Hawaii's Homeless Crisis is more than people without a home; it's a medical epidemic!

Brightly colored flowers of the rainbow, fresh clean air, diamond speckled ocean of green and deep blue, dancing clouds of white against blue skies, fiery sunsets as darkness approaches, star filed nights, and the “Aloha” spirit or love for one another describe my Hawaii. Yet, with all the wonder of Hawaii, there are individuals and families who wander the streets without a permanent home only to find temporary shelters at beaches, parks, and sidewalks. These wandering souls, however, have found a temporary solution for a place to tend to their wounds, comfort, a meal, and a safe place to rest for a couple of hours or a couple of days. The hospital emergency room. One of the biggest effect of homelessness in our community is our hospital emergency rooms (ER) gets filled with homeless individuals who need care but may not need to be at the ER, and most do not have adequate medical insurance to pay for their services. This causes both a health and financial burden on our community. Hospitals have to pay the costs not covered by insurance and those who need emergency care may not receive it timely. My solution to this ER tension is to have mobile preventative and primary care tented clinics in or by places where access to homeless individuals is readily available so they don’t need to go to the ER.

In 2013, homeless individuals made 6,958 ER visits to the Queen’s Medical Center (Queen’s). By the end of 2016, 11,000 homeless individuals visited the Queen’s ER. The cost of care last year at the Queen’s ER was about $90 million dollars. Medicaid insurance (available to eligible individuals and families who cannot afford health care) help to cover most of the cost, but the rest about $5 million dollars were covered by the hospital through its reserves. Dr. Daniel Cheng, assistant chief of Queen’s ER stated that without such reserves the
hospital would be bankrupt and that only 15 percent of the all homeless individuals who come into the ER have a true emergency, but "what they really need is good access to primary care." ("Cost of homeless care increases.")

Without access to primary care, our hospital ERs will continue to be crowded with individuals who don’t need to be there. This creates a strain on everyone because the cost of ER services will increase and may not be available to those who really need emergency care. This strain, if left to progress over fifty years will change Hawaii forever. This change may force people to become angry and stressed because they have to work more, pay more for ER services, and put their lives in jeopardy when they really need help.

Hawaii State Senator Josh Green proposed a bill this past legislative session to have two primary care mobile clinics to serve the homeless population but, unfortunately the bill did not pass. He is also working to build an epicenter for homeless services with an urgent care facility to address this ER overload. I believe that a viable solution which is different from what Senator Green proposed in his legislation and that of the epicenter is to have mobile preventative and primary care units under tents in or by places where access to homeless individuals is readily available so they don’t need to go to the ER.

These tented clinics would be inexpensive and easily set up and dismantled, operational a couple of times a week or more as needed at locations throughout the state, and used as living classrooms for our medical school and schools; training doctors, nurses, technicians, emergency care professionals, educators, and children about Science, Technology, Engineering, and Mathematics (STEM) activities. Existing mobile units such as the vision screening van, the
blood mobile van, and various health center vans can be used to add more equipment to screen and provide services at the tented clinics.

To be sustainable, these clinics could be part of the college or program system so it would pay for itself through tuition and fees. Additionally, I am an 8th year girl scout and my troop and I would love the opportunity to pitch in, rally the troops and get involved. We can get other scouts to participate and have it as a continuing activity where they could earn different types of community service and leadership patches. My troop could also help watch the children for those with families receiving services at the clinics and we could help with fundraising as we sell cookies every year and with the funds we receive give it back to our community to sustain the clinics.

I believe Mr. Ching had this vision when he created Kukui Gardens, he saw his community helping each other through the generations and giving back to their community as they were blessed by others. By creating his foundation, he was a visionary that knew that times would change and that fresh eyes (his Board of Directors) would be needed to see the future but, somehow preserve the core of what he freely received, love or "Aloha!"

The "Aloha" Mr. Ching experienced and grew up with will never change if we continue to help each other and want the best for them. When we love one another as ourselves and help out of that love, our lives are enriched even more. Therefore, I believe that if we work together to help homeless individuals and their families find preventative and primary care when they need it, our emergency rooms will just be used for emergencies only and our medical epidemic will not exist.
Work Cited:

“Care providers to create Iwilei medical service hub for homeless.” Honolulu Star Advertiser, 28 August 2017,

“Medical vans to aid homeless could cost state $1.4M annually.” Honolulu Star Advertiser, 30 January 2017,

“Cost of homeless care increases.” Honolulu Star Advertiser, 7 September 2016,