# Neurodivergent Birth Plan Template



### **Sensory Needs**

- Dim lighting / option to turn lights off
- Wear eye mask or sunglasses
- Use noise-canceling headphones or calming music
- No strong smells (no perfumes or essential oils)
- Minimal or no touch without warning



#### **Communication Preferences**

- Clear, direct language
- No small talk during contractions
- Repeat instructions if needed
- Let support person speak for me if needed
- Allow use of written or nonverbal communication



## **Emotional Support**

- Calm, kind, soft-spoken staff
- Explain procedures before touching
- Give me time to process decisions
- Respect my need for quiet or breaks



#### **Environment & Movement**

- Access to birth ball, tub, or space to move
- Freedom to sway, rock, or stim as needed
- Quiet time alone or with support person
- Freedom to change positions as needed