# **Unmasking COVID-19 in the Pacific**

Funding Equity for Native Hawaiian and Pacific Islander Community-Based Organizations and the COVID-19 Pandemic



ASIAN AMERICAN & PACIFIC ISLANDER POLICY INITIATIVE

ative Hawaiian and Pacific Islander (NHPI) communities have endured disproportionately high mortality rates during the ongoing COVID-19 pandemic, engendering additional community needs and exacerbating pre-existing inequities. NHPI community-based organizations (CBOs) are uniquely positioned to respond to community needs in a culturally appropriate and effective manner and have developed trust with the community over many years. Yet, these NHPI CBOs have historically experienced financial underinvestment which has impeded their ability to serve the needs of California's NHPI community including resulting in widening health disparities. The State of California's commitment to equitable funding and resource allocation to mitigate the ongoing physical, social, and economic harms of the pandemic on the NHPI community will advance the State's goal of greater health equity.

#### Context: NHPI Community-Based Organizations Meeting Community Needs Prior to and During the COVID-19 Pandemic

According to the U.S. Census Bureau, a Native Hawaiian and Pacific Islander (NHPI) individual is, "A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands."1 California holds the largest population of NHPI singlerace individuals in the country.<sup>2</sup> For decades, NHPI community-based organizations (CBOs) have provided critical resources and support for families across California. These CBOs include Pacific Islander Health Partnership, Samoan Community Development Center, and Marshallese Youth of Orange County. Many of these organizations have for decades provided social safety net programs for NHPI community members through services such as after school programming, youth leadership development, mental health support, health care access, food distribution, citizenship classes, voter engagement, health education, and workforce development. Over 60 NHPI CBOs are based in California and the majority have provided direct family and community support during the pandemic.

Nevertheless, NHPI CBOs continue to face significant barriers limiting their access to funding and resources:

- 1. There is a **lack of disaggregated NHPI and subgroup data** that could uncover disparities and inequities which would justify much needed support for NHPI community-centered support services.
- 2. The continued use of the Asian American and Pacific Islander (AAPI) label in data collection and community organizing efforts **largely renders NHPI needs invisible**; additionally, organizations claiming to serve AAPIs often direct only a small fraction of AAPI resources to NHPI services and communities.
- 3. Funders such as state and local government agencies often **do not have knowledge or familiarity with NHPI communities and the historical, cultural, and political contexts** that frame their lived experiences. As a result, NHPI organizations must expend valuable time and scarce resources repeatedly educating government agencies and other funders in order to advocate for funding.
- 4. The use of place-based funding approaches by funders has proven ineffective in directing resources to NHPIs since our communities are geographically dispersed throughout the state.

These challenges have been further exacerbated by the ongoing COVID-19 pandemic and its disproportionate impact on members of the NHPI community. Despite this, NHPI CBOs across California have been instrumental in alleviating hardship by providing housing, food, and emergency services.<sup>3</sup> For example, the Southern California Pacific Islander COVID-19 Response Team (SoCal PICRT), a coalition of 20 NHPI CBOs, shared and coordinated pandemic-related resources and information, developed effective outreach and communication strategies to reach NHPI communities, and built organizational capacity to sustain its members' efforts. Utilizing minimal, piecemeal funding, these organizations successfully coordinated and operated COVID-19 testing sites and vaccination community-based clinics, designed COVID-19-related education campaigns in English

and six Pacific Islander languages, and guided families to securing wrap-around services that linked them to needs-specific COVID-19 resources.

### Scope and Key Findings: Funding of California NHPI CBOs to Achieve Health Equity

In 2022, the State of California expressed and affirmed its commitment to health equity.<sup>4</sup> Such a commitment must include ensuring the effective care and support of NHPI families and investing in the sustainability of experienced NHPI CBOs. These CBOs are best positioned to meet the cultural and linguistic needs of our communities and to close the health disparity gap.

In response to an online survey of 21 Californiabased NHPI CBOs administered by members of this policy brief team to gain a holistic understanding of funding equity's impact on health equity, NHPI community leaders described how the COVID-19 pandemic significantly increased demand for culturally and linguistically competent services. They also expressed how the strain on organizational resources and continued uncertainty regarding the financial survival of their organizations was the result of historical underinvestment in NHPI CBOs. On top of these funding challenges, CBOs faced difficulty in recruiting and maintaining volunteers with a limited number of full-time staff members. However, upon seeing an increase in community members seeking support in covering the cost of everyday needs (e.g., housing, food, transportation, etc.) to make it through the pandemic, many CBOs were successful in pivoting and expanding their work to include COVID-19 support (e.g., disseminating information about how to prevent contracting the virus, sharing vaccination locations for community members, hosting vaccine clinics, etc.). More survey findings may be found in the policy report.

## Recommendations

We therefore recommend that the State of California:

- 1. Provide annual funding and equity-based funding for CBOs that primarily serve historically underinvested communities, including Native Hawaiians and Pacific Islanders. Ongoing annual funding should support the sustainability of community organizations serving Native Hawaiian and Pacific Islander communities in areas of organizational staffing and capacity development, and include accountability mechanisms. Legislation should also ensure full distribution of equity-based funding, such as grants from the State of California for historically underinvested communities, including Native Hawaiians and Pacific Islanders. Requirements must account for the severity of disparities impacting underinvested communities that are relevant to the funding's purpose.
- 2. Fund the publication of annual reports summarizing Native Hawaiian and Pacific Islander data collected by state agencies across major areas including health, education, employment, and criminal justice. Create a Native Hawaiian and Pacific Islander community advisory board to review the data and provide input and feedback regarding the report's development and dissemination.

## Endnotes

1. United States Census Bureau, "About the Topic of Race," last modified March 1, 2020, https://www.census.gov/topics/population/race/about.html#:-:text=Native%20 Hawaiian%200r%20Other%20Pacific,Samoa%2C%200r%20Other%20Pacific%20Islands

2. Ninez A. Ponce, Riti Shimkhada, and 'Alisi Tulua, Disaggregating California's COVID-19 Data for Native Hawaiians and Pacific Islanders and Asians (Los Angeles: UCLA Center for Health and Policy Research, 2021).

3. National Coalition for Asian Pacific American Community Development (National CAPACD), Resilient AAPI Communities in the Time of COVID-19: How AAPI Community-Based Organizations are Responding to the Pandemic (Washington: National CAPACD, 2021). https://www.nationalcapacd.org/wp-content/uploads/2021/05/ NationalCAPACD\_CovidBriefs\_Housing\_final\_042021.pdf

4. California for All, "California's Commitment to Health Equity," last modified July 1, 2022, https://covid19.ca.gov/equity/



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