

Strategic Priority: Maui Ola (Health)

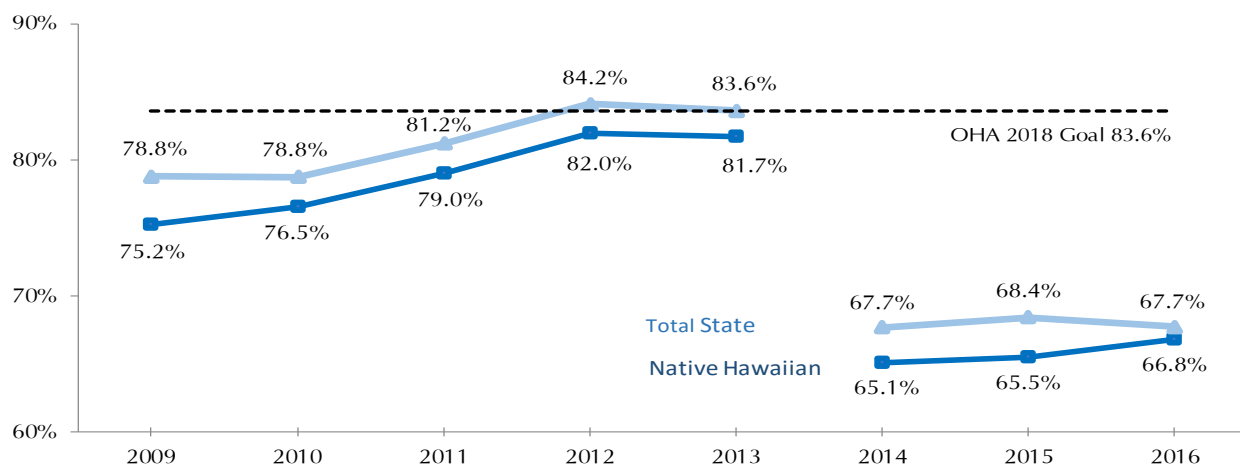
Strategic Result — Increasing the percent of Native Hawaiian families actively improving lifestyle choices by engaging in health programs and supportive family development practices by:

- Increasing the number of Native Hawaiian mothers receiving prenatal care in the first trimester from 75.2% in 2009 to 83.6% by 2018.

BACKGROUND. Early identification of maternal disease and risks for complications of pregnancy or birth are the primary reasons for first trimester entry into prenatal care. This can help ensure that women with complex problems and women with chronic illness or other risks are seen by specialists if required. Early high quality prenatal care is critical to improving pregnancy outcomes (Hawai'i PRAMS, 2010).

Figure 1 depicts the percent of live births of resident Native Hawaiian and State mothers who received prenatal care in the first trimester from 2009-2016.

Figure 1. First Trimester Prenatal Care for Resident Mothers in Hawai'i (2009-2016)



SOURCES. Hawai'i State Department of Health. Office of Health Status Monitoring (OHSM) Vital Statistics, 2009. Hawai'i Health Data Warehouse (HHDW) Reports, 2010-2013. Indicator-Based Information System (IBIS), 2014-2016.

Notes: OHSM data in 2009 contained an Unknown category for prenatal trimester care. In 2010, HHDW started reporting on Vital Statistics data without the Unknown category. All the percents in this Indicator Sheet include data with the Unknown category.

Due to changes in data collection methods in Vital Statistics, data from 2014 forward cannot be compared to prior years as indicated by the broken time lines.

The y-axis does not begin at 0%.

FINDINGS

- From 2013 to 2014, the percent of Native Hawaiian mothers who received prenatal care in the first trimester decreased due to methodology changes. In 2014, the birth certificate started collecting the exact date prenatal care began (MM/DD/YYYY) as recorded in the medical record. Previously only the month was recorded as reported by the mother. The OHA 2010-2018 Strategic Plan was based on pre-2014 methodology.
- In 2016, there was a 0.9 percentage point difference between Native Hawaiians and the State.

TERMS.

Hawai'i Pregnancy Risk Assessment Monitoring System (PRAMS): A survey project funded by the Centers for Disease Control & Prevention in collaboration with the Hawai'i Department of Health, Office of Health Status Monitoring (OHSM) to identify and monitor maternal behaviors and experiences before, during, and in the first few months after a live birth in Hawai'i. The first full year of data was collected in 2000.

Maternal and Child Health Bureau (MCHB): The governmental program in the Health Resources and Services Administration responsible for ensuring the health and well-being of women, infants, and children.

Prenatal Care: Prenatal care is medical attention given to the expectant mother and her developing baby. It also involves the mother's caring for herself by following her health care provider's advice, practicing good nutrition, getting plenty of rest, exercising sensibly, and avoiding things that could harm her or her baby (MCHB, 2013).

REFERENCES.

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