



Conseil Cri de la santé et des services sociaux de la Baie James
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Cree Board of Health and Social Services of James Bay

Being born in Eeyou Istchee in a culturally safe way Waapimaausuwin and Midwifery



“The baby’s first home is the
mother’s womb”

Sally and Robbie Matthew

Chiiniskautinnaauwau



“If the Cree Nation wants their people to heal it must make every effort to develop programs, services and approaches designed to for such purposes and to recognize that our health is our most valuable possession.”

Dr. George Blacksmith 2013



Strategic Regional Plan 2016-2021

Nishiiyuu and Perinatal Care Objectives

Proceed for gathering traditional knowledge

Provide Waapimaausuwin along with midwifery services

Ensure culturally-safe services to client

Give pregnant women the freedom to choose their perinatal care providers (midwife, MD, nurse)

Midwives conduct normal deliveries on territory in birthing homes

Provide choice for traditional medicine for clients

Decrease high risk pregnancies

Vision for Waapimaausuwin in Eeyou Istchee

To develop a unique model

- Reviving and Restoring Waapimaausuwin practices and knowledge for Cree mothers and families
- Embedding Indigenous knowledge within our service delivery and programs
- Restoring the path of transfer of knowledge with the Elders
- Strengthening family bonding through Waapimaausuwin programs and midwifery services
- Instilling resiliency and improving wellness
- Developing a collaborative care approach

Nishiiyuu and community at the heart of the decisions



Background of the Waapimaasuwin guide

Created for Nishiiyuu Waapimaasuwin
Birthing Knowledge Program

2013 Pilot in Waswanipi, later in
Chisasibi, Mistissini & Waskaganish

Developed with support from Elders &
Nishiiyuu Council of Elders



Content of the Waapimaausuwin Guide

- Introduction
- How to use the guide

1

- Teachings on 39 topics

2

- List of Videos
- Catalogue of 300 video clips

3

“The placenta was never discarded; it would be placed and wrapped in something and hung in a tree. This was done because there was the belief and expectation that the baby would grow up healthy and strong. This is why its placenta would be hung in a tree. It was never put in the ground. When the placenta was hung high above in a tree it was analogous to babies growth with the hope they would be well raised.”

James Kawapit, Whapmagoostui

There are stories dating back to 2000 years ago and prior, which tell what it was like back then. This knowledge can help us even today.

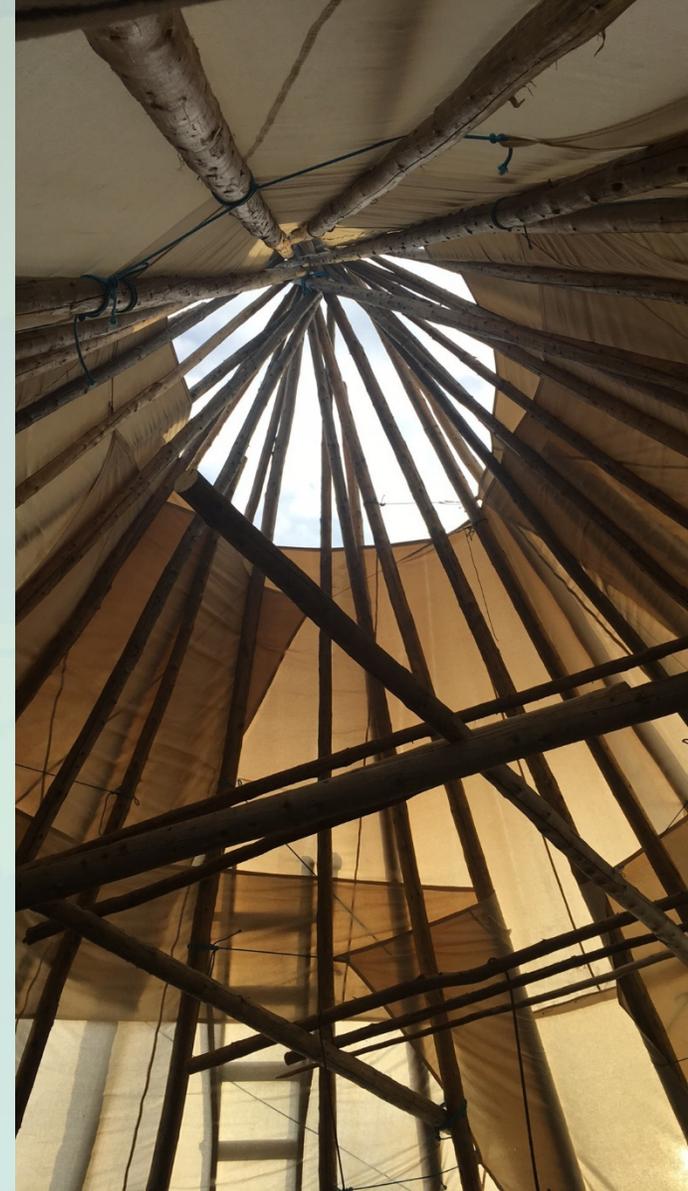
Young people, you must continue to explore Iyiyiu knowledge and skills that your ancestors had and learn also how they raised their children.

James Kawapit, Cree elder



Guiding Principles of Midwifery in Quebec

- To trust women's competency and autonomy
- To respect and to trust pregnancy and birth as physiological processes
- To value the continuity of care and of the relation
- To establish a personal and egalitarian relationship with the women



Midwifery Scope of Practice

Any act the purpose of which is to provide the professional care and services required by a woman during normal pregnancy, labour and delivery and to provide a woman and her child with the professional care and services required during the first six weeks of a normal postnatal period constitutes the practice of midwifery. The professional care and services concerned consist in

- (1) monitoring and assessing a woman and her child during pregnancy, labour, delivery and the first six weeks of the postnatal period, and include the provision of preventive care and the detection of any abnormal conditions in the woman or child ;
- (2) conducting spontaneous deliveries ;
- (3) performing an amniotomy, performing and repairing an episiotomy and repairing a first or second degree perineal tear or laceration.

In addition, in an emergency, while awaiting the required medical intervention or in the absence of medical intervention, applying suction, conducting a breech delivery, performing manual placental extraction followed by digital exploration of the uterus or performing resuscitation procedures on the woman or newborn also constitutes the practice of midwifery.

Midwifery Services

Accessible for all communities:

- Complete maternity services in communities with midwives in a collaborative care practice approach
- Collaborative follow-up with nurses and doctors in communities without midwives for women who want to give birth in Eeyou Istchee
- Pregnancy and postnatal follow-up for women who want a VBAC
- Pregnancy and postnatal follow up for women who want to give birth in a hospital where surgery is available



Midwifery services and Nishiiyuu

Offer to every women and family to meet with an Elder

Groups meetings in communities with involvement of Elders

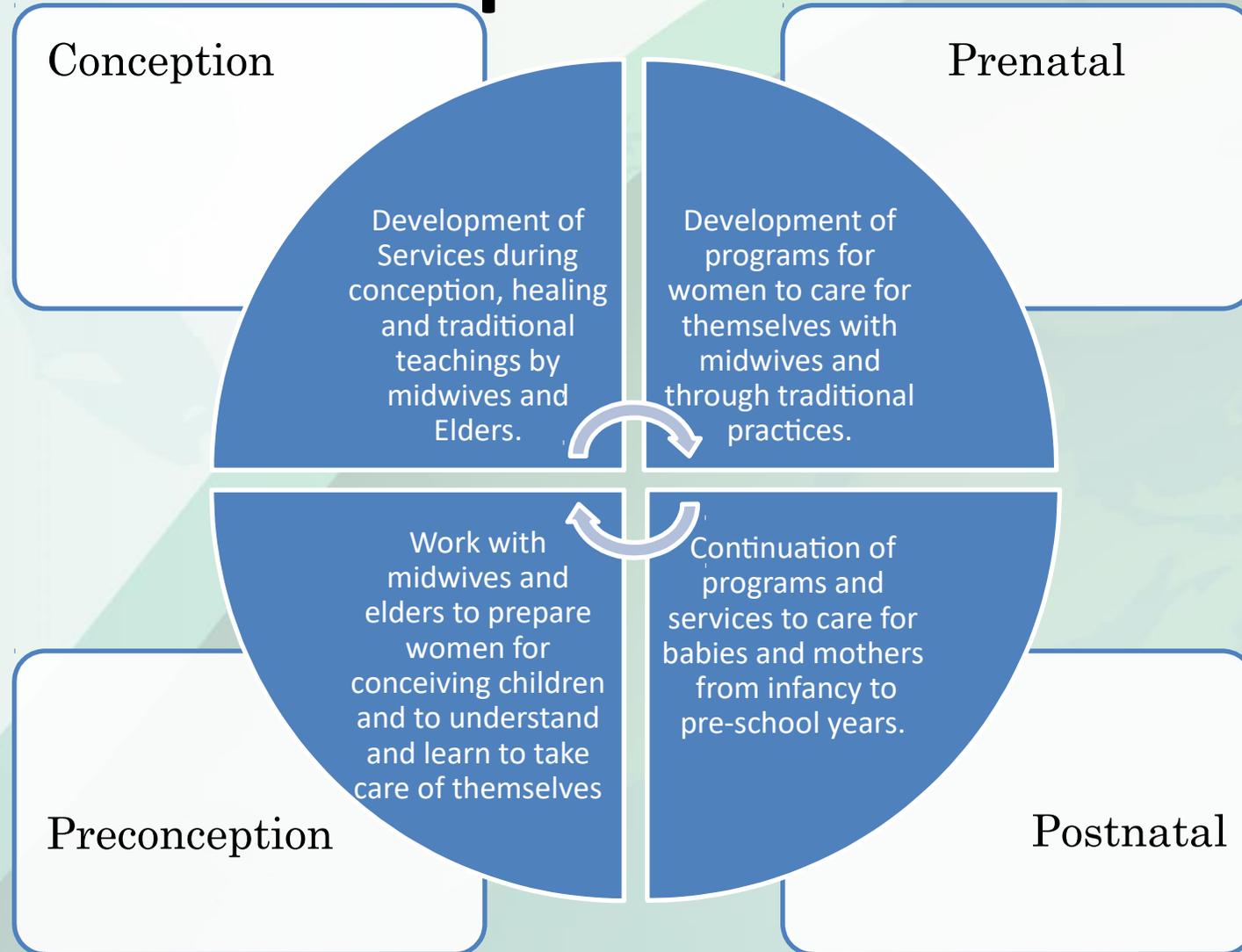
Clinical support 24-7 to health professionals and workers

Well women clinic

Training of Cree midwives



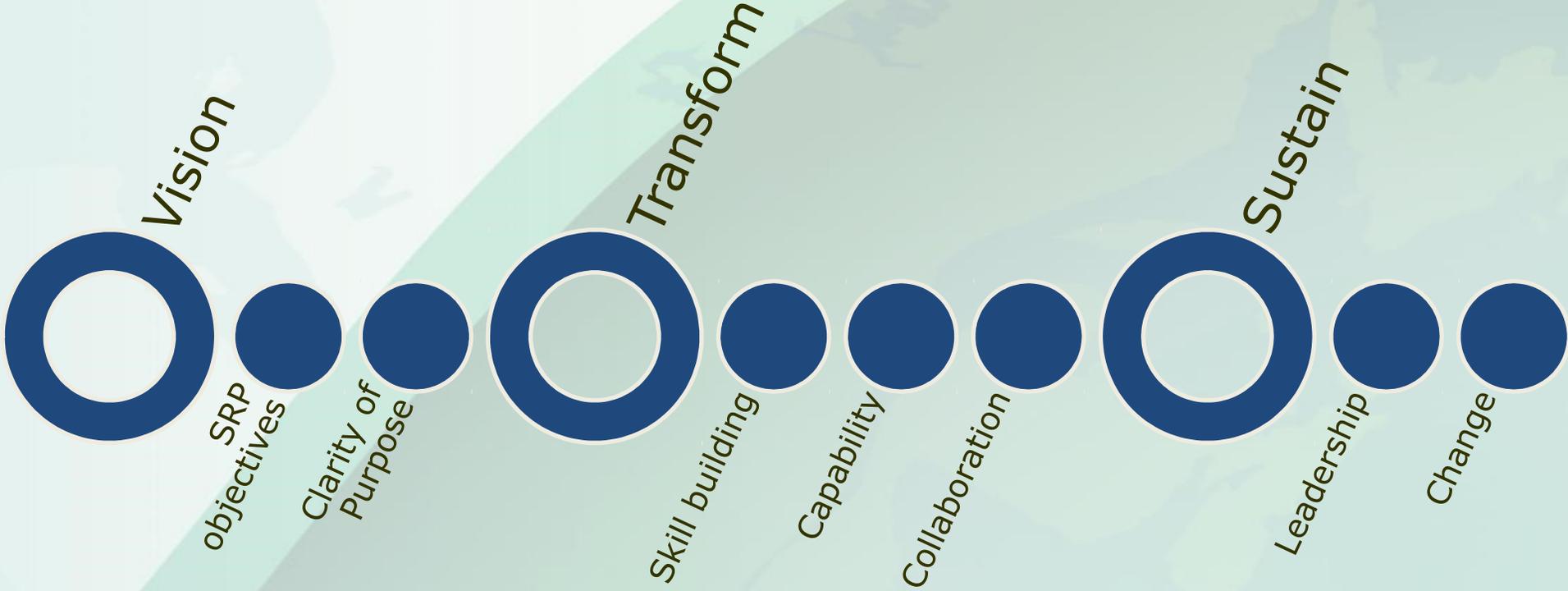
Framework for midwifery services and Waapimaausuwin



Timeline for deployment of midwifery services

| | Chisasibi | Waskaganish | Mistissini |
|-----------------------|-----------------------|-------------------------|--------------------------|
| Planning | Fall 2017 | Beginning 2020 | Beginning 2021 |
| Start of service | Summer/Fall 2018 | Spring 2020 | Spring 2021 |
| Implementation period | Spring 2018-Fall 2019 | Spring 2020-Spring 2021 | Spring 2020- Spring 2022 |

How will we get there



Truth and Reconciliation Commission of Canada

Call to Actions

5 call to actions are concerned: 18, 19, 22, 23 & 33

18. We call upon the federal, provincial, territorial, and Aboriginal governments to acknowledge that the current state of Aboriginal health in Canada is a direct result of previous Canadian government policies, including residential schools, and to recognize and implement the healthcare rights of Aboriginal people as identified in international law, constitutional law, and under the Treaties.

19. We call upon the federal government, in consultation with Aboriginal peoples, to establish measurable goals to identify and close the gaps in health outcomes between Aboriginal and non-Aboriginal communities, and to publish annual progress reports and assess longterm trends. Such efforts would focus on indicators such as: infant mortality, maternal health, suicide, mental health, addictions, life expectancy, birth rates, infant and child health issues, chronic diseases, illness and injury incidence, and the availability of appropriate health services.

Truth and Reconciliation Commission of Canada

Call to Actions

22. We call upon those who can effect change within the Canadian health-care system to recognize the value of Aboriginal healing practices and use them in the treatment of Aboriginal patients in collaboration with Aboriginal healers and Elders where requested by Aboriginal patients.

23. We call upon all levels of government to:

- i. Increase the number of Aboriginal professionals working in the health-care field.
- ii. Ensure the retention of Aboriginal healthcare providers in Aboriginal communities.
- iii. Provide cultural competency training for all healthcare professionals.

33. We call upon the federal, provincial, and territorial governments to recognize as a high priority the need to address and prevent Fetal Alcohol Spectrum Disorder (FASD), and to develop, in collaboration with Aboriginal people, FASD preventive programs that can be delivered in a culturally appropriate manner

United Nations Declaration on the Rights of Indigenous Peoples

Article 13

1. Indigenous peoples have the right to revitalize, use, develop and transmit to future generations their histories, languages, oral traditions, philosophies, writing systems and literatures, and to designate and retain their own names for communities, places and persons.

Article 21

1. Indigenous peoples have the right, without discrimination, the improvement of their economic and social conditions, including, inter alia, in the areas of education, employment, vocational training and retraining, housing, sanitation, health and social security.

2. States shall take effective measures and, where appropriate, special measures to ensure continuing improvement of their economic and social conditions. Particular attention shall be paid to the rights and special needs of indigenous elders, women, youth, children and persons with disabilities.

Cree elders have identified this knowledge and the Nishiiyuu Waapimausuwin program as critical to Cree identity, resilience, health and wellness. This knowledge is a guide to the Cree way of life, for newborns and families to achieve Miyupimaatisiwin – a Good life.

Waapimausuwin guide, 2018, p.4



**Meegwetch
Thank you**

