

Midwives bring birth back to Nunavik

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In a remote northern community in the province of Quebec, Ryerson midwifery professor Vicki Van Wagner is seeing the benefits of bringing birth back home.

For generations, [women](#) in Nunavik, the Inuit region of northern Quebec, were flown from their homes to Montreal or Moose Factory at about 36 weeks gestation in order to have a hospital birth. This kept families apart for weeks or months, isolated young mothers during one of the most vulnerable times in their lives, and put them at risk for social and emotional problems that are amplified when the [young mothers](#) feel unsupported.

Now, this is all changing. The Inuulitsivik Health Centre has been training [midwives](#) within the northern communities of Nunavik with the support of Ryerson professors. Today, on average, 86 per cent of babies birthed by Inuit women are born in the region and attended to by indigenous midwives. A previous research project by Van Wagner studied the outcomes from 2000-2007. She is now updating that information for 2007-2015, and is working on a grant application that would study results in indigenous communities across Canada.

Bringing birth back to the community is important culturally, said Van Wagner. Sending the women away to large urban centres to birth is seen as "colonialist" within the community.

"In Inuit culture, birth is a celebration for the whole community," said Van Wagner. "It's something you do surrounded by family, having your

partner or your mother there, and even your kids there if you want to." In addition to the cultural aspect, the research is showing that it is just as safe to birth within the community. In fact, birthing within Nunavik means that women who might otherwise forego prenatal care, because they were afraid of being sent away to birth, are now actively engaging in the process. Overall, pre-term labour, perinatal outcomes, and breastfeeding rates are all showing an improvement over birthing outside the community.

Van Wagner explained that previous pregnancies and the young age of expectant mothers make them less likely to experience complications in childbirth, than mothers in larger urban centres where women are delaying childbirth well into their 30s. "The average age for having a first baby here is 19," said Van Wagner, in a telephone call from the midwifery clinic in Nunavik. "And most women have more than one child. Both of these factors make birth safer." The establishment of mother-child care in the community contributes to the overall improvement of health, as the midwives also support better general community health programs and preventive care such as Pap tests.

The kind of on-the-job training that the northern midwives receive through the program established with the Inuulitsivik Health Centre is perfect for the local women, who often have families and would otherwise be reluctant to leave their community for training.

While the push to bring [birth](#) back to the community was cultural and motivated by traditional values, the medical training that the midwives receive is very modern.

Van Wagner notes that the midwives are trained in emergency skills. "If a baby needs resuscitating, the midwives will do it. Midwives are usually the lead in care with mothers and babies. They are really mixing traditional knowledge and medical skills very well."

Provided by Ryerson University

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