In 2006, the Hawai‘i State Department of Health (DOH) received the Strategic Prevention Framework State Incentive Grant (SPF-SIG) from the Substance Abuse and Mental Health Services Administration (SAMHSA) to establish a comprehensive, coordinated, and sustainable substance abuse prevention infrastructure in Hawai‘i. The SPF-SIG Project is funded for five years with approximately two million dollars per year, administered by the Alcohol and Drug Abuse Division (ADAD) of the DOH. This progress report describes the SPF-SIG Project, examines the process-development indicators, and presents the project’s achievements and challenges in the past four years ending September 2010.

The first two years of the project focused on assessment and capacity building. A study of community needs in substance abuse prevention was commissioned. Based on the study’s findings and the recommendation of the State Epidemiological Workgroup (SEW), the State Advisory Council (SAC) adopted the reduction and prevention of underage alcohol consumption for youths 12–17 years old as the issue to be addressed by the SPF-SIG Project.

In the state, the mean age of first alcohol use was 12.2 years old among youths, and more than one third (36.3%) of 12th-graders reported alcohol use in the past 30 days (Table 1). Among the counties, Kaua‘i had the lowest mean age of first alcohol use (11.9) and Hawai‘i had the highest percentage of 12th-graders (49.8%) who were current users of alcohol.

An assessment of the state’s substance abuse prevention system was conducted to identify the strengths and weaknesses of its infrastructure and capacity. A strategic plan was then developed by the SAC and approved by the SAMHSA at the end of the second year.

**TABLE 1. Alcohol Use Among Youths**

<table>
<thead>
<tr>
<th>County/State</th>
<th>Mean age of first use of alcohol</th>
<th>Past 30-day use of alcohol</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>6th Gr.</td>
</tr>
<tr>
<td>Hawai‘i</td>
<td>12.0</td>
<td>6.2%</td>
</tr>
<tr>
<td>Honolulu</td>
<td>12.3</td>
<td>3.1%</td>
</tr>
<tr>
<td>Kaua‘i</td>
<td>11.9</td>
<td>6.6%</td>
</tr>
<tr>
<td>Maui</td>
<td>12.1</td>
<td>4.3%</td>
</tr>
<tr>
<td>State</td>
<td>12.2</td>
<td>3.9%</td>
</tr>
</tbody>
</table>

Source: Hawai‘i Epidemiological Profile for Substance Abuse Prevention (Revised March 2008).

**FIGURE 1. SAMHSA’s Strategic Prevention Framework**

The Strategic Prevention Framework is an ongoing cyclical change process that ensures an adaptive prevention infrastructure and interventions can be integrated into the existing organizational, community, and state systems to benefit diverse stakeholders. This process includes five main steps and two crosscutting elements.
In accordance with the Strategic Prevention Framework (SPF, see Figure 1), this project has adopted the following guiding principles for underage drinking prevention in Hawai‘i:

- We identify issues and disparities and develop a plan for prevention based on the best available data.
- Coordination and collaboration are essential to achieving all phases of the SPF.
- The state underage drinking prevention plan identifies overall priorities and goals; counties address their specific needs with realistic strategies and actions.
- The SPF process identifies existing prevention programs and strives not to duplicate those efforts, but to build, enhance, and expand on them for the benefit of all citizens of Hawai‘i.
- The implementation of evidence-based programs (EBP) is crucial, and we make efforts to tailor those programs to fit the unique needs of Hawai‘i’s population.
- We evaluate the SPF process and outcomes on an ongoing basis and provide feedback regularly.
- We integrate cultural competency into all phases of the SPF.
- We make efforts to develop a prevention system at the state and county levels that will be sustainable over time.

In each county, a County Advisory Council (CAC) was established to conduct local assessments of substance abuse prevention needs and the prevention system’s capacity. In July 2009, ADAD awarded an equal amount of funding to each county to carry out activities focusing on infrastructure and capacity building, and to develop an underage drinking prevention plan for that county. Beginning January 2010, the funding for the implementation phase was awarded to the counties through a competitive Request for Proposal process that also considered factors such as the population size and the burden and magnitude of the underage drinking issue in the respective counties. Funding to counties was $8,372,000, or about 85% of the total SPF-SIG funds. Figure 2 shows the amount awarded to each county.

Hawai‘i SPF-SIG is being implemented at three levels: state (blue), community/county (green), and prevention program/provider (yellow) (Figure 3). This infrastructure is designed to include a wide array of members, representing various sectors of the community, who will be supportive of ongoing prevention efforts and will provide long-term, sustainable leadership. A list of SPF-SIG members is presented on page 15.

**FIGURE 2. SPF-SIG County Funding**

<table>
<thead>
<tr>
<th>County</th>
<th>Funding Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hawai‘i</td>
<td>$313,950</td>
</tr>
<tr>
<td>Honolulu</td>
<td>$313,950</td>
</tr>
<tr>
<td>Kaua‘i</td>
<td>$313,950</td>
</tr>
<tr>
<td>Maui</td>
<td>$313,950</td>
</tr>
</tbody>
</table>

**FIGURE 3. Hawai‘i SPF-SIG Infrastructure, 2006–2010**
## County SPF-SIG Projects’ Objectives and Prevention Programs

Each of the four counties developed a logic model to guide planning and administration of its underage drinking prevention program. A summary of the county logic models is presented in Table 2. By the Fall of 2010, all counties went through the Request for Proposal process and selected EBPs to be implemented in local communities. The number of programs ranges from five to ten per county and sums up to a total of 17 different programs statewide. Table 3 shows the list of programs and service providers as of September 2010.

### TABLE 2. Problems, Objectives, Activities, and Desired Outcomes of Hawai‘i SPF-SIG for Four Counties

<table>
<thead>
<tr>
<th>COUNTY</th>
<th>PROBLEMS</th>
<th>OBJECTIVES</th>
</tr>
</thead>
</table>
| Hawai‘i | There are systemic community, family, and peer issues throughout the community that increase the early and frequent use of alcohol by youths 12–17 years old. | 1. Increase the number of youths reporting they perceive “great risk” in binge drinking  
2. Decrease the number of youths reporting alcohol use in the past 30 days  
3. Increase the age of first use of alcohol by youths |
| Honolulu | Alcohol is available to minors through social outlets and retail establishments, and normative family, peer, and community attitudes tend to be favorable regarding youths’ alcohol use. | 1. Decrease underage access to alcohol from retail establishments, parents, and peers  
2. Change community norms to “alcohol use by minors cannot be tolerated”  
3. Reduce the consumption of alcohol among youths 12–17 years old |
| Kaua‘i | Alcohol use among youths 12–17 years old is a significant problem on Kaua‘i and there is weakness in capacity and infrastructure needed to address the issue of underage drinking prevention. | 1. Decrease underage access to alcohol  
2. Increase awareness of the problem of underage drinking  
3. Reduce underage consumption of alcohol  
4. Increase community capacity to address the issue of use of alcohol by minors |
| Maui | There is a lack of effectiveness, cultural competence, and sustainability in underage drinking prevention programs, and age of first use of alcohol is earlier than the state’s average. | 1. Increase initial age of first use  
2. Decrease the number of youths reporting alcohol use in the past 30 days  
3. Increase effectiveness of and support for underage drinking prevention programs throughout the county |
<table>
<thead>
<tr>
<th>COUNTY</th>
<th>PROBLEMS</th>
<th>OBJECTIVES</th>
<th>ACTIVITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hawai‘i</td>
<td>There are systemic community, family, and peer issues throughout the community that increase the early and frequent use of alcohol by youths 12–17 years old.</td>
<td>1. Increase the number of youths reporting they perceive &quot;great risk&quot; in binge drinking. 2. Decrease the number of youths reporting alcohol use in the past 30 days. 3. Increase the age of first use of alcohol by youths.</td>
<td>1. Implement evidence-based programs for youths that are culturally appropriate. 2. Design and implement public information campaign. 3. Strengthen county policies regarding use of alcohol by minors. 4. Conduct compliance checks.</td>
</tr>
<tr>
<td>Honolulu</td>
<td>Alcohol is available to minors through social outlets and retail establishments, and normative family, peer, and community attitudes tend to be favorable regarding youths' alcohol use.</td>
<td>1. Decrease underage access to alcohol from retail establishments, parents, and peers. 2. Change community norms to &quot;alcohol use by minors cannot be tolerated&quot;. 3. Reduce the consumption of alcohol among youths 12–17 years old.</td>
<td>1. Strengthen county policies regarding access to alcohol by minors. 2. Conduct media advocacy trainings and events. 3. Implement evidence-based programs for youths. 4. Conduct alternative activities for youths with support of schools, parents, businesses.</td>
</tr>
<tr>
<td>Kaua‘i</td>
<td>Alcohol use among youths 12–17 years old is a significant problem on Kaua‘i and there is weakness in capacity and infrastructure needed to address the issue of underage drinking prevention.</td>
<td>1. Decrease underage access to alcohol. 2. Increase awareness of the problem of underage drinking. 3. Reduce underage consumption of alcohol. 4. Increase community capacity to address the issue of use of alcohol by minors.</td>
<td>1. Increase representation on CAC from various community sectors. 2. Implement public awareness campaign regarding the problems and risks of underage drinking. 3. Host annual drug summit. 4. Initiate environmental prevention strategies to increase parental awareness and education. 5. Implement evidence-based programs for youths. 6. Engage businesses and other community stakeholders to increase public support for underage drinking prevention programs.</td>
</tr>
<tr>
<td>Maui</td>
<td>There is a lack of effectiveness, cultural competence, and sustainability in underage drinking prevention programs, and age of first use of alcohol is earlier than the state's average.</td>
<td>1. Increase initial age of first use. 2. Decrease the number of youths reporting alcohol use in the past 30 days. 3. Increase effectiveness of and support for underage drinking prevention programs throughout the county.</td>
<td>1. Implement evidence-based programs for youths. 2. Conduct media campaign. 3. Provide alternate activities for youths during off-school hours. 4. Increase inter-agency involvement to provide coordinated approach to address underage drinking prevention. 5. Engage business support for underage drinking prevention programs.</td>
</tr>
</tbody>
</table>
### TABLE 3. Evidence-Based Programs and Service Providers by County, as of September 2010

<table>
<thead>
<tr>
<th>COUNTY</th>
<th>EVIDENCE-BASED PROGRAMS</th>
<th>SERVICE PROVIDERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hawai‘i</td>
<td>Alcohol Education</td>
<td>• Boys &amp; Girls Club of the Big Island</td>
</tr>
<tr>
<td></td>
<td>LifeSkills Training</td>
<td>• Big Island Substance Abuse Council</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Hawai‘i Academy of Arts and Science</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• People’s Advocacy for Trails Hawai‘i</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Salvation Army Family Intervention Services</td>
</tr>
<tr>
<td></td>
<td>Positive Action</td>
<td>• Hawaii County Economic Opportunity Council</td>
</tr>
<tr>
<td></td>
<td>Project Northland</td>
<td>• Hawaii Future Farmers of America Foundation</td>
</tr>
<tr>
<td></td>
<td>Project Towards No Drug Abuse</td>
<td>• The Institute for Family Enrichment</td>
</tr>
<tr>
<td></td>
<td>Project Venture</td>
<td>• ‘Aha Pūnana Leo, Inc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Hamakua Youth Foundation, Inc.</td>
</tr>
<tr>
<td></td>
<td>Too Good for Drugs and Violence</td>
<td>• University of Hawai‘i at Hilo</td>
</tr>
<tr>
<td></td>
<td>Communities Mobilizing for Change on Alcohol</td>
<td>• Office of the Mayor, Hawai‘i</td>
</tr>
<tr>
<td>Honolulu</td>
<td>ATLAS &amp; ATHENA</td>
<td>• Hawai‘i Speed and Quickness</td>
</tr>
<tr>
<td></td>
<td>Big Brothers Big Sisters</td>
<td>• Big Brothers Big Sisters of Honolulu</td>
</tr>
<tr>
<td></td>
<td>Challenging College Alcohol Abuse</td>
<td>• Coalition for a Drug-Free Hawai‘i</td>
</tr>
<tr>
<td></td>
<td>Keeping It Real</td>
<td>• Honolulu Police Department</td>
</tr>
<tr>
<td></td>
<td>LifeSkills Training</td>
<td>• City and County of Honolulu, Department of Community Services, Youth Services Center</td>
</tr>
<tr>
<td></td>
<td>Positive Action</td>
<td>• Alu Like, Inc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Boys &amp; Girls Club of Hawaii</td>
</tr>
<tr>
<td></td>
<td>Project ALERT</td>
<td>• Hina Mauka</td>
</tr>
<tr>
<td></td>
<td>STARS for Families</td>
<td>• Hina Mauka</td>
</tr>
<tr>
<td></td>
<td>Teen Intervene</td>
<td>• Hina Mauka</td>
</tr>
<tr>
<td></td>
<td>Communities Mobilizing for Change on Alcohol</td>
<td>• City and County of Honolulu, Department of Community Services</td>
</tr>
</tbody>
</table>
### State of Hawai‘i 2006–2010

The following reports are available on the ADAD Website at:

1. Hawai‘i Epidemiological Profiles for Substance Abuse Prevention
   - State Profile, Revised March 2008
   - County Profiles, Current Revision May 2010

2. Hawai‘i’s Strategic Prevention Framework State Incentive Grant
   Underage Drinking Prevention Plan, October 2008

3. Hawai‘i SPF-SIG Project Infrastructure and Capacity Assessment
   Results—Final Analysis, May 2009

### County Evidence-Based Programs and Service Providers

<table>
<thead>
<tr>
<th>County</th>
<th>Evidence-Based Programs</th>
<th>Service Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaua‘i</td>
<td>All Stars</td>
<td>• Hale Kipa</td>
</tr>
<tr>
<td></td>
<td>LifeSkills Training</td>
<td>• Kauai Economic Opportunity</td>
</tr>
<tr>
<td></td>
<td>Positive Action</td>
<td>• Alu Like, Inc.</td>
</tr>
<tr>
<td></td>
<td>Project ALERT</td>
<td>• Hale ‘Opio</td>
</tr>
<tr>
<td></td>
<td>SPORT</td>
<td>• YWCA</td>
</tr>
<tr>
<td></td>
<td>STARS for Families</td>
<td>• Hina Mauka</td>
</tr>
<tr>
<td></td>
<td>Teen Intervene</td>
<td>• Hina Mauka</td>
</tr>
<tr>
<td></td>
<td>Too Good for Drugs</td>
<td>• Circles of Light</td>
</tr>
<tr>
<td></td>
<td>Communities Mobilizing for Change on Alcohol</td>
<td>• Office of the Mayor, Kaua‘i</td>
</tr>
<tr>
<td>Maui</td>
<td>LifeSkills Training</td>
<td>• Coalition for a Drug-Free Lanai</td>
</tr>
<tr>
<td></td>
<td>Project Northland</td>
<td>• Maui Economic Opportunity</td>
</tr>
<tr>
<td></td>
<td>Positive Action</td>
<td>• Boys &amp; Girls Club of Maui</td>
</tr>
<tr>
<td></td>
<td>Project Venture</td>
<td>• Hoaloha 58</td>
</tr>
<tr>
<td></td>
<td>Communities Mobilizing for Change on Alcohol</td>
<td>• Pa‘ia Youth Cultural Center</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alu Like, Inc.</td>
</tr>
</tbody>
</table>
The past four years, the activities of the SPF-SIG Project focused on assessment, capacity building, and planning at the state and county levels. Most common activities included meetings, training, and technical assistance (TA).

**Meetings 2007–2010**

At the state level, meetings were held for (1) State Advisory Council (SAC), (2) State Epidemiological Workgroup (SEW)/Epidemiology Team (EPI), (3) the Coordinating Team (made up of the state SPF-SIG Project Director, Epidemiology Team and Evaluation Team), and (4) ad hoc workgroups (such as EBP Review Committee and Assessment Tools Development Committee). The purpose of these meetings was to provide oversight, guidance, and coordination to the state and county efforts in underage drinking prevention.

Meetings at the county level were convened by County Advisory Council (CAC) members, representing various community sectors, to identify priority issues relating to underage drinking prevention, develop a strategic prevention plan, and select service providers for implementing prevention interventions in the community.

**FIGURE 4. Number of Meetings Held at the State Level**

A total of 43 meetings were held at the state level. The numbers of Coordinating Team meetings and ad hoc group meetings increased substantially between 2009 and 2010 as the SPF process worked its way into communities.

**FIGURE 5. Number of Meetings Held at the County Level**

There were 38 meetings held at the county level. A pronounced growth in the number of meetings was observed between 2008 and 2009 as counties embarked on their SPF process.
A total of 45 training sessions were conducted statewide. The majority of state-level trainings focused on evaluation. Diverse training topics were covered among the four counties, with the highest number on the topic of capacity, followed by implementation, planning, and sustainability. An emphasis on cultural competency permeated all training sessions.
On average, 8 participants attended the state-level trainings. The average numbers of participants were 21, 23, 19, and 9 for Hawai‘i, Honolulu, Kaua‘i, and Maui Counties, respectively.

The training provided by the state and counties elicited positive evaluations from the participants. The average percentage of participants who rated the overall training as either good or excellent ranged from 83% (state level) to 100% (Maui County). The majority of participants (89%–95%) agreed either somewhat or strongly that they gained knowledge from the training.
Technical Assistance 2009–2010

Technical assistance (TA) is the provision of information related to a specific topic to one or a few individuals. The state’s Coordinating Team members provided TA to county staff, and county staff provided TA to local service providers. TA prepared the communities to carry out the local prevention efforts. The first instance of TA was provided in 2009. Note that county-level TA is not presented due to a lack of consistency in data collection.

A total of 136 instances of TA were reported by the Coordinating Team, with each county receiving a similar share of TA.

Capacity building, an important step of SPF, was the most common TA topic (48%) provided by the Coordinating Team, followed by planning (28%) and assessment (11%). Of all instances of TA, only 13% were concerned with implementation (8%) and evaluation (5%).

Among the 65 instances of TA concerning capacity building, the most common topic was funding application (29%), followed by contract issues (23%) and EBP (22%). Other less frequent capacity-building TA instances concerned evaluation capacity (15%), maintaining and strengthening County Advisory Councils (8%), and SPF and state requirements (3%).
**SPF-SIG Project Milestones**

**FIGURE 13. SPF-SIG Project Milestones, October 2006 to September 2010**

- **October 2006**
  - Hawai‘i State awarded SPF-SIG funding for five years from SAMHSA

- **April 2007**
  - First State Advisory Council meeting held

- **May 2007**
  - State epidemiological profile developed

- **October 2007**
  - State underage drinking prevention plan approved by SAMHSA

- **November 2007**
  - County Advisory Councils organized

- **April 2008**
  - State infrastructure and capacity assessment completed

- **October 2008**
  - State underage drinking prevention plan approved by SAMHSA

- **November 2008**
  - County Advisory Councils organized

- **April 2009**
  - Hawai‘i SPF-SIG evaluation plan developed

- **July 2009**
  - (1) County epidemiological profiles disseminated
  - (2) Four counties awarded phase 1 funding for prevention planning

- **October 2009**
  - State-level planning phase completed

- **November 2009**
  - (1) County-level infrastructure and capacity assessment completed
  - (2) County underage drinking prevention plan completed

- **January 2010**
  - Four counties awarded phase 2 funding for program implementation

- **March 2010**
  - County evaluation handbook developed

- **July 2010**
  - Prevention intervention applications solicited by counties

- **September 2010**
  - Four counties selected evidence-based programs for implementation
**SPF-SIG Project**

**Accomplishments**

The Hawai‘i SPF-SIG Project has provided much-needed funding for the state and counties to establish a sustainable substance abuse prevention framework. The development of this framework is a work in progress and will continue over the next year. During this reporting period there have been significant achievements as a result of the assessment, capacity-building, and planning process.

- **State and County Epidemiological Profiles were completed.** Prevention of alcohol use by youths 12–17 years old was recommended as the priority issue to address. The profiles identified patterns of youths’ alcohol use in each county and statewide, as well as the associated risk and protective factors.

- **State and County Capacity and Infrastructure Reports were completed** to provide baseline information regarding the status of substance abuse prevention system at both levels. Strengths and weaknesses in organization, effectiveness, workforce skills, funding, cultural competency, and sustainability were identified.

- **The SPF-SIG Project collaborated with the Hawai‘i School Health Survey Committee** regarding adding alcohol use questions to the Youth Risk Behavior Survey and the Youth Tobacco Survey. Trend data at the county level will become available in the near future to monitor progress in reducing underage drinking.

- **State and County Evaluation Plans were completed.** Training was provided to state and county project staff and prevention service providers with regard to the collection and reporting of evaluation data. Ongoing evaluation and feedback mechanisms have been put in place.

- **All four County Advisory Councils have utilized a number of strategies to build infrastructure within their counties.** These have included surveys to collect community input, training on various topics related to substance abuse prevention and community development, and informational meetings regarding underage drinking issues in each county.

- **The state and counties successfully completed and received approval for their strategic plans** to address the prevention of underage use of alcohol. They utilized data from the epidemiological profiles to develop goals and objectives related to the most pressing issues at both the state and county levels.

- **Based on the submission of the county strategic plans, ADAD awarded funding to all four counties** to provide resources for the implementation of prevention programs at the community level.

- **The County SPF-SIG Projects and the CACs are poised to move forward with building a stronger prevention system** that has a buy-in for implementing data-driven and evidence-based programs to meet the specific needs of the community relating to underage drinking prevention.
Community development is an ongoing process that can be slow. The SPF assessment and planning phases took a long time, leaving limited time in the funding cycle for the implementation of prevention programs. The turnover of advisory council membership and project staff at both the state and county levels also posed challenges to the momentum of the project. As Hawai‘i SPF-SIG enters its fifth year, with a one-year extension anticipated, increased efforts in the following areas will help SPF process continue and move forward.

- **Coordinate Resources**
  Coordinate with other governmental and community organizations involved in underage drinking prevention to effectively utilize limited resources.

- **Streamline Process**
  Identify ways to streamline the process of conducting the assessment, selecting evidence-based programs, applying for funding, and completing the procurement procedures.

- **Expand Evidence-Based Prevention**
  Expand the implementation of data-driven and evidence-based programs, policies, and practices to bring about better prevention outcomes.

- **Strengthen Communication Practices**
  Strengthen communication practices at all levels and hold regular update sessions for advisory council members to better involve them as a resource to increase support for the Strategic Prevention Framework.

- **Increase Community Involvement**
  Increase community involvement by expanding advisory council membership to include representatives from various community sectors.
SPF-SIG Members List

Alcohol and Drug Abuse Division
Department of Health
State of Hawai‘i
Wendy Nihoa, SPF-SIG Project Director
Christine Payne, SPF-SIG Project Specialist
(808) 692-7531

Epidemiology Team
Office of Public Health Studies
John A. Burns School of Medicine
University of Hawai‘i
Claudio Nigg, Principal Investigator
Rebecca Williams, Research Assistant
LaShanda Eller, Research Assistant

Evaluation Team
Center on the Family
University of Hawai‘i
Sarah Yuan, Principal Investigator
Karen Heusel, Evaluation Specialist
Mei-Chih Lai, Data Analyst
Lai Lamb, Project Facilitator

State Advisory Council
C. Kimo Alameda
Karl Espaldon (Chair)
Farrah-Marie Gomes
Cheryl Kameoka
Theresa Koki
Leina’ala Nakamura
Tamah-Lani Noh
Pauline Pavao
Janice Shishido

State Epidemiological Workgroup
Kathleen Baker
Gerri Caldwell
Cortney Chambers
Kareem Fuertes
Deborah Goebert
Meredith Hersh
Robert Hirokawa (Chair)
Mayda Jones
Tonya Lowery St. John
Alvin Onaka
Florentina Salvail
Allen Shin
Ken Tano
Rebecca Williams

County Advisory Councils, 2010

Hawai‘i
Frecia Basilio
Jim Brady
Jason Cortez
Lori Eldridge
Lisa Faulkner-Inouye
Leonard Feliciano
Joe Fichter
Vicky Gapasen
Farrah-Marie Gomes
Harry Kubojiri
Kalani Kahalioumi
Nancy Kelly
Leina’ala Nakamura
Jesse Kerr
Heidi Koop
Wally Lau
Rita Miller
Lance Niimi
Janice Pakele
Pauline Pavao
Jan Sears

Honolulu
Ken "Wiwik" Bunjamin-Mau
Jim Gagne
Anna Hirai
Dewey Kim
Daniela Kittinger
Alison Lum
Valerie Mariano
Janna Mizuo
Debbie Morikawa
David Nakada
Leina’ala Nakamura
Andrew "Kona" Purdy
Alan H. Shinn
Michael Thomas
Mei Jeanne Wagner

Kaua‘i
Al Amimoto
Bill Arakaki
Bridget Arume
Fran Becker
Kaui Castillo
Valentino Garipoli
Lionel Gonsalves
Eric Honma
Theresa Koki
Francis Mission
Dan Miyamoto
Larry Moises
Al Nebre
Mark Ozaki
Ann Wooton

Maui
Joelle Aki
Crystal Alboro
Aika Atay
Emily Bartow
Jeny Bissell
Isabella Bissen
Donna Borge
Maile Carpio
Frank Cummings
Rosie Davis
Dusten Dudoit
Leina’ala Estrella
Cheryl Ferguson
Butch Gima
Martha Guzman-Flores
Colin Hanlon
Ray Henderson
Venus Rosete Hill
Cathy Inouye
Dianne Irons
Tanya Jones
Darlyne Kaahanui
Mollie Klingman
Leslie LauHee
Kaimana Lee
Heather Long
Kaikoukalani Lum
Kawika David Mattos
Gay McDonald
Ashley McGinley
Richard Melton
Iokepa Naeole
Donalyn Naihe
Anne Nakagawa
Misty Nako
Lia Oyama
Kelly Pearson
Maelynn Potter
Lisa Rodrigues
Marylee T. Sagaunit
Mary Santa-Maria
David Silva
Wendy Stebbins
Diane Tavares
Lori Tshukko
Becky Vaughn
Carole Vida
Susun White
Marlene Young

County of Hawai‘i
Office of the Mayor
Kalani Kahalioumi
SPF-SIG Program Coordinator
(808) 961-8860

City and County of Honolulu
Department of Community Services
Daniela Kittinger
SPF-SIG Project Manager
(808) 768-7712

County of Kaua‘i
Office of the Mayor
Rebecca Smith
SPF-SIG Project Manager
(808) 241-4924

County of Maui
Department of Housing and Human Concerns
Wendy Stebbins
SPF-SIG Project Manager
(808) 270-7150

For more information, please contact:
Alcohol and Drug Abuse Division (ADAD)
Hawai‘i State Department of Health
601 Kamokila Boulevard, Room 360
Kapolei, HI 96707
(808) 692-7517

Center on the Family
University of Hawai‘i
2515 Campus Road, Miller Hall 103
Honolulu, HI 96822
(808) 956-4132
http://uhfamily.hawaii.edu