



STATE OF HAWAII
OFFICE OF WELLNESS AND RESILIENCE
OFFICE OF THE GOVERNOR
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HONOLULU, HAWAII 96813

Testimony on S.B. 3272
RELATING TO CHILD WELFARE SERVICES

Senator Joy San Buenaventura, Chair
Senator Angus McKelvey, Vice Chair
Senate Committee on Health and Human Services

February 9, 2026, at 1:05 p.m.; Room Number: 225

The Office of Wellness and Resilience (OWR) **SUPPORTS** S.B. 3272, Relating to Child Welfare Services and defers to the Department of Human Services (DHS).

In the Mālama ‘Ohana Working Group report submitted to the 2025 Hawai‘i State Legislature, the report underscores the cascading impact of poverty and the urgent need for concrete supports that prevent families from entering the child welfare system. Youth and families with lived experience consistently shared that most families who come to the system’s attention require support services—not protective intervention—to remain safe and stable.

Concrete supports and trauma-informed intervention to divert families away from child welfare services

S.B. 3272 recognizes the critical importance of immediate financial assistance and access to basic necessities such as food, clothing, housing, childcare, and transportation. These supports are essential for stabilizing families in crisis.¹ When basic needs are met, the stressors that

¹ Clare Anderson *et al.*, “Family and child well-being system: Economic and concrete supports as a core component,” Chapin Hall at the University of Chicago, March 2023, <https://www.chapinhall.org/wp-content/uploads/Economic-Supports-deck.pdf>.

often contribute to child welfare involvement are significantly reduced, allowing parents and caregivers to focus on nurturing their relationships with their children. By addressing both immediate needs and long-term goals, the bill's holistic approach empowers families to navigate challenges and work toward greater stability and well-being.

For families at risk of child welfare system involvement, trauma-informed, evidence-based parent-child relationship building and parenting skills training offer critical protective benefits. Programs that teach positive communication, behavior management, and co-regulation strategies help parents break intergenerational cycles of adversity while reducing their children's exposure to Adverse Childhood Experiences (ACEs).^{2, 3} Such skill building strengthens caregiver-child attachment, improves family functioning, and addresses underlying stressors that drive child welfare involvement.⁴

Thank you for the opportunity to testify on this important measure.

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

² Mersky, J. P., Lee, C. P., Gilbert, R. M., & Goyal, M. (2019). Prevention of adverse childhood experiences in a Midwestern city. *Children and Youth Services Review*, 96, 61-67.

³ Timmer, S. G., Urquiza, A. J., Zebell, N. M., & McGrath, J. M. (2011). Parent-child interaction therapy: Application to maltreating parent-child dyads. *Child Abuse & Neglect*, 29(7), 825-842.

⁴ Chaffin, M., Hecht, D., Bard, D., Silovsky, J. F., & Beasley, W. H. (2012). A statewide trial of the SafeCare home-based services model with parents in child protective services. *Pediatrics*, 129(3), 509-515.

JOSH GREEN, M.D.
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RYAN I. YAMANE
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TRISTA SPEER
DEPUTY DIRECTOR
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February 8, 2026

TO: The Honorable Senator San Buenaventura, Chair
Senate Committee on Health and Human Services

FROM: Ryan I. Yamane, Director

SUBJECT: **SB 3272 – RELATING TO CHILD WELFARE SERVICES.**

Hearing: February 9, 2026, Time 1:05 p.m.
Conference Room 225 & Via Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports the intent of this bill and offers comments. DHS respectfully requests that any appropriation not reduce or replace priorities identified in the executive budget.

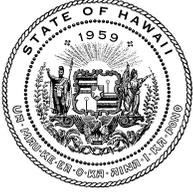
DHS will work together with the Office of Wellness and Resilience (OWR) to design this program. This measure provides an opportunity to support protective factors to prevent and address child abuse and neglect. Meeting the concrete needs of children and families and providing an enhanced trauma-informed intervention program can strengthen families and reduce the risk of entering the child welfare system.

The proposed pilot program will complement existing diversion services offered by the DHS Child Welfare Services Branch. These programs provide supportive services to families and children involved with, or at risk of involvement in, child welfare services, equipping them with the skills and resources needed to create a safe, nurturing environment for their children.

DHS defers to OWR on its resource needs and anticipates that DHS will require time and staff resources for assessment, planning, and implementation, as well as a general fund

appropriation to provide concrete resources and trauma-informed services.

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



**STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY**
DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

JOSH GREEN, MD
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII

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

JOHN C. (JACK) LEWIN, MD
ADMINISTRATOR

February 12, 2026

TO: SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair
Senator Angus L.K. McKelvey, Vice Chair
Honorable Members

FROM: John C. (Jack) Lewin, MD, Administrator, SHPDA, and Sr. Advisor to
Governor Josh Green, MD on Healthcare Innovation

RE: **SB 3272 -- RELATING TO CHILD WELFARE SERVICES**

HEARING: Friday, February 13, 2026 @ 1:00 pm; Conference Room 225

POSITION: SUPPORT with COMMENTS

Testimony:

SHPDA supports SB 3272, with comments.

SHPDA strongly supports this bill. For a presumably modest request in funding, this bill allows the Office of Wellness and Resilience (OWR) to collaborate with DHS to assist families at risk for needing child welfare services in a 5-year pilot program. There is another bill with a similar goal for TANF-eligible families. This one seems aimed more generally at families and children at risk for child welfare services as a means of preventing abuse and neglect, adverse mental health outcomes for affected kids, and ultimately cost-effectiveness for DHS and improved outcomes for beneficiary families. We need to pilot more innovative prevention programs like this. Engendering a partnership between DHS and OWR is a positive idea to explore. It would obviously be wise to report on pilot outcomes and suggested means of improving the partnership annually as it progresses. We defer to DHS and OWR on projected costs and staffing needs.

Thank you for hearing SB 3272.

Mahalo for the opportunity to testify.

■ -- Jack Lewin, MD, Administrator, SHPDA



Date: February 9, 2026

To: Senator Joy San Buenaventura, Chair
Senator Angus McKelvey, Vice Chair
Members of the Senate Committee on Health & Human Services

From: Early Childhood Action Strategy

Re: Senate Bill 3272, Relating to Child Welfare Services

Early Childhood Action Strategy (ECAS) is a statewide cross-sector collaborative designed to improve the system of care for Hawai‘i’s youngest children and their families. ECAS partners work to align priorities for children prenatal to age eight, streamline services, maximize resources, and improve programs to support our youngest keiki.

ECAS supports Senate Bill 3272 which relates to Child Welfare Services.

Our organization is a strong supporter of the efforts of the State Office of Wellness & Resilience’s Mālama ‘Ohana working group and its recommendations to create transformative change within the State’s child welfare system, especially those which relate to the diversion of children from entry into the child welfare system or to the provision of trauma-informed care.

We feel strongly that the pilot program laid out in SB3272 will ultimately demonstrate efficacy in diverting children away from entry into the child welfare system through the delivery of financial assistance and resources along with a trauma-informed intervention program aimed at improving parenting skills as well as the caregiver-child relationship.

As the pilot program described in this measure is in alignment with the findings and recommendations of the Mālama ‘Ohana working group, ECAS supports Senate Bill 3272.

To: Senate Committee on Health and Human Services
RE: **SB3272 – Relating to Child Welfare Services**
Hawaii State Capitol & Videoconference
February 9, 2026, 1:05 PM

Aloha Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

On behalf of Hawai'i Children's Action Network (HCAN) Speaks!, I am submitting this testimony in **SUPPORT of SB3272**, which requires the Department of Human Services, in collaboration with the Office of Wellness and Resilience, to design a 4-year Child Welfare System Diversion and Intervention Pilot Program to support families and children involved or at risk of involvement or reinvolvement with child welfare services.

This initiative is grounded in community-informed findings from the Mālama 'Ohana Working Group (MOWG) Final Report¹ and reflects long-overdue efforts to transform Hawai'i's child welfare system to prevent unnecessary family separation and reduce trauma.

The MOWG Final Report envisions a child welfare system that supports families before crisis occurs, emphasizing prevention, healing-centered and culturally grounded approaches, and community-based resources that strengthen 'ohana and keep children safely with their families. This bill brings this vision into action by directing the development of a pilot program that shifts away from reactive responses and instead invests in early intervention—providing families with concrete supports and trauma-informed guidance before deeper child welfare involvement becomes necessary.

Hawai'i's approach to supporting families must be rooted in the values of 'ohana, and aloha—recognizing that the well-being of children is inseparable from the strength of their families and communities. This pilot acknowledges that many families become involved with the child welfare system not solely due to harm or neglect, but because they lack access to essential supports, timely crisis intervention, and services that honor cultural identity and lived experience.

These realities were consistently lifted up by families and community members throughout the MOWG process. Designing this program in trauma-informed and healing-centered practices helps ensure the pilot is equitable, culturally responsive, and aligned with the needs of Native Hawaiian, Pacific Islander, and other families who are disproportionately impacted by the child welfare system.

Mahalo for this opportunity to provide this testimony. Please pass this bill.

Sincerely,

Nicole Woo
Director of Research and Economic Policy

¹ Mālama 'Ohana Working Group Final Report (www.malamaohana.net/mowg-final-report)



Aloha,

My name is Patricia “Patty” Chin, and I serve as the HI H.O.P.E.S. Initiative Manager at EPIC ‘Ohana. We work with youth ages 14 to 26 who have experienced foster care, and we see every day how unmet family needs early on shape a young person’s long-term stability. I am submitting testimony in strong support of SB3272, which creates a four-year Child Welfare System Diversion and Intervention Pilot Program.-term stability. I am submitting testimony in strong support of SB3272, which creates a four-year Child Welfare System Diversion and Intervention Pilot Program.

Research shows that many children enter foster care not because of abuse, but because of poverty-related stressors such as housing instability, food insecurity, and untreated trauma. According to the U.S. Children’s Bureau (AFCARS), neglect linked to poverty remains the leading reason for child welfare involvement nationwide. The Mālama ‘Ohana Working Group (2025) similarly found that Hawai‘i families often need concrete support and trauma-informed services—not system involvement.-related stressors such as housing instability, food insecurity, and untreated trauma. According to the U.S. Children’s Bureau (AFCARS), neglect linked to poverty remains the leading reason for child welfare involvement nationwide. The -informed services—not system involvement.

We also know the long-term impact on youth. The National Child Traumatic Stress Network reports that 90% of youth in foster care have experienced at least one traumatic event, and placement instability is strongly associated with poorer outcomes in adulthood (Casey Family Programs). These challenges follow young people long after they exit care.-term impact on youth. The National Child Traumatic Stress Network reports that 90% of youth in foster care have experienced at least one traumatic event, and placement instability is strongly associated with poorer outcomes in adulthood (Casey Family Programs). These challenges follow young people long after they exit care.

SB3272 directly addresses these gaps by providing:

- Financial assistance to stabilize families before crises escalate
- Trauma-informed coaching to strengthen caregiver child relationships-informed coaching to strengthen caregiver-child relationships
- Navigation support to connect families with resources early

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These are the kinds of supports that research shows reduce child welfare involvement, prevent unnecessary removals, and improve long-term outcomes for youth. SB3272 gives families that chance—and gives young people the stability they deserve. For these reasons, the HI H.O.P.E.S. Initiative strongly supports SB3272 and respectfully urge the Committee to pass this bill. Mahalo for your time and for your commitment to Hawai'i's children and youth.

Patricia "Patty" Chin

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Judith F. Clark
48-218 Kamehameha Highway
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Judithforceclark@gmail.com
Kaneohe, Hawaii 96744

February 6, 2026

To: Senator Joy San Buenaventura, Chair,
And members of the Committee on Health and Human Services

Testimony in Support of SB 3272 Relating to Child Welfare Services

As a community advocate and a former member of the Hawaii Trauma Informed Care Task Force and the Office of Wellness and Resilience Advisory Board, I support SB 3272 which establishes a pilot program to support families involved with or at risk of involvement with Child Welfare Services.

The program strongly aligns with the recommendations of the Malama Ohana Task Force and will move Hawaii toward its goal of being a trauma-informed state. It will strengthen family functioning and increase the safety and well-being of children.

The 4-year time period for the pilot is needed to provide sufficient time to build the program and enable families to gain the skills and resources needed for healthy parenting.

Thank you for this opportunity to testify.

Sincerely,



Judith F. Clark, MPH

Chair and members of the committee,

Thank you for the opportunity to testify. My name is Tilahni Hunkin and I am a Social Work and Public Health Student at UH Manoa. I am here today in support of SB3272 as it focuses on keeping children and family out of the child welfare system. This pilot program will emphasize diversion and intervention by offering support and services for families and children who are already involved with child welfare services or who are at risk of involvement or re-involvement.

Families continue to come into contact with the Child Welfare System due to unmet basic needs. I believe this program will help families meet those needs through support and services like trauma-informed care. Social Work and Public Health research shows that early intervention leads to better outcomes for children and reduces children's involvement with the child welfare system.

In summary, this bill offers stability and wellbeing to our community. I respectfully urge the committee to take into account what I have shared today and support SB3272. Thank you all for your time and consideration.

Sincerely,

Tilahni Hunkin

Written Testimony on Senate Bill 3272, Relating to Child Welfare Services

Hearing Date: 02/09/2026

Submission Date: 02/06/2026

Submitted by: Julia Ricci

Organization/Affiliation: Individual

Position: In Support

My name is Julia Ricci and I am a member of the local community and a student at the University of Hawai'i, pursuing a master's degree in Social Work. I am submitting this testimony in support of SB3272.

As a social work student, we often study the importance of familial and community involvement, particularly during critical stages of a child's development. When families lack adequate support, challenges such as stress, limited resources, and restricted access to services can quickly escalate and increase the need for welfare intervention. Preventative and early intervention efforts are essential in reducing these risks that often hold long-lasting consequences.

Reports from Child Welfare Outcomes government data and the Child Welfare League of America show that the state has benefitted greatly from prior resource allocations and supportive services. Through its related programs, Hawaii has served thousands of families, providing health insurance to children and WIC assistance to over 25,000 people in 2022. By taking a solution-focused approach, this diversion and intervention program will support families who are currently involved with Child Welfare Services, or who are at risk of re-involvement, by providing stabilization and reduction of repeated system contact. Additionally, because it is proposed as a pilot program, there is opportunity to evaluate outcomes, learn from implementation, and make potential improvements before considering its permanency or expansion. The prevention and intervention services offered will allow for familial cohesion and stability, creating a supportive environment where children can thrive emotionally, socially, and developmentally.

This bill appropriately recognizes the role that proactive community collaboration plays in ensuring the well-being and safety of families and children. I urge you to hold this measure with careful consideration and support, as it has the ability to create long-term positive outcomes for our most vulnerable children and families.

SB-3272

Submitted on: 2/7/2026 5:40:58 PM

Testimony for HHS on 2/9/2026 1:05:00 PM

Submitted By	Organization	Testifier Position	Testify
Karen L Worthington	Individual	Support	Written Testimony Only

Comments:

Aloha Senator Buenaventura, Senator McKelvey, and members of the Committee on Health and Human Services,

Please pass SB 3272, relating to child welfare services, which requires DHS to collaborate with Office of Wellness and Resilience to design and implement a 4-year pilot program to support families and children involved with or at risk of involvement with CWS.

This pilot is an important way to support children and families in Hawaii, and I urge you to pass this bill.

Best regards,
Karen Worthington, Kula, Maui

SB-3272

Submitted on: 2/11/2026 10:57:25 AM

Testimony for HHS on 2/13/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kristi Kekoa	Individual	Support	Written Testimony Only

Comments:

I am in support