

Advancing Health Equity: Reducing Maternal-Fetal Mortality in Hawai'i through Community-Academic Partnership

Kyoung Eun Lee, PhD, APRN, WHNP-BC¹, Sunny Chen, BSN, RN²,
Molly R Altman, PhD, CNM, MPH, FACNM¹,
Holly B Fontenot, PhD, APRN, WHNP-BC, FAAN¹, Joanne R Loos, PhD¹

¹ School of Nursing and Dental Hygiene, University of Hawai'i at Mānoa, ² Health Mothers Healthy Babies Coalition of Hawai'i

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The Spotlight on Nursing is a recurring column from the University of Hawai'i at Mānoa School of Nursing and Dental Hygiene (SONDH). It is edited by Holly B. Fontenot, PhD, APRN, WHNP-BC, FAAN, FNAP; Associate Dean for Research, Professor, and Frances A. Matsuda Chair in Women's Health for SONDH, and HJH&SW Contributing Editor; and Joanne R. Loos PhD, Science Writer for SONDH.

Abbreviations

HMHB – Healthy Mothers Healthy Babies Coalition of Hawai'i

SONDH – School of Nursing and Dental Hygiene

The Urgent Challenge: Maternal-Fetal Health Disparities in Hawai'i

Maternal-fetal health disparities in Hawai'i remain a pressing public health crisis, shaped by persistent racial, geographic, and economic inequities. Native Hawaiian, Pacific Islander, and other historically marginalized populations experience disproportionate burdens of maternal morbidity and mortality.¹ For example, from 2017 to 2019, Native Hawaiian and Pacific Islander women were significantly more likely to die from pregnancy-related causes than women of other racial or ethnic groups.^{2,3} In 2020, 1 in 3 infants in Hawai'i were born to a woman receiving inadequate, late (after 2nd trimester), or no prenatal care.⁴ According to the Office of Hawaiian Affairs (2022), only 59.5% of Native Hawaiian women receive prenatal care during the first trimester⁵—well below the national target of 80.5% set by Healthy People 2030.^{5,6} Women living on rural neighbor island counties are doubly impacted, with reduced provider availability and increased travel distances to reach birthing facilities—averaging over 12 miles, compared to 8.8 miles on O'ahu.¹ Unlike other US regions where distance is measured in miles traversed on ground, patients in Hawai'i may be required to travel by air to another island to receive specialty care or deliver their babies. These inter-island travel requirements introduce significant barriers—including cost, scheduling, and transportation logistics—that disproportionately affect low-income and Medicaid populations. In many areas, especially Moloka'i, Lāna'i, and rural parts of Hawai'i Island, the scarcity of maternity providers and birthing facilities further intensifies disparities and delays in care. While the 2023 March of Dimes Maternity Care Desert Report (2023)⁷ does not classify Hawai'i as hav-

ing maternity care deserts, this designation overlooks the unique structural and geographic barriers that limit access. In practice, many communities across the state function as *de facto* maternity care deserts due to the unavailability of local services and the necessity of inter-island travel. These systemic limitations highlight the urgent need for mobile outreach, telehealth expansion, and community-rooted support networks across all islands.

Additional disparities manifest in mental and behavioral health outcomes. The prevalence of postpartum depressive symptoms in Hawai'i is estimated at 12% to 18%, depending on the population.⁸ Native Hawaiian and Pacific Islander mothers are 1.5 to 2 times more likely to report depressive symptoms postpartum compared to White mothers, due to the limited access to mental health providers and cultural stigma remain barriers to care.⁸ These disproportionate outcomes reflect entrenched disparities in chronic disease burden, limited access to timely and culturally appropriate care, and structural inequities embedded within the health care system.

Addressing these complex and layered disparities requires an integrated approach that merges academic knowledge with community wisdom. Therefore, a new partnership between the School of Nursing and Dental Hygiene (SONDH) at the University of Hawai'i at Mānoa and the Healthy Mothers Healthy Babies Coalition of Hawai'i (HMHB) has formed. This novel collaboration proposes an innovative and scalable framework to reduce maternal-fetal mortality, ensure early and sustained prenatal care, and improve overall birth experiences for all birthing people in Hawai'i.

Advancing Equity Through Community-Rooted Care: HMHB

HMHB is a nonprofit, community-rooted organization with a decades-long track record of serving the maternal and child health needs of Hawai'i's most vulnerable populations.⁸ Founded over 30 years ago, HMHB continues to lead statewide efforts to reduce reproductive health inequities through integrated clinical services, education, peer support, and policy advocacy. Guided by core values of equity, autonomy, and innovation, HMHB's mission is to support and empower individuals and families across the reproductive lifespan—from preconception through pregnancy, postpartum, and early parenting.⁹ Through a comprehensive model of wraparound care, HMHB addresses not only

clinical needs but also social determinants of health such as housing insecurity, food access, transportation, and systemic racism.

HMHB offers an array of services including birth control access, reproductive services, sexually transmitted infection testing and treatment, cervical cancer screening, and prenatal and post-partum care. These services are delivered through a mix of fixed-site clinics and mobile medical units that travel to remote and underserved communities across the islands.¹⁰ Nurses, nurse practitioners, and midwives provide culturally grounded support to Native Hawaiian and Pacific Islander mothers living in remote areas with limited/no access to OB care through the Māna Mama and OG Mama programs. Māna Mama focuses on prenatal and postpartum care through traditional practices, and OG Mama offers peer-led outreach and guidance for women navigating substance use and recovery during pregnancy. The organization's Community-Based Doula program provides holistic childbirth and postpartum support rooted in cultural competence and lived experience. Their 'Piko Pals' initiative brings together new parents in peer-led groups that foster resilience, emotional well-being, and social connectedness. HMHB's expanded telehealth offerings, partnerships with shelters, and educational classes further extend their reach to individuals who otherwise might not have access to timely or quality care.

Through its multi-layered services, HMHB functions as both a health care provider and community advocate—an essential bridge between marginalized communities and the formal health care system. This uniquely positions HMHB as an indispensable partner for collaborative efforts to eliminate maternal-fetal disparities across the state.

Academic Excellence in Action: SONDH at the University of Hawai'i at Mānoa

An academic leader in advancing health equity through nursing education, research, and service, SONDH is rooted in a mission to improve the health of Hawai'i's diverse and geographically dispersed populations. The school has a mission to prepare culturally responsive clinicians and scholars who are trained to address health disparities across the lifespan.¹¹

The faculty at SONDH conduct impactful research across maternal-child health, Indigenous wellness, population health, and rural care access. Their work is often transdisciplinary and community-engaged, with strong partnerships that translate evidence into action. Faculty initiatives focus on improving perinatal care delivery models, advancing equity in access to mental health care, and understanding the impact of social determinants on maternal outcomes.

The undergraduate and graduate education programs cultivate the next generation of health care clinicians and leaders equipped to deliver system-level change. These students engage in high-impact clinical training that integrates concepts of trauma-informed care, cultural humility, and interprofessional collaboration. SONDH's commitment to experiential learning places students in real-world settings, including community clinics, rural hospitals, and cul-

turally focused health organizations, which allows them to apply theory and research to practice. The school's alignment with HMHB's mission and operational model creates a synergistic opportunity to both support and scale equitable maternal health interventions across the state.

A Shared Vision: Building a New Collaborative Infrastructure for Health Equity

The goals and values of SONDH and HMHB converge in their shared vision to eliminate maternal-fetal health disparities in Hawai'i. Together, these institutions form a new and powerful alliance to address the systemic barriers impacting maternal and infant health.

The new partnership will integrate SONDH students into HMHB's clinical programs, offering immersive training in prenatal, postpartum, and reproductive care. These clinical placements not only expand students' clinical and cultural competence but also increase HMHB's care capacity—particularly in underserved and neighbor island communities. Graduate students, in particular, will contribute to program improvement, service delivery, and practice-based research. In return, HMHB benefits from the scholarly engagement and workforce reinforcement provided by academic collaborators and future nursing leaders.

Beyond clinical training, the collaboration supports rigorous, community-informed evaluation of maternal health initiatives. The faculty, students, and HMHB team plan to co-develop new and assess outcomes for current clinical interventions such as mobile outreach, same-day reproductive services, peer-support groups like Piko Pals, and the Community-Based Doula Program. These existing initiatives aim to improve parenting confidence, reduce mental health burdens, and enhance equitable access to care—particularly for Native Hawaiian, Pacific Islander, and other Black, Indigenous, People of Color (BIPOC) birthing families; yet long term outcomes have yet to be explicated.

The new partnership is structured around bidirectional knowledge exchange: HMHB's on-the-ground expertise guides academic inquiry, while SONDH's research infrastructure supports service innovation. Community feedback will be integrated at every stage of any new program design and evaluation, ensuring that findings remain relevant, respectful, and impactful. The shared aim is to generate data-driven insights into the social and clinical drivers of maternal health inequities in Hawai'i. These insights will inform future interventions, guide best practices, help to generate programmatic revenue, and provide the knowledge needed to inform policy change.

The joint team is planning to pursue federal and foundation grant funding. Educational grant funding directly supports workforce development, training opportunities, and the expansion of clinical services that are culturally relevant and place-based. Research grant funding drives development and testing of innovation interventions necessary to guide services that will reduce health disparities and improve health outcomes for the communities served. Faculty and HMHB leader led continuing education, commu-

nity symposia, and policy engagement will also contribute to long-term systems change.

Ultimately, this collaborative infrastructure is more than a service network—it is a sustainable, equity-centered model grounded in Hawai‘i’s values of *aloha*, community, and *kuleana* (responsibility). By bridging academic excellence with community wisdom, the new SONDH-HMHB partnership offers a transformative blueprint for improving maternal and infant health outcomes statewide.

Conclusion: A Commitment to Equity and Generational Wellness

The collaboration between SONDH and HMHB represents a transformative model for improving maternal health outcomes across Hawai‘i by centering equity, cultural responsiveness, and community empowerment. Through joint

publications, community symposia, and continuing education workshops, the knowledge generated will be widely disseminated, ensuring research translates into real-world impact. Recognizing maternal-fetal mortality as a solvable crisis, this partnership emphasizes cross-sector collaboration, cultural insight, and structural investment to build a robust, research-informed model of care that serves Hawai‘i’s most vulnerable birthing populations. From peer support and mobile clinics to student training and data analysis, the shared infrastructure aims to close widening perinatal gaps and foster a maternal health system that leaves no family behind. This collaboration represents a hopeful and transformative response, one rooted in community, evidence, and *kuleana*.

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