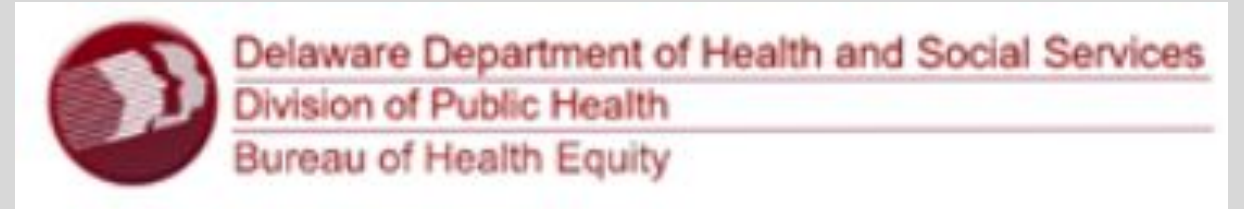


A Comparative Analysis of Maternal and Infant Health Programs



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Introduction

Maternal and infant health outcomes vary across states due to differences in policies, programs, and community resources. In collaboration with the Delaware State Health Improvement Plan (SHIP), which prioritizes reducing maternal morbidity and mortality and improving infant health outcomes, this study compares maternal and infant health initiatives in Delaware, Maryland, New Jersey, and Pennsylvania. The analysis highlights evidence-based strategies that could strengthen Delaware's programs and support health equity.

State-Specific Findings

State	Key Focus Area	Example Programs/Initiatives	Funding Sources
Delaware	Early identification, maternal mental health, and family support; expansion of culturally responsive care	Healthy Women, Healthy Babies; Healthy Families Delaware; Birth to Three; Black Mothers in Power; Do Care Doula Foundation	Federal grants with additional state support
Maryland	Data-driven quality improvement; expanded Medicaid services including doula and group prenatal care; maternal mortality and opioid misuse prevention	Perinatal Quality Collaborative; Maternal Mortality Review Initiatives; Maternal Opioid Misuse programs	Federal, state, and academic partnerships
New Jersey	Health equity and workforce development; expanded postpartum support and home visiting	Nurture NJ; New Jersey Doula Learning Collaborative; NJ FamilyCare	Medicaid, federal and state funding, private sources
Pennsylvania	Screening initiatives, breastfeeding support, and safe sleep programs; improved referral systems	PA Navigate; PA 211; statewide perinatal collaboratives	Federal programs, state funding, and philanthropy

Recommendations for Delaware

- **Expand equitable maternal care:** Increase community-based doulas, culturally responsive care, and Medicaid support for maternal health services
- **Strengthen care coordination:** Improve referral systems linking OB-GYN care, home visiting programs
- **Improve access to services:** Address transportation barriers and expand rural access through telehealth, group prenatal care, and outreach to underserved communities
- **Grow the maternal health workforce:** Support training and reimbursement for doulas, community health workers, and maternal health providers
- **Use data to guide policy and funding:** Leverage maternal mortality review findings and partnerships to support sustainable maternal health initiatives

Key Takeaways Across States

- Systems-level policy and care improvements
- Expanded WIC and nutrition programs
- Home visiting and coordinated care
- Prioritizing Medicaid and underserved populations
- Cross-sector partnerships across health systems and communities

Delaware-Specific Challenges

Challenge Area	Description
Rural access barrier	Limited OB-GYN availability and long travel distances in Southern counties
Funding instability	Heavy reliance on federal grants creates sustainability challenges
Care coordination gaps	Fragmented systems across Medicaid, public health, and social services
Healthcare workforce shortages	Limited OB-GYN, midwife, and behavioral health providers
Persistent Disparities	Higher maternal morbidity among Black and Hispanic women
Health insurance barriers	Some providers do not accept Medicaid, limiting care access
Transportation barriers	Limited public transit increases missed prenatal and postpartum visits

References

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Additional references are available upon request.

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