

Association of Pacific Island Legislatures

American Samoa Commonwealth of the Nort

Commonwealth of the Northern Mariana Islands FSM, State of Chuuk

FSM, State of Kosrae FSM, State of Pohnpei

FSM, State of Yap Island of Guam Republic of Kiribati

Republic of the Marshall Islands

Republic of Nauru Republic of Palau State of Hawaii

A RESOLUTION

Resolution No. 51-BOD-08, CD1

"Endorsing the Pacific Island Health Officers Association's Board Resolution 48-01, Declaring a Regional State of Health Emergency Due to the Epidemic of Non-Communicable Diseases (NCD) in the United States-Affiliated Pacific Islands (USAPI)."

WHEREAS, the United States Affiliated Pacific Islands (USAPI) include American

- 2 Samoa, Guam, the Commonwealth of Northern Mariana Islands, the Republic of the Marshall
- 3 Islands, the Republic of Palau and the Federated States of Micronesia (Pohnpei, Chuuk, Yap and
- 4 Kosrae); and
- 5 WHEREAS, the Association of Pacific Island Legislatures include American Samoa, State
- of Hawaii, Island of Guam, the Commonwealth of Northern Mariana Islands, the Republic of the
- 7 Marshall Islands, the Republic of Palau, FSM State of Pohnpei, FSM State of Chuuk, FSM State of
- 8 Yap, FSM State of Kosrae, Republic of Kiribati and Republic of Nauru; and
- 9 WHEREAS, according to the World Health Organization (WHO), statistically the Pacific
- 10 Island Countries, in particular, the Micronesians and some Polynesian populations are ranked the
- highest in obesity and some Non-Communicable Diseases (NCD) indicators; and
- WHEREAS, the NCD mortality rates in the USAPI are indeed among the highest in the
- world and The prevalence of diabetes among 25-64 year old adults was 47.3% in American Samoa,
- 14 32.1% in Federated States of Micronesia (Pohnpei) and 28.3% in Marshall Islands. The prevalence
- of hypertension, a kind of cardiovascular disease, was 34.2% in American Samoa, 21.2% in
- 16 Federated States of Micronesia (Pohnpei) and 15.9% in Marshall Islands. The obesity rates
- 17 (BMI≥30kg/m2) were 74.6% in American Samoa, 44.8% in Marshall Islands and 42.6% in
- 18 Federated States of Micronesia (Pohnpei): and
- 19 WHEREAS, the estimated indigenous population of Pohnpei is only 29,900; of Yap,
- 20 10,200; of Kosrae, 7,300; of Chuuk, 53,300; of Palau, 14,400; of the Republic of the Marshall
- 21 Islands, 49,900; of American Samoa, 50,500; of Guam, 57,300; and of the Commonwealth of
- 22 Northern Mariana Islands, 17,400 according to 2005 Census for the Republic of Palau; 2000 Census
- 23 for the Federated States of Micronesia (Pohnpei, Chuuk, Yap, Kosrae); 2000 Census for the
- 24 Commonwealth of Northern Mariana Islands; 2000 Census for the American Samoa; 2000 Census
- 25 for Guam; 1999 Census for the Republic of Marshall Islands; and

WHEREAS, the leading causes of morbidity and mortality for adults in the USAPI are from non-communicable diseases (NCDs), including obesity, cancer, cardiovascular disease, stroke, diabetes, depression, injury, arthritis and gout; and

WHEREAS, the rates of NCDs and their risk factors in the USAPI are among the highest in the world, are rapidly increasing, are epidemic, and include high tobacco use, high alcohol consumption, a genetic predisposition towards obesity, significant environmental and behavioral health barriers to healthy eating and healthy families, a propensity toward injury, and a high prevalence of sedentary lifestyles; and

WHEREAS, the indigenous people of the USAPI are rich in culture but comparatively small in population; are fragile, isolated and endangered in multiple ways, including economically, socially and environmentally, have endured early decimation due to communicable diseases contracted shortly after Western contact, and now face decimation and possible extinction due to diseases and changes in climate associated with Western lifestyles; and

WHEREAS, the USAPI medical systems—given the current and rising rates of NCDs—are unable to manage the health complications of NCDs effectively due to the high cost and infrastructure required for end stage treatment, which include dialysis, cancer surgery, cancer chemotherapy and radiation therapy, intensive cardiac care for hospitalized patients, specialty stroke units, and sub-specialty medical care; and

WHEREAS, many residents of the USAPI migrate to other parts of the USAPI and to the United States for medical care that cannot be accessed locally, and this medical migration stresses already burdened health systems in Guam, CNMI and the United States and causes suffering among USAPI families and communities, due to separation and financial strain; and

WHEREAS, the cost and complexity of health care in the USAPI are increased exponentially due to the geographic isolation of small islands; and

WHEREAS, external funding for health care in the USAPI from the United States and other sources is unbalanced, with significant resources and mobilization dedicated to issues such as bioterrorism and pandemic influenza but comparatively fewer resources, effort and coordination focused on NCD's, a far more urgent issue for the region; now, therefore,

BE IT RESOLVED by the Board of Directors of the Association of Pacific Island Legislatures, 51st Board Meeting, December 1-3, 2010, Colonia, Yap, Federated States of Micronesia, that the Board of Directors, on behalf of the Association of Pacific Island Legislatures, hereby endorses Pacific Island Health Officers Association's Board Resolution 48-01, Declaring a Regional State of Health Emergency due to the Epidemic of Non-Communicable Diseases in the United States-Affiliated Pacific Islands; and

1 BE IT FURTHER RESOLVED that the Board of Directors of the Association of Pacific 2 Island Legislatures will dedicate the following topic: "Blue Continent, Communications and Infrastructure and the Health of Our People" as the theme for the APIL 30th General Assembly; and 3 BE IT FURTHER RESOLVED that the APIL President shall certify, and the APIL 4 Secretary shall attest, to the adoption of this resolution and that copies of the same shall be 5 thereafter transmitted to the American Pacific Nursing Leaders Council, the Pacific Basin Medical 6 7 Association, the Pacific Basin Dental Association, the Pacific Substance Abuse and Mental Health Collaborating Council, the Pacific Islands Primary Care Association, the Pacific Chronic Disease 8 Coalition, the Pacific Partners for Tobacco Free Islands, the Cancer Council of the Pacific Islands, 9 the Secretariat of the Pacific Community, President of the Pacific Island Health Officers 10 Association (PIOHA) and to the Chief Executives and Legislative Presiding Officers of each 11 member legislature of the Association of Pacific Island Legislatures. 12

DULY AND REGULARLY ADOPTED ON THE 3RD DAY OF DECEMBER, 2010.

REBLUUD KESOLEI

PRESIDENT

ALIK J. ALIK SECRETARY