

Let's Talk Timing of Birth Resources

The 'Let's Talk Timing of Birth' resources have been co-designed and tested with women and maternity healthcare professionals to promote shared decision-making around timing of birth. These resources, which include a brochure for women and complementary video to be played in antenatal waiting rooms, provide information on the importance of timing birth at the appropriate gestational age, describe what a planned birth is, and when a planned birth might be considered. These resources also introduce the concept of stillbirth and risk factors that increase a woman's chance of stillbirth.

As healthcare professionals, we may be concerned that discussing stillbirth with women will cause fear and anxiety. The 'Let's Talk Timing of Birth' resources have been designed to introduce stillbirth in a sensitive manner and aid these discussions. Research has demonstrated that women do not want information withheld from them of fear that talking about stillbirth will frighten them. Discussing stillbirth as a rare event is important, as is informing women of the measures that they can take to reduce their chance of stillbirth (e.g. stopping smoking as soon as possible; attending all antenatal care appointments to monitor baby's health and growth; being aware of baby's movements from 28 weeks onwards and reporting any changes immediately to a doctor or midwife; going to sleep on their side from 28 weeks' onwards).



Talking it through

The 'Let's Talk Timing of Birth' brochure was developed to promote an open and shared discussion between a woman and her maternity healthcare professional, introducing stillbirth in a gentle manner. This discussion should start early in pregnancy, with the view that it would be revisited during pregnancy. The brochure was not developed to replace any other usual conversations or to be given without a discussion.



Every week counts

The 'Let's Talk Timing of Birth' resources also provide information on why every week of growth counts for a baby's health and development. Included in the brochure is a QR code leading to the Every Week Counts website.

Scan here to view the
Every Week Counts website





When might a planned birth be considered?

The main reason women have a planned birth is to reduce the chance of health problems for them or their baby, including stillbirth. The 'Let's Talk Timing of Birth' resources mention some examples of risk factors for stillbirth, including:

- Pre-existing medical conditions (e.g. diabetes and hypertension)
- Pregnancy complications (e.g. fetal growth restriction)
- Increased maternal age
- Increased BMI
- Conceiving through IVF
- Nulliparity
- Smoking during pregnancy
- Alcohol and drug use during pregnancy
- Some cultural groups or ethnicities
 - Aboriginal and Torres Strait Islander women
 - Women born in Sub-Saharan Africa or South Asia

Frequently Asked Questions

When should the brochure be given?

Following feedback from women and healthcare professionals, the brochure was designed to be given in the first half of pregnancy. We understand that not all women have access to a continuity of care model and that care provision is very diverse in Australia. Women receive lots of information at their booking visit, so care providers can make the decision as to what timing works best in their health services.

Some of the risk factors listed are quite common. How did researchers determine these risk factors increase a woman's chance of stillbirth?

Risk factors were identified by measuring the rate of stillbirth for women with and without a particular characteristic. This identified that particular characteristics contributed more or less towards a woman's risk of stillbirth, and those that contributed more were therefore categorised as a risk factor.

Does having more than one risk factor increase a woman's chance of stillbirth even more?

Most risk factors will increase a woman's chance of stillbirth by only a small amount. Even if her chance of stillbirth is doubled, it is still relatively low in absolute terms. If a woman has multiple risk factors, they will all contribute to her risk of stillbirth, which may be higher than someone who only has one risk factor.



Scan here to access all of the 'Let's Talk Timing of Birth' resources



Scan here to download the 'Let's Talk Timing of Birth' brochure



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