

# OPEN LETTER

## INEQUITIES IN INDIGENOUS MATERNAL AND CHILD HEALTH: CHALLENGING HEALTHCARE POWER AND CORPORATE INFLUENCE IN CANADA

June 30, 2023

The harm to Indigenous communities of failing to adequately regulate breastmilk substitutes extends deeper and beyond those described in the rest of this report. Racist policies have shaped both the historical experience of infant feeding in Indigenous communities and continue to prevent Indigenous families from providing the safe and nutritious first foods their children are entitled to. Government policies with genocidal objectives have marked the Indigenous communities that survived them, obscuring the nurturing wisdom that sustained our babies and blighting them with the outcomes of generations of trauma.

In the 2016 paper written by Kristin Burnett, Travis Hay, and Lori Chambers\*, documentation referring to the postwar period, said:

*Indigenous women and their infants were singled out as being of particular nutritional concern. Notices for pabulum and milk posted at HBC forts started with thinly veiled warnings. "Our King has made a law that all mothers of children will get help in seeing that his children grow up to be strong and healthy," announced one statement issued by Indian Affairs. This aggressive program concentrated on introducing strict daily feeding routines, altering what kinds and when supplementary foods were to be introduced to infants, and changing when breast-feeding should be terminated.*

The King had been seen as a father-type figure who wanted to help them. Nothing could be further from the truth. This advice weakened communities, by sickening their children and prohibiting the responsive parenting that buffered against suffering and traumatization. Malnutrition was pushed on Indigenous people to subjugate them, to make their numbers smaller so the governments could take the rest of their lands, to rid the government of the so-called, "Indian problem".

*These instructions were to be distributed at HBC posts, nursing stations, at treaty payment time, and by IA medical officers. Instructions for "feeding Indian babies" were also circulated by the Indian agent giving the guidelines an unstated authority. The "Health Rules for Feeding Indian Babies" outlined strict instructions regarding the appropriate length of time to breast feed infants and when and how to bottle feed. But in mobile communities and places where clean water was unavailable, such instructions posed insurmountable obstacles and serious health consequences for babies; moreover, "a bottle-fed baby is up to 25 times more likely to die from diarrhea where water supplies are unsafe."*

The government made themselves the legal authority over Indigenous people's lives, their movement, their education, and parenting methods. They took authority for themselves, tying money or help to how closely Indigenous people followed their orders.

Direct connections can then be drawn between high infant mortality rates in northern First Nations communities and the European-Canadian norms regarding appropriate lengths of breastfeeding that were being imposed on Indigenous women—an example that demonstrates the ways in which settler colonialism continued to cause death amongst Indigenous peoples. This situation was then exacerbated by the prohibitive costs of baby formula and the high rates of infant adoption by extended family among the Inuit. For instance, in some Inuit communities, as many as 40 percent of the children were adopted and "most mothers were only able to afford infant formula for the first two or three months" at which point the formula was replaced by a combination of evaporated milk, powdered whole milk or fruit drinks.

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\* Burnett, K., Hay, T., & Chambers, L. (2016). Settler Colonialism, Indigenous Peoples and Food: Federal Indian policies and nutrition programs in the Canadian North since 1945. *Journal of Colonialism and Colonial History*, 17(2), Summer, Johns Hopkins University Press.

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- 2 -

The generational effect of these policies on Indigenous communities is seen today. Traditional breastfeeding knowledge has been lost in many communities. We are 3 or 4 generations from the government telling us how to feed our babies. Teachings about infant feeding has become a suggestion, "Just do it." Because of the patriarchal views being forced onto, then being entrenched, some new parents feel it is better to have an individual right to put the parent foremost, instead of the Old Ways which put children front and centre of everything. We are supposed to have an obligation to our children and communities first. Colonization has changed that mentality.

Today's governments have an obligation to begin repairing these harms, yet they fail to even ensure that communities have access to the minimum standards that the government themselves accepted and have repeatedly endorsed internationally for more than 40 years. In many communities, it continues to be the government itself that provides many of the breastmilk substitutes used by parents and caregivers, without regard to ensuring that they can be used safely. The dependency on breastmilk substitutes that successive governments have created and continue to create carries an obligation to ensure that Indigenous parents and caregivers have access to the culturally-appropriate support and information needed to make informed decisions.

The UN Declaration on the Rights of Indigenous Peoples (UNDRIP) states in section 24.2 that, "Indigenous individuals have an equal right to the enjoyment of the highest attainable standard of physical and mental health. States shall take the necessary steps with a view to achieving progressively the full realization of this right." More than 40 years after the Code was passed, Canada has not progressed but rather is going backward in meeting this obligation.

While the Truth and Reconciliation Commission (TRC) doesn't specifically refer to breastfeeding, it is inherent in Section 5, "We call upon the federal, provincial, territorial, and Aboriginal governments to develop culturally appropriate parenting programs for Aboriginal families." The obligation to address health outcome disparities in TRC Section 19 specifically names gaps in "infant mortality, maternal health ... life expectancy, birth rates, infant and child health issues, chronic diseases, illness, and injury incidence" all of which are improved when babies receive human milk.

The Missing and Murdered Indigenous Women and Girls (MMIWG) report says, "2.5 We call upon all governments, in partnership with Indigenous Peoples, to create a permanent empowerment fund devoted to supporting Indigenous-led initiatives for Indigenous individuals, families, and communities to access cultural knowledge, as an important and strength-based way to support cultural rights and to uphold self-determined services."

We need cultural rights to uphold self-determined services. What the genocidal policies of decades past began, unfettered predatory marketing of commercial milk formulas and ultra-processed complementary foods continues, with the help of policies and programs that continue to be imposed on families. The patriarchal laws that undermine our mothers' choices with false information and threats to our families and communities may have different forms today, but they continue to cause harm.

Western healthcare practitioners, working under the laws and policies of governments and policymakers wield great power and authority. Health systems have failed to return birth to the land, medicalizing birth and preventing the support and rituals central to the healthy welcome of a new baby. Few communities have Indigenous midwives or lactation support, but they all receive infant formula and ultra-processed baby foods. Healthcare workers are empowered to threaten parents with investigation or removal of their infants or children for not following their "recommendations" to use these products while there is no requirement or support for infants in care to receive human milk or culturally-appropriate foods. Meanwhile, large global corporations are allowed unfettered access to influence those same healthcare workers and market their products to mislead parents into thinking that they are just like breastmilk.

**This must stop.**



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Stephanie George  
Indigenous Midwife, Lactation Consultant,