

Exploring Ways to Reduce Aboriginal Stillbirths in the Noongar Boodjar Region

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Background:

Stillbirth disproportionately impacts Aboriginal and Torres Strait Islander peoples placing a profound burden on families. Yet, it remains an (almost) invisible public health problem, with a paucity of evidence-informed and Aboriginal-specific interventions addressing this distinctly higher stillbirth risk. Aboriginal-specific evidence is required to support the development of stillbirth education and awareness initiatives.

Methods:

Jinda Maawit Project is a large-scale multidimensional, mixed methods study of Aboriginal stillbirth. The approach includes: (1) a population-level epidemiological study to investigate the relationship between stillbirth and parental physical and mental health using routinely collected linked administrative health data; (2) a cross-sectional survey (N=450) of Aboriginal women (16-45 years) living in Noongar Boodja regions of Western Australia to develop a foundational understanding of knowledge about stillbirth risks among Aboriginal women; and (3) a qualitative examination, using indepth interviews (N=20), of the barriers to timely, high quality antenatal care.

Results:

The Jinda Maawit project is ongoing, although our extensive community engagement to-date has supported the establishment of a robust Aboriginal governance and the identification of key findings including: (i) the lack of models of care and support services for stillbirth in Aboriginal communities, (ii) the lack of cultural education in health care providers, and (iii) the lack of acknowledgement to the significance of birthing on country.

Conclusions:

The vision of the Jinda Maawit project is to provide a more nuanced understanding to the reasons for current stillbirth rates to guide preventative population health strategies for reducing stillbirth among Aboriginal populations