

Bringing Birth Back to Communities

Health disparities between Indigenous and non-Indigenous populations in Canada and other western societies is of great concern to Indigenous Peoples and communities, researchers, and healthcare providers and systems, especially in relation to maternal and infant health. Studies show that infant mortality rates are, on average, twice as high for Indigenous populations compared to non-Indigenous populations [1, 2]. Specific to Alberta in 2020, the First Nations population experience a perinatal mortality rate of 14.32 per 1,000 births compared to 5.17 per 1,000 births in non-Indigenous populations [3]. For several decades, Indigenous women have been and continue to be forced to leave their communities due to Health Canada's 'birth evacuation policy', which mandates that women from rural and remote communities must travel away from their families and communities in their last weeks of pregnancy to give birth in hospitals [4, 5]. Such regulations do not support traditional birthing practices, or recognize traditional midwifery knowledge, and continue to feed the complicated and colonialist apparatus surrounding childbirth in Canada and other western societies, such as the United States, New Zealand and Australia [4].

The Maternal Newborn Child and Youth (MNCY) Strategic Clinical Network (SCN) of Alberta Health Services (AHS) has prioritized improving maternal and infant health in Indigenous communities [6]. Evidence suggests that midwifery that includes cultural safety and competency leads to improved Indigenous maternal and infant health [7, 8]. Bringing birth back to community, primarily through midwifery, doulas, and/or traditional birth attendants, and including cultural safety, is of particular interest.

The Scientific Offices of the MNCY SCN and the Indigenous Wellness Core (IWC) are leading an environmental scan to identify best practices on how to implement midwifery, doula support, and/or traditional birth attendants in Indigenous communities and for Indigenous people and the barriers and facilitators associated with implementation. The environmental scan complements a systematic review focused on peer-reviewed literature about midwifery for Indigenous communities, expanding the breadth to include grey literature (not published in academic peer-reviewed journals) and interviews with key stakeholders to gather information that will be synthesized to inform implementation strategies and guide decision-making processes to support bringing birth back to communities.

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