Reproductive and Sexual Health

Reproductive, maternal, and infant health outcomes are important measures of overall population health. Despite this importance, there are big gaps in population based reproductive, maternal and infant health information for Indigenous peoples in Canada.¹ The intergenerational transmission of health promoting birthing and parenting knowledge and practices are a core part of many Indigenous knowledge systems.² This knowledge and practice was negatively impacted by colonial policies such as the Indian act, residential schools, forced sterilization and the outlawing of Indigenous midwifery.³ Revitalization is a key part of advancing Indigenous infant, maternal, and family health. Community-led health services and the resurgence of Indigenous midwifery across Turtle Island are actively engaged in ensuring that our mothers and babies are once again nurtured and supported.

Contraception

56% of Indigenous peoples in Toronto identifying as women, trans, and other, 15 to 44 years, were taking some form of contraception to keep from getting pregnant.

Types of contraception

<table>
<thead>
<tr>
<th>Contraception</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Condoms</td>
<td>47%</td>
</tr>
<tr>
<td>Abstinence/Not Having Sex</td>
<td>17%</td>
</tr>
<tr>
<td>Birth Control Pill</td>
<td>12%</td>
</tr>
<tr>
<td>Intrauterine device (IUD)*</td>
<td>10%</td>
</tr>
<tr>
<td>Tubes Tied/Blocked**</td>
<td>5%</td>
</tr>
<tr>
<td>Injection (e.g. Depo Provera)</td>
<td>4%</td>
</tr>
<tr>
<td>Other***</td>
<td>5%</td>
</tr>
</tbody>
</table>

*IUD includes Mirena, ParaGard; **Tubes tied: female sterilization, Essur, Adiana; ***Other includes contraceptive patch, vasectomy, withdrawal

Reasons for not taking birth control were:

I want to get pregnant
I cannot afford to pay for birth control
I have a female partner who doesn’t want to use anything
I am not having sexual intercourse
I am worried about the side effects of birth control
I had my tubes tied/blocked
I am pregnant now
I am not able to get pregnant (infertility or tubes tied/blocked)

26% of Indigenous adults believed fertility services serving Indigenous people are inadequate

Sexually Transmitted Infections

21% of Indigenous adults have been diagnosed or treated for a sexually transmitted infection (STI) in their lifetime.

28% of Indigenous adults believe sexual health services are inadequate

Fertility Rate

The fertility rate for Indigenous people identifying as women, trans, and other of reproductive age (15 to 49 years) living in Toronto is **2.12 children.** vs. **1.51 children** per woman living in Ontario (Canadian Vital Statistics 2013).⁴

Chlamydia and Gonorrhea were the most commonly reported STIs.

Based on the population estimate of reproductive age, it is expected that approximately **1,036 – 1,408** children will be born to Indigenous women, trans, and other per year in Toronto.
Reproductive and Sexual Health

### Prenatal And Birthing Care

27% of Indigenous adults in Toronto believed reproductive health and pregnancy services are inadequate.

<table>
<thead>
<tr>
<th>Percent (%)</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>61%</td>
<td>61% of Indigenous women, trans, and other in Toronto that gave birth in the past 5 years had their first prenatal visit at 0-12 weeks.</td>
</tr>
<tr>
<td>13%</td>
<td>13% had their first visit at 13-26 weeks.</td>
</tr>
<tr>
<td>26%</td>
<td>26% had their first visit at 27-40 weeks or did not receive any prenatal care during their most recent pregnancy.</td>
</tr>
</tbody>
</table>

In comparison, 94.9% of women in Canada had their first prenatal care visit at 13 weeks or earlier (MES 2006/2007).\(^5\)

Indigenous mothers (includes women/trans/other) in Toronto who experienced discrimination from a healthcare professional were **2.5 times** more likely to not receive prenatal care or receive prenatal care in the 3rd trimester of pregnancy.

#### Prenatal And Birthing Care

- **48%** Obstetrician/Gynecologist/OBGYN
- **32%** Midwife
- **20%** Family Doctor or General Practitioner

97% of Indigenous people identifying as women, trans, and other that gave birth in the past 5 years indicated that the prenatal care provider they used was their preferred choice.

1 in 5 (20%) indicated not receiving prenatal care as early as they wanted.

#### Midwifery Care

A higher rate of Indigenous people that gave birth in the past 5 years used a midwife as their prenatal care provider compared to women in the Toronto Central LHIN.

<table>
<thead>
<tr>
<th>Percent (%)</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>32%</td>
<td>OHC Toronto Adults (gave birth ≤5 years)</td>
</tr>
<tr>
<td>25%</td>
<td>OHC London Adults (gave birth ≤5 years)</td>
</tr>
<tr>
<td>8%</td>
<td>Toronto Central LHIN Women - Hospital Deliveries (BORN 2007)(^6)</td>
</tr>
</tbody>
</table>

All women/trans/other that had a midwife as their prenatal care provider said it was their preferred prenatal care provider.
Reproductive and Sexual Health

Womb As First Environment

13% of Indigenous children’s mothers (includes women, trans, and other) in Toronto experienced Gestational Diabetes during their pregnancy.

In comparison, 7% of mothers that gave birth in Ontario experienced Gestational Diabetes.\(^7\)

85% of Indigenous mothers (includes women, trans, and other) had a smoke-free home during their pregnancy.

Birth Story

21% (1 in 5) of Indigenous infants in Toronto were born premature (born before 37 weeks).

VS.

8% of infants in Toronto.\(^8\)

Preterm Birth (<37 weeks)

21% of Indigenous infants in Toronto were born premature (born before 37 weeks).

VS.

8% of infants in Toronto.\(^8\)

Birth Weight

Indigenous infants born in Toronto were 2X more likely to be overweight or underweight compared to infants born in Ontario.*

Teenage Pregnancy

A higher percentage of Indigenous women, trans, and other in Toronto who gave birth in the past 5 years were teenagers (15-19 years) compared to the general population of women who gave birth in Toronto (Ontario Inpatient Discharges and Hospital and Medical Services Data, 2004-2013 – MOHLTC).\(^10\)

* Note these differences indicate a trend only
Reproductive and Sexual Health

Neonatal Intensive Care Unit

Over 1 in 5 (21%) Indigenous children in Toronto were admitted to the neonatal intensive care unit (NICU) immediately after birth. This is higher than the 13% of live births in Ontario admitted to the NICU.⁷

7% of Indigenous children were in the NICU for 7 days or more. In comparison, 4% of live births in Ontario newborns were in the NICU for 7 days or more.⁷

Breastfeeding/Chest Feeding

Chest feeding is increasingly being used to refer to breastfeeding. It is a more inclusive word that provides another term for breastfeeding for people that do not identify as women.

76% of Indigenous women, trans, and other that gave birth in the past 5 years breastfed their most recent child. This is slightly lower than the 89% of women in Canada.¹¹

61% of Indigenous children in Toronto were breastfed.

The main reasons Indigenous mothers (includes women/trans/other) in Toronto did not breastfeed:

- Bottle feeding easier
- Medical condition of mother
- Medical condition of infant

Factors that helped birth parents of Indigenous children breastfeed:

- People in my family helped/supported me: 42%
- I felt confident, from breastfeeding my previous child/children: 38%
- Healthcare providers helped/supported me to breastfeed: 33%
- Indigenous community support programs: 8%
- Community support programs: 6%
- Other: 11%

41% of birth parents (mother/other) of Indigenous children in Toronto breastfed their most recent child exclusively for 6 months or more compared to 25% of mothers in Ontario.¹¹

62% of Indigenous children in Ontario Women (gave birth ≤5years) (CCHS 2011/2012)¹¹

Factors that helped birth parents of Indigenous children breastfeed:

- People in my family helped/supported me: 42%
- I felt confident, from breastfeeding my previous child/children: 38%
- Healthcare providers helped/supported me to breastfeed: 33%
- Indigenous community support programs: 8%
- Community support programs: 6%
- Other: 11%
Reproductive and Sexual Health

**Introduction of Solid/Liquid Foods**

- **29%** of birth parents of Indigenous children in Toronto added solid or liquid food to their child’s diet at 6 months or later.

The recommended age for the introduction of solid or liquid food for breastfed infants is 6 months (CCHS 2011/2012).

The main reasons mothers (includes women/trans/other) stopped breastfeeding:
- **Believed the child was ready for solid foods**
- **Did not have enough breast milk**
- **Had difficulties with breastfeeding (e.g. sore nipples, mastitis)**

The main reasons liquid/solid food was added to the baby’s diet:
- **Believed the child was ready for solid foods**
- **Did not have enough breast milk**
- **Had difficulties with breastfeeding (e.g. sore nipples, mastitis)**

**Policy Implications**

- We call upon all levels of government to provide cultural safety training for all healthcare professionals.

City of Toronto, provincial and federal policy makers work in partnership with urban Indigenous peoples and organizations to:
- Provide funding for anti-racism and cultural safety training across the healthcare system, including expanding availability and continuing education.
- Address barriers in accessing programs and service in the areas of family support, breastfeeding/chestfeeding support, nutritional support, and prenatal care.
- Provide sustainable funding for existing and new Indigenous specific community breastfeeding/chestfeeding supports.
- Provide sustainable funding for breastfeeding/chestfeeding promotion during pregnancy.
- Provide sustainable funding for nutritional support and diet supplements.

**Definitions**
- Indigenous women/trans/other: persons 15 to 44 years self-identifying as Indigenous, such as First Nations, Métis, Inuit or other Indigenous nations, living or using services in the City of Toronto.
- Indigenous mothers: Indigenous women/trans/other that have given birth in the past 5 years.
- Indigenous children: persons 1 to 14 years self-identified as Indigenous by their parent or guardian, such as First Nations, Métis, Inuit or other Indigenous nations, living or using services in the City of Toronto.

**Sources**
Reproductive and Sexual Health Reference

Our Health Counts Toronto is an inclusive community-based health survey for Indigenous peoples of Toronto and is part of the largest Indigenous population health study in Canada. Participants were selected using respondent-driven sampling, a statistical method which uses social networks in the community to recruit Indigenous people living in the city.

Survey Question

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes (%) (95% CI)</th>
<th>No (%) (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you or your partner/husband/boyfriend doing anything to keep from getting pregnant?</td>
<td>56.1% (39.5, 72.7)</td>
<td>43.9% (27.3, 60.5)</td>
</tr>
<tr>
<td>What kind of birth control are you or your partner using now to keep from getting pregnant?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Condoms</td>
<td>47.0% (32.4, 61.6)</td>
<td></td>
</tr>
<tr>
<td>Abstinence/not having sex</td>
<td>17.1% (7.4, 26.7)</td>
<td></td>
</tr>
<tr>
<td>Birth control pill</td>
<td>11.6% (4.2, 18.9)</td>
<td></td>
</tr>
<tr>
<td>Intrauterine device (IUD)</td>
<td>10.4% (1.1, 19.4)</td>
<td></td>
</tr>
<tr>
<td>Tubes tiedblocked</td>
<td>5.0% (0.0, 10.3)</td>
<td></td>
</tr>
<tr>
<td>Injection</td>
<td>3.9% (0.0, 8.1)</td>
<td></td>
</tr>
<tr>
<td>Other (includes contraceptive patch, vasectomy, withdrawal)</td>
<td>5.0% (1.5, 8.5)</td>
<td></td>
</tr>
<tr>
<td>Do you think there are adequate resources serving Indigenous people in Toronto for fertility services?</td>
<td>21.0% (13.9, 28.2)</td>
<td>25.5% (19.6, 31.4)</td>
</tr>
<tr>
<td>Have you ever been diagnosed and/or treated for a sexually transmitted infection (STI)?</td>
<td>21.1% (15.2, 27.0)</td>
<td>78.9% (73.0, 84.8)</td>
</tr>
<tr>
<td>Have you ever been diagnosed and/or treated for any of the following STIs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chlamydia</td>
<td>14.0% (8.7, 19.3)</td>
<td></td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>4.1% (2.1, 6.1)</td>
<td></td>
</tr>
<tr>
<td>Genital warts</td>
<td>2.0% (0.4, 3.5)</td>
<td></td>
</tr>
<tr>
<td>Syphilis</td>
<td>1.3% (0.3, 2.3)</td>
<td></td>
</tr>
<tr>
<td>General herpes</td>
<td>1.2% (0.4, 2.0)</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>1.5% (0.4, 2.6)</td>
<td></td>
</tr>
<tr>
<td>Do you think there are adequate resources serving Indigenous people in Toronto addressing sexual health and wellbeing?</td>
<td>38.8% (30.8, 46.8)</td>
<td>27.9% (21.8, 34.0)</td>
</tr>
</tbody>
</table>

Fertility Rate for Indigenous women, trans, and other 15 to 49 years in Toronto

- 2.12 children per women/trans/other

Number of children expected to be born to Indigenous women/trans/other in Toronto per year

- 1,036 – 1,408

Do you think there are adequate resources serving Indigenous people in Toronto addressing reproductive health and pregnancy services?

- Yes: 33.1% (25.4, 40.8)
- No: 26.5% (20.4, 32.5)

How many weeks pregnant with your child were you when you had your first visit for prenatal care?

- 0-12 weeks: 60.9% (41.6, 80.2)
- 13-26 weeks: 13.4% (2.6, 24.2)
- 27-40 weeks or no prenatal care: 25.6% (5.8, 45.5)

From which type of healthcare provider, such as an obstetrician, family doctor or midwife, did you receive most of your prenatal care?

- Obstetrician or obstetrician/gynaecologist or OBGYN: 48.1% (26.9, 69.3)*
- Midwife: 31.8% (12.6, 51.0)
- Family doctor, general practitioner, or other: 20.1% (0.0, 43.1)*

Do you think there are adequate resources serving Indigenous mothers in Toronto?

- Yes: 40.0% (32.3, 47.8)
- No: 32.2% (25.2, 39.2)

Was your prenatal care provider, your preferred prenatal care provider?

- Yes: 96.9% (93.4, 100.0)
- No: 3.1% (0.0, 6.6)

Funding was provided by the Canadian Institute of Health Research (CIHR) and Ministry of Health and Long-Term Care (MOHLTC) Capacity Award

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## Reproductive and Sexual Health Reference

### Survey Question

**Did you receive prenatal care as early as you wanted?**
- Yes: 80.4% (67.6, 93.1)
- No: 19.7% (6.9, 32.4)

**Did you experience diabetes during your pregnancy (i.e. Gestational diabetes, pre-existing Type II Diabetes)?**
- Yes: 13.2% (5.7, 20.6)
- No: 86.8% (79.4, 94.3)

**During your pregnancy with your child, did you live in a smoke-free home?**
- Yes, completely smoke free: 58.2% (45.8, 70.6)*
- Yes, smoke outside: 26.9% (15.6, 38.1)*
- No: 14.9% (6.5, 23.4)

**Do you know how many weeks you (or partner/spouse/child's birth mother) were/was into the pregnancy when you child was born?**
- Born before 37 weeks: 21.0% (9.4, 32.7)
- Born 37 weeks or later: 79.0% (67.4, 90.6)

**Immediately after birth, was your child admitted to an intensive care unit?**
- Yes: 20.8% (11.0, 30.6)
- No: 79.2% (69.5, 89.0)

**How long was your child in the intensive care of special care unit?**
- Less than 24 hours: 21.8% (0.0, 51.5)
- 1 day to less than 7 days: 45.7% (18.3, 73.1)
- 7 days or more: 32.5% (9.6, 55.3)*

**How much did your child weigh at birth in grams?**
- 2500g or less: 3.6% (0.0, 7.2)
- 2500g to 4000g: 73.4% (63.6, 83.1)
- 4000g or more: 23.1% (13.8, 32.4)

**How old were you when your child was born?**
- 15-19 years: 7.5% (0.6, 14.5)
- 20 years or older: 92.5% (85.5, 99.4)

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**RDS Prevalence Estimate**

(95% Confidence Interval)

**For your last baby, did you breastfeed or try to breastfeed your baby, even if only for a short time? (asked to Indigenous women/trans/other 15-44 years)**
- Yes: 75.8% (60.3, 91.4)
- No: 24.2% (8.6, 39.8)

**Did you breastfeed or try to breastfeed your child even if only for a short time? (asked to birth parent of Indigenous children)**
- Yes: 60.5% (47.1, 73.8)
- No: 39.5% (26.2, 52.9)

**How old was your child when you stopped breastfeeding?**
- Less than 6 months: 55.9% (41.5, 70.3)
- 6 months or older: 44.1% (29.7, 58.5)

**What helped or made it possible for you to be able to breastfeed your child?**
- People in my family helped and supported me to breastfeed: 41.9% (28.0, 55.8)
- Healthcare providers helped and supported me to breastfeed: 33.5% (22.2, 44.8)
- I felt confident about breastfeeding from breastfeeding my previous child/children: 38.4% (25.1, 51.8)
- Community support programs: 6.4% (1.4, 11.5)
- Indigenous community support programs: 8.1% (2.6, 13.7)
- Other: 11.4% (3.6, 19.1)

**How old was your child when you first added any other liquids (e.g. milk, formula, water, teas, herbal mixtures) or solid foods to the baby’s feed?**
- Three months or less: 56.7% (42.7, 70.6)
- Four or five months: 13.3% (3.6, 23.0)
- 6 months or more: 30.1% (16.8, 43.3)

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For the full OHC Toronto report visit: www.welllivinghouse.com

Funding was provided by the Canadian Institute of Health Research (CIHR) and Ministry of Health and Long-Term Care (MOHLTC) Capacity Award

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