

# Office of Health Equity Veterans Health Administration Department of Veterans Affairs



## HOMELESSNESS IN NATIVE HAWAIIAN AND OTHER PACIFIC ISLANDER VETERANS INFORMATION BRIEF

Lauren Korshak, DHealth(c), MS, ACSM-CEP<sup>1</sup>, Chava Eve Sonnier, MSOD<sup>1</sup>, Kathryn Ryder, MD, MS<sup>2</sup>, Ryan Holliday, PhD<sup>3</sup>  
<sup>1</sup>Office of Health Equity, <sup>2</sup>VA Pacific Islands Health Care System, Rocky Mountain Mental Illness Research, Education and Clinical Center for Suicide Prevention<sup>3</sup>

### INTRODUCTION

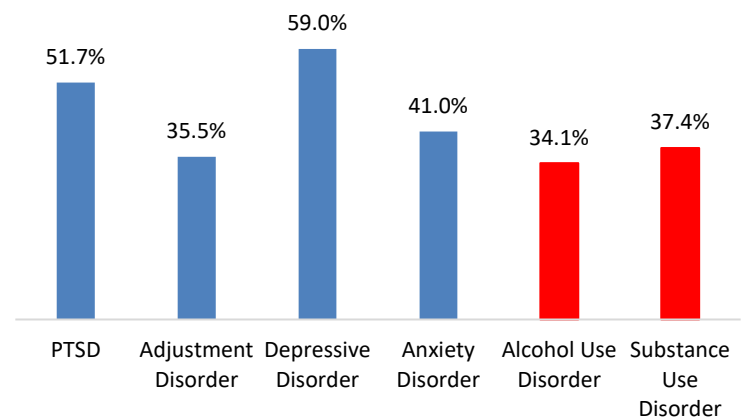
The Veterans Health Administration (VHA) serves an increasingly racially and ethnically diverse Veteran population. Equitable access to high-quality care for all Veterans is a major tenet of the VA healthcare mission. The Office of Health Equity (OHE) champions the elimination of health disparities and achieving health equity for all Veterans, including Native Hawaiian and Other Pacific Islander (NHPI) Veterans.

OHE's [National Veteran Health Equity Report – Asian and Native Hawaiian and Other Pacific Islander Veteran Chartbook](#) reports that NHPI Veterans who receive VA health care are younger, are more likely to live in urban areas, and have higher rates of service-connected disabilities than non-Hispanic White Veterans. There are several factors unique to NHPI Veterans that may exacerbate the risk of becoming homeless. These include living in areas where the cost of living is high, and it can be especially difficult to relocate across the Pacific Islands or from the Pacific Islands to the Continental United States.

### NHPI VETERANS LIVING WITH HOMELESSNESS

Addressing homelessness remains a top priority of VA. Between 2005 and 2018, 1,177 Veterans who accessed the VA Homeless Program identified as NHPI. Almost half (48.3%) of NHPI Veterans accessing the VA Homeless Program were younger than 39 years old and 79.8% were male. NHPI Veterans experiencing homelessness had high rates of mental health diagnoses and histories of substance use disorders. NHPI Veterans experiencing homelessness were also significantly less likely to use VA services. VA is working to understand the factors driving this health inequity.

Select Mental Health Diagnoses and Rates of Substance Use and Alcohol Use Disorders in NHPI Veterans Accessing VA Homeless Programs, 2005-2018



Source: [Rocky Mountain Mental Illness Research, Education and Clinical Center for Suicide Prevention](#)



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Office of Health Equity

## **CARING FOR NHPI VETERANS IN THE HOMELESS PROGRAM WITH ACTIVE METHAMPHETAMINE USE**

There is a strong relationship between housing security and improved health. Experiencing homelessness can increase the risk of poor health outcomes including poor wound healing, poor diabetes control, poor medicine management, and poor pain management options. It can also result in experiencing trauma, becoming injured, and engaging in illicit drug use. There are approximately 1,200 Veterans in the Homeless Program in Hawaii. These Veterans experience a range of poor health outcomes and inequitable access to health care services. Many evidence-based addiction treatments are not available to Veterans who are unable to attend face to face appointments in central Oahu twice a week.

Health care providers at the [VA Pacific Islands Health Care System](#) (VAPIHCS) implemented harm reduction strategies for NHPI Veterans currently cared for in the Homeless Program and who reported active or within 3-month methamphetamine use. Veterans who use other substances in addition to methamphetamine were also invited to participate in the intervention. Veterans were provided immediate access to substance use disorder (SUD) treatment and preventive care at six community events and received continuous follow up in between the events, including medical visits and outreach. This intervention:

1. Increases preventive care access, including harm reduction.
2. Increases SUD treatment engagement.

The intervention will be offered in community settings previously attended by NHPI Veterans in the Homeless Program, including a group ear acupuncture and acupressure clinic, surfing outings, horticultural therapy, and fishing outings. By offering training at barbecues, town halls, street outreach, and at mass vaccination events at Barbers Point, an area with a high density of Veterans experiencing homelessness, VAPIHCS successfully increased access to naloxone training and distribution of naloxone to high-risk Veterans in the Homeless Programs by 60%.

## **REDUCING DISPARITIES AND IMPROVING ACCESS TO CARE**

The VHA provides care in the Pacific Islands across 2.6 million square miles of ocean—nearly the size of the continental United States. OHE supports efforts across VHA to reduce health disparities among NHPI communities, including by providing culturally appropriate care when cultural differences may jeopardize Veterans' engagement in care. OHE funded 5 pilot projects in Fiscal Year 2023 and 9 pilot projects in Fiscal Year 2024 focused on identifying and addressing health disparities in the NHPI Veteran population. The pilot projects encompass a broad range of approaches ranging from health data analytics to psychiatry, pharmacy and primary care, specialty care, and medical nutrition therapy.

**For more information about the Office of Health Equity visit:** <https://www.va.gov/healthequity/>.