

Pacific Partners for Tobacco-Free Islands Builds Tobacco Control Capacity in U.S. Affiliated Pacific Islands

The Pacific Partners for Tobacco-Free Islands (PPTFI) is a collaborative of tobacco control stakeholders from all six jurisdictions that make up the U.S. Associated Pacific Islands (USAPI). Despite limited funding, geographic separation between islands, and other challenges, territories participating in PPTFI have found it to be a source of support to build local coalitions and tackle the tobacco control issues and challenges unique to each island state and territory.

The six jurisdictions that make up the USAPI – American Samoa, the Commonwealth of Northern Mariana Islands (CNMI), the Federated States of Micronesia, Guam, the Republic of Marshall Islands, and the Republic of Palau – are comprised of hundreds of islands that extend across three million square miles of the Pacific Ocean. While all of these jurisdictions are eligible to apply for federal grants from CDC and other agencies, only American Samoa, CNMI, and Guam are eligible to receive funding from the Tobacco Master Settlement Agreement based on their jurisdictional status as U.S. territories. Limited funding sources can only support basic public health infrastructures to serve the citizens of the USAPI.

In 2007, PPTFI was formed to support tobacco control efforts in all six USAPI states and territories to reduce tobacco-related deaths in these jurisdictions. Following in 2008, Truth Initiative (at the time known as American Legacy Foundation) and other tobacco control partners convened an in-person meeting of these jurisdictions, and afterwards decided to support PPTFI members through funding and the delivery of customized technical assistance for community engagement, evidence based programming, and policy. The greatest value of PPTFI was the member territories' ability to share best practices and success stories, and provide mutual support unique to their challenges.

- PPTFI was formed in 2008 for the U.S.
 Affiliated Pacific Islands to collaborate with one another on challenges they face in tobacco control.
- PPTFI meets regularly by teleconference to share success stories and best practices to improve tobacco control in island states and territories.
- Various tobacco control policy and programmatic successes in recent years can be attributed to the formation of the PPTFI.

Steps Taken:

PPTFI formed after all six USAPI states and territories convened in 2008 in Hawaii, where a
diverse group of stakeholders from each jurisdiction discussed the future of tobacco control in
the USAPI. A variety of community stakeholders were also present, including faith leaders,
women leaders, and youth representatives from the USAPI, along with national tobacco
partners such as Truth Initiative.



- PPTFI formalized its partnership by developing bylaws and adopting an action plan to set priorities and track progress. Priorities listed in the action plan include improving existing programs, strengthening partnerships, and providing publication opportunities.
- Participating territories convened with each other and national tobacco partners by teleconference (and face-to-face whenever possible) to share best practices, success stories, and challenges in their tobacco control work.

Results:

- All USAPI have passed a clean indoor air act since the formation of the PPTFI.
- In 2010, Guam started a Non-Communicable Disease Consortium, which includes a tobacco
 control action team, to build partnerships between government agencies and local stakeholders
 on key chronic disease issues. Through this consortium, Guam partnered with a number of
 government agencies, faith-based groups (including the local Archdiocese), and other non-profit
 organizations to aid in the enforcement of smoke-free air laws and also aid in the delivery of
 tobacco cessation services.
- In 2015, Palau created the Palau National Coordinating Mechanism, which includes a tobacco control workgroup that organizes resources and community partners. CNMI founded Team YEAH (Youth Empowerment Alliance for Health) that works on second-hand and third-hand smoke exposure awareness in schools and other public spaces.
- Since PPTFI formed, both Guam and CNMI have started their own tobacco quitlines, with technical assistance from Truth Initiative and funding from the CDC.
- Other programmatic and policy successes in recent years include:
 - American Samoa: The tobacco control program has partnered with hospitals to deliver tobacco cessation services to admitted patients, and following up upon discharge.
 - o CNMI: Incorporating e-cigarettes in existing smoke-free legislation.
 - Federated States of Micronesia: Banning smoking in vehicles when a minor is present, and a ban on importing e-cigarettes on the island of Kosrae.
 - Guam: Smoke-free bars and smoking ban in vehicles when a minor or pregnant woman is present.
 - Marshall Islands: A restriction on the importation of betel nut into the Marshall Islands, which came into law due to youth advocacy efforts.
 - Palau: Raising the tobacco purchase age to 21, increasing taxes on cigarettes to \$5 per pack, restricting public tobacco advertisements and sponsorships, and prohibiting tobacco smoking and chewing in public spaces.
- PPTFI has empowered USAPI representatives to translate collective support and expertise into
 policy and programmatic successes on their own islands, where the challenges in tobacco
 control and related chronic disease issues vary significantly. For example, chewing tobacco is
 more prevalent than combustible cigarettes in some of the USAPI. In addition, the chewing of
 betel nut a stimulant that causes oral cancer and other health issues is common in many
 jurisdictions within the Pacific and is sometimes combined with chewing tobacco.
- Building the coalition to support local tobacco control efforts has created opportunities for PPTFI members to make progress in other chronic disease areas. For example, Palau's Ministry of Health has integrated tobacco cessation as part of its Million Hearts program to improve hypertension control and has worked with their Ministry of Education and other community



partners to include instruction on alcohol and tobacco in school curricula. CNMI is working with hospitals to pilot a worksite wellness program, which is made possible, in part, because hospital physicians and other clinics participate in CNMI's stakeholder groups that address tobacco control and other health issues.

Lessons Learned:

- The modest funding and technical assistance provided by CDC and other national partners
 allowed PPTFI members to self-organize and work across islands to provide best practices and
 lessons learned unique to USAPI in a largely self-sustaining manner. The USAPI now have
 improved tobacco control capacity as a result of their own initiative after partners helped start
 the PPTFI.
- Since PPTFI's formation in 2007, much of USAPI's progress in tobacco control relates to
 establishing coalitions that involve local stakeholders and community members in tobacco
 control work. When resources are lacking, public-private partnerships that bring together
 government and clinicians, youth, faith and traditional leaders, and other community members
 are effective in delivering resources to the public and mobilizing support for health policies.
- Based on geographic, economic, and cultural challenges unique to the region, tobacco control in the USAPI is inherently different from tobacco control in the 50 U.S. states and Washington, D.C. Within the island jurisdictions, rates of poverty and unemployment are higher, populations are far more disparate, and chewing of betel nut and tobacco is oftentimes more prevalent than cigarette smoking. PPTFI members benefit simply from having the support of fellow tobacco stakeholders in the USAPI, giving them the confidence to pursue comprehensive tobacco control policies and programs in their own states and territories.

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Please contact Laura Hamasaka (lhamasaka@truthinitiative.org) to request a printed or electronic copy of the monograph "Pacific Partners for Tobacco-Free Islands: Weaving Together our Resources and Cultures to Address Tobacco Use."