**** ©The Gianna Centre

**….**doing life together

A Family Support and Education Service

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**Facing an Unplanned Pregnancy**

**My Questions – My Options**

**Keeping My Baby**

**1)** What are my greatest fears now about keeping my baby?

|  |
| --- |
|  |

**2)** Will these fears be different? (Write down thoughts and feelings)

|  |
| --- |
| In 1 Year: |
| In 5 Years: |
| In 10 years: |
| In 20 years: |
| In 50 Years: |

**3)** If I keep my baby how will I cope?

Now

|  |
| --- |
| In 1 Year: |
| In 5 Years: |
| In 10 years: |
| In 20 years: |
| In 50 Years: |

**4)** What are my hopes, plans and dreams now? What might they be?

|  |
| --- |
| In 1 Year: |
| In 5 Years: |
| In 10 years: |
| In 20 years: |
| In 50 Years: |

**5)** What is the best outcome for my baby?

|  |
| --- |
| * Keeping & raising my baby. Why? |
| * Aborting my baby. Why? |
| * Adopting out my baby. Why? |

**Facing an Unplanned Pregnancy**

**My Questions – My Options**

**Keeping My Baby (continued)**

**6)** Should I research and discuss my situation with ⬜ my friend/s ⬜ my parent/s ⬜ my sibling/s ⬜ a support service ⬜ my GP ⬜ websites ⬜ other

If I continue with my pregnancy what assistance will I need?

|  |
| --- |
|  |
|  |

**7)** How will this decision affect:

|  |
| --- |
| My baby’s father |
| My parent/s |
| My brother/s / sister/s |
| My older children |
| My friend/s |
| My future relationship/s |
| - my future partner |
| - my future children |

Is someone pressuring me to make a quick decision? 🗖 Yes 🗖 No

**8)** What are the good things about keeping my baby?

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

How can I find out what support is available?

Contact **The Gianna Centre**

(03) 5442 4644 0417 392 255 (Admin) 0419 496 443 (Clients)

The Gianna Centre is a Child Safe Organisation