

Hawaii's Aging Population, Healthcare Infrastructure, and Island-Specific Resilience Gaps

Author: Warren Pulley, Founder & Executive Director, Island Security Policy Institute

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EXECUTIVE SUMMARY

Hawaii's aging population is creating simultaneous pressure on healthcare infrastructure, workforce capacity, and community resilience systems — with island-specific constraints that continental aging policy frameworks do not address. Governor Green's \$10.58 billion fiscal year 2027 budget reflects the mounting strain, with increased spending on healthcare infrastructure and \$903 million in new bonds. ISPI's research identifies the specific intersection of Hawaii's aging population trend with island security, insider threat in healthcare, sole-provider workforce constraint, and emergency management capacity — dimensions of the aging infrastructure challenge that standard healthcare policy frameworks miss.

KEY FINDINGS

- Hawaii's aging population creates pressure across generations — fewer workers supporting more seniors and fewer children — in an island economic environment that cannot draw on the continental labor mobility that allows mainland healthcare systems to address workforce gaps.
- Island healthcare systems face the same sole-provider workforce constraint that ISPI's research identifies across all small island institutions — with the specific consequence that healthcare insider threat risk is elevated when a single employee controls multiple critical access functions.
- Healthcare emergency preparedness in Hawaii requires 30-day supply reserve architecture for pharmaceuticals and medical equipment — the same island-specific standard ISPI recommends for food and fuel, and for the same structural reason: supply chain singularity.
- Neighbor island healthcare infrastructure gaps create medical emergency response time problems that parallel the law enforcement response time problems ISPI documents for rural campus safety — with documented air transport dependency for acute care across several neighbor island communities.

- Governor Green's integration of healthcare into the homelessness strategy reflects an evidence-aligned approach that ISPI's research supports — addressing the compound health, safety, and housing crisis with integrated rather than siloed interventions.

The Island Healthcare Workforce Constraint

Continental healthcare workforce strategies — interstate licensing compacts, travel nurse programs, medical school pipeline development — assume a degree of geographic mobility and market scale that island healthcare systems cannot access at equivalent effectiveness.

A hospital on Molokai cannot recruit travel nurses at the rates that Honolulu hospitals can. A rural Big Island clinic cannot participate in an interstate licensing compact that provides meaningful workforce supply. The healthcare workforce solutions available to island communities are constrained by the same geographic isolation that constrains every other island institutional function.

ISPI's research identifies the sole-provider workforce constraint as the most consequential specific manifestation of this general challenge: when a single healthcare employee — a pharmacist, a licensed clinical nurse, a specialist physician — is the only qualified individual available to perform an essential function, the standard institutional security responses to concerning behavior are operationally catastrophic.

Healthcare Insider Threat in Island Environments

ISPI's insider threat research identifies healthcare as one of the highest-risk insider threat environments in island communities — for the same structural reasons that produce elevated insider threat risk in all small island institutions, compounded by the specific access patterns of healthcare environments.

A hospital employee with access to controlled substance management, patient record systems, and physical facility access in a small island community accumulates the access privilege concentration that ISPI's research identifies as the most consequential insider threat risk profile — while operating in the social density environment that suppresses reporting of concerning behavior.

ISPI's healthcare insider threat framework addresses this compound risk with protocols specifically designed for island healthcare environments — not the access governance frameworks designed for large continental healthcare systems with substantial HR and security infrastructure.

Healthcare Emergency Preparedness for Island Communities

Healthcare emergency preparedness in island communities requires the same fundamental framework adaptation that ISPI recommends for all island emergency management: self-sufficiency primacy, 30-day supply reserve architecture, and communication redundancy without infrastructure dependence.

A neighbor island hospital that depends on daily mainland pharmaceutical supply cannot function as an emergency medical anchor institution when the supply chain is disrupted. Healthcare emergency preparedness investment — strategic pharmaceutical reserves, backup power for critical systems, satellite communication

capacity — is the healthcare system's equivalent of the community reserve architecture ISPI recommends for general emergency resilience.

POLICY RECOMMENDATIONS

- 1.** Commission an independent assessment of Hawaii's neighbor island healthcare infrastructure emergency preparedness — establishing whether healthcare facilities can function as emergency medical anchor institutions during sustained supply chain disruption.
- 2.** Establish a Hawaii Healthcare Emergency Supply Reserve standard requiring 30-day pharmaceutical and medical equipment reserves for all Hawaii healthcare facilities operating as community emergency anchors.
- 3.** Develop and publish an island-specific healthcare insider threat framework for Hawaii healthcare institutions — addressing the sole-provider and social density conditions that standard healthcare security frameworks do not account for.
- 4.** Invest in telehealth infrastructure for neighbor island communities as both a service quality improvement and an emergency resilience investment — reducing air transport dependency for acute care through expanded specialist consultation capacity.
- 5.** Integrate healthcare workforce retention into the broader Hawaii essential services workforce resilience framework — extending housing assistance and cost-of-living support to healthcare workers experiencing the same real compensation disadvantage as law enforcement personnel.