As we head into the Pacific Century, it is a good time to pause and evaluate the health of those who populate the Pacific. This article looks at the health of Native Hawaiians as compared to the rest of the nation, using five of the Surgeon General’s Leading Health Indicators for 2010, and one of the nutrition goals. Nutrition is not considered a leading indicator.

Unless otherwise noted, Native Hawaiian data for this article come from the 1998 State of Hawai‘i Behavioral Risk Factor Survey (BRFS). Local data are not used in the Healthy People 2010 indicators, and therefore there are few baseline measures for Native Hawaiians (NH) or Other Pacific Islanders (PI). Federal agencies have only recently been required to collect separate statistics on Native Hawaiians and Pacific Islanders. All other data, including data on Asian Americans and Pacific Islanders (AAPI), are from Healthy People 2010.

Access to Health Care

Access to health care is a major issue across America, as fewer employers offer health care coverage to their employees (Commonwealth Fund). As the only state with an ERISA waiver, which requires employers to offer health benefits to employees working 20 hours a week or more, Hawai‘i tends to have lower numbers of uninsured than other states. However, certain pockets of the population, Native Hawaiians among them, tend to be both unemployed and uninsured.

**HP 2010 Access Objective 1.1.: Increase the proportion of persons with health insurance.**

**Target:** 100 Percent.

**Baseline:** 86 percent 1997 (age adjusted to the year 2000 standard population).

**Native Hawaiians and other Pacific Islanders:** 83 percent (NHIS, CDC, NCHS, Nov. 1999).

**Native Hawaiians:** 90.4 percent (BRFS 1998).

As the graph shows, Native Hawaiians in Hawai‘i have higher numbers of insured than the nation. Compared to other ethnic groups in the state, Native Hawaiians have the lowest percentage of people insured. People of Japanese ancestry have the highest rates of insurance coverage (98.5 percent insured), while 93 percent of the Caucasian population is insured.

In addition, access can be difficult for people in rural areas, single mothers with children, the elderly, and people without transportation. The 1985 E Ola Mau study showed Native Hawaiians had disproportionately poor health compared to other ethnic groups in the state. In 1988, the U.S. enacted the Native Hawaiian Health Care Act, which created systems to ensure increased access to care for Native Hawaiians.

**HP2010 Access Objective 1.6.: Reduce the proportion of families that experience difficulties or delays in obtaining health care or do not receive needed care for one or more family members.**

**Target:** 7 percent.

**Baseline:** 12 percent of families experienced difficulties or delays in obtaining health care or did not receive needed health care in 1996.

When asked if cost was a barrier to health care in the past year, 11 percent of Native Hawaiians in the 1998 BRFS study cited cost as a barrier. Other barriers were child care and transportation.
Comparing Native Hawaiians’ Health to the Nation

By Pua'ala'okalani Aiu, PhD
Closing the Gap, Pacific Islander Health • June/July 2000

Overweight and Obesity

Almost half of all Americans and 30 percent of children are overweight. Native Hawaiians tend to be the most overweight among all ethnic populations in Hawai‘i. Almost 50 percent of Native Hawaiians are obese.

Overweight and Obesity Objective 19.2.: Reduce the proportion of adults who are obese.
Target: 15 percent.
Baseline: 23 percent of adults aged 20 years and older were identified as obese, with a Body Mass Index (BMI) of 30 or more in 1988–94 (age adjusted to the year 2000 standard population).

Overweight: BMI greater than 27.3 for females, and greater than 27.8 for males. The chart also shows the percentage of Native Hawaiians who are over 120 percent of the median weight for state residents.

The data in this chart are not really comparable, although they can give one some idea of a comparison between groups. In Hawai‘i, which is known as the health state, Native Hawaiians have the highest percentage of obese people (49 percent).

Nutrition

Although nutrition is not a leading indicator, obesity and nutrition are tied together, and have a great impact on the lives of Native Hawaiians. The lack of proper nutrition contributes to obesity as well as other chronic diseases such as diabetes and cancer, both of which are high in Native Hawaiians (Tsark, 1995).

HP 2010 Nutrition Objective 19.5.: Increase the proportion of persons aged 2 years and older who consume at least two daily servings of fruit.
Target: 75 percent.
Baseline: 28 percent of persons aged 2 years and older consumed at least two daily servings of fruit in 1994-96 (age adjusted to year 2000 standard population).

Native Hawaiians: 43 percent answered “daily or more” to the question, “Not counting juice, how often do you eat fruit?”

The two categories are not really comparable because the HP2010 asks about two servings daily and the BRFSS asks if fruit is consumed at least once a day.

Although Native Hawaiians seem to consume more fruits than the average American, both groups are well below the target. Native Hawaiians eat less fruit than any other ethnic group in Hawai‘i.

Physical Activity

Along with good nutrition, physical activity leads to better health. Americans, on the average, do not get enough exercise. In Hawai‘i, Native Hawaiians have always been less sedentary than other ethnic groups, while still being more obese.

HP2010 Physical Activity Objective 22.2.: Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day.
Target: 30 percent.
Baseline: 15 percent of adults aged 18 and older were active for at least 30 minutes 5 or more days per week in 1997 (age adjusted to the year 2000 standard population).

Native Hawaiians: 29 percent of adults aged 18 years and older engaged in regular physical activity for 30 minutes 5 or more days per week in 1998, regardless of intensity.

All ethnic groups in Hawai‘i report more physical activity than the national indicators. Several ethnic groups in Hawai‘i, including Native Hawaiians, exceed or are approaching the HP2010 goal of 30 percent of adults engaging in regular physical activity.
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Tobacco Use

HP2010 Tobacco Use Objective 27.1.: Reduce Tobacco use by Adults. Cigarette Smoking
Target: 12 percent.
Baseline: 24 percent (Age adjusted to 2000 population standard).
Native Hawaiians: 26 percent.

More Native Hawaiians are smokers than the national norm, and only Native Americans report a higher level of current smokers (HP2010). Native Hawaiians also smoke more than any other ethnic group in Hawai‘i.

Mental Health

HP 2010 Goal: Improve mental health services and ensure access to appropriate quality mental health services.

HP 2010 has 14 objectives for mental health, although none are closely comparable to the BRFS data from Hawaii reported below. HP 2010 notes that population group data, including Native Hawaiian and Pacific Islander data, were not collected, not analyzed, or statistically unreliable for most objectives. Only one objective even has a combined API baseline. The difficulty in quantifying poor mental health adds to the difficulty in measuring advances or declines in this area.

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