Ending the Practice of Forced & Coerced Sterilization:

The Role of Indigenous Midwifery

Policy Brief

"Healing through our Lifegivers by restoring Indigenous Midwifery and Birth to our communities."

Federal Core Capacity Funding 2020-2022

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"Canada has a long history of forced and coerced sterilization. For much of the 20th century, laws and government policies explicitly sought to reduce births in First Nations, Métis and Inuit communities, Black communities, and among people with intersecting vulnerabilities relating to poverty, race, and disability. Though these explicit eugenic laws and policies have been repealed, the racist and discriminatory attitudes that gave rise to them are still present in Canadian society and forced and coerced sterilization still occurs."

Standing Senate Committee on Human Rights:
The Scars that We Carry: Forced and Coerced Sterilization of Persons in Canada- Part II[1]

Introduction

Sterilization is a form of contraception that eliminates a person's ability to reproduce through a surgical procedure. As a contraception and family planning method, sterilization must only be performed with prior-informed decision-making and the full and free consent of the individual. The decision must be free from discrimination, coercion, and violence.[2] Forced and coerced sterilization is a form of gender-based violence and trauma and is a manifestation of ongoing racism and genocide experienced within the health care system. It must end. Governments, regulatory bodies, and health provider associations are responsible for ensuring this practice stops. We strongly assert that as Indigenous Midwives, we have a significant role in leading the delivery of rights-based approaches to care, informed consent for contraception, and the provision of safe, consensual access to sexual and reproductive health care for Indigenous communities and Peoples.

Background

Forced and coerced sterilization (FCS) became a common, embedded practice through government legitimization. Alberta[3] and British Columbia[4] had specific legislation from the 1920s to the mid-1970s that made FCS legal and mandated the practice in stipulated situations. The *Acts* allowed for the sterilization of people without their knowledge and consent. In other provinces, informal policies and procedures existed, and were accepted, and practiced. During this period, most sterilizations occurred at government-funded hospitals, prisons, and psychiatric institutions and

disproportionately impacted Indigenous Peoples.[5] The practice was one way of executing the nation-wide Government of Canada policies of assimilation of Indigenous Peoples through reduction or elimination of their population numbers. For example, despite making up approximately 2.5% of the general population in Alberta, in the last years of the *Act's* operation, Indigenous Peoples represented over 25% of those sterilized.[6]

Current manifestations of FCS are perpetuated by a spectrum of coercion and lack of information, underscored by anti-Indigenous racism that is embedded in healthcare systems across Canada. Based on incomplete and partial data, at least 12, 000 Indigenous people have been sterilized since the 1970s in Canada and we know over 100 Indigenous people have come forward with their experiences of coercion, from across the country. We also know that Indigenous peoples sometimes disproportionately experience this permanent procedure and that not all those who experience this or other forms of violence are willing to come forward. There are class action lawsuits claiming coerced sterilization in several provinces, including NT, AB, BC, MB, and Sask..[7] These procedures are founded on racist eugenics laws, policies, and ideologies. It is known that forced, coerced, and involuntary sterilization does not just affect individual Indigenous Peoples; by reason of its ultimate purpose, it is an assault on families, communities, and Nations, and is a continuation of Canada's long-standing history of colonization and assimilation. The control of Indigenous People's fertility through forced, coerced, and involuntary sterilization is an act of genocide and is a human rights violation, which is explicitly prohibited by the UN Convention on the Prevention and Punishment of Crimes of Genocide.

Forced, coerced, and involuntary sterilization is an act of violence and torture.[8] Sterilization under duress or coercion is a violation of human rights. Forced and coerced sterilization is a violation of medical ethics, yet many Indigenous Peoples continue to be approached in pregnancy, during or immediately following childbirth about sterilization or are made to feel threatened by child apprehension and involvement by children's aid organizations.[9] The Society of Obstetricians and Gynecologists of Canada (SOGC) released a statement in 2021 acknowledging Indigenous rights for contraception choices and the importance of culturally safety, autonomous, and coercion free decision making.[10] Despite this statement, Indigenous Peoples are still coming forward with their experiences of forced and coerced sterilization.

The Standing Senate Committee on Human Rights, which commenced an inquiry in February 2019 and published part I report June 2021 and part II report July 2022, has recommended that Parliament further investigate and find ways to stop forced and coerced sterilization in Canada; the Senate Report thereby recognizes and confirms the ongoing practice[11]

The protective role of Indigenous midwives

Indigenous Midwives are an intervention to forced, coerced sterilization in Canada. Not only is Indigenous Midwifery grounded in the provision of respectful, relational Indigenous human, sexual, and reproductive rights, it explicitly goes beyond cultural safety to include Indigenous reproductive knowledge and broader sovereignty, a necessary precondition for ensuring "choice" for Indigenous women/people in healthcare and beyond. Indigenous Midwives are care providers who are essential knowledge holders in the community who provide health and wellness care that includes contraception, discussion on choice and consent, respectful relations across all generations, and rights-based sexual and reproductive health. Indigenous Midwifery is committed to eliminating gender-based violence.

Unfortunately, most Indigenous communities across Canada do not have access to Indigenous Midwives and generally have limited access to healthcare professionals. As a result, pregnancy and childbirth increase Indigenous Peoples' vulnerability and compromise safety and choices.[12] Indigenous peoples also face a decision between forced, coerced, and involuntary sterilization and family cohesion. For example, Indigenous youth in care are being given intrauterine devices *(*IUDs) before the legal age of consent to sexual activity.[13] In other instances, parents of young children are pressured by social health services to accept long term contraception or sterilization as a condition to keeping their children at home and outside of the child welfare system.

The medicalization of childbirth and the practice of routine, mandatory evacuations for birth delivery compromises the safety of Indigenous Peoples, forcing them to endure care alone in unfamiliar hospitals and often unable to understand the language. These evacuations contribute to Indigenous Peoples' physical and emotional vulnerability[14] and susceptibility to forced and coerced sterilization. As a direct response to the prevalence of sterilizations occurring among routine evacuated pregnant patients, Pauktuutit, the national representative organization of Inuit women in Canada, prioritized reintroducing midwifery practice as an attempt to maintain "cultural

survival" and keep birth local. [15]Indigenous midwives are a vital, protective force against the ongoing sexual and reproductive health violence experiences by Indigenous peoples. Indigenous midwives are needed in every Indigenous community.

There is an urgent need to adopt and address the recommendations and Calls to Action brought forward by the *Truth and Reconciliation Commission of Canada* (2015) and the Calls to Justice in the *National Inquiry into Missing and Murdered Indigenous Women and Girls*, and to uphold the principles of the United Nations Declaration on the Rights of Indigenous Peoples (2007).[16] To carry out the recommendations is a means of specifically addressing TRC Calls to Action 18, 19, 20, 23, 24, 25, 55 and the MMIWG Calls to Justice 3.2, 3.3, 3.6, 7.2, 7.6, 7.8, 15.1, 15.2 and 15.6.

Recommendations

1. ***Mandate every healthcare regulatory body in Canada to adopt a zero-tolerance policy of forced and coercive sterilization and contraception.***

   Articulate clear guidelines on free prior and informed consent. Develop a process to report medical staff participating in forced and coerced sterilization. Ensure that all allegations of forced and coerced sterilization are impartially investigated, that the persons responsible are held accountable, and that adequate redress is provided to the victims.

2. ***Adopt Bill S-250 to criminalize forced and coerced sterilization FCS by registering under the criminal code forced, coerced, and involuntary sterilization.***

   The Bill articulates consent and safeguards to ensure prior informed consent.

3. ***Acknowledge, listen to, and provide patient-guided supports and counselling to every forced and coerced sterilization affected person***.

   Their perspectives must be meaningfully included, and they must be engaged in a safe and sensitive way moving forward.

4. ***Fund community-based, Indigenous-led initiatives to inform, identify, and prevent forced and coerced sterilization***.

   The must aim to ensure the protection and promotion of sexual and reproductive health rights and cultural practices of Indigenous Peoples.

5. ***Provide sustained, ample resourcing to develop an action plan to fulfill the 13 recommendations of the Standing Senate Committee on Human Rights most recent report: The Scars That We Carry: Forced and Coerced Sterilization of Persons in Canada- Part II.***

6. ***Fund continued education and training related to forced and coerced sterilization for all health professionals, social services, and regulatory bodies.***

   The aim must be to ensure concepts of informed consent and choice are understood among all such professionals and body with whom Indigenous Peoples come into contact when seeking healthcare.

References

[1] The Scars that We Carry: Forced and Coerced Sterilization of Persons in Canada - Part II https://sencanada.ca/en/info-page/parl-44-1/ridr-the-scars-that-we-carry-forced-and-coerced-sterilization-of-persons-in-canada-part-ii

[2] Black, K. A., Rich, R., & Felske-Durksen, C. (2021). Forced and Coerced Sterilization of Indigenous Peoples: Considerations for Health Care Providers. *Journal of Obstetrics and Gynaecology Canada*. https://doi.org/10.1016/j.jogc.2021.04.006;

World Health Organization. (2014). Eliminating forced, coercive and otherwise involuntary sterilization: An interagency statement, OHCHR, UN Women, UNAIDS, UNDP, UNFPA, UNICEF and WHO.

[3] Alberta's *Sexual Sterilization Act* was in effect between the years of 1928-1972.

[4] British Columbia's *An Act Respecting Sexual Sterilization* was in effect between 1933-1973.

[5] Pegoraro, L. (2015). Second-rate victims: the forced sterilization of Indigenous peoples in the USA and Canada, Settler Colonial Studies. *Settler Colonial Studies*, *5*(2), 161-173. https://doi.org/10.1080/2201473X.2014.955947;

Stote, K. (2012). The coercive sterilization of aboriginal women in Canada. *American Indian Culture and Research Journal, 36(3),* 117-150.

[6]Black, K. A., Rich, R., & Felske-Durksen, C. (2021). *Journal of Obstetrics and Gynaecology Canada;* Pegoraro, L. (2015). *Settler Colonial Studies*, *5*(2), 161-173;

[7] https://www.facebook.com/APTNNews/videos/1040220833528236; Shawana, C., Ryan, C., & Ali, A. (2021). Forced or Coerced Sterilization in Canada: An Overview of Recommendations for Moving Forward. *International Journal of Indigenous Health*, *16*(1);

Virdi, J. (2018). The coerced sterilization of Indigenous women. *New Internationalist*. https://newint.org/features/2018/11/29/canadas-shame-coerced-sterilization-indigenous-women

Stote, K. (2022). From Eugenics to Family Planning: The Coerced Sterilization of Indigenous Women in Post-1970 Saskatchewan. *NAIS, 9* (1); Bill Casey, Chair, Standing Committee on Health, "Letter to Ministers Petitpas Taylor, Goodale, and O'Regan, Re: Study on Forced Sterilization," 6. August 2, 2019, https://www.ourcommons.ca/DocumentViewer/en/42-1/HESA/related-document/10596408.

[8]NCAM PS on ForcedSterilization.pdf . https://indigenousmidwifery.ca/wp-content/uploads/2019/05/PS-ForcedSter.pdf

United Nations General Assembly. (1948, December 9). Convention on the prevention and punishment of crimes of genocide, Paris. United Nations Treaty Series78(1021). Retrieved from https://treaties.un.org/doc/publication/unts/volume%2078/volume-78-i-1021-english.pdf;

[9] Black, K. A., Rich, R., & Felske-Durksen, C. (2021). *Journal of Obstetrics and Gynaecology Canada;* Collier, R. (2017).

Reports of coerced sterilization of Indigenous women in Canada mirrors shameful past. *CMAJ*; National Collaborating Centre for Indigenous Health. (2021).

Informed Choice and Consent in First Nations, Inuit, and Métis Women's Health Services; Virdi, J. (2018). *New Internationalist*.

[10] Ibid; SOGC Statement on Coercive Contraception Provision https://sogc.org/en/en/content/featured-news/SOGC-Statement-on- Coercive-Contraception-Provision.aspx

[11] Forced and Coerced Sterilization of Persons in Canada (sencanada.ca); 2020_Accessible Committee-Report template_E.docx (sencanada.ca) https://sencanada.ca/en/info- page/parl-43-2/ridr-forced-and-coerced-sterilization-of-persons-in-canada/

[12] Dyck & Lux, 2016 *Canadian Historical Review*, *97*(4), 481-512.

[13] Lawyer in B.C. alleges Indigenous girls forced to have IUDs - APTN News (2021) https://www.aptnnews.ca/videos/lawyer-in-b-c-alleges-indigenous-girls-forced-to-have-iuds/;

Forced and Coerced Sterilization of Persons in Canada (sencanada.ca); 2020_Accessible Committee-Report template_E.docx (sencanada.ca) https://sencanada.ca/en/info- page/parl-43-2/ridr-forced-and-coerced-sterilization-of-persons-in-canada/.

[14] Dyck, E., & Lux, M. (2016). Population Control in the “Global North”?: Canada's Response to Indigenous Reproductive Rights a Neo-Eugenics. *Canadian Historical Review*, *97*(4), 481-512.

[15] Ibid; Forced and coerced sterilization in Canada must be stopped: Senator Boyer (sencanada.ca) https://sencanada.ca/en/sencaplus/opinion/forced-and-coerced-sterilization-in-canada-must-be-stopped-senator-boyer/

[16] Shawana et al., (2021) *International Journal of Indigenous Health*, *16*(1); World Health Organization, (2014.)