



SCR140 SD1

ASSERTING THAT RACISM IS A PUBLIC HEALTH CRISIS AND URGING THE STATE TO COMMIT TO RECOGNIZING AND ADDRESSING THE RESULTING INEQUITIES, AND STUDY AND REPORT TO THE LEGISLATURE ON ECONOMIC DISPARITIES THAT CONTRIBUTE TO THE DETRIMENTAL PUBLIC HEALTH EFFECTS OF RACISM

Ke Kōmike Hale o ka Ho‘okolokolo a me ke Kuleana Hawai‘i
House Committee on Judiciary & Hawaiian Affairs

Apelila 5, 2021

2:00 p.m.

Lumi 325

The Office of Hawaiian Affairs (OHA) **SUPPORTS** SCR140 SD1, which would declare racism as a public health crisis and urge the State to commit to several actions to assist in the dismantling of racism in Hawai‘i.

OHA has long advocated for meaningful policies, including targeted and systemic actions, necessary to help reduce the health inequities of Native Hawaiians and to better protect and uplift the health and vitality of the Lāhui. OHA’s most recent strategic priorities included Maui Ola (Health), which represents our continuing commitment to improve the quality of life of Native Hawaiians. In furtherance of this commitment, and in line with the Hawai‘i State Planning Act under Hawai‘i Revised Statutes § 226-20, OHA supports a “social determinants of health” approach to health policy, which takes a holistic and systemic view in addressing the health of Hawai‘i’s communities. Accordingly, OHA appreciates that **SCR140 SD1 may facilitate an examination of the racial inequities and disparities within those social determinants of health affecting Native Hawaiians and other health-vulnerable communities, including through the critically needed improvement of state data governance practices.**

As the COVID-19 pandemic has highlighted, timely, consistent, and appropriately disaggregated data for Native Hawaiians and Pacific Islanders is essential to best inform our programmatic interventions, whether it be for COVID-19 or general public health planning, as well as data driven policymaking. OHA’s Data Governance Resolution, HCR3/SCR5, streamlines the acknowledged need for a coordinated approach for not only public health data, but also data related to various social determinants of health. OHA accordingly emphasizes that improved data governance and disaggregated Native Hawaiian and Pacific Islander data is part of what is needed to reconcile the impact of racism in Hawai‘i and ensure equitable policymaking as this resolution proposes.

As a final note, OHA appreciates this resolution’s call to dismantle structural and systemic racism in Hawai‘i, and particularly appreciates its language calling for diversity,

inclusion, and engaging communities as partners that are most impacted by systemic racism. OHA has long advocated for its beneficiaries by requesting inclusion and representation for Native Hawaiians and other communities on various boards, commissions, task forces, and committees that may be able to address the social determinants of health arising from, and contributing to, racial inequities in our society.

Accordingly, OHA urges the Committee to **PASS** SCR140 SD1. Mahalo for the opportunity to testify.



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Glen Kaneshige

President
Michael Lui, MD

Board Members
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For more information on the AHA’s educational or research programs, visit www.heart.org or contact your nearest AHA office.

**American Heart Association testimony in strong SUPPORT of SCR140, SD1
“Asserting That Racism Is A Public Health Crisis and Urging The State To
Commit TO Recognizing And Addressing The Resulting Inequities, and Study
and Report To The Legislature On Economic Disparities That Contribute To
The Detrimental
Public Health Effects Of Racism”**

The American Heart Association strongly supports SCR140, SD1.

Structural racism is a major cause of poor health and premature death from heart disease and stroke, according to an American Heart Association Presidential Advisory, “Call to Action: Structural Racism as a Fundamental Driver of Health Disparities,” published in the Association’s journal *Circulation* in November 2020 ([Call to Action: Structural Racism as a Fundamental Driver of Health Disparities: A Presidential Advisory From the American Heart Association \(ahajournals.org\)](https://www.ahajournals.org)). The advisory reviews the historical context, current state and potential solutions to address structural racism in the U.S., and outlines steps the Association is taking to address and mitigate the root causes of health care disparities.

The Association is focusing more aggressively on overcoming societal barriers created by structural racism because they contribute significantly to the disproportionate burden of cardiovascular risk factors (including high blood pressure, obesity and Type 2 diabetes) in Black, Asian, Native Hawaiian/Pacific Islander, American Indian/Alaska Native, and Hispanic/Latino people compared with white people in the U.S.

While overall death rates from heart disease and stroke declined over the past two decades until a recent plateau, these gains were not equitably shared among people who are from the Black, Asian, American Indian/Alaska Native or Hispanic/Latino, Native Hawaiian/Pacific Islander communities.

The new Presidential Advisory highlights three key points:

- Structural racism is a current and pervasive problem, influenced by history and not merely an issue of the past.
- Structural racism is real and produces adverse effects, whether it is blatant to others or perceived only or primarily by those impacted.

- The task of dismantling the impact of structural racism on economic, social and health inequities is a shared responsibility that must belong to all of society.

“Structural racism, by definition, is not a personal action or behavior or belief, it’s not something that a few people or institutions choose to practice,” said Keith Churchwell, M.D., FAHA, chair of the Advisory writing committee and president of Yale New Haven Hospital in New Haven, Conn. “Structural racism is an embedded part of legal, business and social constructs and a feature of the social, economic and political systems in which we all exist. Although structural racism has existed for centuries, the COVID-19 pandemic exposed and exacerbated the existing disparities in health disparities, as evidenced by the way the virus is disproportionately more prevalent in people from Black, Asian, American Indian/Alaska Native, Pacific Islander, or Hispanic/Latino communities.”

The Association also announced new strategic business goals, with an increased focus on health equity. By 2024, the American Heart Association will champion health equity by advancing cardiovascular health for all, including identifying and removing barriers to healthcare access and quality. Specifically, the Association has committed to:

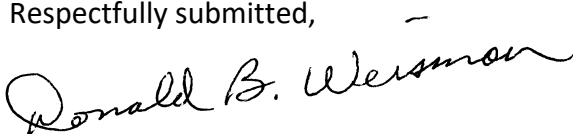
- Drive advances in research and discovery,
- Raise awareness, empower people and engage communities to improve their cardiovascular and brain health,
- Advocate relentlessly to improve healthcare quality and ensure access to healthcare for all, and
- Innovate new solutions to achieve equitable health for all.

In addition to working with allies to advocate for system change, the American Heart Association is examining its own organizational practices and processes to ensure they embrace antiracism within the Association and externally to better account for its interactions with volunteers, members, supporters and other organizations to end all forms of racism.

The Association stands ready to work with the Hawaii State Legislature and others in our community to address and make changes to the health inequities driven by structural racism.

We urge you to support SCR140, SD1.

Respectfully submitted,



Donald B. Weisman
Government Relations/Communications Director

Hawaii
*Holding Power Accountable*Statement Before The
HOUSE COMMITTEE ON JUDICIARY & HAWAIIAN AFFAIRS

Monday, April 5, 2021

2:00 PM

Via Video Conference, Conference Room 325

in consideration of

SCR 140, SD1**ASSERTING THAT RACISM IS A PUBLIC HEALTH CRISIS AND URGING THE STATE TO COMMIT TO RECOGNIZING AND ADDRESSING THE RESULTING INEQUITIES, AND STUDY AND REPORT TO THE LEGISLATURE ON ECONOMIC DISPARITIES THAT CONTRIBUTE TO THE DETRIMENTAL PUBLIC HEALTH EFFECTS OF RACISM.**

Chair NAKASHIMA, Vice Chair MATAYOSHI, and Members of the House Judiciary & Hawaiian Affairs Committee

Common Cause Hawaii provides written comments regarding SCR 140, SD1, asserting that racism is a public health crisis and urging the state to commit to recognizing and addressing the resulting inequities.

Common Cause Hawaii is a nonprofit, nonpartisan, grassroots organization dedicated to upholding the core values of American democracy. We work to create open, honest, and accountable government that serves the public interest and promotes equal rights, opportunity, and representation for all.

Being silent in the face of wrongdoing is not an option; it is tacit cooperation and being complicit. Common Cause agrees that the State should, as provided in SCR 140, SD1, at page 2, lines 41-42, and page 3, lines 1-14, commit to:

- (1) Eliminating racial disparities in the criminal justice system;
- (2) Prioritizing racial equity in decision making processes;
- (3) Acknowledging that communities of color have borne the greatest burdens of inequitable social, environmental, technological, economic, and criminal justice policies, practices, and investments;
- (4) Understanding that the legacy of inequitable policies has caused deep disparities, harm, and mistrust; and
- (5) Recognizing that racial equity is realized only when race can no longer be used to predict life outcomes. . . .

Let us not forget the words of Pastor Martin Neimöller:

First they came for the socialists, and I did not speak out—because I was not a socialist.
Then they came for the trade unionists, and I did not speak out— because I was not a trade unionist.
Then they came for the Jews, and I did not speak out—because I was not a Jew.
Then they came for me—and there was no one left to speak for me.

We all need to reject and call out racism, xenophobia, intolerance, discrimination, or hate crimes against all Black, Indigenous and People of Color (BIPOC), including women.

Common Cause Hawaii supports SCR 140, SD1, urging the State, at page 2, lines 35-41, and page 3, lines 1-9, to (1) commit to engage as partners with communities and residents most impacted by systemic racism and to identify and implement solutions, (2) prioritize diversity in board membership, centering voices of people of color when addressing issues of racism, and holding one another accountable to address implicit biases of all kinds, (3) urge it, its departments, and agencies, and the counties to prioritize diversity in board membership, centering voices of people of color when addressing issues of racism, and holding on another accountable to address implicit biases of all kinds, and (4) promote equity through all policies approved by the Legislature and enhance educational efforts throughout the state system aimed at understanding, addressing, and dismantling racism and how it affects the delivery of human and social services, economic development, and public safety.

Common Cause Hawaii further supports SCR 140, SD1, requesting the Director of Health, in conjunction with the Directors of Human Services and community organizations, at page 3, lines 40-42, and page 4, lines 2-15, to (1) identify the twenty communities with the largest number of Asset Limited, Income Constrained, Employed (ALICE) households in the State, as listed in the AUW ALICE Data Sheet, 2020, (2) provide a summary of all activities conducted by their departments to provide health care services in these communities, and (3) develop a plan of action to reduce the number of ALICE households in the State.

Thank you for the opportunity to provide comments on SCR 140, SD1. If you have questions of me, please contact me at sma@commoncause.org.

Very respectfully yours,

Sandy Ma
Executive Director, Common Cause Hawaii

House Committee on Judiciary
Monday, April 5, 2021, 2:00pm
Room 325/Via Videoconference

Testimony in Support of SCR 140 SD1

Chair Nakashima, Vice Chair Matayoshi, and members of the committee,

Thank you for the opportunity to testify in **support of SCR 140 SD1**, asserting that racism is a public health crisis and urging the State to commit to recognizing and addressing the resulting inequities, and study and report to the legislature on economic disparities that contribute to the detrimental public health effects of racism.

YWCA O'ahu is dedicated to eliminating racism, empowering women and promoting peace, justice, freedom, and dignity for all. In 1900 we opened our doors to provide opportunity to women for growth, leadership and power to change. Today, over a century later, the YWCA O'ahu is the largest and oldest women's membership organization in the State of Hawaii. We are a charter member of the YWCA USA and one of more than 200 community associations nationwide that share the mission of empowering women and eliminating racism.

As a new core of women are preparing for our future, we are committed to reinventing the YWCA for the 21st century so it remains relevant to all women as their lives and needs change. The YWCA offers a unique place – a place where women and girls can build relationships for life and have opportunities to move forward in life and give back to their community. Our three centers at the YWCA, Fernhurst, Kokokahi and Laniākea, provide valuable programs and services that develop women and girls' social, economic, leadership and community skills.

We are writing in strong support of this critical resolution. While Hawaii is different in many ways from the mainland, we are not immune to racism and the ways in which racism has impacted generations of our citizens. Racism has been long been looked at as a risk factor rather than what it is, the root cause of racial disparities that face our state and nation. As stated in the resolution, over the past year Covid-19 has “revealed, reaffirmed, and cast into sharp relief the exigent nature of these pre-existing inequities caused by systemic racism”. While not new, COVID-19 has shone a new light on these existing issues and has presented us with yet another opportunity to balance the scales.

Racism is complex, multi-layered and often not talked about or challenged for these reasons. There is no easy answer or silver bullet to address racism and for that reason we support the

eliminating racism
empowering women

ywca

O'ahu

Fernhurst YWCA

1566 Wilder Avenue
Honolulu, Hawai'i 96822
808.941.2231

Kokokahi YWCA

45-035 Kāne'ohe Bay Drive
Kāne'ohe, Hawai'i 96744
808.247.2124

Laniākea YWCA

1040 Richards Street
Honolulu, Hawai'i 96813
808.538.7061

ywcaoahu.org

many and varied ways this resolution calls on the State to begin tackling this pervasive issue in deliberate and meaningful ways. We must examine the racist foundations of our policies and procedures and work to rebuild systems from the ground up in many cases. This work will not be easy, but it must be done to truly dismantle the broken systems within our government, in our health care settings, in our communities and every other place that have not been serving the people of Hawaii equitably.

Thank you for the opportunity to testify in strong support of SCR 140 SDI.

Jen Wilbur
Director of Advocacy
YWCA O'ahu

YWCA IS ON A MISSION

SCR-140-SD-1

Submitted on: 4/2/2021 8:34:44 PM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Michael Golojuch Jr	LGBT Caucus of the Democratic Party of Hawaii	Support	No

Comments:

Aloha Representatives,

The LGBT Caucus of the Democratic Party of Hawai'i, Hawaii's oldest and largest policy and political LGBTQIA+ focused organization, fully supports SCR 140 SD 1.

Mahalo nui loa for your time and consideration,

Michael Golojuch, Jr.

Chair

LGBT Caucus of the Democratic Party of Hawai'i

SCR-140-SD-1

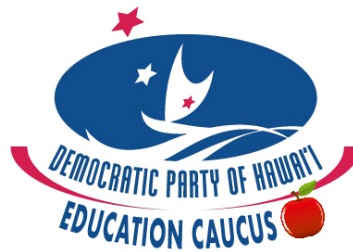
Submitted on: 4/3/2021 7:16:28 PM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jennifer Azuma Chrupalyk	Aloha ?Aina Party	Support	No

Comments:

On behalf of the Aloha 'Äina Party, its organization and membership, we hereby would like to add that the suppression of history and the ignorance of the fact that the Hawaiian Language is an official language of the State of Hawai'i, is also racism and also is a public health crisis.



SCR 140, SD 1, ASSERTING THAT RACISM IS A PUBLIC HEALTH CRISIS AND URGING THE STATE TO COMMIT TO RECOGNIZING AND ADDRESSING THE RESULTING INEQUITIES, AND STUDY AND REPORT TO THE LEGISLATURE ON ECONOMIC DISPARITIES THAT CONTRIBUTE TO THE DETRIMENTAL PUBLIC HEALTH EFFECTS OF RACISM.

APRIL 5, 2021 · HOUSE JUDICIARY AND HAWAIIAN AFFAIRS COMMITTEE · CHAIR REP. MARK M. NAKASHIMA

POSITION: Strong support.

RATIONALE: The Democratic Party of Hawai'i Education Caucus **strongly supports** SCR 140, SD 1, asserting that racism is a public health crisis and urging the state to commit to recognizing and addressing the resulting inequities, and study and report to the Legislature on economic disparities that contribute to the detrimental public health effects of racism.

Intolerance is an epidemic within the COVID-19 pandemic. As the coronavirus has surged throughout our shores, anti-Asian racism has soared. Stop AAPI Hate tracks reports of violence against Asian American and Pacific Islander communities.

Since the start of the pandemic, they've received reports of nearly 4,000 hate incidents directed toward Asians and Asian-Americans across the U.S. Similarly, a recent report from the Center for the Study of Hate and Extremism at California State University, San Bernardino, revealed that hate crimes against Asian-Americans in 16 cities rose by 150 percent in 2020. Anti-Asian xenophobia has frequently resulted in violent acts.

Just last month, an armed white male murdered eight people of Asian ancestry in Atlanta, Georgia, in an act of racial terror. We must take a stand against racial discrimination. If we don't, as Martin Luther King, Jr. said, "We will learn very shortly that racism is a sickness unto death."

**Kris Coffield · Chairperson, Democratic Party of Hawai'i Education Caucus ·
(808) 679-7454 · kriscoffield@gmail.com**



SCR 140, SD 1, ASSERTING THAT RACISM IS A PUBLIC HEALTH CRISIS AND URGING THE STATE TO COMMIT TO RECOGNIZING AND ADDRESSING THE RESULTING INEQUITIES, AND STUDY AND REPORT TO THE LEGISLATURE ON ECONOMIC DISPARITIES THAT CONTRIBUTE TO THE DETRIMENTAL PUBLIC HEALTH EFFECTS OF RACISM.

APRIL 5, 2021 · HOUSE JUDICIARY AND HAWAIIAN AFFAIRS COMMITTEE · CHAIR REP. MARK. NAKASHIMA

POSITION: Strong support.

RATIONALE: Imua Alliance **strongly supports** SCR 140, SD 1, asserting that racism is a public health crisis and urging the state to commit to recognizing and addressing the resulting inequities, and study and report to the Legislature on economic disparities that contribute to the detrimental public health effects of racism.

Intolerance is an epidemic within the COVID-19 pandemic. As the coronavirus has surged throughout our shores, anti-Asian racism has soared. Stop AAPI Hate tracks reports of violence against Asian American and Pacific Islander communities. Since the start of the pandemic, they've received reports of nearly 4,000 hate incidents directed toward Asians and Asian-Americans across the U.S. Similarly, a recent report from the Center for the Study of Hate and Extremism at California State University, San Bernardino, revealed that hate crimes against Asian-Americans in 16 cities rose by 150 percent in 2020. Anti-Asian xenophobia has frequently resulted in violent acts. Just last month, an armed white male murdered eight people of Asian ancestry in Atlanta, Georgia, in an act of racial terror. We must take a stand against racial discrimination. If we don't, as Martin Luther King, Jr. said, "We will learn very shortly that racism is a sickness unto death."

Kris Coffield · Executive Director, Imua Alliance · (808) 679-7454 · kris@imuaalliance.org

SCR-140-SD-1

Submitted on: 4/5/2021 10:56:01 AM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Nikos Leverenz	Hawaii Health & Harm Reduction Center	Support	No

Comments:

Hawai'i Health & Harm Reduction Center (HHRC) **supports** SCR 140, SD 1, which declares racism as a public health crisis in Hawai'i.

In May 2020, the American Public Health Association (APHA) declared: "Racism is a longstanding systemic structure in this country that must be dismantled through brutally honest conversations, policy changes and practices." Since the death of George Floyd, a number of states and local governments have declared that racism is a public health crisis.

Unfortunately, this measure does not specifically point to white supremacy as a key source of the dispossession and maltreatment of those impacted by structural racism, including Native Hawaiians and other non-whites. White supremacy in Hawai'i also impacts its large Filipinx population, which struggles with longstanding economic and health disparities, exacerbated during this ongoing pandemic period, and remains underrepresented in Hawai'i's elected bodies and learned professions.

This hearing comes shortly after a new report from UH Mānoa disclosed that public school students who are Native Hawaiian, Pacific Islander, Black, or disabled are subject to encounters with law enforcement at significantly disproportionate rates. The report also notes that Hawai'i leads the country in terms of students arrested and referred to law enforcement at almost 10%.

That **one in ten** K-12 students in Hawai'i's public schools are referred to law enforcement is a crisis that demands concerted attention at every level of government. On this front and others, **the Legislature must lead the way** toward a more just, equitable, and compassionate future for every person who resides in this archipelago.

Among the health disparities faced by Native Hawaiian and Pacific Islander populations are higher rates of HIV, sexually transmitted infections, and tuberculosis than the general population and higher rates of chronic diseases that include diabetes, heart disease, obesity and asthma. COVID-19 has hit Marshallese and other Micronesian residents in Hawai'i especially hard, with state health authorities being less than proactive in providing needed language-appropriate health information through at least the first six months of the pandemic.

Income is the most important determinant of health, with those living in poverty having less access to routine medical care, higher rates of chronic diseases, and shortened life expectancies. Poverty reinforces the accumulation of [adverse childhood experiences correlating with unfavorable health outcomes](#) in adulthood.

[Hawai'i's poverty rate prior to the pandemic was just over 11% of the total population, with substantially higher percentages among Native Hawaiians \(15.5%\), Samoans \(20.4%\), Tongans \(16.2%\), Marshallese \(51.1%\), Vietnamese \(18%\), and Native Americans \(18.1%\).](#) Increasing the minimum wage to \$15, as Governor Ige called for in 2018, would materially improve the economic situation for many of these families.

Hawai'i should recalibrate its tax structure through measures like those advanced by the [Hawai'i Tax Fairness Coalition](#) in order help ensure that downturns in state and local tax revenues do not fall the hardest on those who are already below the poverty line. Notably, Hawai'i also continues to have the lowest property taxes in the nation.

Native Hawaiians continue to be disproportionately impacted by Hawai'i's criminal legal system, as has been the case since the late 19th Century. [Native Hawaiians are more likely to get a prison sentence, and for longer periods of time, than other groups. Native Hawaiians comprise the highest percentage of those incarcerated in out-of-state and women's prisons. Native Hawaiians are sentenced to longer probation terms than other groups. Native Hawaiians also bear a disproportionate burden of the punitive response to drug use, with sentencing structures, police practices, and prosecutorial practices contributing to that disproportionality.](#)

The high individual, familial, and governmental costs associated with consigning persons with behavioral health problems to protracted involvement in the criminal legal system are readily apparent to those familiar with assessing punitive responses to drug use at the state, national, and international levels.

It is imperative that Hawai'i embark on concerted responses to drug use that are grounded in public health, including harm reduction services and appropriate medical care, and not maintain its overreliance on placing individuals with behavioral health problems in jail or prison, which is latently injurious to individual health, and prolonged periods of criminal legal supervision that include probation and parole.

Current punitive responses to drug use constitute white supremacy and structural racism in ignominious operation. This includes the classification of personal drug possession and use *in any amount* as felonious "promotion of a dangerous drug" under HRS Section 712-1243, punishable by a prison term of five years.

[The APHA vigorously endorses a public health response to drug use and misuse, including the decriminalization of personal drug possession and use. It urges state governments to eliminate "criminal penalties and collateral sanctions for personal drug use and possession offenses and to avoid unduly harsh administrative penalties, such as civil asset forfeiture..."](#)

As noted recently by a report from the Pew Charitable Trusts, [Hawaii has the highest average term of probation in the nation at just under five years](#). Statewide probation reform that substantially reduces terms is another tangible means of repairing the harm of white supremacy and structural racism that are manifest in the operation of the state's criminal legal system.

In short, the corrosive legacy and ongoing deleterious impact of white supremacy and structural racism in our state cannot be adequately addressed without substantial reorientation of state and local policies and practices related to the criminalization of behavioral health problems.

Thank you for the opportunity to testify on this measure.

SCR-140-SD-1

Submitted on: 4/1/2021 4:48:51 PM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
cheryl B.	Individual	Support	No

Comments:

Support wholeheartedly.

It is my belief that every single legislator should be voting yes on this SCR.

SCR-140-SD-1

Submitted on: 4/2/2021 10:19:14 AM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Laurie Field	Individual	Support	No

Comments:

Planned Parenthood Alliance Advocates supports SCR 140, SD1. Thank you!

SCR-140-SD-1

Submitted on: 4/2/2021 11:57:31 AM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Caroline Kunitake	Individual	Support	No

Comments:

Dear Chair Nakashima, Vice Chair Matayoshi and Committee on Judiciary and Hawaiian Affairs,

Please support SCR140 SD1.

The COVID-19 pandemic has revealed the racial inequities and barriers to healthcare and health service. Those who have lower paying, public facing jobs and live in multigenerational housing are more likely to contract and spread COVID-19.

It is important for our state government to acknowledge these racial inequities and work to remove the barriers to healthcare and health service. If not, the pandemic will linger and continue to breed viral mutations which may be more contagious and more deadly to the entire population. The scientist don't know how long the current versions of the COVID-19 vaccine will be effective against the newer viral mutations.

Thank you for taking the time to review this issue. I appreciate the opportunity to provide testimony in support of SCR140 SD1.

Mahalo,

Caroline Kunitake

SCR-140-SD-1

Submitted on: 4/3/2021 11:02:44 AM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
tlaloc tokuda	Individual	Support	No

Comments:

First off, i believe that our leaders (including Chief of Police of Kauai) should be exemplars of society and if they are not they should be relieved of their duties...especially in Hawaii where we have such.a diverse population.

- Being silent in the face of wrongdoing is not an option; it is tacit cooperation and being complicit. I agree that the State should, as provided in SCR 140, SD1, at page 2, lines 41-42, and page 3, lines 1-14, commit to:
 1. Eliminating racial disparities in the criminal justice system;
 2. Prioritizing racial equity in decision making processes;
 3. Acknowledging that communities of color have borne the greatest burdens of inequitable social, environmental, technological, economic, and criminal justice policies, practices, and investments;
 4. Understanding that the legacy of inequitable policies has caused deep disparities, harm, and mistrust; and
 5. Recognizing that racial equity is realized only when race can no longer be used to predict life outcomes. . . .

Mahalo for your consideration,

Tlaloc Tokuda

Kailua Kona, HI 96740

SCR-140-SD-1

Submitted on: 4/3/2021 11:15:36 PM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Edward B Hanel Jr	Individual	Support	No

Comments:

The incidious notion that our nation has erased racism from our society must be refuted with facts and evidence. SCR140 calls for that documentation. I concur with Common Cause Hawaii comments and support passage.

SCR-140-SD-1

Submitted on: 4/4/2021 6:39:30 AM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
David Anderson	Individual	Support	No

Comments:

Being silent in the face of wrongdoing is not an option; it is tacit cooperation and being complicit. I think that the State should commit to: Eliminating racial disparities in the criminal justice system; Prioritizing racial equity in decision making processes; Acknowledging that communities of color have borne the greatest burdens of inequitable social, environmental, technological, economic, and criminal justice policies, practices, and investments; Understanding that the legacy of inequitable policies has caused deep disparities, harm, and mistrust; and Recognizing that racial equity is realized only when race can no longer be used to predict life outcomes. . . .

We all need to reject and call out racism, xenophobia, intolerance, discrimination, or hate crimes against all Black, Indigenous and People of Color (BIPOC), including women.

SCR-140-SD-1

Submitted on: 4/4/2021 11:09:22 AM

Testimony for JHA on 4/5/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Susan Dursin	Individual	Support	No

Comments:

I hope that the Justice and Hawaiian Affairs Committee will support this effort to acknowledge the part that economics plays in racial inequity, and beyond that, the evolution of many government programs that contribute to disparity. One hopes that investigation and reporting will lead to action addressing this very significant problem.

Often, people advance historical and cultural reasons for disparity, arguing that it is exceedingly difficult to attack those roots. Economic disparity is not discussed so often, yet it is one area where government does have some ability to affect outcomes.

Awareness should accompany a broad examination of present programs and a sensitivity to proposed programs. Do they carry implicit bias? Do they further racial inequity?

Thank you for considering this much-needed step.

Susan Dursin, Captain Cook