohokapu-Lee Loy, and Members of the Committee on Judiciary & Hawaiian Affairs and the Committee on Health

My name is Katie A. Smith, and I am writing to strong **support** of HCR102, HD1. As a social worker in my last semester of my MSW, I believe that getting mental health services into the hands of our youth is imperative. Per HCR 102, HD1 peer counselors and peer-support models have been proven to reduce stigma associated with seeking mental health support, encourage a sense of belonging, and improve the school climate when implemented appropriately and with the correct training and supports. This bill will provide a vital lifeline for our most vulnerable populations.

Thank you for allowing me this opportunity to provide testimony and for considering this important legislation.

I urge the committee to pass HCR102, HD1.

Respectfully,

Katie A. Smith
MSW Graduate Student, University of Hawai'i at Mānoa
ksmith8@hawaii.edu

To: Honorable Rep. Lisa Marten, Chair
Honorable Rep. Ikaika Olds, Vice Chair
Members, House Committee on Human Services & Homelessness

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

From: Rae Ward

Re: HCR 102 HD1

Date: Tuesday, April 7, 2026
Time: 11:15am
Place: VIA VIDEOCONFERENCE
Conference Room 329
State Capitol
415 South Beretania Street

Aloha Chairs Marten & Takayama, Vice Chairs Olds & Keohokapu-Lee Loy, and committee members:

My name is Rae Ward. I am a Master's of Social Work candidate with the University of Hawai'i at Mānoa who has been living in Kailua-Kona on Hawai'i Island for over 6 years. I have been a Certified Substance Abuse Counselor (CSAC) for over a decade. I share this testimony with you strictly as an individual with lived experience of a mental health disorder who actively works with a peer counselor.

I am writing in strong **support** of HCR 102 HD1, which would establish a statewide peer counselor program to address youth loneliness and social disconnection in Hawai'i's schools. This legislation is important to me because I have struggled with feelings of loneliness for most of my life. As a teenager, I was not taught the importance of active listening or setting boundaries, the signs and impacts of trauma, the benefits of cultural connection, or even what mental health was or how I could seek help if I needed it!

When I was in high school, I was a nerd, a geek, a straight-A student until my senior year, when I decided I was tired of being little Miss Goody-Two-Shoes. I was tired of feeling like I didn't belong anywhere, so I turned to using substances as a way to rebel, find belonging, and cope with the emotions I was experiencing. While using substances, I was subjected to trauma that I wouldn't wish on any teenager, and it has only been within the last few months that I have

become aware of the extent of this trauma and have begun to work with a therapist to address it. I am now 36. My trauma occurred when I was 17. I believe that if I had been taught about boundaries, consent, trauma, and emotional intelligence when I was in high school, I may have had a better chance at avoiding the trauma or seeking help sooner.

I currently work with a peer counselor through the WeConnect Health app. Anyone can receive 90 days of free peer support when they download the app and use the code “FREESUPPORT90” so I encourage everyone to give it a try. They also have a variety of peer support meetings available on their website, and I believe their business model may be an excellent example to base Hawai‘i’s peer counselor program on.

My peer, Meghan, has helped me alleviate feelings of loneliness and isolation; she has helped me create safety plans for navigating difficult decisions in my life; she has helped me increase my feelings of belonging, and she inspires me to keep advocating for the health and well-being of all marginalized peoples, especially Native Hawaiians and other Indigenous people. I talk to Meghan about things I do not feel safe talking to my other therapists and helping professionals about because I know Meghan has lived experience as a peer and is less likely to judge or shame me for my behaviors.

Furthermore, over the last school year, I have had the privilege to intern with Papa Ola Lōkahi. During my time with them, I have learned that Native Hawaiians are consistently overrepresented in various social services, including substance use disorder (SUD) treatment, incarceration for drug offenses, and offenses associated with SUD-related issues AND the majority of available SUD treatments function within Western frameworks, which does a disservice to Native Hawaiians who need a decolonized approach for greater treatment efficacy (Daniels et al., 2022; Papa Ola Lōkahi, 2023).

Native Hawaiians made up 43% of treatment admissions in 2017, the most of any ethnic group. “Recent research indicates that re-envisioning treatment for the Native population, utilizing cultural reconnection, and methodologies that speak to Native perspectives, are more influential in creating positive health outcomes for Native peoples... Native Hawaiians need not become Western to heal” (Daniels et al., 2022). With this being said, it is evident that a peer counselor program grounded in pilina (relationships and connection), kaiaulu (community), and ‘āina (land) would be extremely beneficial for addressing youth loneliness and social disconnection.

As a result of my personal experiences with loneliness and substance use as a teenager, and my experiences as an adult working with a peer counselor, I highly recommend voting in support of HCR102 HD1.

Passing this resolution would positively impact youth in Hawai‘i by:

- 1) Providing our teenagers with much-needed peer support for decreasing loneliness, increasing meaningful connections, preventing unsafe behaviors, and reducing stigma around mental health disorders,
- 2) Creating a centralized state hub with local chapters responsive to the needs of their respective communities, and
- 3) Developing a standardized training program for the peer counselors that teaches active listening, ethical boundaries, trauma-informed care, and culturally-grounded healing practices.

Mahalo nui loa for this opportunity to provide testimony.

Please vote YES on HCR102 HD1.

Mahalo,
Rae Ward, BA, CSAC, TTS
Kailua-Kona, Island of Hawai‘i

References:

Daniels, S.P., Kauahikaua, L., Kaio, C., Casson-Fisher, J.N., & Ku, T. (2022). Conceptualizing a New System of Care in Hawai‘i for Native Hawaiians and Substance Use. *Hawai‘i Journal of Health & Social Welfare*, 81(12, 3), 43-51.

https://hawaiijournalhealth.org/past_issues/hjhs8112_S3_0043.pdf

Papa Ola Lōkahi. (2023, December). E Ola Mau: An Update on the Health and Well-Being of Native Hawaiians. *Papa Ola Lōkahi*.

<https://www.papaolalokahi.org/wp-content/uploads/E-OLA-MAU-2023-Update-of-all-Workgroups.pdf>