

THE DEMISE OF AGRICULTURE ON THE ISLANDS AND THE RISE OF DISILLUSIONMENT

1835

Sugar was first grown commercially in Hawaii at Koloa Plantation on Kauai in 1835. At one time there were 32 plantations in the State of Hawaii. Collectively, they imported the 385,000 workers from Asia, Europe and North America who created Hawaii's unique multi-cultural society.

1975

Kohala Sugar Co. closes.

1994

Hamakua Sugar Co. closes.

1995

Hilo Sugar closes.

1996

Ka'u Sugar closes.

The Sugar Mill and other plantation closures have affected the rhythm of island life and devastated communities. Displaced workers were now being forced to leave their communities to find employment in other industries that generally provided only minimal pay. Whereas the sugar plantations had provided for families from birth to death with; schools, churches, community centers, sporting events and job security. The new tourism industry was for the wealthy and those coming for a taste of “paradise”. In essence, the sugar plantation closures created a huge vacuum that left the population with despair, frustration, and loss of identity. In their frustration, many turned to drug abuse and alcoholism, which led to family violence and depression. While marijuana was previously the “drug of choice” for many drug users, when the Green Harvest Program cracked down on growers, the picture changed dramatically. As marijuana became more difficult to buy, active addicts began using “Ice” (methamphetamine) in epidemic proportion. With Ice use, the Big Island began to experience an increase in acts of violence. This was inevitable as this drug is an amphetamine and when used in large quantities over long periods, it produces neurological damage manifested as paranoia, distorted cognitive processing and organic brain damage. This drug has the potential to devastate centuries of cultural practices, beliefs and essentially destroy an entire generation.

A wave of construction began along the coastal highway, the growth of luxury hotels and resorts along the Kohala coast, and a growing interest and developments of eco-tourism have started to revive the community economically. Agriculture had been replaced by tourism as the prime workforce employer. Presently, West Hawaii is primarily employed in the hotel and visitor industries, which attracted former plantation workers. This includes residents of both East and West Hawaii. However, there is a dark side to this, as many are required to work extra long shifts to earn the income necessary in an attempt to restore what the plantations had provided (Housing, medical . . .). For those working double shifts “Ice” (methamphetamine) is often seen as a way to maintain alertness during extended work hours and long distance traveling. Initially this appears to be a viable solution and the word is spread around to other workers. However, what starts off as a way to stay awake becomes an addiction and the worker(s) finds themselves using methamphetamines to “feel normal.”

Although the Kohala coast has experienced a growth in tourism, it continues to experience a sense of existential isolation; income, but no cultural identity to who they are as island peoples. The Kohala community is also geographically cut off from the mainstream, as is the southern part of the island, Kau District. There is no viable public transportation connecting Kohala and Kau with other communities on the Big Island, nor is there any viable public transportation within the districts itself. Transportation has often been the cause for those who are unemployed or under-employed (casual/part-time workers), which prolongs the cycle of despair and frustration that leads to increased family violence, drug abuse, alcoholism and depression.

Surviving economically is a struggle in Hawaii, which has one of the highest costs of living in the United States, and resulted in many locally born residents moving to the mainland. Additionally, a significant number of single parents are working two jobs to make ends meet, leaving the children at home unsupervised. For many, opportunities for “family time” much less after school programs and special lessons for their children are out of reach. Our children are missing opportunities for growth and achievement. Their formerly secure futures are now one of doubt, and frustration as they watch their parents struggle to make ends meet but fall further and further behind.

Perhaps it is these circumstances that catalyze the exponential growth rate of drug use on our island today. Anecdotally, we know that a growing number of parents believe that it is okay to drink excessively and use drugs with their kids or in front of their kids. It's how to take the edge and escape the reality of their circumstances. In this way, the drug use is handed down from parent to child and has become an unfortunate part of the Hawaiian culture.

Here's a few suggestions for possible solutions:

- **Support and continue to develop existing programs that provide recreational activities for youths and adults, such as Parks and Recreation, the Boys and Girls Club, YWCA, YMCA**
- **Support Vocational Rehabilitation Programs. LTC feels that, in addition to counseling, an equally important element to a full recovery is the support and skills gathered through Vocational Educational services.**
- **Support and continue to develop the Parent Community Network that already exists in all of Hawaii's public schools through their Parent Community Network Coordinator. At this time, these are only part-time positions.**
- **Support and continue to develop agricultural cooperatives and eco-tourism.**

LOKAHI TREATMENT CENTERS

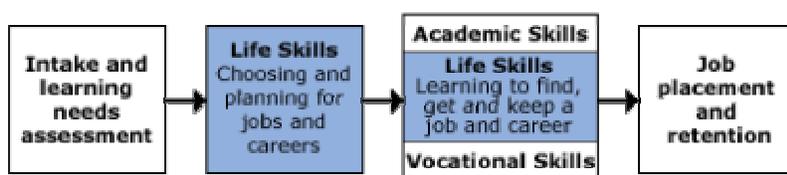
When the crystal methamphetamine epidemic escalated on the Big Island of Hawaii in the late 1990's, Dr. Jamal Wasan, PhD responded to the community's concerns by founding The Waikoloa Community-Based Substance Abuse Rehabilitation and Recovery Program a nonprofit community program, now known as LOKAHI TREATMENT CENTERS (LTC). The community quickly learned that drug abuse was not an isolated problem and LTC expanded its services to create an integrated model to address related mental health and anger issues, as well. The mission of LTC is to provide community-based Substance Abuse and Mental health services that are culturally appropriate to Big Island adults, adolescents, and children suffering from chemical dependency and acts of violence.

LTC Invest in the Career Development of Clients

Job training programs are a missing link in substance abuse treatment services. LTC would like to provide a means for helping its' clients by providing them with job training opportunities as part of their treatment plan. LTC will encourage its' clients to make choices and take responsibility for their own employment and self-development. LTC will help clients make informed employment/career choices, to which they become committed. These choices motivate them to take full advantage of the educational programs and services to become better prepared for work. As a result, their attendance in other programs dramatically increases.

As the flow chart below indicates, a quality career choice up front helps clients and staff organize the client's program logically. Clients attend regularly, complete training, get and retain their jobs because of the increased motivation and satisfaction.

LTC Career Development Organizational Model



LTC Strengthens Client Motivation

We invest in client training to ensure that our clients are making informed occupational choices that are right for them-choices that they can stick with.

Research shows that clients who have made informed career choices, based on good self and occupational knowledge are more highly motivated and more successful in completing training, getting jobs and staying employed. They are also more satisfied than those who have not given systematic thought to their future options.

LTC Reduces Fragmentation of Services

One goal of LTC is reducing the fragmentation of services to its clients.

Clients who have career plans and who are goal-directed can take full advantage of the multiple opportunities for learning and services that will be available through LTC's treatment plans. There is a tendency on the part of some agencies to help make choices for people instead of helping them to make their own choices. Research shows that people are motivated to pursue choices they themselves make far more than choices made for them.

LTC will address the needs of those:

1. who are job/career ready and self-directed;
2. who need some help with motivational, choice and planning issues; and
3. who need the most help to become job/career ready.

LTC Makes Up for Missed Learning about Life Tasks

LTC Substance abuse programs provides the kind of developmental learning that many persons using drugs or alcohol have missed. This kind of positive learning goes beyond jobs and careers to the essential psychological skills and values of self-direction and self-development that were delayed or impaired during the years of substance abuse.

LTC is the ideal complement to traditional treatment methods that focus on the elimination of negative, self-defeating behaviors.

The program enhances the true rehabilitation of the chemical abuser by focusing on the acquisition of essential coping skills, based on new concepts, new knowledge, different values, and new behaviors which have not yet become part of the individual's repertoire.

LTC Stresses The Positive

LTC requires that the clients become actively involved in conducting inquiries, gaining new experiences, internalizing new learning and practicing new behaviors until they can competently perform the new coping skills.

It is our conviction that the learning of necessary new values, attitudes, strategies, and the making of life-affirming choices requires a different kind of learning process, one that stresses the positive. The process must help the individuals think differently, help them decode emotion, learn new concepts and practice new behaviors to mastery. What the program does is help a person substitute new effective life-sustaining attitudes and behaviors for old ineffective life-draining attitudes and behaviors.