Ho‘oilina Pono A‘e
CREATING A JUST LEGACY FOR THE NEXT GENERATION
2017 HMSA COMMUNITY GRANT PROGRESS REPORT

Michael S. Spencer, PhD, Indigenous Wellness Institute (IWRI), University of Washington
Mary Frances Oneha, PhD, Waimānalo Health Center
Leina‘ala Bright, Waimānalo Health Center
Historical Background

Prior to 1778, Native Hawaiian people were documented as healthy, fit, and athletic people. Health, for the Hawaiian people, was holistic. Lā'au lapa'au was used as their only form of medicine. The value of lōkahi or balance or harmony is central to understanding health. It is achieved when physical, mental and spiritual parts of a person are in balance, including relations with others, family, gods, and the environment. Conversely, illness is caused by imbalance or ma'i. Traditional Native Hawaiian methods of healing often addresses all three realms in a holistic way. Similarly, the Hawaiian framework of Mauli Ola balances traditional concepts of the physical, emotional, mental, and spiritual health of our people.

The arrival of Christianity led to the abolishment of the kapu system, leading to overwhelming changes to the social structure and lifestyle of the Hawaiian people. Over time, communal lands was replaced by plantations, capitalist-based economies, and the western concept of land ownership. The illegal overthrow of the Hawaiian Kingdom, racism, discrimination, and colonization have impacted Native Hawaiians greatly as evidenced by the outlawing of their language and many cultural practices. Through cultural historical trauma, Hawaiians have experienced structural and social stressors, including barriers to education, unemployment, and houselessness, which are all determinants of health (OHA, 2019).

Native Hawaiians, particularly those living in rural communities and/or lower socioeconomic conditions, encounter many barriers to care. These barriers include: insurance status, ability to pay, homelessness, childcare, transportation, and school and work responsibilities. Due to these barriers, some Hawaiians have turned to traditional Hawaiian healing methods, but may be reluctant to share this with providers due to fear of judgment or discrimination (Mau, et al, 2003). Providers may exhibit skepticism due to lack of experience with traditional healing methods or an inherent bias to western medicine. These types of experiences can lead to alienation, noncompliance, or premature termination of services. The integration of traditional healing practices into primary care may serve as one way of increasing knowledge of these practices, opening a natural dialogue with patients, increasing patient choice and decision making, as well as monitor patients’ health status and adjust medications as necessary.

Integration of Traditional Healing Practices

The incorporation of traditional healing practices into primary care is an emerging field, but not unprecedented. For example, Broad and Allison (2002) found that patients attending clinics that provided western medical care as well as traditional Hawaiian healing methods showed that 76% of patients held the belief that improved health care can best be attained by using native and western treatments together and gave patients agency in choosing what medical treatment they want.
**HAWAII**

The integration of Native Hawaiian healing practices has been supported by a number of studies (Broad and Allison, 2012; Davis, 2010; Young and Braun, 2007). A benefit of integration is greater empowerment among patients regarding choice of medical treatment. Papa Ola Lokahi’s report, *E Ola Mau*, also recommends the integration of healing practice in clinics serving Native Hawaiians.

**TANZANIA, GHANA, NIGERIA, AND KENYA**

In a review of the integration of African traditional healing and western medicine in Tanzania, Ghana, Nigeria, and Kenya, examples and stories are presented to show that integration is desired and sought out by the community (Ahlberg, 2017). However, formal integration has been reduced through colonization, stripping away the spiritual components that are the essence of much of traditional medicine. The author argues that integration of traditional healing must be more readily available and affordable to individuals in its complete form (Ahlberg, 2017).

**JAPAN**

In a review of the Japanese medical system, traditional Japanese medicine is somewhat integrated into the larger health system. The fact that many western medical providers in Japan view one specific traditional method, *kampo*, as part of their practice and not as an alternative practice, is indicative of the benefits of integration and its power to transform medical practice (Payyappallimana & Serbulea, 2013).

**CANADA**

In Ontario, the Aboriginal Health and Wellness Strategy supports the integration of western and Aboriginal medicine in many ways including funding a number of Aboriginal health access centers (AHAC) which prioritize the provision of culturally sound health care for Aboriginal people. By working in an AHAC, the author concluded that while integration is not yet fully realized, it is needed, and it is beneficial. Among the benefits of integrated care are better continuity of care, more holistic health care, and increased agency within the community to make choices for their own health (Maar, 2004).
Studies by Young and Braun (2007) and Davis (2010) also recommends that professionals in these two healing disciplines collaborate for better health outcomes. *E Ola Mau: The Native Hawaiian Health Needs Study,* provides a compendium of task force recommendations, one of which is that traditional Hawaiian healing and western medicine be integrated in clinics that serve Native Hawaiians. Integration of Native healing practices into primary care also promotes cultural relevance and culturally appropriate care. Eastern medicine, e.g., Chinese herbal medicine, acupuncture, mindfulness, tai chi, as well as western complementary practices, e.g., homeopathy, massage, are increasingly becoming a part of mainstream regimens in maintaining health. A modest body of research exists on Native Hawaiian healing that recommends its integration with western medicine.

**The Study**

This study extends the global literature on the integration of traditional healing into primary care. Waimanalo Health Center (WHC) currently provides integrated Native Hawaiian healing practices in primary care as well as a wide range of culturally relevant services, including workshops, a healing garden, and physical activity (see Table 1). In particular, there is demonstrated high interest in the Waimanalo community with lā`au lapa`au, as the workshops average 25 individuals per class.

Working in partnership with a 9-member community advisory board (CAB) who are users and/or growers of lā`au lapa`au through a community participatory process, the purpose of this study is to identify the impact of integrated services on the patient experience, understand the process of integrating Indigenous and western healing, and enlighten us to the critical components of what is missing in western medical care for kānaka `ōiwi. This study design is based on in-depth, semi-structured interviews with the patients, native healer, and providers at WHC.

Through our participatory process, the CAB identified a theoretical model and the research questions for the study. The interviews are designed to confirm or disconfirm the theoretical model and inform future research that will help us to better understand the added value of Native healers in primary care.

The research team included the community advisory board. Leina`ala Bright, the WHC cultural practitioner, Dr. Mary Frances Oneha, the WHC Chief Executive Officer, and Dr. Michael Spencer from University of Washington Indigenous Wellness Research Institute. The researchers represent kānaka `ōiwi committed to recalling Indigenous ways and thinking to improve individual, family, and community health outcomes. The research proposal was approved through an expedited review to the Institutional Review Board (IRB) of the Association of Asian Pacific Community Health Organization (AAPCHO). Additionally, we present recommendations that might potentially influence the payment or funding models of similar community initiatives.
<table>
<thead>
<tr>
<th>TABLE 1. NATIVE HAWAIIAN HEALING SERVICES PROVIDED BY WHC</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Integrated Lomilomi and Lā‘au Lapa‘au</strong></td>
</tr>
<tr>
<td><strong>Workshops- Lomilomi and Lā‘au Lapa‘au</strong></td>
</tr>
<tr>
<td><strong>Māla Ho‘ōla</strong></td>
</tr>
<tr>
<td><strong>Hānai a Plant Program</strong></td>
</tr>
<tr>
<td><strong>Mālama ‘Āina Day</strong></td>
</tr>
<tr>
<td><strong>Hele A Ikaika I Ka ‘Ōlelo Hele A Ikaika I Ka Hula</strong></td>
</tr>
</tbody>
</table>
Theoretical Model of Integration of Services

The research team identified a theoretical model for understanding the patient experience as a result of integrated services. This model hypothesized that successful integration of services will result in acceptability of the integration of practices.

- Is the integration of traditional Hawaiian services acceptable to patients, providers, staff, and the community?
- Do patients welcome both western and Indigenous practices in their care and see an added value?
- Do providers feel comfortable working with indigenous healers and see their added value to their practice?
- Does the community find integration to be an acceptable model of practice and an added value for the community and for Native Hawaiians throughout the state of Hawaii?

If acceptability is achieved, this will result in a deeper sense of cultural connectedness due to the integration of practices.

The final stage of the model hypothesizes that if acceptability and cultural connectedness occurs, there will be an increase in patient activation or empowerment among patients and providers. These concepts are similar to the terms compliance and adherence, which are often used in medical research, but do not represent a strengths-based and active approach by patients.

- Do patients abide by their medical regimens at an increased rate?
- Do providers promote integrative and team-based approaches to care that include indigenous healing?
- Does the clinic promote the sustainability of these integrative services?
- Do large systems, e.g., healthcare systems, insurers, government, support the integration of Indigenous services?
- Is there a diffusion of Indigenous healing practices that is used within the community?

![Figure 1. Model of Integration](image-url)
Methods

While this is a small exploratory study to examine the impact of integrating Native Hawaiian healing practices on the patient experience, it is one of the only studies to do so. During the early planning stages of the study, the CAB met once a month to develop our theoretical model and research questions. Once data collection commenced, meetings occurred quarterly.

In total 28 participants were recruited for the study. 10 patients, 9 providers and staff, 6 community residents not receiving services at WHC, and 3 kūpuna or elders. All interviews were audiotaped and transcribed and lasted for about one hour. Kūpuna interviews were videotaped, but not included in this study for confidentiality purposes.

Data analysis of the interviews were conducted by a team of undergraduate and graduate students at the University of Washington and the Principal Investigators. All interviews were double-coded for reliability and validity and all inconsistencies were discussed and rectified. Data were coded inductively using open coding and deductively using content analysis based on the theoretical model. For deductive coding, we first defined each theme from the model from the existing literature and adjusted definitions throughout the analysis process.

Our sampling was completed when our analysis reached saturation with regard to these themes.

Hypotheses:

1. Patients, providers, clinic staff, and the larger community will be more familiar with and gain a greater acceptance of Native Hawaiian healing practices.
2. Native Hawaiian patients, providers, clinic staff, and the larger community will gain a deeper cultural connection through Native Hawaiian healing practices.
3. Patients will experience greater activation and empowerment over their health care needs, including regular clinic attendance, greater adherence to treatment regimens, improved self-efficacy in management of acute and chronic illness, and patient satisfaction.
4. Further, we hypothesize that through this model of integration, we will ultimately observe positive changes in patient health outcomes.

Although changes in health outcomes were not included in this study, we hope to include them in future studies.

Results

Our findings can be summarized in five broad themes:

1. Native Hawaiian healing provides an alternative to western medicine.
2. Experience with Native Hawaiian healing practices recalls ancestral knowledge.
3. Native Hawaiian healing focuses on the whole and addresses spirit.
4. Native Hawaiian healing practitioners generate increased disclosure and engagement leading to behavior change.
5. The integration of Native Hawaiian healing is central to a decolonizing process for the Center, its patients, and for healthcare in general.
These general themes were prevalent throughout the interviews. Each of these themes are embodied in our theoretical model, and our findings are presented below.

Integration

Integration of Native Hawaiian healing practices continues the tradition of education and the passing of 'ike kupuna. Participants noted that integration restores Native Hawaiian knowledge and cultural practices to the community. By offering classes to the community, patients are able to learn Native Hawaiian healing practices to use and share. For example, one patient stated:

“I mean we have the western medicine and everything, but if you can go into the natural, I think that’s a lot better, but still you will need the guidance for it because you cannot just take what you see people saying oh this herb is good, this lāʻau is good, but to administer it, there’s no way of really knowing for sure until you get the education from it.”

Having a Native Hawaiian healing practitioner available gives patients access to knowledge of healing practices which also gives patients more choices concerning their care. In the case of Western medicine where health and wellness are defined as physical, barriers to care can include fear of discrimination and judgement. Integration promotes different views of health which benefits patients and providers. Patients report having more options, control, and choice over their own health. Providers also expressed enjoyment in learning alternative forms of care and building a more open and trusting relationship with patients.

Participants also expressed how integration of Native Hawaiian healing practices fills gaps in care that exist when culturally relevant care is not available. In Native Hawaiian culture, health consists of the body, mind, and spirit. Western medicine focuses on mind and body only. This gap in care due to differences in culture results in patients feeling neglected or distrustful of providers. Patients express satisfaction and trust in the clinic when integration brings culture specific care to patients, as one patient responded:

“I get more than that when I come here, even with Aunty Lei and Christina Lee. It’s just not oh just take 2, you know, ’cuz they really, show that they care for me.”

The model of integration of Native Hawaiian healing practices into primary care educates patients, provides safety, gives them alternatives and choice, and fills gaps in care that exist due to the difference in cultural definitions of health. Through integration, there is greater acceptance of Native Hawaiian healing practices among patients and providers.

Acceptance

According to our model, integration leads to the second theme: acceptance. The theme of acceptance begins to examine what kind of effect integration has on people in the community. Through the success of integration, patients begin to embrace Native Hawaiian healing methods into their lives. Patients are open to and even interested in learning more about
Native Hawaiian healing and see high value in incorporating Native Hawaiian healing methods to their health routines and regimens. They value these methods as they are natural, cost effective, and present fewer side effects compared to western medicine. A step beyond successful integration of services, the theme of acceptance demonstrates that the benefits of integration are acknowledged by patients which is exemplified by their willingness to utilize, receive, and learn more about Native Hawaiian healing methods. Acceptance was widely expressed by patients and providers alike during interviews. For example, one provider noted:

“...And now with the Hawaiian culture being integrated into it, with the healing and all that kind stuff, it’s gonna only get better you know because there is a want for it. People want the traditional, you know, they tired of the iPads and all that kind stuff. They want to go back to old school is what I see, you know?...”

Interviews with clinic patients and providers revealed not only that acceptance of Native Hawaiian healing practices increased through integration, but that acceptance of Western medicine may have also increased. Due to a history of colonization, unethical human subjects research, and some of the highest rates of chronic disease in the U.S., among many Native Hawaiians, a lack of trust in western medical practitioners understandably exists. Analysis of interview responses revealed that acceptance of and trust in western medicine may increase when western medical providers work in collaboration with already trusted, culturally familiar, Native Hawaiian healers. One provider described observing this in patients:

“...Things like folks who not necessarily feel comfortable in say if we were just providing medicine or providing psychology, they feel really comfortable in like family members talking and they see Leina’ala and they’re like oh hi, how are you and they just talk about almost immediately at ease, and are just more open or willing to just converse. ...”

This description demonstrates how the presence of a Native Hawaiian healer helps increase patient comfort in medical settings. Thus, while this theme was initially predicted to be unidirectional towards increased acceptance of Native Hawaiian healing methods, the theme of acceptance may also increased trust and belief in methods of western healing.

Cultural Connectedness

The integration and acceptance of Native Hawaiian healing practices into primary care creates an avenue for a deeper connection to Hawaiian history, Hawaiian practices, and Hawaiian values as well as brings awareness to the culture to culture interaction that has influenced the rocky relationship between Western medicine and Indigenous people. Integrating Native Hawaiian healing practices into primary care can improve the patient experience and promote health by encouraging cultural connectedness. We identified four sub-categories of cultural connectedness that convey the importance of culture in this community.
One aspect of cultural connectedness mentioned throughout the patient interviews was reconnection or recollection. Patients ranged in their stated connection to their Hawaiian culture and Hawaiian family. The integration of Native Hawaiian healing brought past memories to the forefront. Patients experienced nostalgia, but also expressed pride in their family and their ancestral knowledge. This pride was apparent whether the patient was remembering or reconnecting.

The second aspect of cultural connectedness referenced throughout the patient interviews was the importance and value of revitalization of Native Hawaiian practices. These healing practices are considered sacred wisdom and have traditionally been passed down through the generations. Having Native Hawaiian practices integrated into a primary care setting legitimizes thousands of years of knowledge.

The third aspect of cultural connectedness highlighted in the patient interviews was the respect for cultural values. Both patients and providers across the interviews shared about the missing spiritual aspect of health that Western medicine does not address. Patients value Native Hawaiian healing for its holistic approach to health. This and the values of self-sufficiency and sharing with the community were evident in interviews with patients. One patient remarked that,

"In the process of teaching us, she also says when I teach you about the plants, and I give you a plant to take home, and you go ahead and you nurture that plant and there’s other keiki along the way, I want you to share that plant with somebody else."

The final aspect of cultural connectedness identified in the interviews was the emphasis put on the culture to culture interaction between Western medicine and Native Hawaiian culture. The culture of Western medicine is highly individualistic, specialized, and hierarchical. Western doctors must undergo years of professional training and certifications in order to practice. One practitioner remarked,

"I think it’s also made me aware of the fact that so many, so many patients really do kind of their own lā‘au that they grew up with at home. You know, so they have some understanding and knowledge of that."

The realization that patients are caring for their health in the ways they know how changes the way practitioners interact with their patients. It breaks barriers to care that Native Hawaiian people have experienced.

Empowerment

An important aspect of integrating native healing practices for Native Hawaiian patients is that integration not only helps alleviate the physical, but strengthens the mind and spirit of the patients, giving them sufficient capacity to proactively make positive changes to improve their health. Instead of only relying on the Western medicine prescribed by the doctors, patients discussed their motivation to explore and try out Native Hawaiian healing, which they see as far more harmless and sustainable. In addition to acceptance and cultural connectedness, patients gained confidence in their own capacity to control their health status.
Patients express that the integration of Native Hawaiian healing in primary care elevates medical treatment and the healthcare experience. Besides making personal changes, many patients are inspired to take care of their family members through Hawaiian healing practices and share their knowledge and wisdom with the community. One patient who is also a parent reported making dramatic changes in their family diet and encourage their children to engage in different sports to prevent the kids from obesity and chronic illnesses that adversely affected many of the older generations. In the interviews, multiple health practitioners reflected the excitement to see the positive changes patients are making to enhance the health status of both themselves and their families.

“...I do see greater motivation. I see a lot of families when they get engaged, they are like, they’re really, sometimes they make dramatic changes, they come back and share with us oh they grew that, they made this poultice, they tried it, you know, and they are so excited when they tell me that...so when you see families making these changes, it is so rewarding for us, and I’m sure its empowering for the families.”

A significant advantage of integration is giving people the power and courage to proactively combat illness through lā’au lapa’au and a healthier lifestyle. Through the integration of traditional Hawaiian practices, patients appear to move from a more passive patient to one that appears more empowered. They report that they feel more empowered to maintain their health in a happier, cost-effective and more sustainable way.

Discussion

In this study, we hypothesized that through the integration of Native Hawaiian healing practices into primary care, there would be a significant and positive change in the patient, provider and community experience at WHC. We hypothesized that this would occur through greater acceptance, increased cultural connectedness, and patient activation and empowerment. In nearly unanimous response, we found strong evidence for our hypothesized theoretical model.

Acceptance and acceptability of health care is an important component of health care access. Acceptability includes how well patient and provider health beliefs align, the quality and extent of conversation between patient and provider, and how health care systems and services are provided and organized. These elements of acceptability are evident in the integrated care at Waimānalo Health Center according to patients, providers, and community members. Increasing the acceptability of healthcare is crucial in the journey towards health equity (Gilson, 2007).

Culture’s role in the acceptance of healthcare is corroborated by Native Hawaiian elders and their family members (Browne et al., 2014). A major theme of their study was the significance of the incorporation of cultural values and practices across health care services, as well as the importance of respecting elders, their wisdom, and Native Hawaiian culture in general. This research suggests that when cultural values have a prominent place in the health care of Native Hawaiians, health care is
more acceptable to patients. Our analysis suggests that the integration of native healing practices may increase acceptability and acceptance of health care in Native Hawaiian communities. Research suggests that feelings of cultural connectedness may be important agents of health improvement for indigenous populations. A metasynthesis of research studies working with various indigenous communities of North American from 1990-2016 found that connection between cultural connectedness and continuity and health was a theme across most of the studies (Auger, 2016). Studies found that cultural continuity was correlated with health outcomes such as a sense of holistic wellness, effective coping, feelings of belonging, trauma healing, and even lower rates of chronic disease and other illnesses (Auger, 2016).

Another study working with Aboriginal people in Canada looked at the use of traditional healing in an integrated clinic. By utilizing traditional healing, participants in the study felt a reclaiming of Aboriginal culture – a sense of cultural connectedness (Hunter et al., 2006). The idea that cultural connectedness among Native Hawaiians can merge from the use of Native Hawaiian healing is therefore supported by research with other indigenous populations (Hunter et al., 2006). Further, the research seems to support a reciprocal relationship between health and cultural connectedness suggesting that feeling connected to one’s indigenous culture supports positive health (Auger, 2016).

A significant body of healthcare research exists on the significance of empowerment. Empowerment, in the context of individuals and communities, refers to the realization of self-determination and control over one’s circumstances, and the subsequent actions that follow such realizations (Rappaport, 1987; Wallerstein 1992). A study on integrated western and Aboriginal healthcare in Canada found that as a result of utilizing traditional healing methods, patients seemed to have a greater sense of empowerment, much like patients in our study at Waimānalo Health Center implied (Hunter et al., 2006).

Patient activation is another well-established concept in healthcare. Activation occurs when patients become interested in their own involvement in and control of their health (Hibbard et al., 2008). Research suggests that patient activation can be positively influenced by both a compassionate demeanor as well as a partnering approach from providers, much as was indicated by many patients of WHC (Greene, Hibbard, Alvarez, & Overton, 2016). Positive effects of higher patient activation may include a decreased likelihood of smoking and obesity, as well as an increased probability of having normal blood sugar and blood cholesterol (Greene & Hibbard, 2012). Studies also suggests that working to increase patient activation may be as essential as increasing insurance coverage in the effort to diminish disparities in healthcare access (Cunningham, Hibbard, & Gibbons, 2011). Literature supports our findings that patient activation is influenced by the care provided and indicates that there are several potential positive implications of increased patient activation. Both empowerment and patient activation were observed among patients and providers at WHC in this exploratory study.
Limitations

There are several limitations that we would like to highlight:

1. The sample size is small and consists of self-reports of individual experiences. This study is exploratory in nature.

2. Findings are not generalizable beyond the Waimānalo Health Center. We acknowledge that this model of integration may not be appropriate or welcomed in all Native Hawaiian communities.

3. We understand that integrating native healing into primary care can impact the delivery of native healing services, e.g., change to ʻōlelo over time as a result of mixing with western institutions. Practice is limited by the constraints of the institutional structure (limited time to perform services and payment structures).

4. While potentially effective, we acknowledge that native healing practices will not cure all ills. Despite these limitations, we believe this study contributes greatly to the literature on the integration of Native Hawaiian healing into primary care and will be the catalyst for future studies.

Recommendations

Several recommendations have been developed as a result of this study.

- While effective in improving patient experience, WHC is limited in its ability to provide patients and the Waimānalo Community with access to plants for the purposes of lāʻau lapaʻau. We recommend that WHC partner with community entities to promote lāʻau lapaʻau and find ways to increase plant access.

- There is a need to examine the processes in which Native Hawaiian healing services are rendered to ensure that the traditions are kept intact to the degree it is possible. Healing is holistic and it takes time.

- We recommend that Native Hawaiian healing should be just as valued as western medicine. True integration would mean that practitioners should be valued members of healthcare teams.

- Weekly classes, while useful, could be taught also in a retreat format, e.g., over the course of a weekend, so that patients can go into greater depth with their learning.

- We need to address the trauma, both historical and contemporary, that patients are experiencing, just as much as we address clinical outcomes like blood pressure and A1c. Healing must be holistic and address mind, body, and spirit.

- Finally, and perhaps most importantly, third party payers need to be educated so that Native Hawaiian healing is valued and paid for through their plans.
FUNDING FOR THIS PROJECT WAS PROVIDED BY HMSA.

WE WISH TO SAY MAHALO TO THE MEMBERS OF THE COMMUNITY ADVISORY BOARD, PATIENTS, PROVIDERS, AND MEMBERS OF THE WAIMĀNALO COMMUNITY. WE ALSO WISH TO THANK THE UNIVERSITY OF WASHINGTON RESEARCH TEAM (DAISY WONG, MIKYLA SAKURAI, LIZA ELKIN, DANIELLE ROBINSON, ASHLEY MOROCCO-POWELL, ZIHAN ZHENG) WHO ASSISTED WITH THIS PROJECT.
References


