

How one Florida program reduced preterm births – and how it could serve as a model for other communities

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Preterm birth is the second-leading cause of infant deaths.

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One in 10 babies in the U.S. – nearly 374,000 infants – were born preterm in 2023, meaning before 37 weeks of pregnancy. More than 15% were very preterm, meaning they were born before 32 weeks. A full-term pregnancy lasts 40 weeks.

Florida's rate is slightly higher, at about 1 in 9 babies born preterm. In an average week, 456 of the 4,257 babies born in the state will be preterm, and 75 of those will be very preterm.

According to the March of Dimes, preterm birth and low birthweight-related health complications cause 37.5% of infant deaths nationwide. This makes preterm birth the second-leading cause of infant deaths, after birth defects. Preterm babies who survive infancy are susceptible to health complications later in life, including cerebral palsy and learning disabilities.

Preterm and low-birthweight babies – those weighing less than 5.5 pounds (2,500 grams) – are far more likely to go to the neonatal intensive care unit, or NICU. Very preterm infants tend to have the longest NICU stays, averaging around 43 days.

Beyond the emotional toll this takes on a family, preterm births and their resulting health complications carry substantial financial costs. The average NICU admission in 2021 cost around US\$71,000. And economists estimated the lifetime societal cost of all preterm babies born in 2016, from birth to subsequent disability care, at \$25.2 billion.

We are a public policy Ph.D. student and public policy researcher focusing on health policy and population health outcomes.

Recently, we were sifting through the data on preterm and low birthweight rates in the U.S., in search of places that are doing better than average at preventing preterm births. And that is what we found in the Central Hillsborough Healthy Start program, which serves a cluster of Tampa ZIP codes with roughly 177,000 residents.

In 2008, this program published records showing 30% lower preterm and low-birthweight rates among families at highest risk. Peer-reviewed evaluations link participation in the program to substantial reductions in preterm and low-birthweight outcomes.

These remarkable improvements remained consistent through 2020.

When we looked at what this program is doing, we found a set of practices that can serve as a model for other counties in Florida and around the U.S. to lower preterm birth rates, saving money and, more importantly, lives.

Screening for risk factors

The program does early screening for risk factors of preterm birth using Florida's Healthy Start prenatal risk screen at the pregnant person's first prenatal visit. This screening has been proven to correctly flag a good share of higher-risk pregnancies, while avoiding many false alarms, helping scarce services reach families who need them most.

This is key, because the risk of preterm birth isn't spread out evenly across all pregnancies. The neighborhoods that Central Hillsborough Healthy Start serves include many young, Black, unmarried, low-income families that are eligible for Medicaid. All of these factors place them at high risk for preterm birth.

Early screening allows the Healthy Start program to identify mothers at highest risk and tailor its resources to assist them.

Measuring against the rest of the state

The Florida Healthy Start prenatal risk screen is available throughout the state. Florida created Healthy Start in 1991 precisely to reduce infant deaths and low birthweight through universal prenatal and infant risk screening, community coalitions and coordinated services.

While Florida's preterm birth rate in 2023, the most recent year for which there is data, was 10.7%, Hillsborough County tracked slightly below the U.S. average of 10.4% at about 10.2% of the county's 16,900 births.

That difference may seem small, but it represents 85 fewer preterm babies in Hillsborough County, and at the average rate of \$71,000 per NICU admission, that's about \$6 million in hospital spending avoided in a single year.



Infants born preterm must remain in the NICU until their organs develop enough to keep them alive without medical support.

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In addition, statewide, 14.8% of Black infants were born preterm in 2023, slightly higher than the 14.65% average across the U.S. In Hillsborough County in the same year, it was 13.9%.

Among pregnant women without a partner, participation reduced very preterm births by 52% and halved the rate of very low-birthweight babies – that is, babies weighing less than 3.3 pounds (1,500 grams).

Obese mothers in the program had a 61% lower chance of extremely preterm birth, which means birth before 28 weeks of pregnancy, than comparable women elsewhere in Florida. Even exposure to air pollution, a known risk factor for preterm birth, was less harmful among women in the program.

So what has Central Hillsborough Healthy Start been doing differently?

The Central Hillsborough Healthy Start model

The model used by Central Hillsborough Healthy Start is practical and straightforward.

After early screening, nurses make home visits and help coordinate patient care for mothers in the program.

Central Hillsborough Healthy Start also provides prenatal education, depression screening and programs to help pregnant mothers improve their health and decrease harmful practices such as smoking or substance abuse. These programs are critical, because obesity, diabetes, hypertension and smoking during pregnancy are significant risk factors for preterm births.

The program also helps to connect patients to resources they may need during and after pregnancy by making personal introductions to community partners such as women and infant resource specialists in women, infants and children, or WIC, clinics.

Healthy Start workers also connect patients to interconception care for healthy birth spacing between pregnancies, which can help prevent future preterm births. Studies show that more than 30% of U.S. mothers who give birth preterm conceived their baby less than 18 months after having their previous child.

The Healthy Start staff use Florida's coordinated intake and referral approach to track referrals and follow up across partners. This is vital to helping the program's staff see who has been contacted, which services were delivered and whether referrals took place. They can then follow up if necessary.

Stability and sustainability

Central Hillsborough Healthy Start operates through a local nonprofit, REACHUP Inc., in partnership with the University of South Florida and the Hillsborough Healthy Start Coalition.

Its funding comes primarily from the federal government through the Health Resources and Services Administration's national Healthy Start program. The program's current federal funding extends into 2029. But proposed changes to the federal budget threaten to eliminate this funding altogether.

The program's budget is supplemented by local partners, including Hillsborough County, which helps sustain operations despite federal uncertainty.

Locally, the Hillsborough coalition's portfolio includes programs that work together like one team, sharing information so families keep getting help even when one grant ends. These partnerships with local community organizations allow the program to remain stable.

A model for others

Looking at the data, we believe Central Hillsborough Healthy Start has succeeded by using the same basic approach for everyone, then customizing. Everyone gets screened early and set up with nurse visits. Then, it adds what each family needs so that support fits real life.

The Central Hillsborough story shows that health disparities are not inevitable. And this model can serve as a feasible blueprint for other communities. With early identification, consistent support and sustained investment, the outcomes for mothers and babies can improve dramatically.

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