Introduction

Tobacco use is the single most preventable cause of death and disease in American society. In Hawai‘i, the impact of tobacco use on the Native Hawaiian population is evidenced by the disproportionately high prevalence of chronic illness and premature death from cardiovascular disease, cancer, and diabetes.

On December 10 – 12, 2003 the National Conference on Tobacco or Health entitled “Surviving and Thriving in Difficult Financial Times” was held in Boston, Massachusetts. More than 3,500 individuals attended, and more than 170 presenters and poster sessions addressed seven program areas:

1. Tobacco-Use Prevention Among Youth;
2. Cessation, Nicotine and the Science of Addiction;
3. Public Policy and Advocacy Strategies;
4. Increasing Diversity/Eliminating Disparities;
5. Comprehensive Tobacco Control Programs or Combined Strategies;
6. Media and Communications Strategies; and

Conference sponsors included Centers for Disease Control & Prevention (CDC), National Cancer Institute (NCI), Robert Woods Johnson Foundation, American Legacy Foundation, National Institute on Drug Abuse, American Heart Association, Environmental Protection Agency, Substance Abuse and Mental Health Services Administration, American Lung Association, Campaign for Tobacco-Free Kids and Danya International, Inc.

Components

Pre-conference events, such as “Building Healthy Communities: Strength Through Diversity,” were among the first of many opportunities to meet colleagues and discuss tobacco issues that affect minority communities. The roundtable discussions covered a multitude of topics, such as faith-based initiatives, secondhand smoke, public policy and social justice, cultural aspects of cessation services, and women and smoking.

Ancillary meetings were held throughout the Conference by organizations, such as APPEAL (Asian Pacific Partners for Empowerment and Leadership), American Legacy Foundation and The PRAXIS Project. Hawai‘i received the Award of Excellence at the Smoke-Free Awards Reception co-sponsored by Americans for Non-Smoker’s Rights and the Smokeless States National Program Office for being the only state in the U.S. that has clean indoor air ordinances in each of its counties.

The importance of involving community leaders from all sectors was evident from the opening plenary session. Featured speakers included: Cynthia Loesch, youth advocate with Campaign for Tobacco-Free Kids and Teens Against Tobacco, whose message was “The Tobacco Settlement Belongs To Us”; Boston Mayor Thomas Menino, who spoke on conquering the fear of the unknown by addressing restaurant owners’ fears of lost revenues; and Bishop Hessie Harris of the Born Again Evangelistic Outreach Ministry, whose campaign brought about the removal of Malcolm X cigarettes in the Boston community.

Models of success

Three model programs presented at the conference were of special interest for us because they included the following cross-cutting components that may be applicable to programs in Hawai‘i and the Pacific:

1. Staff and methodology that demonstrate an understanding of their community;

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Incorporating cultural practices, beliefs and language; Recognizing the importance and influence of family in motivating changes in lifestyle behaviors; and Using strength-based approaches that focus on positive outcomes and healthy families.

One program, entitled “Not in Mama’s Kitchen,” recognizes the value of a mother’s influence with her immediate and extended family in addressing secondhand smoke in African American homes. Building on the strong matriarchal system present in African American families, Not in Mama’s Kitchen encourages African American women to prohibit smoking in their homes and cars by taking a pledge to reduce exposure to Environmental Tobacco Smoke (ETS), or secondhand smoke, for the health benefit of their families, particularly the children. The main message in this tobacco control campaign spearheaded by Brenda Bell Caffee is, “Until you can quit, smoke outside!” The program was created around the family model familiar to many African Americans, where generations come together at “Mama’s” house for family meals.

“¡Ya No Fumo!,” or “I Don’t Smoke Anymore!” underscores the value of cultural competency in a smoking cessation program. It was created in Spanish (versus in English and then translated), and specifically tailored for the Latino smoker who wants to quit. Elements considered in the development of this program included: 1) translation versus interpretation in the development of materials, 2) having staff and counselors that are bilingual versus bicultural, and 3) hospital-based versus community agency-based delivery of services. This culturally tailored program will incorporate one-to-one interaction, nicotine replacement therapy (NRT), and group support that includes: access to counseling, culturally and linguistically appropriate educational materials in written and video format, telephone follow-up by trained bilingual smoking cessation counselors, free child care, and free transportation. Therapy is also tailored to participants’ needs in the context of their family and culture.

“Getting & Staying on the Winning Path” is a community-competent, Pathways-related\(^1\), assisted self-help cessation curriculum developed for African Americans. The curriculum incorporates presentations, guest speakers of all health professions, discussion groups, materials and audio/visuals with components that address physical addiction, habitual behaviors and triggers, stress relievers, prayer and spirituality, roles for non-smokers, and strategies for relapse. In this curriculum, the ability or capability of dealing with stress and triggers are believed to be the key to long-term cessation. Two important points emphasized in this model are: 1) African Americans do not consider health as being at all important until it interferes with their ability to work or support their families, and 2) African Americans, as a faith-based group, view death as something that is going to happen to everyone at some time in their life. Therefore, smoking cessation interventions targeting this group cannot assume that health is the number one priority or that death or the fear of dying is a motivating factor.

A third category of models of success featured initiatives in Public Policy and Social Justice. Hawai‘i and its statewide smoke-free ordinance for restaurants and worksites is just one example of a “policy” model of success.

Key messages that resonated throughout the conference were:

- Tobacco is a social injustice, as demonstrated by cigarette companies’ marketing strategies that target low socioeconomic status populations and communities of color with messages that link tobacco use to independence, financial success and sexual sophistication.
- Minority and medically underserved populations often face similar challenges and barriers.
- Focus should be on comprehensive approaches, NOT innovative approaches.
- The need and importance of disaggregated data are critical for minority and medically underserved populations who are often falsely represented by aggregated data or lack of data.
- Acculturation measures need to be included in survey instruments to capture the diversity among and within groups.
- Face-to-face interaction is invaluable for education dissemination and intervention.

Conference resolutions

Conference resolutions were first initiated as part of the National Tobacco Conferences in 2002 by Rod Lew, Director of Asian Pacific Partners for Empowerment and Leadership (APPEAL). Resolutions have become an important means of collectively summarizing the week of conference meetings and providing impetus for addressing health and tobacco-free parity issues after the conference. This year, conference participants introduced resolutions by completing and submitting forms made available by conference organizers. These were reviewed, combined, and simplified by Conference Committee members and presented to the general assembly at the Closing Plenary, voted on, and adopted. By the end of the conference, 11 resolutions were approved. According to Mr. Lew, “We should all actively use and refer
to these resolutions adopted by the 2003 National Conference on Tobacco or Health on December 12, 2003. They become the movement’s guiding principles and goals. Resolutions from the 2003 Conference follow:

Be it resolved that the National Conference on Tobacco or Health recommends or urges...

- The federal government to strongly urge states to fund tobacco prevention and control with Master Settlement Agreement funds or tobacco tax revenues, at or above the CDC minimum recommendations (e.g. by withholding Medicaid match payments if states don’t meet requirement).
- All tobacco control organizations and governmental agencies to develop comprehensive and concrete plans to advance parity and eliminate disparities, and provide adequate resources and community inclusion to implement the plan.
- All tobacco control programs to be inclusive of lesbian, gay, bisexual, transgender/transsexual, intersex and questioning/queer (LGBTIQ) people in their surveys, program activities, mission statements and evaluations.
- All institutions of higher learning to adopt smoke-free policies, including public common areas, residence halls and doorways, and all hospitals and clinics to adopt tobacco-free campuses and grounds.
- All governmental agencies and non-governmental organizations to formulate a policy statement to acknowledge and respect the sacred use of tobacco by American Indians and Alaska Natives, and all governmental agencies and non-governmental organizations to collaborate with American Indians and Alaska Natives to develop a mechanism and provide resources to address the impact of commercial tobacco abuse.
- Those suffering from alcoholism and other drug dependence be recognized and included in outreach activities at the state and national level.
- Smoking cessation treatment (e.g. pharmacotherapy and counseling) be made more accessible and affordable.

- The Centers for Disease Control and Prevention and state health departments to develop a registry of persons who die from tobacco-related diseases as a means of providing a “human face” to the issue.
- All national health-related organizations to hold their conferences in 100% smoke-free cities and at unionized hotels.
- The U.S. Congress to amend the tax code to disallow the costs of tobacco advertising as a legitimate tax deduction.
- Future tobacco control conferences to involve youth and create an environment where youth can take action and make critical contributions.

The 2005 National Conference on Tobacco or Health is scheduled for May 2 - 4, 2005 in Chicago, Illinois. For the staff from 'Imi Hale, the Native Hawaiian Cancer Network, attending this conference in the past proved to be an excellent opportunity to broaden our knowledge and gain additional insights and perspectives to benefit our efforts in the health and well-being of nā po'e Hawai'i (the people of Hawai‘i).

Acknowledgements

Mahalo piha to Hawai‘i Community Foundation and the Hawai‘i Tobacco Prevention and Control Trust Fund for the scholarship grants that allowed us to attend the 2003 National Conference on Tobacco or Health. Mahalo iā Rod Lew (APPEAL) for his insight and inclusivity.

References


1. Pathways to Freedom: Winning the Fight Against Tobacco is the award-winning quit smoking and community mobilization guide developed by Dr. Robert G. Robinson with Dr. Tracy Orleans, Denise James, and Charyn Sutton to address tobacco use cessation among African Americans.

Banana plants do not bear breadfruit. 

_Pohnpeian proverb_
9th Biennial Symposium on Minorities, the Medically Underserved and Cancer, 2004: a conference report

Stephen P. Jiang*

Introduction

After more than three decades, the “War on Cancer,” declared by President Nixon in 1971 with the enactment of the National Cancer Act, continues in the United States. In 1990, victory was declared when the overall age-adjusted cancer rates began to decline for the first time in history. Unfortunately, this victory was not for all populations. The cancer incidence for minorities and the medically underserved were still rising, yet attention to this disproportionate burden was going unrecognized by most national leaders.

Recognizing the lack of attention paid to the disproportionate burden of cancer in minority and medically underserved communities, Lovell Jones, Ph.D., of M.D. Anderson Cancer Center in Houston, Texas, convened the first “Symposium on Minorities and Cancer” in 1987, attracting approximately 400 participants.

In March 2004, the 9th Biennial Symposium on Minorities, the Medically Underserved and Cancer in Washington, D.C., drew nearly 1,600 participants from 47 states, three U.S. territories, and five countries to speak with one voice against the disproportional burden of cancer on minority and medically underserved populations. This gathering of extraordinary individuals—all committed to eliminating the unequal burden of cancer—included bench and clinical researchers, health service providers, national and community advocates, community organizers, national and local policy makers, cancer survivors, educators, and undergraduate and graduate students. Participants also represented every racial and ethnic group. Sponsored by the Intercultural Cancer Council, the Biennial Symposium series has become the nation’s largest and most professionally and ethnically diverse cancer conference.

“From Awareness to Action” was the theme for the 9th Biennial Symposium in 2004. This meeting emphasized the need to translate what we know about the unequal burden and treatment of cancer in minorities into real actions that will impact such communities. The conference offered five days of networking opportunities to share, learn from others, and hear about successful programs.

In addition to learning from one another, Symposium participants had the pleasure of hearing from some of the nation’s most prominent figures in the fight against cancer, including Dr. Andrew von Eschenbach, Director of the National Cancer Institute; Dr. Francis Collins, Director of the National Genome Research Institute; Dr. Harold Freeman, Director of the Center to Reduce Cancer Health Disparities (NCI) and former Chair of the President’s Cancer Panel; Dr. John Seffrin, Chief Executive Officer of the American Cancer Society; Dr. Antonia Novello, State of New York Commissioner of Health and former U.S. Surgeon General; and Dr. Lasalle D. Leffall, current Chair of the President’s Cancer Panel.

An integral component of the Biennial Symposium is the Student Mentoring Program (SMP). This year, more than 350 minority undergraduate students from 46 universities participated in the SMP. In addition to hearing from national leaders in cancer prevention and control, students learn about graduate and health professional educational opportunities, and hear from minority health professionals and scientists in the field. They are coached in medical and graduate school interviews and how to present themselves confidently and professionally during national conferences such as the Biennial Symposium. Many Symposium participants are deans, faculty, or administrators in medical schools and universities, and

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Key Words: medically underserved, tissue donors, survivor
this provides students with excellent opportunities to network with individuals who may help with future admission processes. Seventeen students from Chaminade University of Hawai‘i, including one from Saipan (Commonwealth of the Northern Mariana Islands), and one from the University of Hawai‘i at Mānoa participated in this year’s SMP. Additionally, a student from Guam who is studying in the continental U.S. expressed excitement at being able to network with other Pacific Islanders over the important issues of cancer. In their reports, most talked about their heightened awareness of cancer and its burden and of their obligation to serve their respective communities.

Full of meaningful presentations, each Biennial Symposium conference schedule typically begins at 7:00 AM and continues into the evening. While most of the conference hours are filled with outstanding presentations, such as “Behavioral Research and Understanding Cancer Survivorship in Under-served Populations” and “Uses and Limitations of Population-Based Cancer Registry Data,” the Symposium also makes a point to celebrate survivorship and community accomplishments. Perhaps most moving was the event where a bone marrow recipient met her bone marrow donor for the first time. This type of event highlights how science has advanced to improved cancer survival, and it puts a face on how selfless individuals can and do make a difference.

During every lunch and dinner, the Symposium takes the opportunity to publicly honor community members for their contributions to reduce the unequal burden of cancer in their communities. This year, Hawai‘i’s Dr. Neal A. Palafox was the recipient of the Susan Matsuko Shinagawa Cancer Control Leadership Award. Dr. Palafox was recognized for his work in serving the needs of cancer patients in the Pacific Basin and for his tireless advocacy to bring attention to the high rates of cancer caused by U.S. nuclear testing in the Pacific Basin. Dr. Palafox and others from Hawai‘i have been strong leaders in ensuring that Native Hawaiians and Pacific Islander issues are given a platform at the Symposium.

Another significant celebration is the Dorothy I. Height Award that honors outstanding lifetime achievement in working to reduce the unequal burden of cancer. A living legend, Dr. Height founded the National Council of Negro Women, provided counsel to every U.S. President since Dwight Eisenhower, and, in 2004, received the United States Gold Medal, the highest civilian honor in the country. At 92, Dr. Height personally presented Dr. Gil Friedell an award for his lifetime work with the poor whites of Appalachia, a topic often neglected, poor and medically underserved populations.

Even though this Biennial Symposium attracted nearly 1,600 people from a wide variety of professional, racial and ethnic groups from all across the U.S., three U.S. territories and five foreign nations, participants reported feeling that they are members of a large extended family. The Symposium organizers are extremely proud of the fact that a serious scientific and cancer health education meeting can foster an environment that promotes a strong sense of community. It is from this larger community that the Intercultural Cancer Council hopes to build our collective awareness through cooperation and action. By living up to the ICC motto, “Speaking with One Voice,” we will eliminate the unequal burden of cancer carried by minorities and medically underserved.
An outpouring of intellect and aloha: Conference report on Kamehameha Schools’ 2003 Research Conference on the education and well-being of Hawaiians

Matthew Corry*

Introduction

Kamehameha Schools’ inaugural research conference on education and well-being draws from a deep well of Hawaiian scholarship.

Legend has it that the god Kâne once struck a rock and caused fresh water to flow for a gathering of people in northern O’ahu. From then on, the Waikâne Stone became a source of life and refreshment for the kama’äina (locals). More recently, in the same area of the North Shore, more than 150 researchers and educators gathered at the Turtle Bay Resort for Kamehameha Schools’ (KS) inaugural Research Conference on the Education and Well-being of Hawaiians. The result: an outpouring of intellect and aloha that enlivened and refreshed.

Ho’omoe wai kâhi ke kâo’o: Let’s all travel together like water flowing in one direction

The conference, held in September 2003, spanned three days and was packed with guest speakers, scholarly papers and presentations, panels, talk-story sessions, a special poster display, and a service project at the Hawaiian Agricultural Gardens at Brigham Young University Hawai‘i campus. The program started on Thursday evening with a ceremonial oli (chant), followed by an exciting lineup of featured speakers, each addressing Hawaiian well-being from different but complementary angles. Presenters covered topics such as health, political economy, leadership, family, mālama ‘āina (land stewardship), spiritual and cultural issues, and education.

“There is a wealth of Hawaiian scholarship,” says Shawn Malia Kana‘iaupuni, Ph.D. (KS ’83), director of the Policy Analysis & System Evaluation (PASE) department at Kamehameha Schools. “We envisioned this conference as an opportunity to call on the talent, knowledge, and mana’o (ideas) of practitioners and researchers who have made significant contributions to educating Hawaiian children and improving Hawaiian well-being.”

Colleen Wong (KS ’75), then Acting CEO of Kamehameha Schools, opened the conference by stating that we can achieve far greater results by working together than if we struggle individually. She was followed by Dr. Kana‘iaupuni, who outlined a historical and statistical framework showing that the strengths and uniqueness of today’s Hawaiian families are rooted in genealogy, aloha ‘āina (affection for and care of the land) and commitment to ‘ohana (family). Marjorie Mau, M.D., discussed how confronting the health challenges of Hawaiian well-being must go beyond a single profession and that research is a tool for cultural survival. Robin Danner called for more research on the economic impact of Hawaiian programs, schools, and issues, with a reminder that we must be informed by Western practices but grounded in indigenous ways of knowing. Maenette Benham, Ph.D. (KS ’74), concluded the evening by affirming that educational systems must include the native voice and that cultural literacy must remain a priority.

“As I listened to the different speakers, I was struck by the passion and commitment to enhancing the well-being of our Hawaiian people,” said Claire Asam, Ph.D. (KS ’70), President and Executive Director of the Queen Lili‘uokalani Children’s Center. “The conference provided a wonderful opportunity to increase my understanding about issues facing Hawaiians.” Diane Paloma (KS ’91) of the Department of Native Hawaiian Health at UH Mānoa added, “The plenary speakers blew me away, the breakout sessions were outstanding, and the Native Hawaiian leadership potential was off the charts.”

On Friday, researchers from dozens of different organizations echoed and expanded the theme of Hawaiian well-being. Presenters covered a wide range of topics, including the role of culture and ethnic identity among Hawaiian youth, innovations in classrooms and curriculum, community building and tribal colleges, cancer rates and at-risk behavior, brain-drain migration, Hawaiian per-

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perspectives on leadership, and the importance of indigenous ways of learning and doing.

Liana Honda (KS '77) of the KS Literacy Enhancement Program noted, “It was inspiring to see so many indigenous people doing research on indigenous issues.”

Featured presenters on Friday and Saturday maintained the momentum: Thomas Kaulukukui, J.D. (KS '63), demonstrated three keys to effective leadership, and Lilikalä Kame'eleihiwa, Ph.D. (KS '70), traced the celestial history and cosmology of Hawaiian knowledge through the Kumulipo (Hawaiian creation chant). Neil Hannahs (KS '69) brought things back to earth by showing the essential connection between ‘āina (land) and well-being. Another major highlight was Dr. Ben Young’s moving account of the interplay between mana (divine power) and research, followed by a wonderful hula performance by the KS Hawaiian Ensemble.

'Aʻohe pau ka 'ike i ka hālau hoʻokāhi: All knowledge is not taught in the same school

Sharing ideas and presenting papers are not new to educators and researchers. Yet, this conference was a first for many. It offered a unique chance to interact with researchers from other fields who bring new perspectives on Hawaiian well-being. ‘What I loved the most about the conference was its multidisciplinary focus,’ said Dr. Martina Kamaka (KS ’78) of the John A. Burns School of Medicine at UH Mānoa. Dr. Kamaka said she usually looks at Hawaiian well-being through the lens of healthcare. “It was incredible,” she said, “to share with such an enthusiastic, scholarly, and inspirational group of Hawaiians who are tackling the issues around well-being through the fields of education, ecology, community development, and the law.”

For Mele Look, director of Outreach and Information Dissemination for the Department of Native Hawaiian Health at UH Mānoa, this was the first time in her several decades of experience as a researcher in Native Hawaiian health that education and health researchers in Hawai‘i have been brought together. “The conference was a wonderful opportunity for cross-fertilization,” said Ms. Look.

Conference participants were diverse both in profession and age. “The conference sent me sky-rocketing from the moment we all shared the oli pane (response chant) and received the invitation,” said Betty Kawohiokalani Ellis-Jenkins (KS ’45). “Each presentation was an inspiration to a 75-year-old kupuna.”

Among the inspiring presentations were original research projects from the younger generation of Hawaiian scholars who presented their findings alongside the work of established professionals. Examples of work by KS high school students included: The Effect of Agricultural and Residential Runoff on the Microbiology of a Hawaiian Ahupua’a by Andrew Knutson; RAPD Analysis of Population Diversity in Hibiscus Arnottianus by Amanda Garcia; and The Anti-Inflammatory Properties of Digitaria Ciliarus, by Kiana Frank; Kukaepua’a: The Anti-Inflammatory Properties of Digitaria Ciliarus, by Amanda Garcia; and RAPD Analysis of Population Diversity in Hibiscus Arnottianus by Andrew Knutson.

‘Aʻohe pau ka 'ike i ka hālau hoʻokāhi: From zenith to horizon

Participants came from as far away as Michigan, Washington, and New Zealand. Danica Waiti of Amorangi Ki Mua in New Zealand, said, “The struggles that my people and Kanaka Māoli face are similar in many ways. I think we need to engage more in sharing experiences and developing ideas around research that serve our communities.”

More than 40 organizations were represented at the

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**Table 1. Hawaiian education and well-being at a glance**

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<th>U.S.</th>
<th>Hawai‘i</th>
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<tr>
<td>Number of Hawaiians</td>
<td>401,162</td>
<td>239,655</td>
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<tr>
<td>Hawaiians enrolled in K-12 schools</td>
<td>109,233</td>
<td>70,054</td>
</tr>
<tr>
<td>Hawaiian students enrolled in public schools</td>
<td>89%</td>
<td>87%</td>
</tr>
<tr>
<td>Hawaiian students enrolled in non-KS private schools</td>
<td>7%</td>
<td>6%</td>
</tr>
<tr>
<td>Hawaiian students enrolled in Kamehameha Schools</td>
<td>4%</td>
<td>7%</td>
</tr>
<tr>
<td>All private-school Hawaiian students who are served by Kamehameha Schools</td>
<td>39%</td>
<td>55%</td>
</tr>
<tr>
<td>Hawaiians age 25 and older who graduated from high school</td>
<td>85%</td>
<td>85%</td>
</tr>
<tr>
<td>Hawaiians age 25 and older who completed a bachelor’s degree or higher</td>
<td>16%</td>
<td>13%</td>
</tr>
<tr>
<td>Hawaiians living below poverty</td>
<td>14%</td>
<td>16%</td>
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conference, including many graduates of Kamehameha Schools. “The Princess was proud,” said Aunty Betty, “to witness Hawai‘i’s industrious men and women in action.”

Many of the presentations included calls to action, charging the research community with a lot to do before next year’s conference. Dr. Noelani Apau (KS ’70) said, “I was delighted to see so much work being done and am challenged, personally, with all the work we have to do.”

In the meantime, the inaugural issue of Hülili: A Multidisciplinary Journal on Hawaiian Well-being is underway and will be published in the near future. At a special conference reception to launch Pauahi Publications, manager and editor Lilinoe Andrews said the knowledge presented at the conference is exactly the kind of information that both the research community and practitioners are eager to receive. “We look forward to publishing these findings,” said Lilinoe, “so that more people will have access to the important insights we have gathered.”

Just as the Waikâne Stone gave fresh water to the kama‘aina years ago, it is hoped that the gathering of people, mana’a, and information from the research conference will become a source of life and nourishment for Hawai‘i’s research community.

Seeing other educated, professional kānaka maoli inspired me to continue trusting our naʻau, or gut, as the foundation to seeking the truths about our own cultural ethnic identity.

Kamanaʻopono Crabbe, PhD  
Hāna Community Health Center (KS ’82)