Canada must address its birth tourism problem: Sergio R. Karas for Inside Policy

One of the most effective solutions would be to amend the Citizenship Act, making automatic citizenship conditional upon at least one parent being a Canadian citizen or permanent resident.

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By Sergio R. Karas, July 11, 2025

Amid rising concerns about the prevalence of birth tourism, many Western democracies are taking steps to curb the practice. Canada should take note and reconsider its own policies in this area.

Birth tourism occurs when pregnant women travel to a country that grants automatic citizenship to all individuals born on its soil. There is increasing concern that birthright citizenship is being abused by actors linked to authoritarian regimes, who use the child's citizenship as an anchor or escape route if the conditions in their country deteriorate.

Canada grants automatic citizenship by birth, subject to very few exceptions, such as when a child is born to foreign diplomats, consular officials, or international representatives. The principle known as *jus soli* in Latin for "right of the soil" is enshrined in Section 3(1)(a) of the *Citizenship Act*.

Unlike many other developed countries, Canada's legislation does not consider the immigration or residency status of the parents for the child to be a citizen. Individuals who are in Canada illegally or have had refugee claims rejected may be taking advantage of birthright citizenship to delay their deportation. For example, consider the Supreme Court of Canada's ruling in *Baker v. Canada*. The court held that the deportation decision for a Jamaican woman – who did not have legal status in Canada but had Canadian-born children – must consider the best interests of the Canadian-born children.

There is mounting evidence of organized birth tourism among individuals from the People's Republic of China, particularly in British Columbia. According to a January 29 news report in *Business in Vancouver*, an estimated 22–23 per cent of births at Richmond Hospital in 2019–20 were to non-resident mothers, and the majority were Chinese nationals. The expectant mothers often utilize "baby houses" and maternity packages, which provide private residences and a comprehensive bundle of services to facilitate the mother's experience, so that their Canadian-born child can benefit from free education and social and health services, and even sponsor their parents for immigration to Canada in the future. The financial and logistical infrastructure supporting this practice has grown, with reports of dozens of birth houses in British Columbia catering to a Chinese clientele.

Unconditional birthright citizenship has attracted expectant mothers from countries including Nigeria and India. Many arrive on tourist visas to give birth in Canada. The number of babies born in Canada to non-resident mothers – a metric often used to measure birth tourism – dropped sharply during the COVID-19 pandemic but has quickly rebounded since. A December 2023 report in *Policy Options* found that non-resident births constituted about 1.6 per cent of all 2019 births in Canada. That number fell to 0.7 per cent in 2020–2021 due to travel restrictions, but by 2022 it rebounded to one per cent of total births. That year, there were 3,575 births to non-residents – 53 per cent more than during the pandemic. Experts believe that about half of these were from women who travelled to Canada specifically for the purpose of giving birth. According to the report, about 50 per cent of non-resident births are estimated to be the result of birth tourism. The upward trend continued into 2023–24, with 5,219 non-resident births across Canada.

Some hospitals have seen more of these cases than others. For example, B.C.'s Richmond Hospital had 24 per cent of its births from non-residents in 2019–20, but that dropped to just 4 per cent by 2022. In contrast, Toronto's Humber River Hospital and Montreal's St. Mary's Hospital had the highest rates in 2022–23, with 10.5 per cent and 9.4 per cent of births from non-residents, respectively.

Several developed countries have moved away from unconditional birthright citizenship in recent years, implementing more restrictive measures to prevent exploitation of their immigration systems. In the United Kingdom, the *British Nationality Act* abolished *jus soli* in its unconditional form. Now, a child born in the UK is granted citizenship only if at least one parent is a British citizen or has settled status. This change was introduced to prevent misuse of the immigration and nationality framework. Similarly, Germany follows a conditional form of *jus soli*. According to its *Nationality Act*, a child born in Germany acquires citizenship only if at least one parent has legally resided in the country for a minimum of eight years and holds a permanent residence permit. Australia also eliminated automatic birthright citizenship. Under the *Australian Citizenship Act*, a child born on Australian soil is granted citizenship only if at least one parent is an Australian citizen or permanent resident. Alternatively, if the child lives in Australia continuously for ten years, they may become eligible for citizenship through residency. These policies illustrate a global trend toward limiting automatic citizenship by birth to discourage birth tourism.

In the United States, Section 1 of the Citizenship Clause of the Fourteenth Amendment to the Constitution prescribes that "All persons born or naturalized in the United States, and subject to the jurisdiction thereof, are citizens of the United States and of the State wherein they reside." The Trump administration has launched a policy and legal challenge to the longstanding interpretation that every person born in the US is automatically a citizen. It argues that the current interpretation incentivizes illegal immigration and results in widespread abuse of the system.

On January 20, 2025, President Donald Trump issued Executive Order 14156: *Protecting the Meaning and Value of American Citizenship*, aimed at ending birthright citizenship for children of undocumented migrants and those with lawful but temporary status in the United States. The executive order stated that the Fourteenth Amendment's Citizenship Clause "rightly repudiated" the Supreme Court's "shameful decision" in the *Dred Scott v. Sandford* case, which dealt with the denial of citizenship to black former slaves. The administration argues that the Fourteenth Amendment "has never been interpreted to extend citizenship universally to anyone born within the United States." The executive order claims that the Fourteenth Amendment has "always excluded from birthright citizenship persons who were born in the United States but not subject to the jurisdiction thereof." The order outlines two categories of individuals that it claims are not subject to United States jurisdiction and thus not automatically entitled to citizenship: a child of an undocumented mother and father who are not citizens or lawful permanent residents; and a child of a mother who is a temporary visitor and of a father who is not a citizen or lawful permanent resident. The executive order attempts to make ancestry a criterion for automatic citizenship. It requires children born on US soil to have at least one parent who has US citizenship or lawful permanent residency.

On June 27, 2025, the US Supreme Court in *Trump v. CASA, Inc.* held that lower federal courts exceed their constitutional authority when issuing broad, nationwide injunctions to prevent the Trump administration from enforcing the executive order. Such relief should be limited to the specific plaintiffs involved in the case. The Court did not address whether the order is constitutional, and that will be decided in the future. However, this decision removes a major legal obstacle, allowing the administration to enforce the policy in areas not covered by narrower injunctions. Since the order could affect over 150,000 newborns each year, future decisions on the merits of the order are still an especially important legal and social issue.

In addition to the executive order, the *Ban Birth Tourism Act* – introduced in the United States Congress in May 2025 – aims to prevent women from entering the country on visitor visas solely to give birth, citing an annual 33,000 births to tourist mothers. Simultaneously, the State Department instructed US consulates abroad to deny visas to applicants suspected of "birth tourism," reinforcing a sharp policy pivot.

In light of these developments, Canada should be wary. It may see an increase in birth tourism as expectant mothers look for alternative destinations where their children can acquire citizenship by birth.

Canadian immigration law does not prevent women from entering the country on a visitor visa to give birth. The *Immigration and Refugee Protection Act (IRPA)* and the associated regulations do not include any provisions that allow immigration officials or Canada Border Services officers to deny visas or entry based on pregnancy. Section 22 of the IRPA, which deals with temporary residents, could be amended. However, making changes to regulations or policy would be difficult and could lead to inconsistent decisions and a flurry of litigation. For example, adding questions about pregnancy to visa application forms or allowing officers to request pregnancy tests in certain high-risk cases could result in legal challenges on the grounds of privacy and discrimination.

In a 2019 Angus Reid Institute survey, 64 per cent of Canadians said they would support changing the law to stop granting citizenship to babies born in Canada to parents who are only on tourist visas. One of the most effective solutions would be to amend Section 3(1)(a) of the *Citizenship Act*, making it mandatory that at least one parent be a Canadian citizen or permanent resident for a child born in Canada to automatically receive citizenship. Such a model would align with citizenship legislation in countries like the UK, Germany, and Australia, where *jus soli* is conditional on parental status. Making this change would close the current loophole that allows birth tourism, without placing additional pressure on visa officers or requiring new restrictions on tourist visas. It would retain Canada's inclusive citizenship framework while aligning with practices in other democratic nations.

Canada currently lacks a proper and consistent system for collecting data on non-resident births. This gap poses challenges in understanding the scale and impact of birth tourism. Since health care is under provincial jurisdiction, the responsibility for tracking and managing such data falls primarily on the provinces. However, there is no national framework or requirement for provinces or hospitals to report the number of births by non-residents, leading to fragmented and incomplete information across the country. One notable example is BC's Richmond Hospital, which has become a well-known birth tourism destination. In the 2017–18 fiscal year alone, 22 per cent of births at Richmond Hospital were to non-resident mothers. These births generated approximately $6.2 million in maternity fees, out of which $1.1 million remained unpaid. This example highlights not only the prevalence of the practice but also the financial burden it places on the provincial health care programs. To better address the issue, provinces should implement more robust data collection practices. Information should include the mother's residency or visa status, the total cost of care provided, payment outcomes (including outstanding balances), and any necessary medical follow-ups.

Reliable and transparent data is essential for policymakers to accurately assess the scope of birth tourism and develop effective responses. Provinces should strengthen data collection practices and consider introducing policies that require security deposits or proof of adequate medical insurance coverage for expectant mothers who are not covered by provincial healthcare plans.

Canada does not currently record the immigration or residency status of parents on birth certificates, making it difficult to determine how many children are born to non-resident or temporary resident parents. Including this information at the time of birth registration would significantly improve data accuracy and support more informed policy decisions. By improving data collection, increasing transparency, and adopting targeted financial safeguards, Canada can more effectively manage the challenges