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DESCRIPTION

*Women and Birth* is the official journal of the Australian College of Midwives (ACM). It is a midwifery journal that publishes on all matters that affect women and birth, from pre-conceptual counselling, through pregnancy, birth, and the first six weeks postnatal. All papers accepted will draw from and contribute to the relevant contemporary research, policy and/or theoretical literature. We seek research papers, quality assurances papers (with ethical approval) discussion papers, clinical practice papers, case studies and original literature reviews.

Our women-centred focus is inclusive of the family, fetus and newborn, both well and sick, and covers both healthy and complex pregnancies and births. The journal seeks papers that take a woman-centred focus on maternity services, epidemiology, primary health care, reproductive psycho/physiology, midwifery practice, theory, research, education, management and leadership. We also seek relevant papers on maternal mental health and neonatal well-being, natural and complementary therapies, local, national and international policy, management, politics, economics and societal and cultural issues as they affect childbearing women and their families. Topics may include, where appropriate, neonatal care, child and family health, womens health, related to pregnancy, birth and the postpartum, including lactation. Interprofessional papers relevant to midwifery are welcome. Articles are double blind peer-reviewed, primarily by experts in the field of the submitted work.

The journal is indexed in PubMed, MEDLINE, Thomson Reuters, Scopus and CINAHL.

The journal is available online to ACM members and is available by separate subscription.

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• Journal policies detailed in this guide have been reviewed
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Observational cohort, case control and cross sectional studies - STROBE - Strengthening the Reporting of Observational Studies in Epidemiology STROBE Checklist


Randomised (and quasi-randomised) controlled trial - CONSORT - Consolidated Standards of Reporting Trials http://www.equator-network.org/reporting-guidelines/consort/


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Reporting the range of methods used to improve healthcare - SQUIRE - Standards for Quality Improvement Reporting Excellence SQUIRE Checklist

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**Qualitative research** - SRQR - Standards for Reporting Qualitative Research: A Synthesis of Recommendations SRQR Checklist

**Mixed Methods Appraisal Tool (MMAT)**

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Page numbers and line numbers should be included for the convenience of the peer-reviewers.

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- The date of approval
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<th>Problem or Issue</th>
<th>What is Already Known</th>
<th>What this Paper Adds</th>
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Example of Statement of Significance

Problem
Poor assessment and clinical reasoning are major contributors to adverse birth outcomes.

What is Already Known
Midwifery decision-making during birth is mediated by hierarchies of surveillance and control. Midwives are often unable to implement their preferred decision. The international and national professional decision-making frameworks are not sufficiently detailed to guide midwives’ clinical reasoning.

What this Paper Adds
Evidence that half of the midwives interviewed did not use clinical reasoning to make decisions. A new and detailed model of midwifery clinical reasoning which incorporates a role for intuition.

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- Conclusion (summarise key points and make recommendations)
- Acknowledgments and Disclosures

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