

# ROOTED IN OUR PAST LOOKING TO OUR FUTURE



**NACM**  
NATIONAL ABORIGINAL  
COUNCIL OF MIDWIVES



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In the summer of 2016, NACM began a situational analysis conducted by external consultants to examine Indigenous midwifery and identify opportunities moving forward. This included a literature review, online survey for NACM’s membership, key informant interviews with NACM leadership and external stakeholders, and a focus group at NACM’s 2016 Annual Gathering. This document presents highlights from this research to tell the story of NACM’s past, present, and potential for the future.

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# NACM MISSION

NACM exists to promote excellence in reproductive health care for Inuit, First Nations, and Métis women.

NACM advocates for the restoration of midwifery education, the provision of midwifery services, and choice of birthplace for all Aboriginal communities consistent with the UN Declaration on the Rights of Indigenous Peoples. As active members of the Canadian Association of Midwives (CAM), NACM represents the professional development and practice needs of Aboriginal midwives to the responsible health authorities in Canada and the global community.

**Our Vision: Aboriginal midwives working in every Aboriginal community.**

## *A note about language*

*While recognizing both the shared experiences of and the diversity within the Indigenous community in Canada, we acknowledge the ease of a single, consistent term to refer to our community. When NACM was established the accepted term in Canada for First Nations, Inuit and Métis people was the constitutionally defined term Aboriginal, and as such Aboriginal is used in the organization's name. In this report, we will use the term Indigenous, as this term is understood to allow individuals and communities to self-determine what this means to them.<sup>1</sup> The term Aboriginal will be used throughout the document when it is used in individual quotes, when an individual self-identifies as Aboriginal or in the names of organizations.*



# Past NACM'S FOUNDATIONS

The National Aboriginal Council of Midwives (NACM) is a dynamic network made up of over 100 Inuit, First Nations and Métis midwives and student midwives from across Canada. NACM is driven by its members who serve their communities, and is one of only a few such national Indigenous midwifery organizations worldwide and the only one in the Americas.

## Significance of Indigenous Midwifery

Birthing in Indigenous communities is an event that strengthens connections between a pregnant person, their family and community. Midwives have always existed, and hold an essential role to the childbirth process in Indigenous communities; it was grandmothers and other women in a mother's life

who assisted them throughout pregnancy and in childbirth.<sup>2,3</sup> However, colonization and assimilative policies that outlawed midwifery practices have contributed to:

- Cultural destruction and a loss of traditional knowledge (including midwifery knowledge), resulting in poorer health outcomes for Indigenous people in Canada that persist today<sup>3,4</sup>
- The loss of power of pregnant people and their families to be active participants in the birth and parenting journey<sup>5</sup>
- The removal of birth from Indigenous communities to hospitals – which are often located far away, particularly from remote communities. This requires evacuation of pregnant people from their homes to wait in unfamiliar urban centres and give birth in distant hospitals surrounded by strangers<sup>4</sup>

“WHEN YOU TAKE BIRTH OUT OF COMMUNITY, WHAT IS LEFT IN COMMUNITY IS DEATH... WHEN YOU DO NOT HAVE BIRTH IN COMMUNITY TO BALANCE OUT PEOPLE DYING, THE ENERGY THAT BIRTH BRINGS IS LOST. IT MEANS LIFE. IT MEANS NOT JUST SEEING DEATH IN THE COMMUNITY, SEEING NEW LIFE, BIRTH, AND REBIRTH.”  
– NACM MEMBER, 2016

In addition, most rural and urban communities across Canada lack culturally safe reproductive services, and culturally safe health care services in





general. Returning birth to communities is critical to Indigenous people’s health and it can assist in restoring skills and pride in communities.<sup>3,6</sup> There are many beneficial outcomes for having access to an Indigenous midwife and bringing birth back to communities, including:

- Culturally safe and relevant care<sup>4,5</sup>
- Care to families where they live: in urban, rural and remote communities<sup>4</sup>
- Reducing the number of routine evacuations from remote communities<sup>7</sup>
- Keeping families together during this important cultural and life event<sup>3,8</sup>
- Improving the health outcomes for parent and baby<sup>7</sup>
- Improved self-determination in health care<sup>9</sup>

According to the NACM internal survey, a majority of NACM members agree that Indigenous midwifery contributes to cultural revitalization. By practicing Indigenous midwifery they are restoring traditional ways of birthing, reclaiming knowledge and customs that have always existed, and improving access to health care, cultural practices and teachings. Increasing access to culturally safe health care, contributing to cultural revitalization and restoring traditional midwifery knowledge are a part of the foundation of NACM’s vision, “Aboriginal midwives working in every Aboriginal community”.



## KEY ACHIEVEMENTS

2002	First informal gathering of Indigenous midwives at Six Nations, Ontario
2003-2007	Roots established through annual gatherings of Indigenous midwives
2008	NACM officially forms and fills a voting seat on Canadian Association of Midwives board of directors
2010-2014	Develops external communications to highlight key messages about NACM and Indigenous midwifery
2012	Recognition from Health Council of Canada for contributions in Indigenous health care
2012-2013	Community outreach and consultations on the return of midwifery care and birth to remote communities
2013	Publishes toolkit for communities on how to (re)establish midwifery care
	NACM speaks on a maternal and child health panel on Parliament Hill to reduce federal gaps
2014	Publishes guidebook to support Aboriginal student midwives
2014-2017	Annual meetings with MPs to advocate for federal recognition of midwifery
2015	Presentation to Parliament’s Health Committee in support of Bill C-608 (National Day of the Midwife Act)
2016	Releases <i>The Landscape of Midwifery Care for Aboriginal Communities in Canada</i> , policy report to expand access to culturally safe midwifery care

# Present

## NACM'S GROWTH

NACM was officially formed in 2008 when Indigenous midwives from across the country formally organized to promote excellence in reproductive care for Indigenous women and families.

NACM is governed by a Core Leadership Circle made up of members who guide the organization to achieve its mandate. In 2008, NACM was given a voting seat on the Canadian Association of Midwives (CAM) board of directors. This was a recognition of the importance of a voice for Indigenous midwives at the national level. CAM also provides sustainable funding that supports NACM's core operations, including an annual gathering and advocacy meetings with the federal government. NACM's relationship with CAM is mutually beneficial, and NACM is recognized as the primary voice for Indigenous midwives and communities within the Canadian midwifery field.

NACM members have diverse perspectives, interests, and skills, and hold a deep passion for their communities. Many of them chose to enter the field of midwifery to:

- Provide culturally safe care
- Empower families in a meaningful way
- Contribute to intergenerational healing
- Fulfill a personal calling to Indigenous midwifery
- Continue the traditional role of the midwife for the community

Over half of NACM members are currently practicing midwives, they may be Registered Midwives, Traditional Midwives or Aboriginal Midwives practicing under an exemption clause. One-quarter of NACM members are student midwives, which highlights the potential for growth of Indigenous midwifery in Canada. Members work in many different communities across the country, from very small, rural and remote communities to large city centres; the majority of which are in Ontario and Quebec. Midwives who are not currently practicing report that they are working in research, education and policy, are on educational leave, or are studying to be midwives. In 2013 NACM introduced a non-voting, supportive member category to their membership. NACM's currently has 76 supportive members, who are individuals committed to supporting NACM vision and Indigenous midwifery.

“BEING AN ABORIGINAL MIDWIFE MEANS LIFTING WOMEN BACK UP AND GIVING HER STRENGTH TO USE HER VOICE, PRACTICE HER CHOICE, AND BE EMPOWERED ON A JOURNEY THAT SHE GUIDES.” – NACM MEMBER, 2016



## The Importance of NACM and Their Work

NACM provides an inclusive and supportive community for their members. Many members engage in NACM to receive and provide peer support. Indigenous midwives are faced with a number of challenges including: jurisdictional barriers, geographical isolation and lack of funding and administrative support. These challenges inhibit the growth of Indigenous midwifery, limiting Indigenous people's access to culturally safe reproductive care. NACM works to address these challenges and needs by advocating for education, best practices in reproductive healthcare, and federal and provincial policies which support midwifery.

NACM enhances the growth of Indigenous midwifery by supporting students throughout their educational journeys and connecting them with knowledge and mentors in both academic and community settings. To increase access to Indigenous midwifery as both a health care option and a profession, NACM produces several materials that are accessible through their website [aboriginalmidwives.ca](http://aboriginalmidwives.ca). These materials include:

- NACM Toolkit for Indigenous communities wishing to restore midwifery
- NACM Student Guidebook for aspiring midwives
- A poster series on NACM's ten Core Values of Healing, Respect, Autonomy, Compassion, Bonding, Breastfeeding, Cultural Safety, Clinical Excellence, Education and Responsibility
- A series of three pamphlets that describe Indigenous midwifery and educational pathways
- Booklets for families sharing cultural knowledge about pregnancy, birth and infant care
- A series of six videos that describe the work of Indigenous midwives, the experiences of aspiring midwives, the return of birth to Indigenous communities

## Strengths

NACM's collective strengths and expertise contribute to improving Indigenous health outcomes and maternal health care. NACM's greatest strength is its members who believe in the importance of Indigenous midwifery and are committed to the vision and advancement of NACM. The strengths of the organization include:

- A network that spans the country, built on relationships and partnerships.
- Elders: NACM's membership includes Elders that provide crucial guidance and leadership to the organization.
- Recognition at the provincial, territorial and national level as the primary voice of Indigenous midwives.
- Support from and collaboration with Indigenous communities. By working at the community level NACM is a bridge between community and policy, ensuring that policy reflects the voice and needs of Indigenous communities.

NACM is committed to promoting culturally safe care and traditional knowledge in reproductive health care. Indigenous midwives traditionally gained knowledge and skills to facilitate birth through the passing down of knowledge from one generation to the next.<sup>3</sup> Colonization disrupted the transmission

“THE ROLE OF MENTORSHIP IN ABORIGINAL MIDWIFERY IS TO TAKE STUDENTS AND YOUNGER MIDWIVES UNDER THEIR WING AND TEACH THEM THE WAYS OF OUR ANCESTORS. IT IS TO SUPPORT YOUNGER MIDWIVES AND IT IS ALSO ABOUT BEING HONEST AND TRUTHFUL ABOUT THE HARDSHIPS WE WILL UNDOUBTEDLY ENDURE AS ABORIGINAL PEOPLE AND HOW WE CAN OVERCOME BARRIERS.”  
– NACM MEMBER, 2016

## WAYS TO ADDRESS INDIGENOUS PEOPLE'S INADEQUATE ACCESS TO HEALTH CARE

- Indigenous-led health services
- Initiatives to increase the number of Indigenous health care providers
- Indigenous patient advocates
- Cultural safety training for health care providers
- Indigenous specific programs within mainstream health organizations

of knowledge between generations and contributed to the loss of Elder midwives. As such, there is a need for the preservation of cultural knowledge in Indigenous midwifery. NACM is envisioned as an organization that can collect, document, and be the keepers of cultural knowledge in order to share it within Indigenous communities in Canada. This can contribute to cultural revitalization and improved health outcomes for Indigenous communities.

### *The Need for Indigenous Midwifery*

Today, Indigenous midwifery is being revitalized to balance traditional knowledge, medicine, and ceremony with Western medical practice to facilitate clinical excellence and culturally safe care for Indigenous families.<sup>6</sup> Indigenous women are leading this movement to reclaim their traditional roles within communities as life-givers.<sup>4</sup> The revitalization of Indigenous midwifery has been empowering Indigenous families by providing them with greater control over their health and wellness at the community level.<sup>3</sup>

Indigenous people continue to be on the lower end of all health and social measures in Canada.

The Truth and Reconciliation Commission of Canada's Calls to Action underscore the need to close the gaps in health outcomes between Indigenous and non-Indigenous people – these include indicators in maternal health, birth rates, infant and child health, and the availability of appropriate health services as well as the retention of Indigenous care providers.<sup>10</sup> This demonstrates the vital need for culturally safe maternal health services and equitable health care and education for Indigenous people; a need that NACM works to fulfill and where they can continue to play a pivotal role.

As a result of advocating and lobbying, there are a number of Indigenous midwifery initiatives in Canada that have increased access to Indigenous midwives and culturally safe care. Midwifery-led birth centres in Nunavik, Quebec; Cambridge Bay, Nunavut; Six Nations, Ontario; Toronto, Ontario and the Fort Smith Health and Social Services Midwifery Program in Northwest Territories are examples of such initiatives. Improvements in funding Indigenous midwifery at such sites points to a growing understanding of the significant role that Indigenous midwives have in communities across Canada as well as the positive health outcomes for Indigenous women and infants. While there are changes occurring at various levels of the health care system to increase Indigenous people's ownership of and access to health care (see textbox on the left), these changes are occurring within a health care system

MIDWIVES PROVIDE SUPPORT AND RESPECT SO THAT WOMEN CAN DELIVER SAFELY WITH EMPOWERMENT AND DIGNITY IN A CULTURALLY RELEVANT WAY, WHICH IN TURN RECOGNIZES AND VALUES THE IMPORTANCE OF A WOMAN TO HERSELF, HER FAMILY, AND THE LARGER COMMUNITY. (NATIVE WOMEN'S ASSOCIATION OF CANADA, 2007, P. 3)

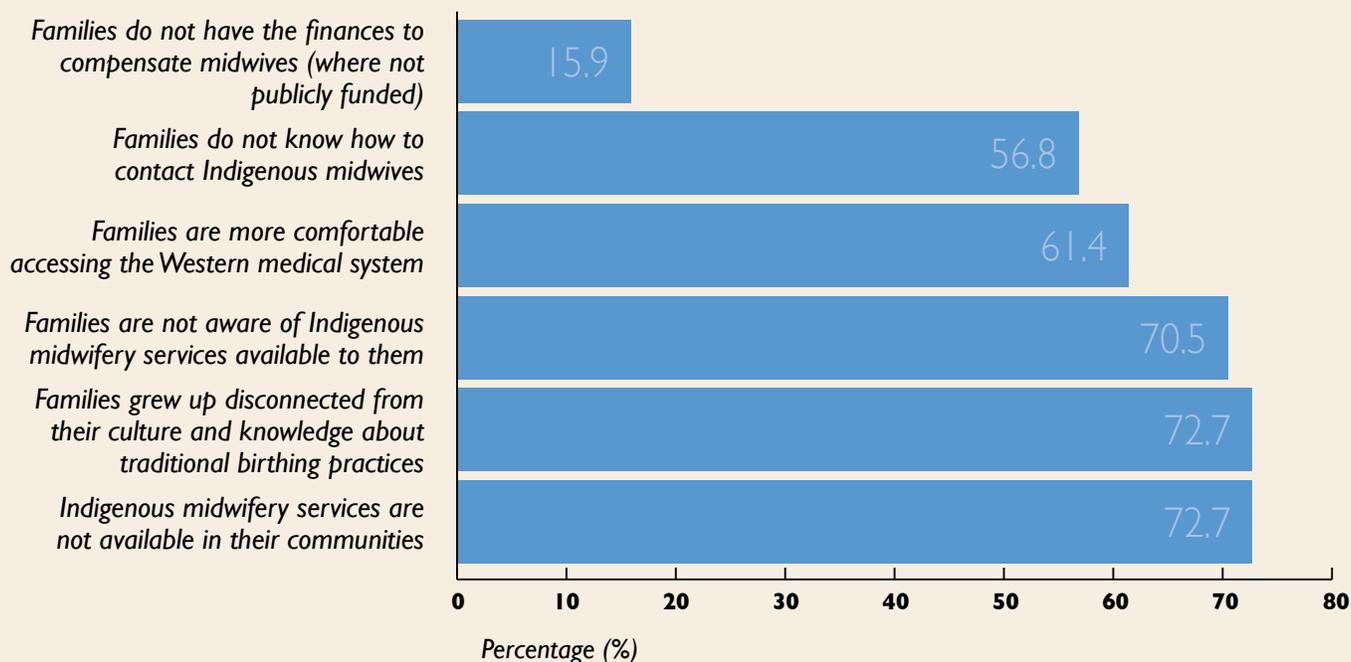
that is based on colonial power structures and jurisdictional barriers. Unless systemic issues of racism and colonization are addressed, Indigenous people will continue to experience barriers to adequate health care.<sup>1</sup>

Indigenous midwifery is based on respect for Indigenous knowledge and medicine and a wholistic approach to care that is complemented by modern biomedical practices allowing for delivery of clinically excellent health care unique to the specific needs of individual families and communities.<sup>4</sup> NACM's role in promoting Indigenous midwifery in Canada allows for Indigenous families to have greater access to health care that addresses their individual needs, but NACM also has a role at higher levels of advocating for systemic changes in the health care and social services field such as:

- Advocating for birth and reproductive justice for all Indigenous families, including bringing birth back to communities



FIGURE 1: BARRIERS FOR FAMILIES TO ACCESS INDIGENOUS MIDWIVES, IDENTIFIED IN NACM MEMBERS SURVEY 2016



# INDIGENOUS MIDWIFERY LEGISLATION

## *Provinces with Indigenous Midwifery Legislation:*

- British Columbia
- Quebec
- Ontario
- Nunavut

## *Provinces without Indigenous Midwifery Legislation:*

- Alberta
- Manitoba
- Northwest Territories
- Saskatchewan
- Nova Scotia
- Newfoundland

- Advocating for clients in the child welfare system, working to change the violent practices of apprehension and interrupted parenting
- Working to ensure that health policy addresses the needs of Indigenous communities

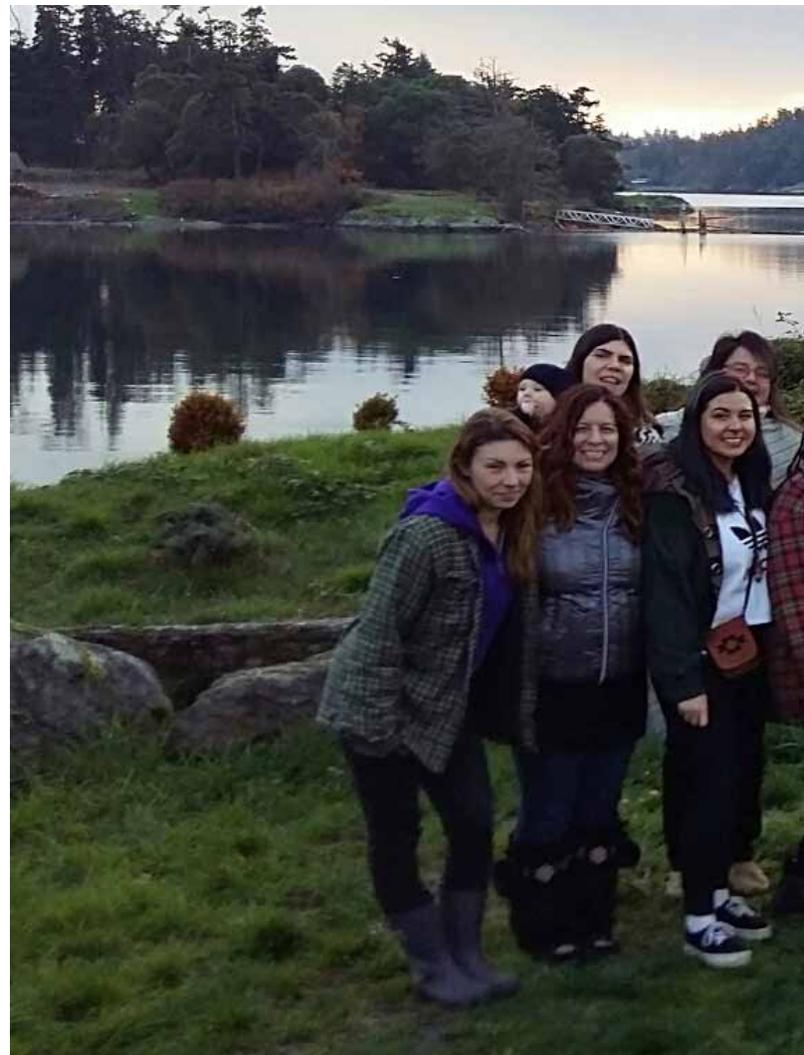
## *Barriers to Accessing Indigenous Midwifery*

Despite a growing demand for services, there are barriers that exist for providing and accessing Indigenous midwifery care. The barriers that families experience in accessing Indigenous midwifery care are rooted in colonization and inadequate funding and infrastructure for delivering services to Indigenous communities.

The federal government has recently recognized the cultural genocide that has taken place in Canada.<sup>10</sup> Forced assimilation through residential schools, over surveillance by the child-welfare system and the judicial system and the historic and ongoing racism that Indigenous people face have led to a disconnection from Indigenous culture and traditional knowledge. Cultural disconnection in itself is a barrier to accessing Indigenous midwifery and a strong contributing force to other barriers

identified by NACM members. Disconnection from culture leads to a lack of awareness of the services that are rooted in this culture, and lack of understanding of how to reach out for these services. A belief that western medicine is superior to traditional medicine is based on colonialism and the racism that stems from it. The prioritizing of Western medical systems over systems based on Indigenous knowledge and a disconnection from Indigenous culture contributes to families being more comfortable in accessing Western medical systems.

NACM members recognize that one of the largest barriers to families accessing Indigenous midwives is that midwifery services are not available in many Indigenous communities. Lack of funding and jurisdictional barriers contribute greatly to this. Funding and midwifery legislation vary by Province and Territory, and most legislation does not specifically recognize Indigenous midwifery (see textbox at left). Currently midwifery is unregulated and inaccessible in the Yukon and Prince Edward Island. New Brunswick will have pilot funding to



allow four midwives to start working in 2017. It is important to note, that while some provinces do have legislation that recognizes Indigenous midwives, this does not always translate to accessibility. In British Columbia, Indigenous midwives had to be practicing and announce themselves before legislation in order to be recognized following legislation, compromising the continuation and growth of community based Indigenous midwifery. No Indigenous midwives came forward at the outset of British Columbia's midwifery legislation despite a rich history of Indigenous midwifery in the province, and no current legislation exists to apply the title "Aboriginal Midwife". Ontario's midwifery legislation has an exemption for Aboriginal Midwives who are trained in community and recognized by their communities. In 2016, the province put out a call for proposals for Aboriginal midwifery practices that included Aboriginal midwives working under exemption. This is a promising development and historical time for Indigenous midwifery in Ontario. Further complicating funding is the fact that the

**"WE NEED TO RETURN THE FOCUS BACK TO THE COMMUNITIES AND HEAR FROM PEOPLE WHAT THEY NEED FROM US. IT GIVES US THE STEAM TO FIGHT REALLY HARD [FOR INDIGENOUS MIDWIFERY], KNOWING THERE IS A WHOLE COMMUNITY BEHIND US."**  
– NACM MEMBER, 2016

federal government is responsible for health care of status First Nations and Inuit, but midwifery is not a federally recognized health care profession, leading to increased difficulty in funding for and access to Indigenous midwives. Without recognition of midwives at the level of the Federal Treasury Board, payment for any hired community midwife would be drawn from other needed health care resources. As such there are few midwives working on-reserve across Canada, even when it is their home community.



# Future

## NACM'S FUTURE

### NACM's Role in Maternal-Child and Indigenous Health

As a strong national Indigenous midwifery organization, NACM has an important leadership role in maternal-child and Indigenous health in Canada and globally. There are several ways NACM members individually and collaboratively contribute to the broader goal of equitable access to care and self-determination of Indigenous people's health.

NACM members engage in a number of professional and leadership activities outside of their clinical midwifery work, including:

- Outreach in communities
- Education and lecturer opportunities
- Board of Directors and Advisory Committee roles

- Knowledge translation and presentations
- Research and policy analysis
- Establishment of midwifery-led clinics and birth centres

In addition, approximately 70% of NACM members belong to a provincial or territorial association, such as the Association of Ontario Midwives. In these platforms and within communities, NACM members hold a strong advocacy position and are able to make critical advancements within the health care field. They provide a bridge between community and policy, and are often relied on for resources, expertise, and research collaborations. The majority of the non-clinical work of NACM members, including work on behalf of NACM, is done on an unpaid and voluntary basis. This contributes to an overall increased and uncompensated workload.

### Priorities and Opportunities

Leaders in midwifery and Indigenous health consider NACM's objectives to be critical to improving health outcomes. NACM is uniquely positioned to meet the health needs of Indigenous people through the promotion of Indigenous birth practices and knowledge and the expansion of culturally safe reproductive care. Based on the current landscape, NACM has identified several focal areas to advance their vision. Work in these priority areas align with the Calls to Action

"I SEE OPPORTUNITIES FOR COLLABORATION GROWING. I SEE [NACM] AS LEADERS GLOBALLY... I THINK THAT THE TIMING IS GREAT IN TERMS OF PEOPLES' WILLINGNESS TO LOOK AT THINGS IN A SPIRIT OF RECONCILIATION." – PARTNER ORGANIZATION, 2016



of the TRC, and will contribute to improving health outcomes and maternity experiences for Indigenous people in Canada. Exploring opportunities to obtain sustained core funding for NACM is critical to make progress in these areas and enhance the sustainability of their organization.

NACM is a dynamic organization working towards the improvement of reproductive health through the promotion of Indigenous midwifery. The Truth and Reconciliation Commission of Canada has drawn the attention of the Canadian government and society to the long-lasting effects of colonization in this country and laid out steps needed to take to move towards reconciliation. The TRC importantly recognizes that reconciliation is not just an Indigenous issue, it is a Canadian issue that must be addressed at all levels of society. As an organization that is recognized for its leadership in Indigenous health NACM is well positioned to play a crucial role

“I THINK THAT THE FUTURE OF NACM IS TO HAVE SECURE, ADEQUATE FUNDING THAT CAN TAKE US TO THE NEXT LEVEL, BECAUSE THE NEED IS THERE. THERE ARE A LOT OF PEOPLE THAT ARE READY TO LISTEN BUT WE NEED THE CAPACITY TO GET OUR MESSAGE OUT... WE HAVE A PLACE ON THE WORLD STAGE WHEN IT COMES TO MIDWIFERY AND WE NEED TO BE REALLY STRONG IN THAT.”  
 – NACM MEMBER, 2016

in reconciliation. Through its diverse and skilled membership, promotion of Indigenous midwifery, and role in cultural revitalization, education and health care, NACM and its members play an essential role in improving the health and wellbeing of Indigenous women, children and families.

PRIORITY AREAS	PURPOSE
Education	To address colonial barriers that prevent access to education, including lack of community-based programs
Mentorship	To increase support for student midwives, midwives starting out in their careers and midwives looking to expand their skills
Expansion of midwifery services	To support communities in the process of bringing birth back to their communities
Policy	To promote best practices and evidence based policies that increase support for and access to Indigenous midwifery care
Promotion of Indigenous Midwifery globally	To highlight the work of NACM and explore ways that NACM’s knowledge can be shared to promote the growth of Indigenous midwifery globally and contribute to improved health outcomes of Indigenous people worldwide

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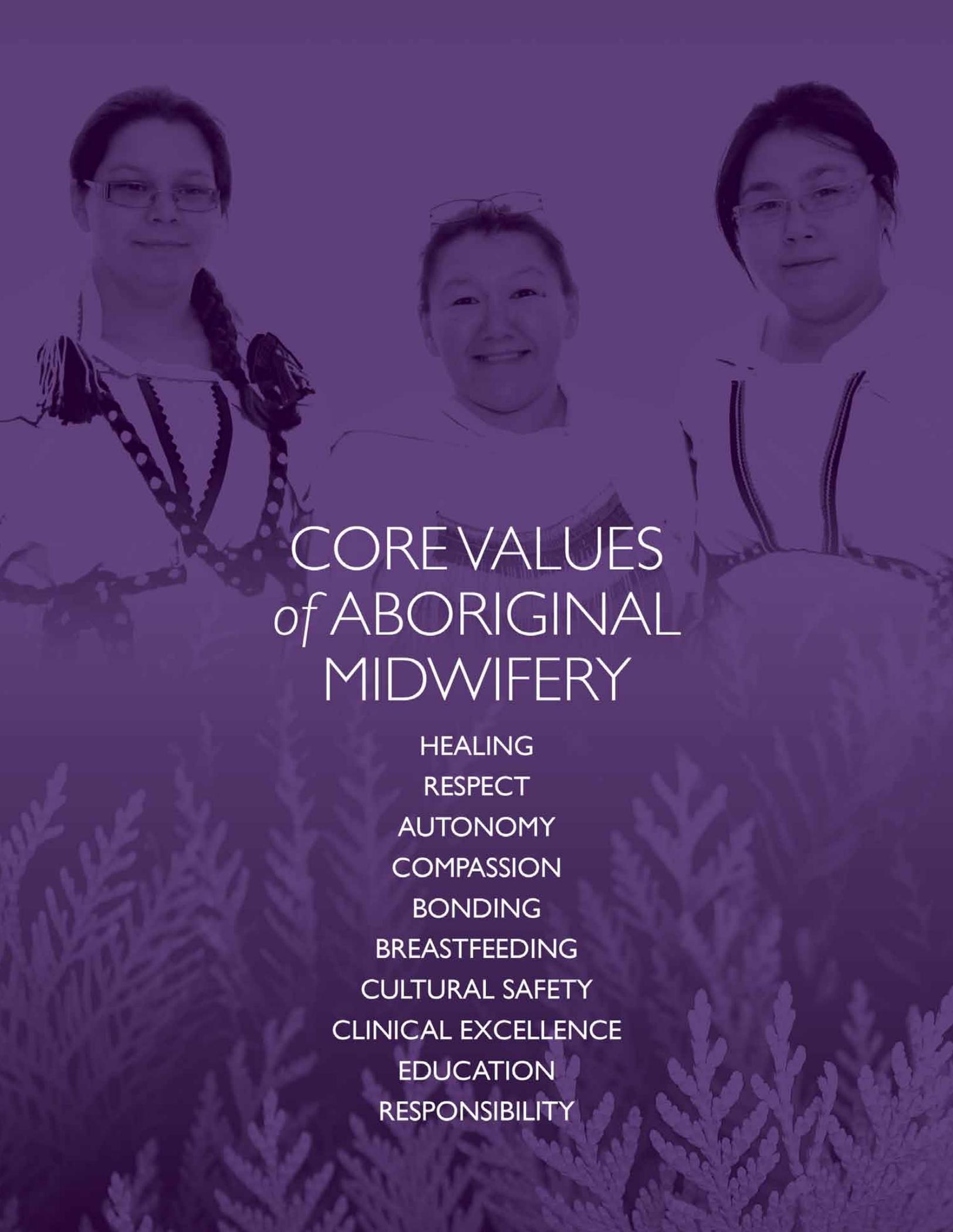
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A photograph of three Indigenous women, likely from the Pacific Northwest, wearing traditional beaded and fringed clothing. They are standing in a field of ferns. The image is overlaid with a semi-transparent purple filter. The text is centered over the image.

# CORE VALUES *of* ABORIGINAL MIDWIFERY

HEALING

RESPECT

AUTONOMY

COMPASSION

BONDING

BREASTFEEDING

CULTURAL SAFETY

CLINICAL EXCELLENCE

EDUCATION

RESPONSIBILITY

“INDIGENOUS MIDWIFERY IS A WAY OF CONTINUING TO HONOUR THE WISDOM AND WAYS OF OUR ANCESTORS. HELPING BABIES AND FAMILIES BE BORN IN A WAY THAT CONNECTS THEM TO THE LAND AND THEIR COMMUNITIES.”  
– NACM MEMBER, 2016



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