



# HAWAII HIV & AIDS NEEDS ASSESSMENT

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The Hawai'i HIV Needs Assessment was conducted in 2018 in a joint effort between the Hawai'i Health & Harm Reduction Center (formerly CHOW and Life Foundation), the Hawai'i Department of Health, and the University of Hawaii at Mānoa. The purpose of the needs assessment is to shape and inform services for people living with HIV/AIDS (PLWH) in Hawai'i from a social determinants of health perspective. We identify strengths as well as barriers to accessing a variety of social and health services with the goal of improving quality of life for PLWH.

## About

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The survey was developed by the Hawai'i Health & Harm Reduction Center (HHHRC) and the Hawai'i Department of Health. It was promoted by service providers at HHHRC, Hawai'i Island HIV/AIDS Foundation (HIHAF), Malama Pono, and Maui AIDS Foundation. Data were analyzed and visualized by Jack Barile, PhD, Joy Agner, MS, OTR, and Angela Zheng.

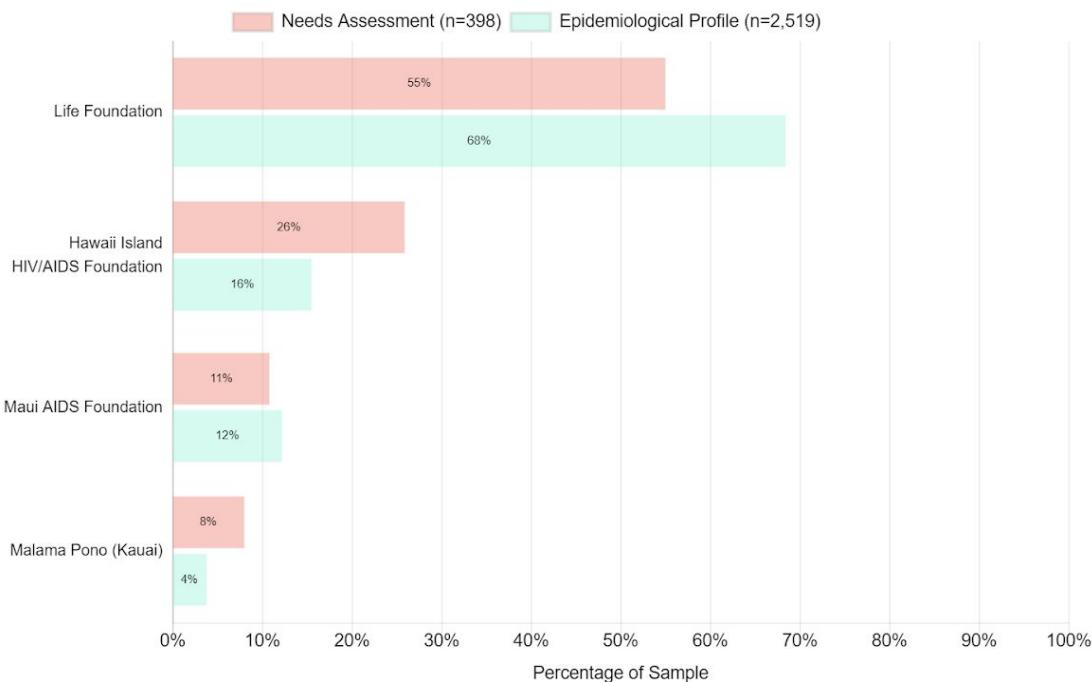
## Sociodemographics

398 PLWHA across O'ahu, Kaua'i, Hawai'i Island, and Maui participated in the survey.

Where possible, demographic comparisons are made with the latest [Hawai'i State Epidemiological Profile](#) to illustrate how representative the needs assessment participants are of the state population of PLWHA.

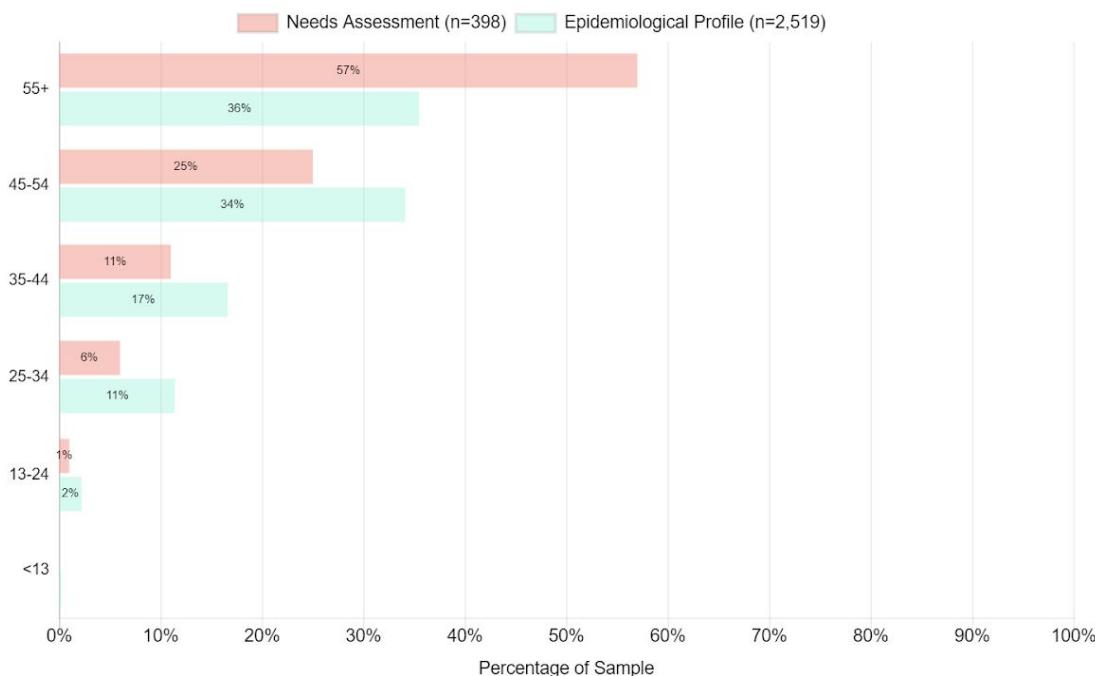
## Case Management Location

Although the epidemiological profile does not have information on where people receive case management services, it does have information on where people live. Assuming that most people receive case management in the county where they live, the samples are similar in terms of location, with slight overrepresentation of individuals from Hawai‘i Island and Kauai, and underrepresentation of individuals in Honolulu County.



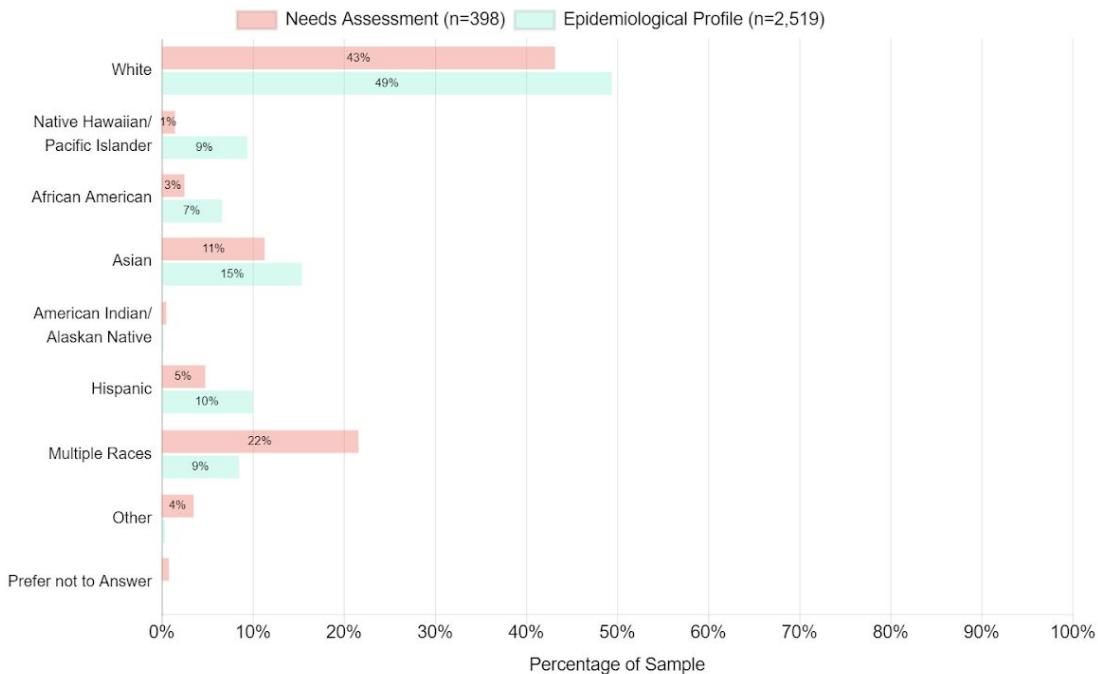
## Age

Individuals who completed the needs assessment tend to be older than the PLWHA included in the epidemiological profile, with a high percentage of the respondents over 55 (58%). This may be reflective of the fact that younger PLWHA are less likely to be engaged in care.



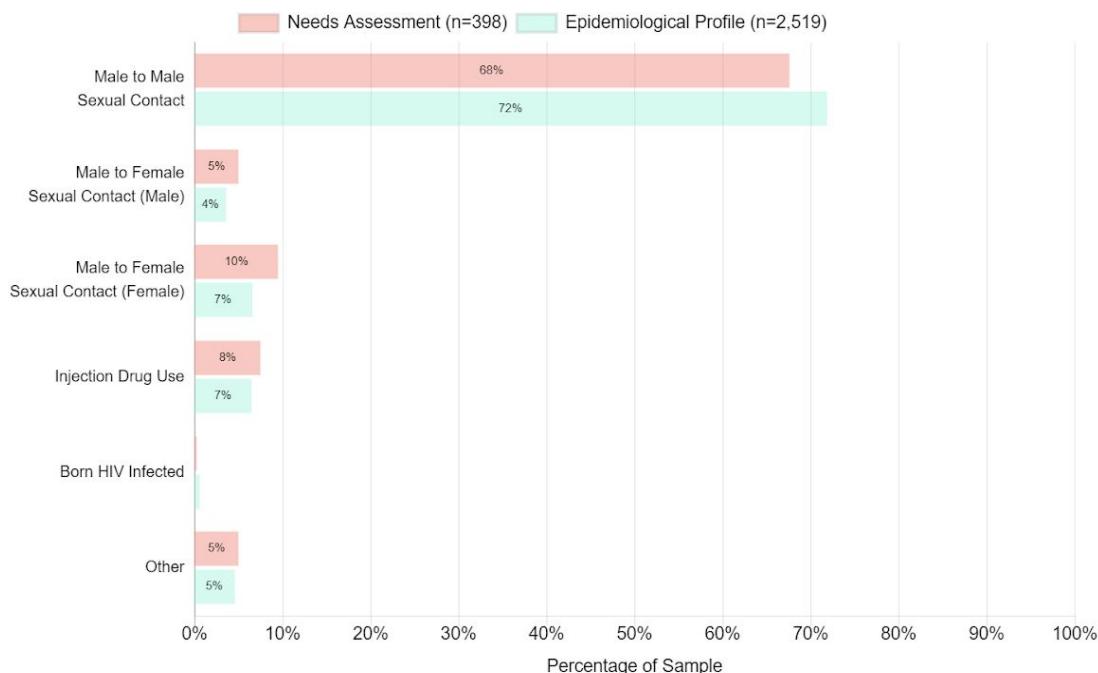
## Race

There were not notable differences in terms of race between the epidemiological survey and the needs assessment. Both showed an overrepresentation of White (23%) and Black/African American PLWHA (2%) compared to the state population, and an underrepresentation of Asians (36%) and people with multiple races (19%) compared to the state population.



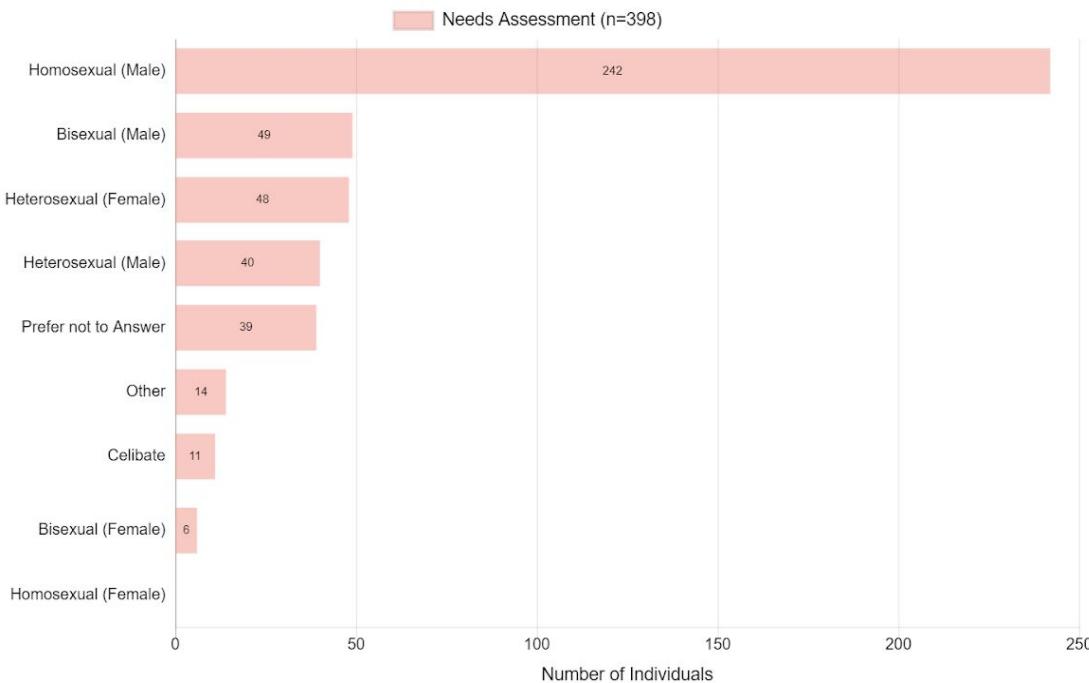
## Method of Transmission

There were not notable differences between the needs assessment and the epidemiological profile in method of transmission. For both, by far the most common method of transmission is male to male sexual contact.



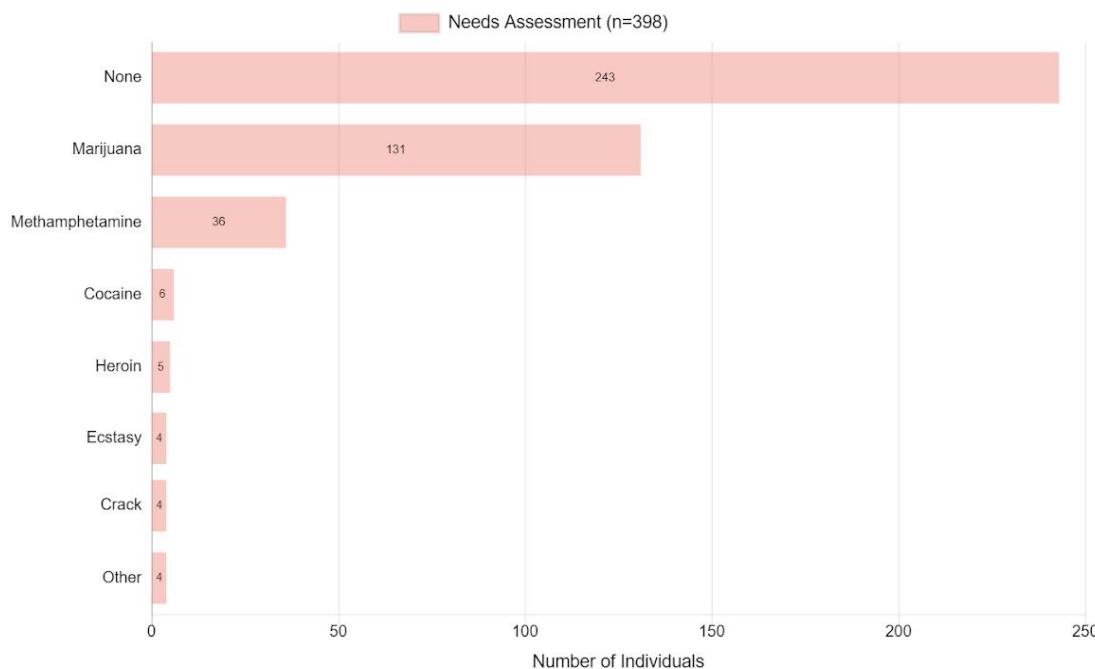
## Sexual Orientation

The majority of individuals in the sample were homosexual men.



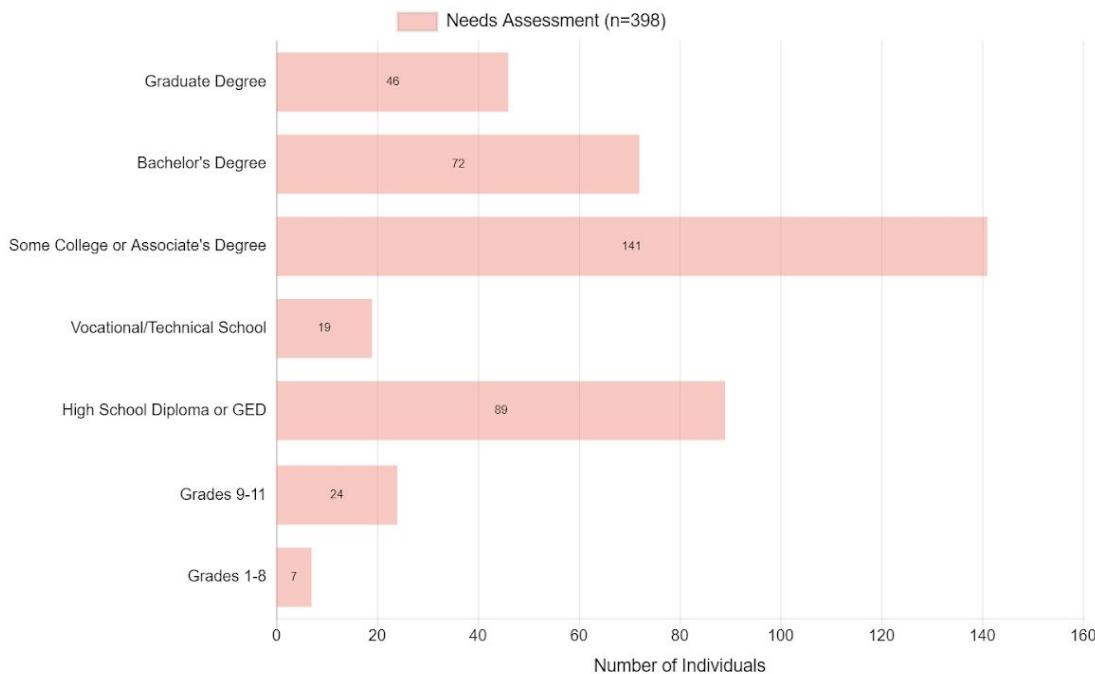
## Drug Use

The majority of the sample did not report using illicit drugs. Of those who did, marijuana was most common, followed by methamphetamines.



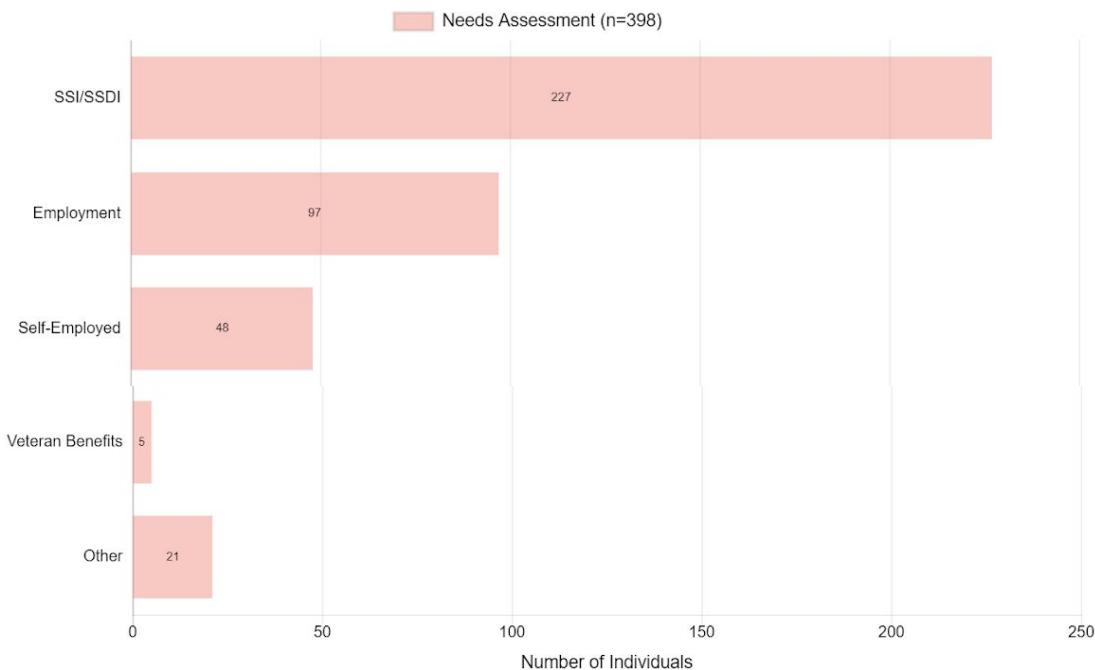
## Education

The majority of the sample continued their education after high school, and 31% either completed Bachelor's or graduate degrees.



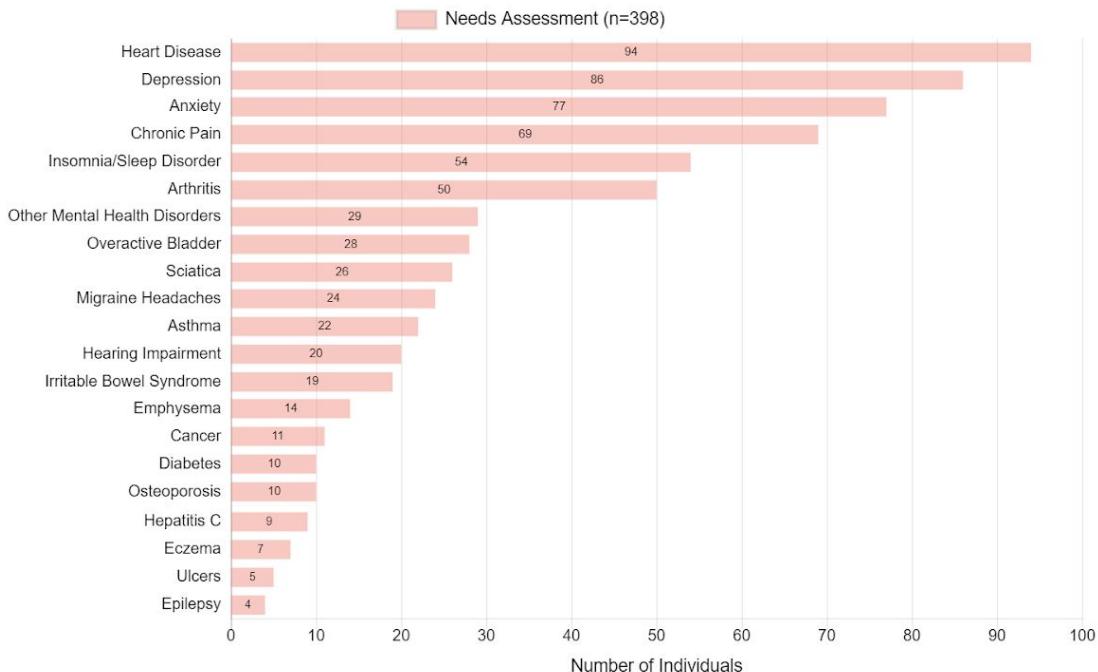
## Income Source

Social security was the most common type of income, indicating that a high percentage of the sample (58%) is living in poverty. Among those that specified "other" income, assistance from family and friends was the most common income source, followed by general assistance.



## Prevalence of Chronic Conditions

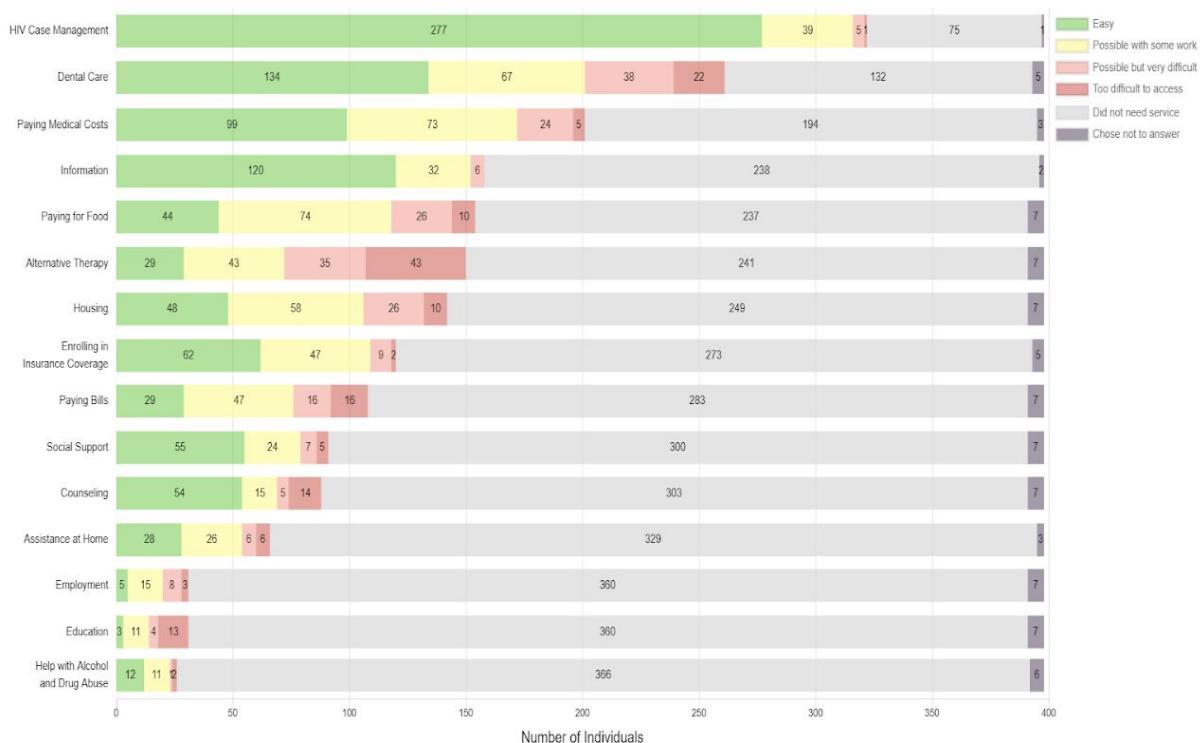
A high proportion of the sample reported concurrent chronic conditions. The most prevalent were heart disease, depression, anxiety and chronic pain.



## Services Needed and Ease of Access

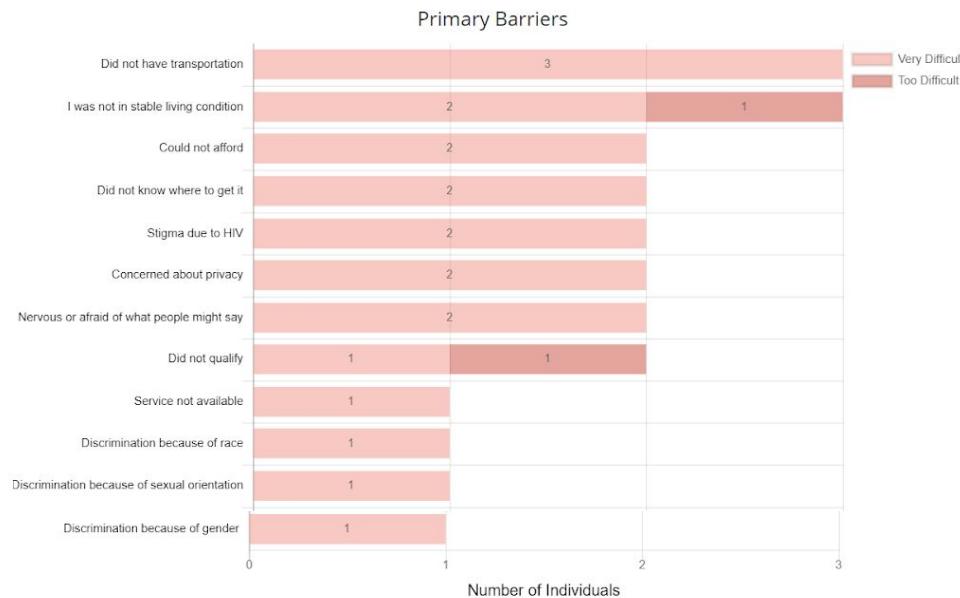
Number of PLWHA Surveyed = 398

Accessing needed services is essential to ensure health and good quality of life for PLWHA. The chart below illustrates the services that people needed in the past year, and also how difficult it was to access those services. By clicking on one of the services, you can see what the main barriers were for those who described accessing the services as "Possible but very difficult" or "Too difficult to access."



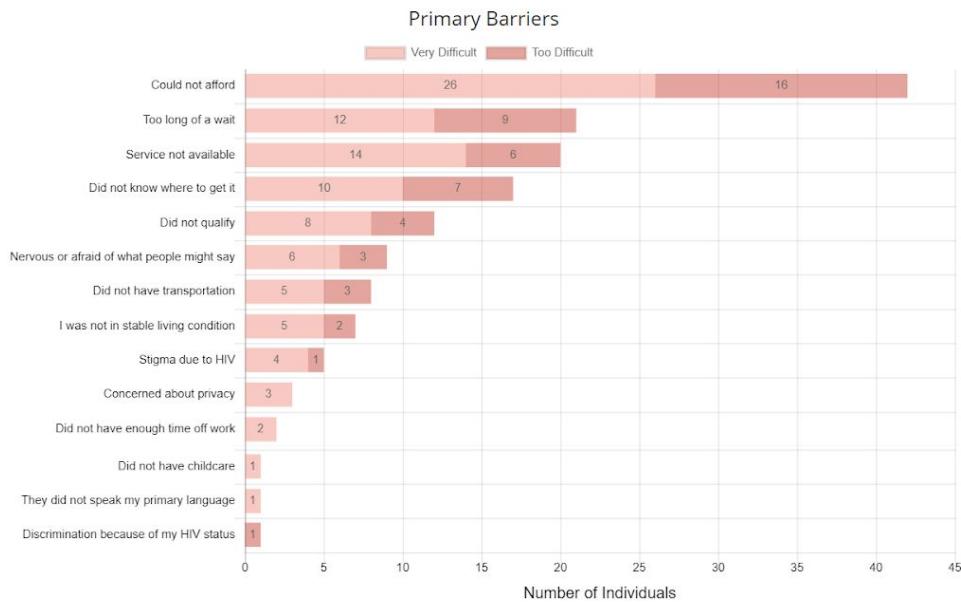
### Accessing HIV Case Management

Nearly everyone in the sample was able to access HIV case management. For those who couldn't, transportation and lack of stable living conditions were primary barriers.



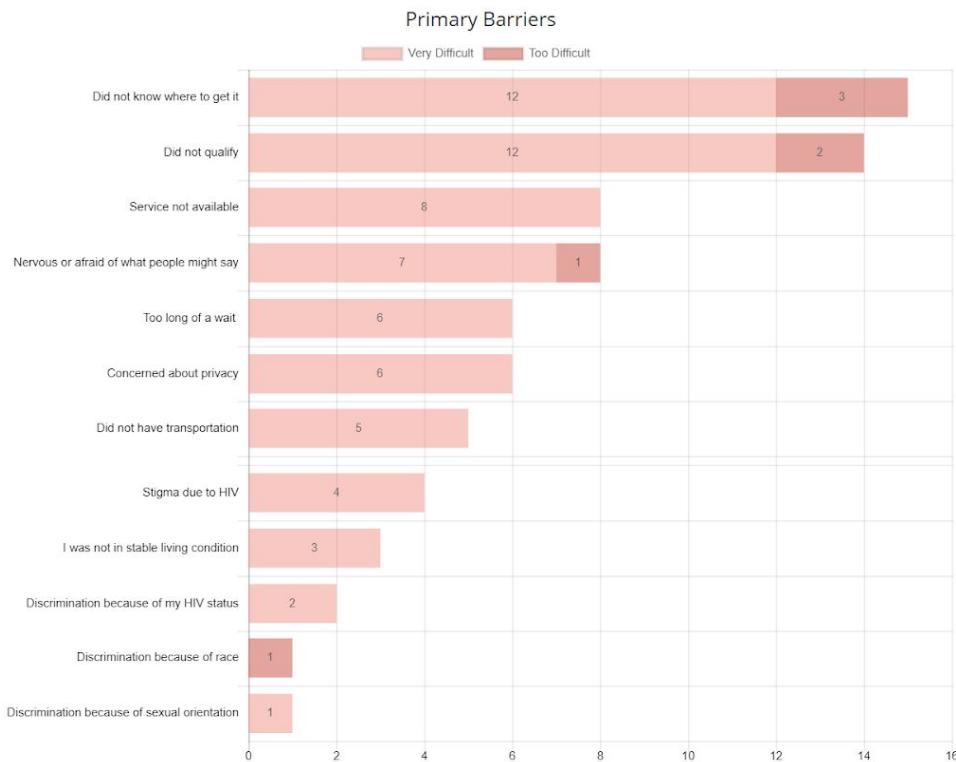
## Access to Dental Care

A high percentage of participants needed dental care, and 16% of the total sample described it as difficult to access. Primary barriers were cost, waiting time, and that the service wasn't available.



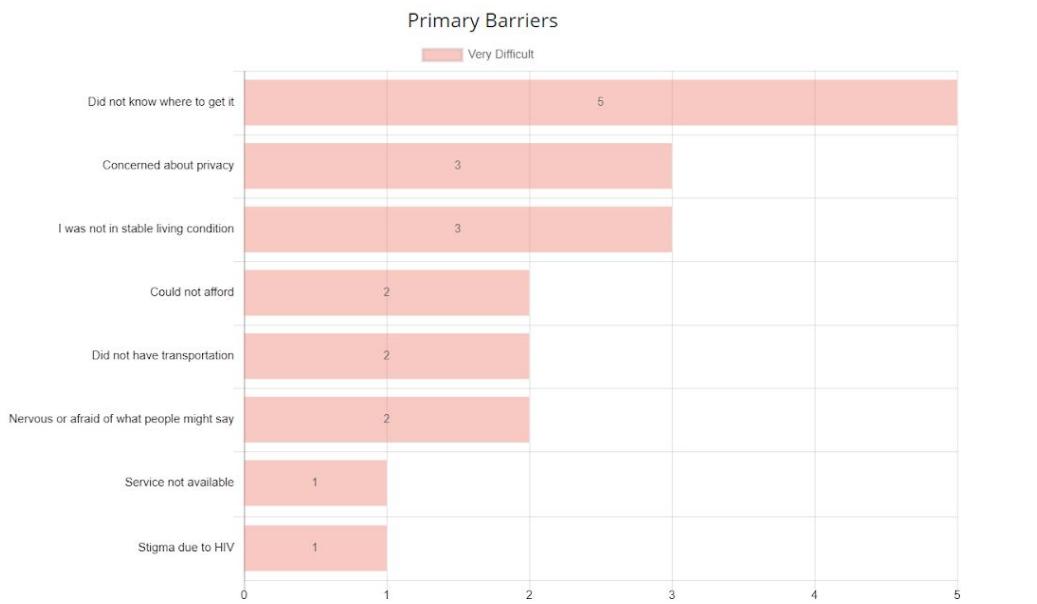
## Accessing Assistance Paying Medical Costs

50% of participants needed help paying for medical bills. Primary barriers for those who found it difficult included knowing where to get assistance and qualifying for assistance.



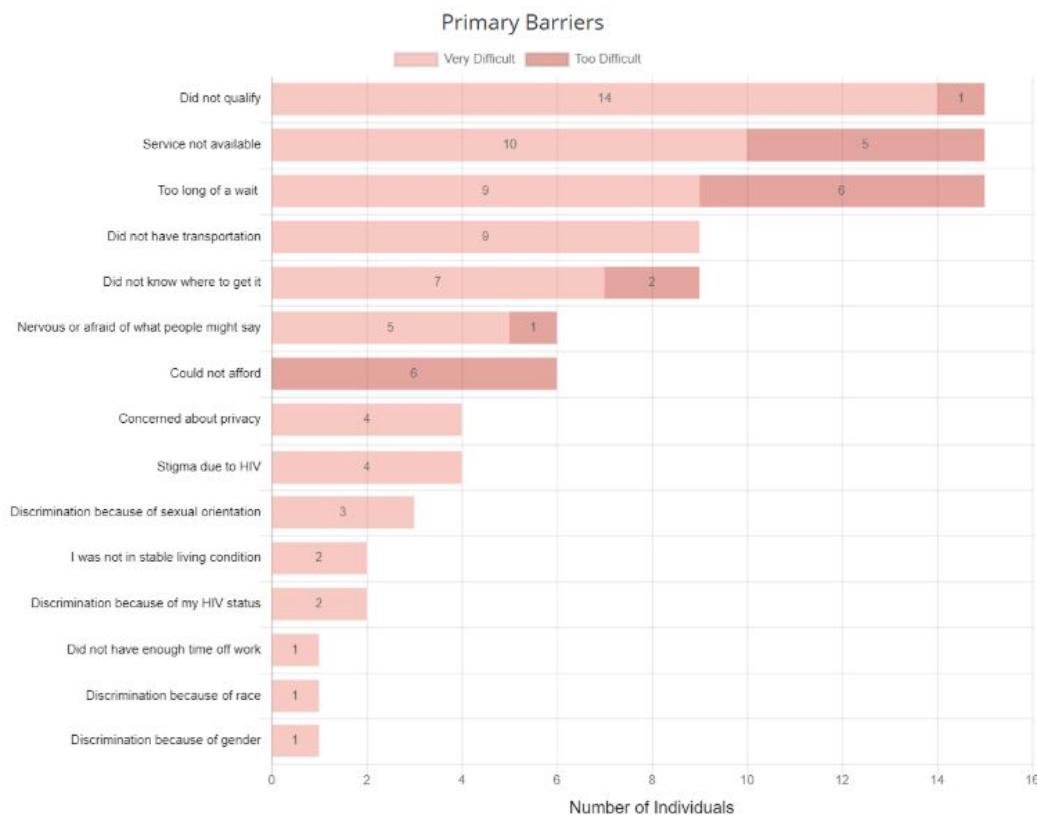
## Accessing Information

39% of participants wanted information about HIV and AIDS. Fortunately, most found it easy or possible with some work to find the information they needed.



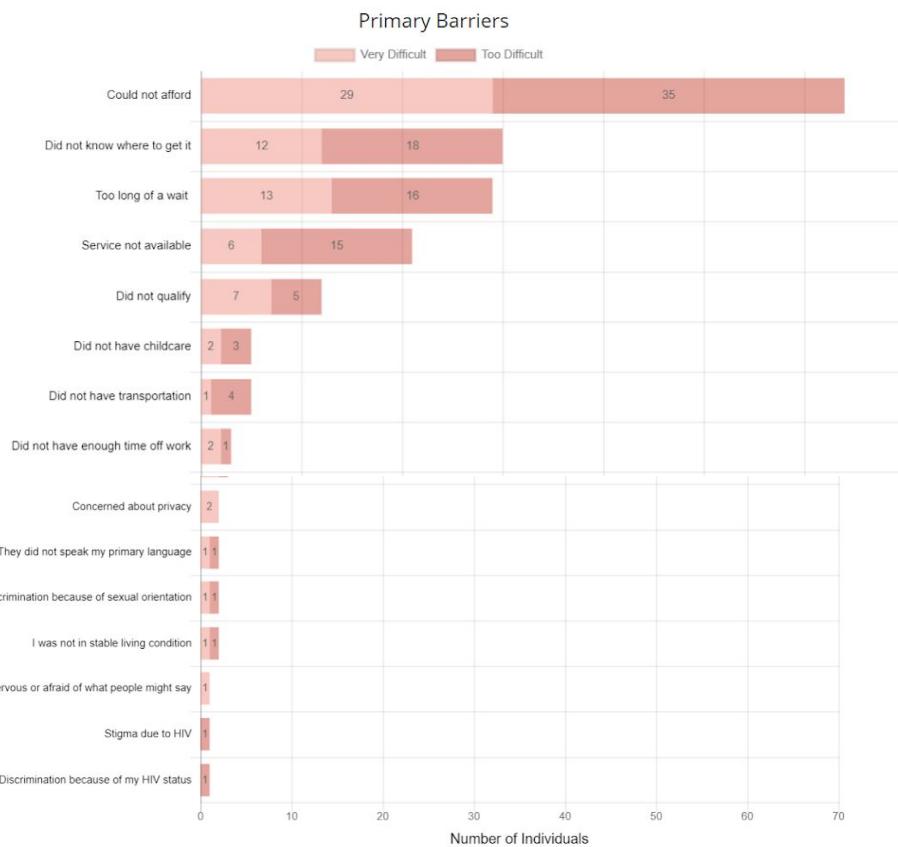
## Accessing Food Assistance

Only 11% of the participants who needed help paying for food found it easy to access food assistance. 19% described it as possible with some work, and 10% found it very difficult or too difficult to access. Primary barriers were not qualifying for food assistance, the service wasn't available, or too long of a wait.



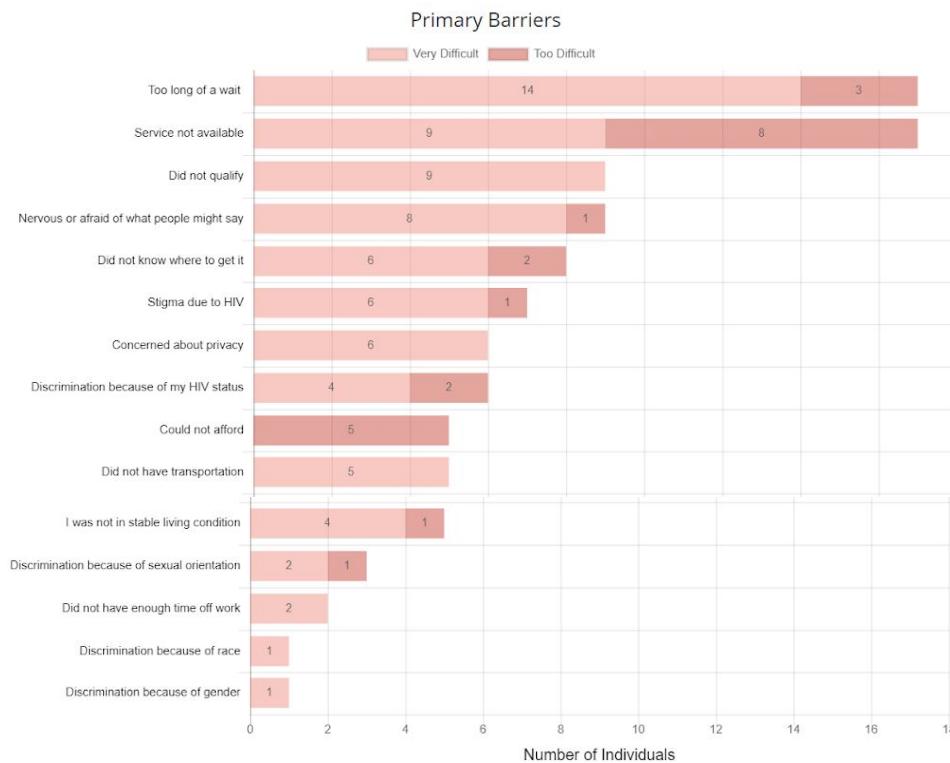
## Accessing Alternative Therapy

Alternative therapy (including acupuncture, chiropractic care, massage therapy, etc.) was the 6th most sought out service in the needs assessment, and the most difficult to access. 20% of the total sample described it as very difficult or too difficult to access. The most common barrier was not being able to afford it.



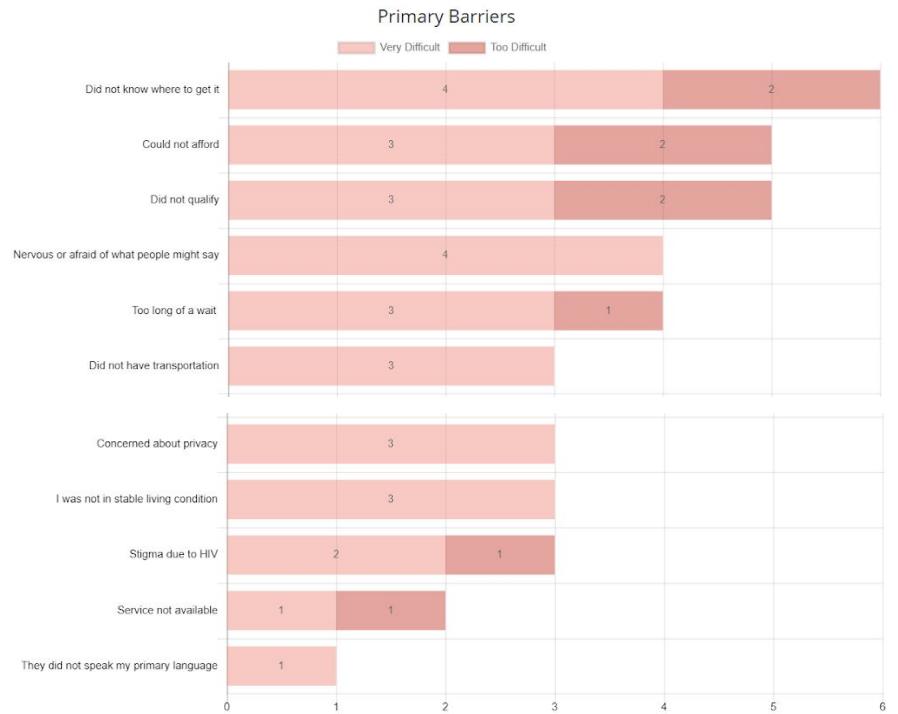
## Accessing Housing Assistance

35% of the participants needed housing services in the past year. Of the total sample, the majority of those (75%) found it easy or possible with some work to access housing services. Among those who found it difficult, wait time and lack of housing services were primary barriers.



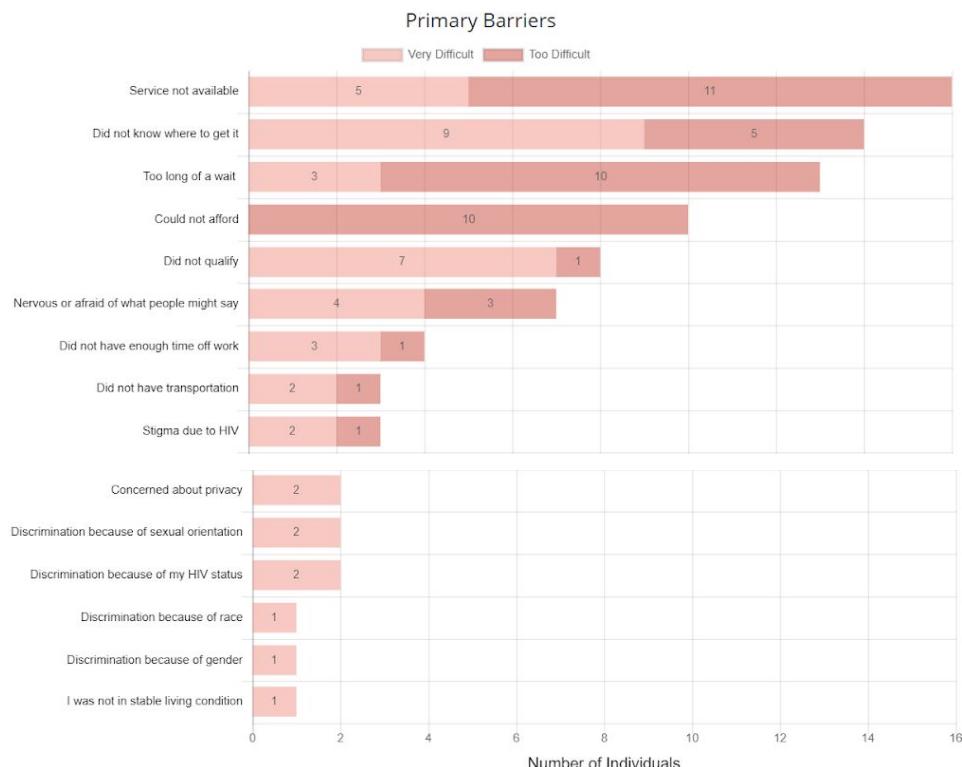
## Accessing Insurance

30% of the sample needed help enrolling in insurance coverage. 91% of those who needed help enrolling in insurance found it easy or possible with some work. Primary barriers for those who found it difficult are below.



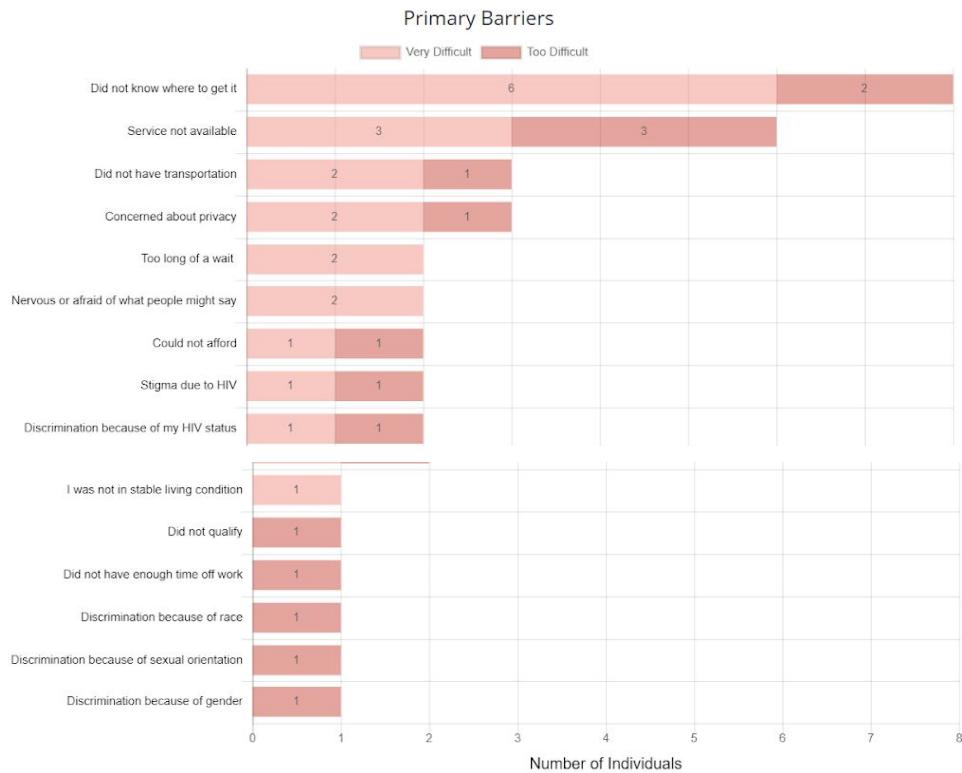
## Accessing Bill Assistance

8% of the total sample needed help paying their bills, and found it very difficult or too difficult to access. Primary barriers were that the service was not available, the participants didn't know where to get it, or long wait times.



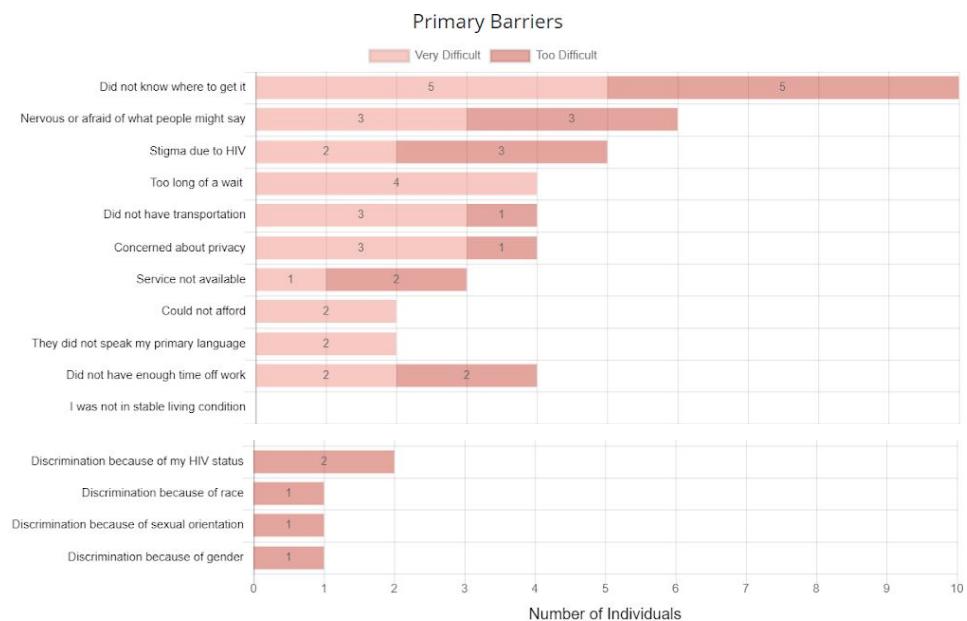
## Accessing Social Support

23% of the sample sought out social support services in the past year. The majority of those who sought out services were able to access them. Primary barriers for those who found it difficult were knowing where to get social support services or that they were not available.



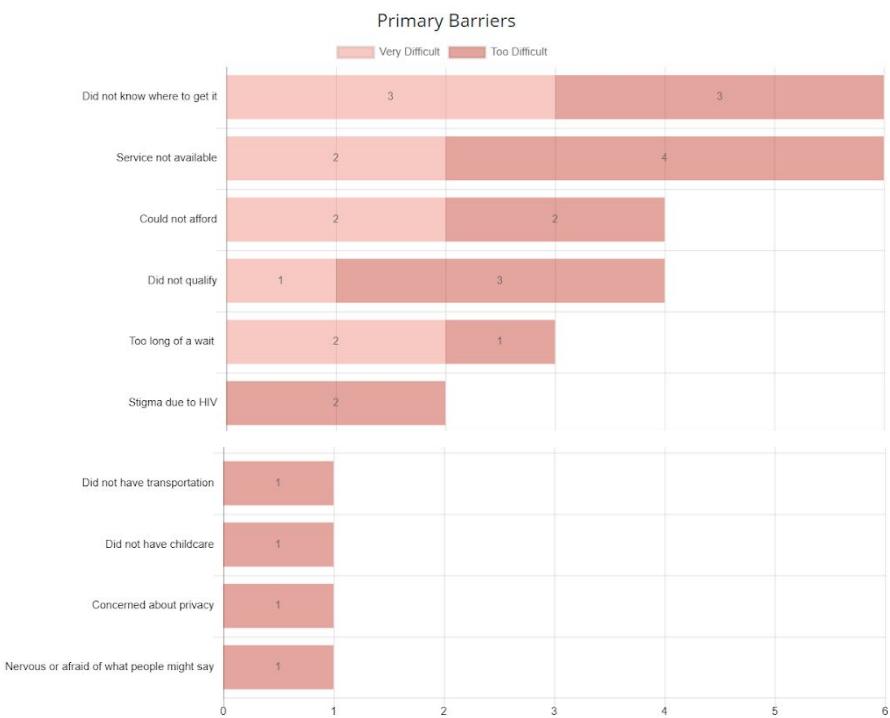
## Accessing Counseling

22% of the total sample sought out counseling services. Most the participants did not have difficulty finding services. Of those that did have difficulty, not knowing where to get services was the primary barrier.



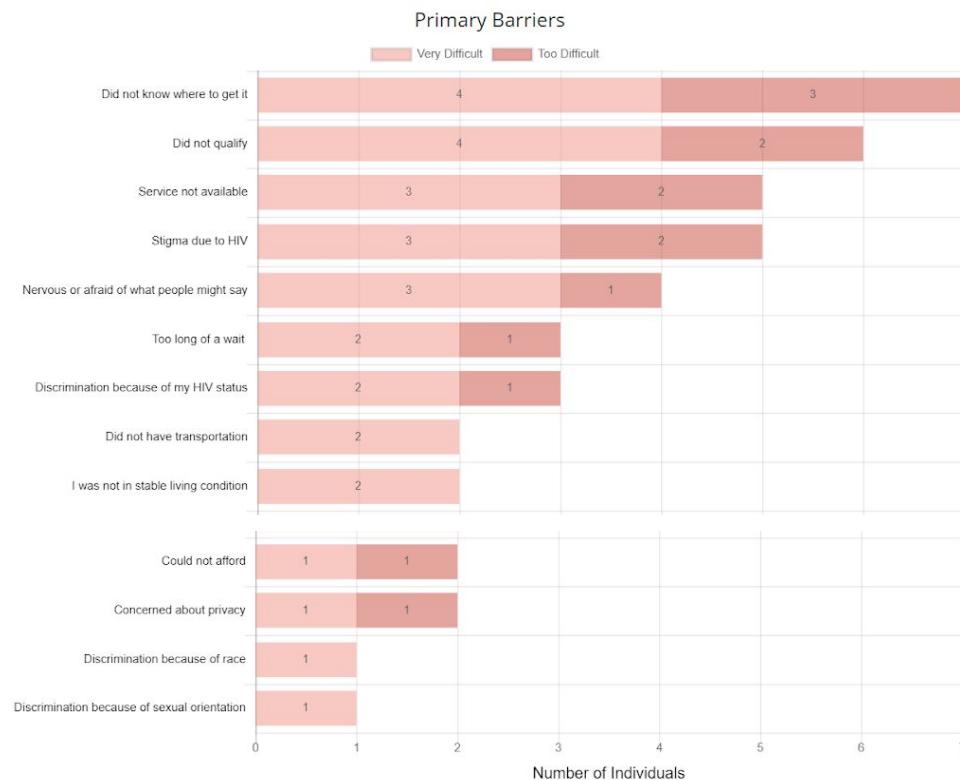
## Accessing Assistance for Daily Self Care

16% of the participants required assistance with daily self care. 81% of them found it easy or possible with some work to find the assistance they needed. Among those who had difficulty, not knowing where to get it was the primary barrier.



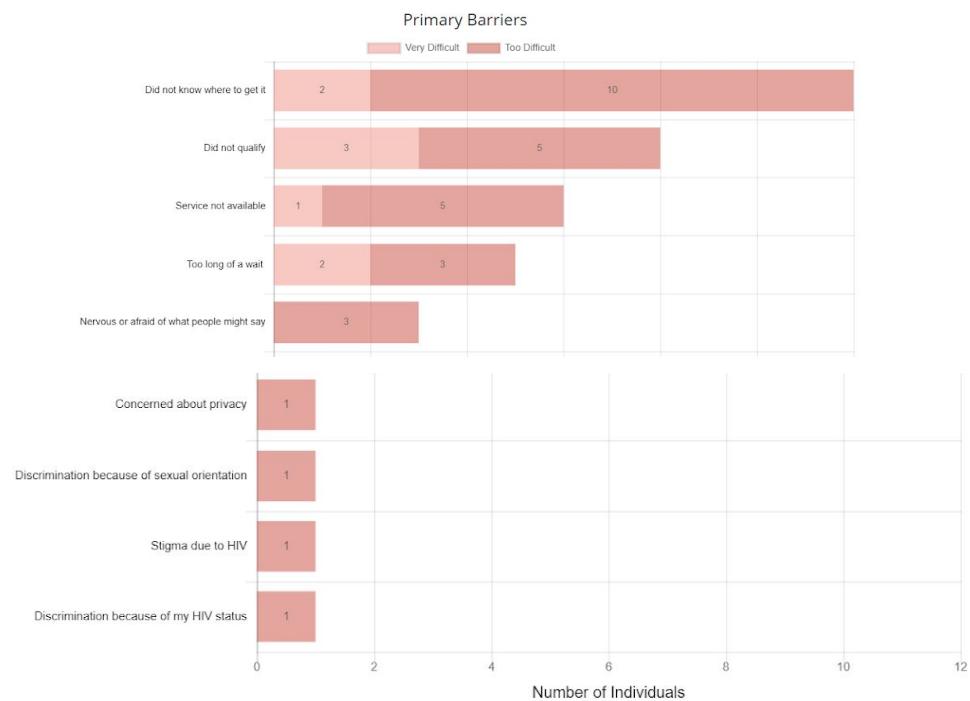
## Accessing Employment

Only 8% of the sample sought out assistance with employment, and the majority found it easy or possible with some work to find employment assistance.



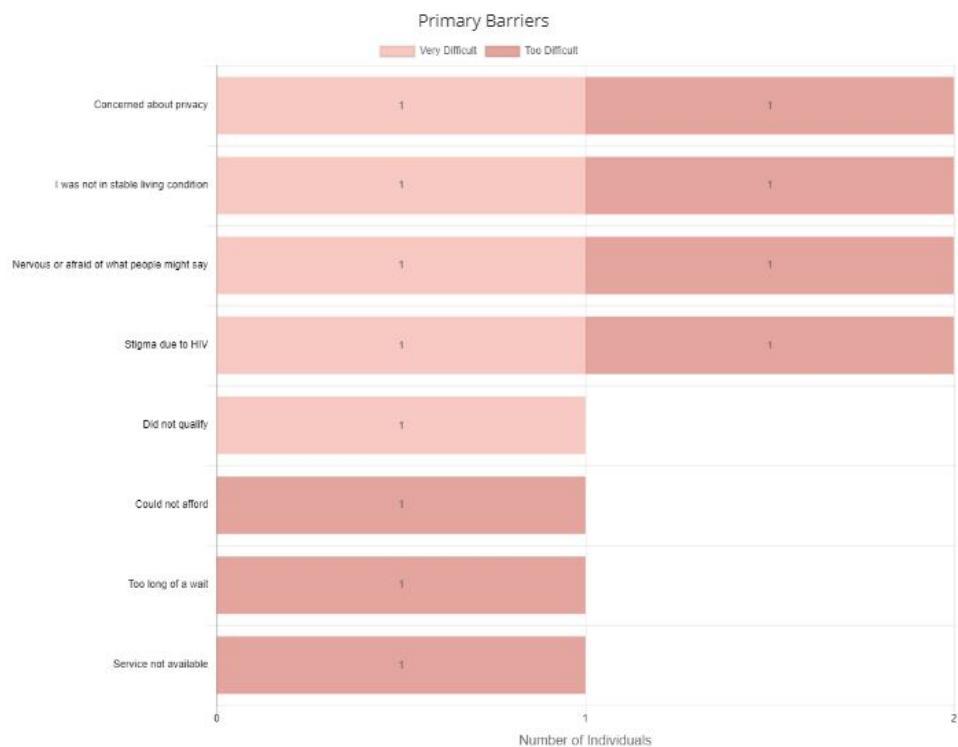
## Accessing Education

Only 8% of the total sample sought out education assistance. However, among those who attempted to access education services, 54% described it as very difficult or too difficult to access. The most significant barriers were not knowing where to get it and not qualifying for assistance.



## Accessing Alcohol & Drug Abuse Services

Despite the fact that 33% of the sample reported using marijuana and 10% reported using methamphetamine, only 6% of the participants attempted to access alcohol and drug abuse services. The majority found it easy to access the services they needed.



## Get Involved

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It is possible to live a long and healthy life despite a diagnosis of HIV, but it takes a community effort to reduce stigma and improve essential services. If you would like to get involved in supporting services for people with HIV/AIDS in Hawai'i by volunteering or providing donations, or if you interested in prevention services, such as PrEP, please contact the following organizations.



Hawai'i Health Harm Reduction Center  
(Oahu)



Malama Pono  
(Kauai)



Hawai'i Island HIV/AIDS Foundation  
(Hawai'i Island)



Maui AIDS Foundation  
(Maui)