



RURAL PILINA MAMA GRANTS

MATERNAL HEALTH ADVANCEMENT THROUGH MĀLAMA & ACTION

RURAL MATERNAL AND INFANT HEALTH COMMUNITY GRANTS REQUEST FOR PROPOSALS

AWARD:	\$20,000 per project
AVAILABLE FUNDING:	Up to ten awards annually, contingent upon available funding
PROJECT PERIOD:	Up to 12 months
APPLICATIONS:	Accepted on a rolling basis while funding is available
PURPOSE:	Community-driven projects that address Rural Pilina priorities and strengthen the rural maternal and infant health workforce

About Rural Pilina MAMA

The Hawai'i State Rural Health Association (HSRHA) invites applications for the Rural Pilina MAMA Grants: Maternal Health Advancement through Mālama and Action. These Rural Maternal and Infant Health Community Grants support practical, community-driven workforce projects in rural Hawai'i.

Supported through Rural Health Transformation Program (RHTP) HOMERUN workforce funding, Rural Pilina MAMA provides \$20,000 grants for projects that respond to priorities identified through HSRHA's statewide Rural Pilina maternal and infant health efforts and strengthen the rural maternal and infant health workforce.

Core Requirement: Every project must address at least one Rural Pilina priority and show a clear benefit to the rural maternal and infant health workforce.

Applications will be reviewed as they are received. Submission does not guarantee funding. HSRHA may request clarification or reasonable changes to a proposed scope or budget before making an award.

Who may apply:

Eligible applicants include Hawai'i-based organizations, clinics, healthcare practices, community groups, cultural practitioners, collaborative partnerships, and individuals working with a fiscal sponsor. Projects must take place in and primarily benefit eligible rural Hawai'i communities. Eligible areas include Hawai'i County, Maui County, Kaua'i County, and these rural O'ahu ZIP codes: 96712, 96717, 96731, 96762, 96786, 96791, 96792, and 96795.

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What projects should do:

- Address at least one Rural Pilina priority finding.
- Strengthen the rural maternal and infant health workforce – for example through training, mentorship, well-being, recruitment, retention, collaboration, care coordination, or increased workforce capacity
- Respond to a need in the rural community being served
- Be informed by community voice and local experience
- Include realistic activities and outcomes that can be completed with \$20,000 in up to 12 months

A project may also provide services to families or improve access to care, but it must have an intentional workforce benefit. Simply paying staff to continue routine services is not enough

Rural Pilina MAMA Grant Priorities

Applicants must select at least one priority their proposed project will address. Because these grants are funded through the RHTP HOMERUN workforce initiative, all projects must demonstrate a clear benefit to the rural maternal and infant health workforce.

- **WORKFORCE DEVELOPMENT AND SUSTAINABILITY**

Strengthen the rural maternal and infant health workforce through training, professional development, mentorship, recruitment, retention, leadership development, or strategies that address burnout and workforce well-being.

- **COLLABORATION AND CARE COORDINATION**

Strengthen relationships, interdisciplinary collaboration, communication, referral pathways, resource sharing, and transitions across the maternal and infant health continuum.

- **PERINATAL BEHAVIORAL HEALTH INTEGRATION**

Build workforce capacity and strengthen the integration of mental and behavioral health within maternal and infant healthcare, including specialized training and certification.

- **TRUST-CENTERED AND TRAUMA-INFORMED CARE**

Equip and support the workforce to provide culturally responsive, trauma-informed, and relationship-centered care that strengthens trust with rural families and communities.

- **ACCESS AND CONTINUITY OF CARE**

Develop workforce-related solutions that help address geographic, transportation, insurance, financing, or other barriers affecting access to consistent maternal and infant healthcare.

- **COMMUNITY STRENGTHS AND RURAL INCLUSION**

Invest in local knowledge, community assets, and rural leadership while strengthening the inclusion of rural providers, partners, and communities in statewide maternal and infant health efforts.

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Proposed projects should be community-informed, responsive to rural needs, and designed to strengthen the capacity, coordination, effectiveness, or sustainability of the rural maternal and infant health workforce.

How to Apply

Complete the Rural Pilina MAMA application and provide:

- A brief description of the project and rural community need
- The Rural Pilina priority finding(s) or strategy the project will address
- The workforce group that will benefit and how the project will strengthen that workforce
- Who will benefit, the partners involved, and how community voice informed the idea
- The main activities, timeline, expected results, and how success will be measured
- A simple \$20,000 budget and budget explanation

Applicants may submit more than one application if each proposal is for a separate and distinct project.

SIMPLE APPLICATION REVIEW

REVIEW AREA	WHAT REVIEWERS WILL CONSIDER
Rural Pilina + Workforce Alignment	Does the project clearly address a Rural Pilina priority and strengthen the rural maternal and infant health workforce?
Community Benefit	Does it respond to a rural community need and reflect community voice?
Project Approach	Are the activities, partners, timeline, and expected results clear and realistic?
Budget	Is the \$20,000 budget reasonable, allowable, and connected to the proposed work?
Potential Impact	Is the project likely to create meaningful benefit or continued value?

Allowable Costs and Requirements:

Funds may support reasonable personnel time, training, supplies, contractual services, local travel, outreach, and limited equipment that are necessary for the approved project. Funds may not be used for food or beverages, lobbying or political activity, fundraising, major construction or renovation, or costs incurred before the award begins. HSRHA will make final decisions about cost allowability. Awardees will sign a grant agreement, complete the project within the approved period, use HSRHA's simple evaluation tools, submit basic participation information, and provide a brief final report.

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Federal Funding Statement

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FREQUENTLY ASKED QUESTIONS

1. What is Rural Pilina MAMA?

Rural Pilina MAMA provides \$20,000 grants for community-driven projects that address priorities identified through HSRHA's statewide Pilina maternal and infant health efforts while strengthening the rural maternal and infant health workforce. MAMA means Maternal Health Advancement through Mālama and Action.

2. How much funding is available?

HSRHA anticipates awarding up to ten \$20,000 grants each year, contingent upon available funding.

3. When may I apply?

Applications are accepted on a rolling basis while funding is available. Applications will be reviewed as they are received.

4. Who may apply?

Hawai'i-based organizations, clinics, healthcare practices, community groups, cultural practitioners, partnerships, and individuals with a fiscal sponsor may apply. Projects must primarily benefit eligible rural Hawai'i communities.

5. What is considered rural Hawai'i?

Eligible areas include Hawai'i County, Maui County, Kaua'i County, and designated rural O'ahu ZIP codes: 96712, 96717, 96731, 96762, 96786, 96791, 96792, and 96795.

6. Does my project have to be workforce-related?

Yes. Because Rural Pilina MAMA is supported through RHTP HOMERUN workforce funding, every project must show a clear benefit to the rural maternal and infant health workforce. This may include training, mentorship, recruitment, retention, well-being, professional connection, care coordination, team development, culturally responsive practice, or increased capacity.

7. May the project provide direct services to families?

Yes, when the service model intentionally strengthens workforce capacity or practice. A proposal that only pays staff to continue routine services, without a clear workforce strategy or outcome, will not qualify.

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FREQUENTLY ASKED QUESTIONS - CONTINUED

8. Does the project have to address every Rural Pilina priority?

No. Applicants must meaningfully address at least one of the Rural Pilina priorities.

9. May we submit more than one application?

Yes, if each application proposes a separate and distinct project. Funding is not guaranteed and depends on available funds and committee review.

10. May organizations apply together?

Yes. Partnerships are encouraged when roles are clear. One organization must serve as the lead applicant and fiscal agent.

11. May Rural Pilina MAMA funds be combined with other funds?

Yes. Complementary or braided funding is allowed, but the same expense may not be charged to more than one funding source. Related funding must be disclosed.

12. How will applications be reviewed?

Reviewers will consider Rural Pilina and workforce alignment, community benefit and voice, feasibility, budget, partnerships, and potential impact. HSRHA may also consider geographic distribution, duplication with other funded work, and available funding.

13. What reporting and evaluation are required?

Awardees will use an HSRHA-provided baseline form when appropriate, submit basic participation counts, and complete a brief final report. HSRHA will lead post-project and annual follow-up. Projects without direct participants will use a simple alternative measure approved by HSRHA.

14. How long may projects last?

Projects should generally be completed within 12 months unless HSRHA approves a different period.

15. When may project work begin?

Work may begin after the grant agreement is fully executed and the approved start date has arrived. Pre-award costs are not reimbursable.

16. Whom should I contact?

Contact HSRHA at connect@hsrha.org.