FOR IMMEDIATE RELEASE
April 24, 2020

Devastating COVID-19 Rate Disparities Ripping Through Pacific Islander Communities in the U.S.

National Pacific Islanders COVID-19 Response Team forms to address devastating COVID-19 impact on Pacific Islander communities

LOS ANGELES – The Pacific Islanders COVID-19 Response Team with the Pacific Islander Center of Primary Care Excellence (PI-CoPCE) today released the following statement in response to new data showing the alarming disproportionate impact of COVID-19 on Native Hawaiian and Pacific Islander (NHPI) communities:

The Pacific Islander community is grappling with the latest COVID-19 data revealing that Native Hawaiian and Pacific Islanders (NHPI) are the most impacted racial group in many states and counties across the nation. Pacific Islanders is one of the fastest growing populations in many states with the largest growth occurring in the South and the Midwest. Some states and counties are reporting alarming rates of NHPI COVID-19 cases that are several times higher that of the general population. Advocates are concerned that the high number of essential workers coupled with communal cultural practices will accelerate spread of the of the virus while existing high rates of underlying health conditions such as heart disease, cancer, diabetes, and lung disease will result in high rates of death in the community.

Although data that separates NHPI numbers from the general population is limited, the states and counties that are reporting this data show similar trends: Pacific Islanders are disproportionately affected by COVID-19. California has the largest NHPI population in the contiguous U.S. and shows the highest case rate per 100,000 people. Preliminary analyses of data from Multnomah County in Oregon and Clark County in Nevada are demonstrating similar findings with the highest rates of infection being seen in Pacific Islander communities.

<table>
<thead>
<tr>
<th>Region</th>
<th>Case Rate per 100K for Pacific Islanders</th>
<th>State Average Case Rate per 100K</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salt Lake County, Utah</td>
<td>233.2</td>
<td>see state average</td>
</tr>
<tr>
<td>California</td>
<td>217.7</td>
<td>62.43</td>
</tr>
<tr>
<td>King County, Washington</td>
<td>189.5</td>
<td>182.1</td>
</tr>
<tr>
<td>Utah</td>
<td>132.3</td>
<td>114.3</td>
</tr>
<tr>
<td>Oregon</td>
<td>131</td>
<td>46</td>
</tr>
</tbody>
</table>

“The challenges that Pacific Islander communities are facing with COVID-19 are the same challenges we have been dealing with for decades. It is that of housing, food security, employment, access to health care and so on. The lack of these things makes our community vulnerable to COVID-19. This pandemic magnified many of the gaps that have been overlooked for a long time. Things are bad and it will get worse if we don’t aggressively work on these structural issues,” said Melisa Lelan, the President & Founder of Arkansas Coalition of Marshallese (ACOM).

Existing chronic health conditions put the community at disproportionately high risk of death. About 1 in 5 NHPIs have been diagnosed with heart disease, and NHPIs are 46% more likely than average to be diagnosed with cancer -- a rate higher than any other racial group. High poverty rates, with implications of lack of access to healthcare, larger than average households, and a close-knit social structure may compound the risk and accelerate the spread of COVID-19. The elderly population require particular attention as they most often have an existing condition and live in the household with family members who are likely to be essential workers and mobile thus increasing the risk of spread and death.

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"While neighbors and family members are contracting and dying from COVID-19, NHPIs are not willing to passively await others to plan and implement response. Our existing community infrastructure is not only capable but is the most effective means of addressing the pandemic in NHPI populations," states Jake Fitisemanu Jr., a Clinics Director with the Utah Department of Health and West Valley City Councilman in District 4 in Utah.

Tackling the issue head on, Dr. Raynald Samoa, an endocrinologist with the City of Hope National Medical Center in Los Angeles, CA, is leading a team of Pacific Islander researchers, healthcare providers, community leaders, and faith leaders in developing and implementing a plan of action to slow the spread and support those who are already affected. The national Pacific Islanders COVID-19 Response Team is working with representatives from regions with high Pacific Islander populations to collect data, consolidate resources, and plan an infrastructure of response to anticipate and address the needs in the community.

The national Pacific Islanders COVID-19 Response Team is calling on states and counties to increase access for Pacific Islander testing and tracking, while collecting and reporting disaggregated race/ethnic data, as a proactive measure for timely identification of affected clusters in the community. This will allow the response team to work with local organizations, churches, and leaders to provide resources and support directly to families to curb the spread of the virus. The response team urges city, county, state, and federal entities, as well as community-based organizations at all levels, to engage Pacific Islander leaders in planning and decision-making processes to help families who are currently affected to help stop the spread of COVID-19 in the community.

Dr. Samoa shares the hopeful message needed for this community-led strategy, “the invisibility of a group so disproportionately affected by this pandemic requires a keen expertise in not only population infection disease control management but a proficient capacity to inform, engage and empower communities to work with city, county, state and federal agencies. The national Pacific Islanders COVID-19 Response Team strategy is aimed at optimizing the regional response of Pacific Islander communities by limiting redundant services and identifying gaps that need to be addressed through a group-share technical assistance model. The Pacific has always known that one drop of water has very little effect but banded together those single drops of water forms a vast ocean. We’re going to need an ocean to turn the tide on this pandemic."

For more information on the Pacific Islanders COVID-19 Response Team, visit Pacific Islander COVID-19 Response Team on Facebook and Instagram (@PacificIslanderCOVID19), and for more information on COVID-19, please visit www.cdc.gov/coronavirus.

About the Pacific Islanders COVID-19 Response Team
A national group of NHPI researchers, health experts, community leaders and advocates formed to plan and implement infrastructure for informing and supporting families and communities about COVID-19. The National Lead for the team is Dr. Raynald Samoa and the Technical Assistance Lead is Dr. Nia Aitaoto. The convening organization for the team is the Pacific Islander Center of Primary Care Excellence (PI-COPCE). A list and names of the National Focus committee as well as the names and contact information for the different regional leads for California (Northern and Southern), Washington state (King and Pierce County), Utah, Arkansas, Oregon and Hawaii will be made available at the PI-COPCE website at www.pi-copce.org.

About PI-CoPCE
The Pacific Islander Center of Primary Care Excellence (PI-CoPCE) is an initiative of the Association of Asian Pacific Community Health Organizations and was established to improve the health of Pacific Islanders in the United States and the U.S. Pacific through primary care support, research, workforce development, and community initiatives. For more information on PI-CoPCE, please visit www.pi-copce.org.

Contact
• ‘Alisi Tulua, Pacific Islanders COVID-19 Response Team, (323) 440-0859 atulua@ocapica.org
• Beverly Quintana, Pacific Islander Center of Primary Care Excellence, (510) 500-5944, bquintana@aapcho.org

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