



PRESS RELEASE

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For Immediate Release

Over 80% of Canadians agree—the Feds should apologize for the harm done to Indigenous communities by birth evacuations.

A national survey shows the public has been left in the dark about the reproductive health inequities of Indigenous people in rural and remote communities.

Tiohtiá:ke/Montreal/Unceded traditional territory of the Kanien'kehá:ka Nation – People across Canada agree – the Federal government should publicly apologize to Indigenous (First Nations, Inuit, and Métis) communities for routine evacuations of low-risk pregnant people from their communities for birth, a practice known colloquially as “Birth Evacuations.”

The National Council of Indigenous Midwives (NCIM) conducted a national survey in November 2022 to understand public perception of Indigenous midwifery and birth evacuations. 312 people responded across ten different provinces and territories. Here is what they said:

Over 50% of respondents did not know about birth evacuations and the extreme distances Indigenous people must travel to give birth. Each year thousands of Indigenous people are forced to leave their families and communities to give birth, often alone, in distant hospitals, as part of long-standing federal health policies. According to federal occupational guidelines for nurses, they leave up to a month before their due dates, residing in substandard housing with little access to birth education and adequate nutrition. Two-thirds of survey respondents were also unaware that currently, the federal government is mostly responsible for Indigenous healthcare on reserve.

Once survey respondents learned about birth evacuations, close to 95% agreed that the Federal government should make changes in Indigenous healthcare to end routine birth evacuations. Close to 80% agreed that the federal government should invest money from evacuations into Indigenous-led midwifery services in communities.

The survey results send a strong message to the federal government—birth evacuations are unfair and need to be addressed. As some respondents put it: “it’s mortifying and disgusting,” “deplorable,” and “not cost-effective and emotionally taxing.” As National Indigenous organizations working towards Indigenous women’s wellness and well-being, we demand the federal government invest in Indigenous midwifery services and education, especially in rural and remote communities.

- In 2022, it cost the federal government [\\$602.2 million to fund medical transportation](#) (35.5% of annual NIHB expenditures), which includes flying people out of communities to give birth.

National Council of Indigenous Midwives
2330 Notre-Dame W. Suite 300
Montreal, Quebec H3J 1N4 Canada
+ 1-514-807-3668, ext. 220
Fax: +1-514-738-0370
admin@indigenoumidwifery.ca



- [Community-based, Indigenous-led midwifery](#) prioritizes access to local, remote and on reserve services that are relevant to community health needs. Services are culturally-rooted with demonstrated, clinically excellent care supporting improved sexual and reproductive health and adolescent health (SRHAH) for Indigenous communities.
- A great example of successful Indigenous-led midwifery began in Puvirnituq in 1986. Through the work of Inuit midwives today, approximately 92.2% of deliveries are done in Nunavik, while only 7.8% of women must travel to Montreal to give birth.
- Over 50% of survey respondents did not know about birth evacuations or the forced travel lengths for pregnant people.
- Over 85% of survey respondents agreed it was unfair that sexual health services in remote Indigenous communities are more difficult to access than services in the rest of Canada.
- Over 85% of survey respondents agreed it is unfair that Indigenous people are forced to leave their communities to give birth.
- Close to 95% of survey respondents agreed that the Federal government should make changes in Indigenous healthcare to end routine birth evacuations.
- Close to 80% of survey respondents agreed that the federal government should invest money from evacuations into Indigenous midwifery services in communities.

Official Statements:

"NCIM has known for decades that birth evacuations are a violation of inherent Indigenous rights, and the federal government needs to make changes to address this. These results show us that the public agrees and wants change from their elected officials."

Ellen Blais, Executive Director of NCIM, Onkwehonwe Midwife

"It is time for the Government of Canada to end the colonial practice of evacuating Métis and other Indigenous people from their rural or remote communities for low-risk pregnancies. During such a sacred time, birthing parents should be surrounded by their families, Elders and Knowledge Keepers, the land to which they are connected and have access to traditional ceremonies."

Melanie Omeniho, President of Les Femmes Michif FMO

Background information and Related Resources:

Birth Evacuations are the routine and blanket evacuation for all births for Indigenous peoples living in remote and rural communities in Canada. Evacuation for birth exposes Indigenous Peoples to the systemic bias, racism, and trauma that is part of Canadian health care systems and continues the trauma of colonization.

[NCIM's Position Statement on Evacuations for Birth](#)

About

The National Council of Indigenous Midwives (NCIM) exists to promote excellence in reproductive health care for Inuit, First Nations, and Métis pregnant people.

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We advocate for the restoration of midwifery education, the provision of midwifery services, and choice of birthplace for all Indigenous communities consistent with the U.N. Declaration on the Rights of Indigenous Peoples. For additional information on survey results, visit indigenoumidwifery.ca

Media Contacts:

Jo Muise, Communications & Engagement Co-ordinator, NCIM
jmuise@canadianmidwives.org

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