

Marshallese Covid-19 Response and Relief Plan

Draft Proposal by Marshallese Covid-19 Response Task Force, RMI Consul General Eldon Alik, Chair / Marshallese Educational Initiative, a 501(c)(3) nonprofit organization

Marshallese community members, more than 12,000 of whom reside in Northwest Arkansas, are disproportionately affected by Covid-19. Marshallese are especially vulnerable to coronavirus, in part, due to underlying health conditions, employment in high-risk occupations, and multigenerational household living arrangements. On behalf of the Marshallese Covid-19 Response Task Force—a diverse group of Marshallese community advocates, leaders, and community allies—we propose the Marshallese Covid-19 Response and Relief Plan to meet the immediate needs of Marshallese community members who reside in the state, many of whom not only suffer from the health effects of covid-19, but struggle due to financial hardship primarily as a result of loss of income and/or employment as a direct result of the pandemic.

Background: Marshallese in Arkansas

The Marshallese, people from the Republic of the Marshall Islands, an archipelago in the north, central Pacific, migrated to Arkansas beginning in the 1980s. Following World War II, the U.S. military, which liberated the Marshall Islands from the Japanese, occupied the atolls and commenced testing nuclear weapons in 1946. A year later, the Marshall Islands became part of the U.S. Strategic Trust Territory of the Pacific (1947-1986). As Trustee, the United States was charged with providing the education, health, and well-being of the Marshallese people. However, from 1946-1958 the United States detonated 67 nuclear weapons in the Marshall Islands, which resulted in forced relocations, and biological, ecological, and cultural consequences that continue to affect the Marshallese community today. After the two nations signed the Compact of Free Association, Marshallese were allowed to travel and work in the United States, in exchange for continued U.S. military testing, use of a military base, and limited compensation for nuclear damages.

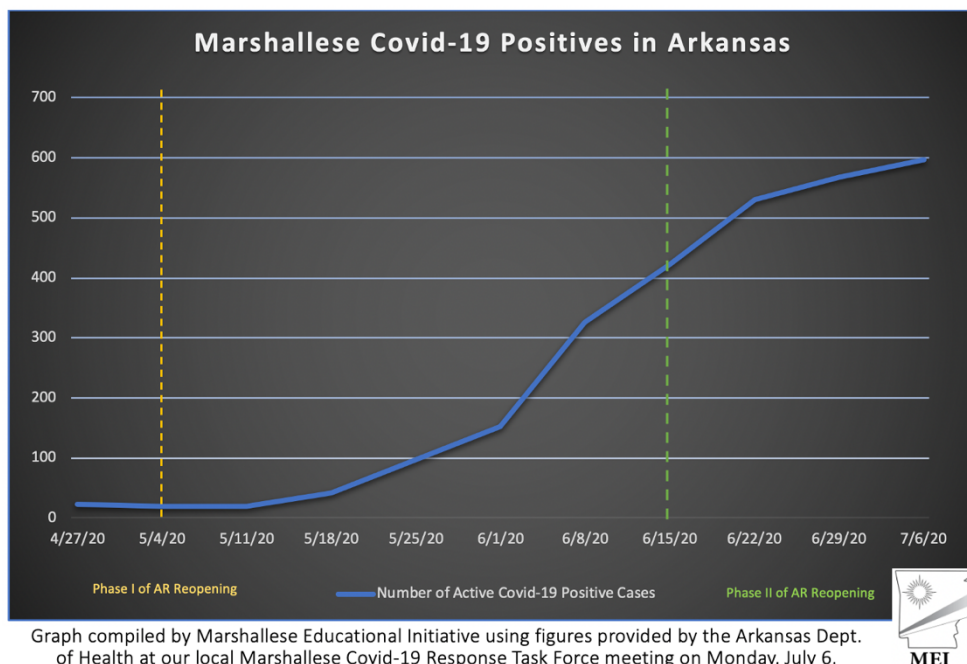
The first Marshallese to arrive in Arkansas in the early 1980s was John Moody, who eventually found work at Tyson Foods. Since then, Marshallese have relocated to the Midwest seeking a lower cost of living (compared to Hawai'i and the West Coast where many first relocated), and for access to employment, education, healthcare facilities (there is only one hospital in the Marshall Islands and preventative care is negligible), and to join their families (as a collective society, maintaining strong, expanded family and kinship ties are a central aspect of Marshallese culture).

Disproportionate Impact of Covid-19

In late April, twenty-three Marshallese residents had tested positive for the coronavirus, according to the Arkansas Department of Health (ADH, report to Task Force). By June 1, the number of active positive cases had risen to 153, which more than doubled within the next week to 326 positive cases. On July 6, the number of Marshallese who were positive stood at 596 (see chart below), which represented just over 2% of the covid-19 positive cases in the state. Marshallese represent .7% of the population.

Covid-19 positive cases were (and continue to be) clustered in Northwest Arkansas (Washington, Benton, Maddison, and Carroll Counties) and in SE Arkansas in Sevier County, according to the ADH. As of this writing, the number of Marshallese deaths in Washington and Benton County stood at 39, based on coroners' records and reported to the RMI Consulate as of July 13. The ADH count,

which stands at 25, is significantly less because of the high number of Marshallese who became ill and died and either tested positive post-mortem or whose positive test results had not been recorded by the ADH before death. Even using the *lower* ADH totals, Marshallese currently represent 43% of the deaths to covid-19 in Benton and Washington Counties, yet make up roughly 3% of the population in those counties (U.S. Census estimates, 2018). The discrepancy in these figures also points to the probability that the number of Marshallese who are covid-19 positive is likely much higher than what is known. It also starkly demonstrates how mistrust of the healthcare system, coupled with fear of being isolated from families has an impact on testing and tracing, both of which have been identified as barriers by community leaders and the CDC Summary report.



Factors that contribute to Marshallese community members being more vulnerable to the coronavirus includes the lack of healthcare. As Compact migrants, Marshallese, due to an error, lost access to Medicaid in 1996, and thus many adult Marshallese do not have access to healthcare, which affects overall health and wellbeing and contributes to Marshallese reluctance to see a doctor out of fears of not being able to pay the bill or being denied service. Partly as a result of the nuclear testing era and U.S. Trust administration, the Marshallese diet changed dramatically, and today, Marshallese have some of the highest rates of Type 2 diabetes in the world, which has been identified as a pre-existing condition that makes one especially vulnerable to becoming severely ill. Additionally, as a collective culture, Marshallese value extended kinship ties and thus live in multigenerational households, a factor that makes self-isolation difficult. Finally, Marshallese work primarily in the poultry industry in workplace settings deemed both high-risk and essential.

Since March Marshallese residents have suffered financial hardship as a direct result of Covid-19. Marshallese workers who test positive, regardless of symptoms, are quarantined for two weeks. While poultry plants have pledged to continue to pay these workers, there have been notable discrepancies in the system. Workers have been contacting Task Force members and organizations for weeks sharing that they have not received paychecks while in quarantine. Also, many workers have had to go into quarantine while waiting on test results to arrive due to their being in contact with someone who has tested positive. Often, these workers also go unpaid, and depending upon their

employer, are still struggling to receive payment. Now, with the increased testing nationwide, it is taking more than two weeks for results to come in. This has put an enormous financial burden on Marshallese community members.

Additionally, we have received requests to assist with paying for funeral expenses. Just today one of our partner organizations, UAMS, contacted us to see if we were provided this assistance. Two families members with whom they work have lost two family members each; neither can afford funeral arrangements.

Capacity

Our organization, Marshallese Educational Initiative (MEI), is a 501(c)(3) nonprofit founded in 2013 and based in Springdale, Arkansas. We currently have federal grants with the Office of Insular Affairs, Department of Interior (\$217,000 for Oct. 2019-March 2021), and the Department of Justice, administered through the Department of Finance and Administration (\$77,000 including match for Oct. 2019-Sept. 2020, renews for 2021). We employ 3 full-time and 3 part-time employees, and several consultants who assist with specific projects. Our annual operating budget is over \$210,000. We also have received funding in 2020 for Census work through Arkansas Counts/Arkansas Community Foundation, a Bridge Grant through the RASO/Walton Foundation, and contract with the University of Arkansas for Medical Sciences on several projects in the health field. Our primary mission is to raise awareness of Marshallese culture and promote intercultural dialogue to foster positive social change. In addition to outreach to help Marshallese better navigate life in the United States, we offer classes and trainings to non-Marshallese to educate them about Marshallese culture. We also offer specific programming for women, elders, and youth, specifically working to raise educational attainment levels, and humanities-based, and arts and culture programming.

Since March, MEI staff have been working closely with the Marshallese Covid-19 Response Task Force. The Task Force meets weekly, sharing ideas on how best to respond to the crisis, and hearing from health officials, community advocates, poultry plant representatives, and at times government representatives. MEI staff members began responding to the pandemic by translating informational materials to educate the public about Covid-19 and creating and posting videos and flyers to social media (many Marshallese look to Facebook as a source of information). We also work closely with UAMS Northwest Center for Community Health and Research, which is also responding to the pandemic in similar ways.

In April MEI received a \$10,000 NWA Equitable Food Response grant to purchase and deliver healthy foods to Marshallese residents. With the assistance of Task Force volunteers, the goal was to deliver to 40 families each week, but after the first week, that number grew to over 100 families. In June that grant was renewed for \$14,800 to deliver food to 80 families/week who are in quarantine.

Currently, our organization has been using funds raised on a crowdsourcing site, Go Fund Me, to pay Marshallese community members' utility bills: gas, water, electric, and internet. Initially, we focused strictly on families who were in quarantine due to a family member testing positive. However, given the additional number of workers who have not received pay and are behind on their bills—some of whom are facing eviction notices—we have expanded our efforts to assist additional families with utilities. In 2-1/2 weeks, we have already spent more than \$20,000. When possible, we are educating community members about other available resources, like HARK, Salvation Army, the Samaritan Center, and the Arkansas Coalition of Marshallese, organizations who have periodically paid expenses like rent, though their resources are somewhat limited and/or inconsistent due to funding shortages and need.

Response Plan Budget

To continue to meet the immediate needs of Marshallese residents, we propose the Marshallese Covid-19 Response and Relief Plan, and request the following amounts for August-November from CARES funds.

\$80,000	utility bills (gas, electric, water, internet/phone)
\$120,000	pay or assist with rent payments
\$30,000	help offset funeral costs
\$9,600	staff member for 30 hours/week, \$20/hour, for 16 weeks to work exclusively with outreach and paying bills; manage expense reports
\$7,000	Marshallese radio advertisements and production costs for videos to educate the public about covid-19
\$15,000	Cleaning supplies, diapers, formula, masks, etc.
\$7,000	To support Intercultural Competency Trainings to health professionals and government workers to help them better understand and communicate with Marshallese residents
\$5,000	Overhead
\$273,600	Total