

A Healthy Equity Framework

for Pacific Islanders (PI)

Barriers to Health Equity

Community-Based Strategies

Health Disparities

Social Determinants of Health

Predisposing barriers

Community Interventions

Capacity Building Opportunities

Outcomes

Estimated rates of overweight and obesity among Pacific Islander (PI) adults in some communities are as high as 90%. Pacific Islanders are **2.5 times more likely** to be diagnosed with diabetes than non-Hispanic Whites (28.7%; 8.0%).¹ In 2021, the diabetes prevalence for American Samoans was (20.3%), (23%) for adults living in the Republic of the Marshall Islands, and (23.4%) of adults from the Northern Mariana Islands²

Neighborhood & Built Environment

The **US detonation of 67 thermonuclear devices in the Marshall Islands** as part of the US Nuclear Weapons Testing Program led to **radioactive contamination and destruction of traditional food sources** and health practices, resulting in epidemics of obesity, diabetes, and cardiovascular disease³

Healthcare Access & Quality:

- Lack of understanding of healthcare system and **confusion with rapid on-going changes with COFA eligibility** for insurance programs⁴
- **Limited tertiary care options** in these jurisdictions regularly require patients to travel off-island for needed care

- A **post-WWII deviation away from traditional fishing** and farming in favor of heavily processed foods has influenced the eating habits of PI communities
- Many USAPI **struggle to maintain a full public health and health care workforce** due to remote/geographic isolation, lack of educational opportunities, professionals emigrating, and underfunded health systems

- The historical **impact of colonization, tourism, military engagement**, and the **decentralized regional health infrastructure** has proliferated socio-economic and health-related disparities for PIs

- Need for **more research** on issues **related to prevention** and interventions **of diabetes** and its complications on PI patients
- Health interventions targeting cardiometabolic disorders in PI communities that are culturally responsive and account for the interpersonal, sociocultural, and socioeconomic realities of PIs
- Initiating **more deliberate and multidisciplinary approaches to chronic disease prevention** efforts with active involvement by Pacific Islander communities at all stages of development

- Improve **regional public health collaboration** both across jurisdictions and with multilateral, nongovernmental, and governmental partners
- Promoting the adoption of culturally responsive approaches to health intervention development for programs focusing on PI's or services based in the USAPI

- More effective diabetes prevention/intervention efforts that align with the cultural values, perspectives, and preferred modes of living for Pacific Islanders
- Increased community knowledge of diabetes prevention and diabetes related self-management behaviors