



The National Stillbirth Action and Implementation Plan Annual Report 1, 2022

Stillbirth¹ is a significant public health issue that has long-lasting effects on parents, families and care providers. The Australian Government launched the [National Stillbirth Action and Implementation Plan](#) (the Plan) on 10 December 2020. The Plan focuses on collective action, calling for the Australian Government, state and territory governments and non-government organisations to work together to reduce stillbirth rates. The Plan has an overarching goal to:

Support a sustainable reduction in rates of preventable stillbirth after 28 weeks², with a primary goal of 20% or more reduction over five years. It also aims to ensure that, when stillbirth occurs, families receive respectful and supportive bereavement care.

Implementation, monitoring and evaluation of the Plan is a shared responsibility that requires the dedicated efforts of many stakeholders. This includes the Australian and jurisdictional governments, Australian Institute of Health and Welfare (AIHW), The Centre of Research Excellence in Stillbirth (Stillbirth CRE), peak bodies, health professional bodies, non-government organisations and more. The National Stillbirth Implementation Oversight Group (IOG) provides advice and guidance on implementation and monitoring and evaluation of the Plan.

About this first Annual Report

The Plan committed to providing Annual Reports to Health Ministers and the Australian public. Annual Reports will provide a comprehensive update of progress against the Plan's goals and actions for the previous calendar year.

The Plan provides jurisdictions with the flexibility to implement actions tailored to local contexts. This means Annual Reports will report on the implementation of specific tasks in the Plan and other activities that, although not listed in the Plan, still contribute to its overall goal.

The first Annual Report (this document) predates the finalisation of the Plan's monitoring and evaluation approach. As such, it is slightly different to future Annual Reports. It provides:

- a high-level overview of stillbirth statistics at the time the Plan was released, largely based on 2019 data (section 1)
- progress of activities undertaken between December 2020 and December 2021 (section 2)
- an update on the development of the monitoring and evaluation approach (section 3).

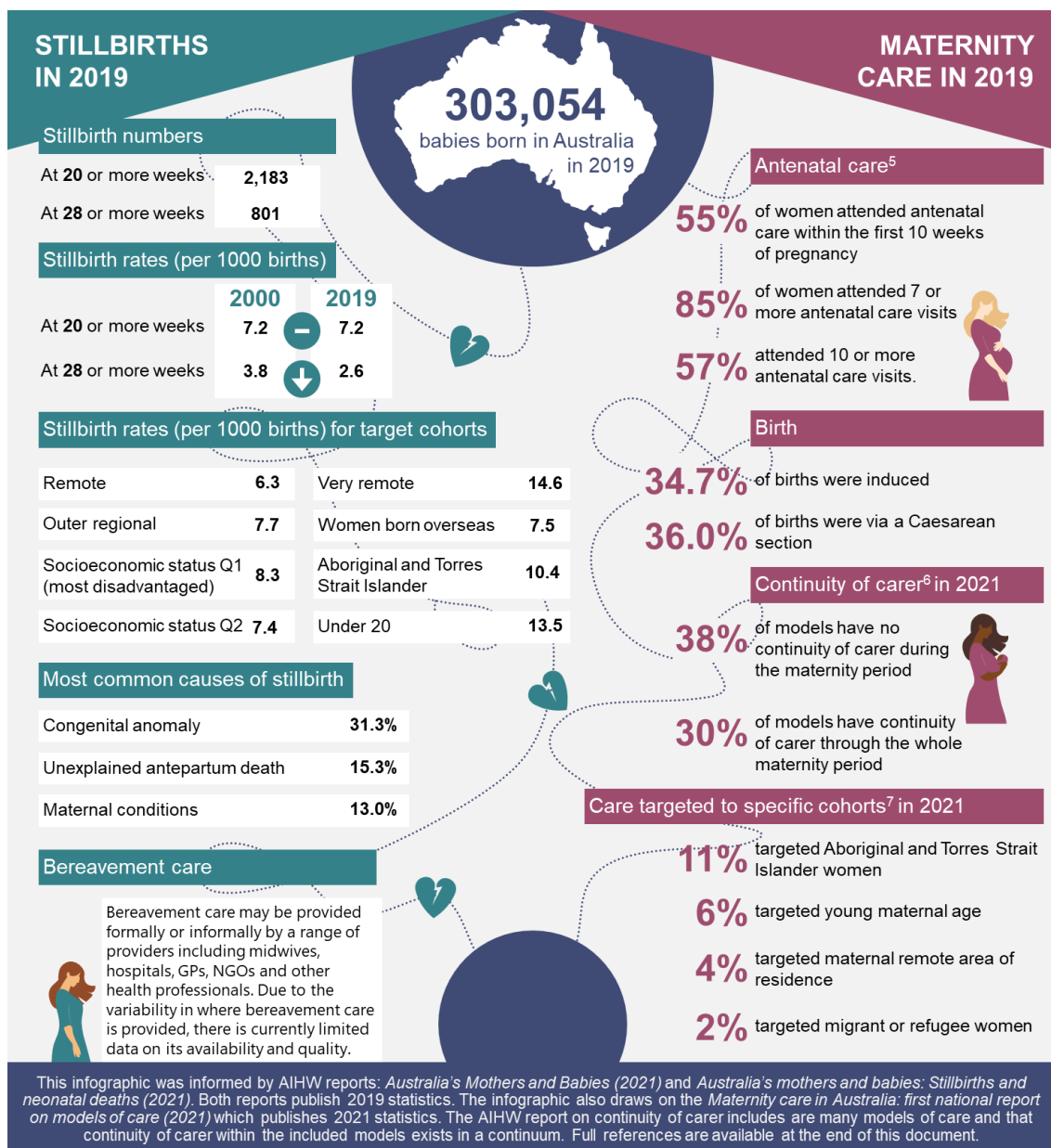
¹ This report uses the Australian definition of stillbirth, unless otherwise specified. That is 'a fetal death prior to birth of a baby born at 20 weeks gestation or more, and/or weighing 400 grams or more'. This report also highlights the stillbirth rate as per the international definition which is deaths 'occurring in the third trimester – born at 28 weeks gestation or more, and/or weighing 1,000 grams or more'.

² The Plan focuses on stillbirth post 28 weeks of gestation. This is in line with international definitions of stillbirth, including the World Health Organization.

Where were we at when the Plan was launched?

Figure 1 provides a snapshot of stillbirth rates, maternity services and bereavement care in 2019, just prior to the Plan's launch³. Immediately prior to the Plan's launch in 2020, Australia's stillbirth rate was 7.2 stillbirths per 1000 births. This rate for stillbirth over 20 weeks gestation has remained largely unchanged for 20 years; however, the stillbirth rate for pregnancies over 28 weeks' gestation has been decreasing since 2000. Stillbirth rates are higher for some populations, such as Aboriginal and Torres Strait Islander women, women under the age of 20 and women in regional and remote areas. The data also indicates a large proportion of stillbirths remain unexplained.

Figure 1 | Data snapshot on stillbirths and maternity care in Australia



³ Figure 1 is based on 2019 data unless stated otherwise. 2019 data provides a baseline against which to measure the impact of the Plan and aligns to most recently published 2021 reports by the Australian Institute of Health and Welfare (AIHW).

What has been progressed since the Plan launched?

The Australian Government, jurisdictional governments and other key organisations have made significant progress implementing activities under the Plan since its launch. As of April 2022, from 2019-20 through to 2025-26 the Australian Government has invested \$44.3 million in measures to prevent stillbirth and support families affected by stillbirth.

Key areas of focus between December 2020 and December 2021 have included implementing the Safer Baby Bundle, training for health professionals, stillbirth education and awareness programs, and improving the capacity and capability of health services and health professionals to undertake stillbirth investigation. Work also commenced on developing a new Clinical Care Standard for stillbirth prevention and bereavement care, adapting the Safer Baby Bundle to be suitable for Aboriginal and Torres Strait Islander women and migrant and refugee women, and setting stillbirth research priorities. The Clinical Care Standard and the research priorities are expected to be finalised during 2022.

Table 1 summarises key activities that address each priority under the Plan that, as of December 2021, were planned, underway, funded or completed. Data for this progress updated was collected via consultations undertaken in late 2021 with governments and key organisations implementing the Plan.

Table 1 | The Plan's implementation between December 2020 and December 2021

Priority	Implementer	Status at December 2021
Priority 1: Ensuring high quality stillbirth prevention and care <i>This priority includes actions related to implementing best practice in stillbirth prevention, the development of national guidelines on stillbirth prevention and ensuring culturally appropriate care is provided to high-risk cohorts.</i>		
Implementation of the Safer Baby Bundle in multiple jurisdictions with the evaluation to be published in 2024	Stillbirth CRE in partnership with the Australian Government and jurisdictions	In progress
Development of resources (Decision Aid, Clinicians Guide and Brochure) to support the fifth element of the Safer Baby Bundle – 'timing of birth	Stillbirth CRE in partnership with the Australian Government	In progress
Co-designing and adapting Safer Baby Bundle resources to be appropriate for Aboriginal and Torres Strait Islander women and for migrant and refugee women	Stillbirth CRE in partnership with NGOs and the Australian Government	In progress
Working with Aboriginal women to understand perceptions of, and barriers to, accessing antenatal care	RANZCOG ⁴ and Australian College of Midwives	In progress
Gathering information on models of maternity care, service availability and challenges from maternity services	RANZCOG, Australian College of Midwives and jurisdictions	In progress
Gathering data on models of care with first report published in 2021	AIHW	In progress
Priority 2: Raising awareness and strengthening education <i>This priority includes actions related to increase community awareness and understanding of stillbirth and providing evidence-based and consistent stillbirth education for health professionals.</i>		

⁴ Royal Australian and New Zealand College of Obstetricians and Gynaecologists

Priority	Implementer	Status at December 2021
Three phased stillbirth education and awareness campaign (including Still Six Lives and the Stillbirth Promise)	Red Nose	Completed
SMS 4 Dads (raising awareness of risk factors for stillbirth via SMS messages sent to expectant fathers)	Red Nose	Completed
Translation of Safer Baby Bundle resources into 23 languages	Stillbirth CRE	Completed
Maternal Health Education for Migrant and Refugee Women	Stillbirth CRE	Completed
Stillbirth education webinars targeting rural and remote clinicians	Stillbirth CRE	Completed
Development of Baby Buddy app (providing stillbirth education & awareness information to pregnant women)	Stillbirth CRE	In progress
Living Literacy program	Stillbirth CRE	In progress
Awareness and education campaigns for health professionals, including provision of training on bereavement support and the implementing programs such as IMPROVE and other online education programs	Stillbirth CRE, health professional bodies, the Australian Government and jurisdictional governments	In progress
Developing new clinical care standard for stillbirth prevention and clinical and bereavement care in maternity services	Australian Government	In progress
Priority 3: Improving holistic bereavement care and community support following stillbirth <i>This priority includes actions related to providing best practice care for families who experience stillbirth and improving care for women who have previously experienced stillbirth.</i>		
Updating the <i>Clinical practice guidelines for care around stillbirth and neonatal death</i> to include information on bereavement care, protocols for information sharing between health professionals and information on care in subsequent pregnancies	Stillbirth CRE in partnership with Australian Government	In progress
Amended the <i>Fair Work Act 2009</i> (Cth) to improve leave entitlements for parents who experience stillbirth	Australian Government	Completed
Improving communication between GPs and hospitals to support continuity of care for bereaved parents	RACGP ⁵	Planned
Developing a version of PSANZ <i>Clinical practice guideline for care around stillbirth and neonatal death</i> to support parents' make informed decisions post-loss	NGOs (Stillbirth Foundation)	In progress
Priority 4: Improving stillbirth reporting and data collection <i>This priority includes actions related to improving stillbirth investigation and reporting and tracking progress to reduce inequity in stillbirth rates.</i>		
Updating the <i>Clinical practice guidelines for care around stillbirth and neonatal death</i> to ensure it informs and supports standardised clinical pathways for appropriate investigations following stillbirth	Stillbirth CRE in partnership with Australian Government	In progress
Development of national resources to support parents make informed decisions on stillbirth autopsies	NGOs in partnership with Australian Government and some jurisdictions	In progress
Increasing capacity of health services, including education and training for health professionals such as pathologists and radiologists, to conduct perinatal autopsies and other stillbirth investigations	Jurisdictions and health professional bodies in partnership with Australian Government	In progress

⁵ Royal Australian College of General Practitioners

Priority	Implementer	Status at December 2021
Establishment of centres of excellence for perinatal autopsies	Some jurisdictions	Completed and planned
Improvements to parent involvement in the autopsy process	NGOs	Planned
Improvements to information and documentation provided to parents regarding stillbirth autopsies and investigations	Jurisdictions and health professional bodies	In progress
Improvements to the perinatal mortality dataset to include additional information, including improving data around autopsies, examinations and contributory factors	AIHW	In progress
Implement annual reporting against the global score card	Stillbirth CRE	Planned
Priority 5: Prioritising stillbirth research <i>This priority includes actions related to determining national stillbirth research priorities and improving access to domestic and international stillbirth research.</i>		
Establishment of agreed national priorities for stillbirth research through national consultation	Stillbirth CRE in partnership with NGOs, jurisdictions and Australian Government	In progress
Develop a risk stratification tool to inform clinical care for women with risk factors for stillbirth	Stillbirth CRE	Planned

How will we monitor progress and evaluate impact over the life of the Plan?

It is important to monitor implementation of the Plan and evaluate progress towards the desired goals. Monitoring of the Plan will focus on the ‘what’ – i.e. what is being done. Evaluation of the Plan will consider the extent to which the Plan is driving and contributing to observed changes– it focuses on understanding whether the Plan “is making a difference”. Annual Reports will provide monitoring updates while staged evaluation reports will provide more detailed findings and analysis.

Nous Group (Nous) was commissioned to develop the monitoring and evaluation framework and is doing so in collaboration with the Implementation Oversight Group (IOG), state and territory governments, the Centre for Research Excellence in Stillbirth, the Australian Institute of Health and Welfare, health professional bodies and non-government organisations.

The IOG is overseeing development of the monitoring and evaluation framework, which is due to be published in mid-2022. The IOG is comprised of representatives from the Australian Government Department of Health and state and territory government health departments. The Centre for Research Excellence in Stillbirth, the Australian Institute of Health and Welfare, and two midwives who work in services specifically designed for Aboriginal and Torres Strait Islander women attend the IOG in an advisory capacity. They provide expert insight on data, research and ensure the needs of Aboriginal and Torres Strait Islander women and communities are considered.

Data sources

AIHW (2021, November). Australia's mothers and babies: Stillbirths and neonatal deaths. Canberra: Australian Institute of Health and Welfare. Available at: <https://www.aihw.gov.au/reports/mothers-babies/stillbirths-and-neonatal-deaths>

AIHW (2021, December). Australia's mothers and babies. Canberra: Australian Institute of Health and Welfare. Available at: <https://www.aihw.gov.au/reports/mothers-babies/australias-mothers-babies/contents/about>

AIHW (2021, November). Maternity care in Australia: first national report on models of care, 2021. Canberra: Australian Institute of Health and Welfare. Available at: <https://www.aihw.gov.au/reports/mothers-babies/maternity-models-of-care-2021/contents/about>