PEYAKOHEWAMAK – NEEDS OF INVOLVED NEHIYAW (CREE) FATHERS SUPPORTING THEIR PARTNERS DURING PREGNANCY: Findings From the ENRICH Study

“In the Cree language, Kikiskawawsow means “she is with child”

BACKGROUND
The benefits of fathers being involved in their partner’s pregnancy and child’s upbringing have been linked to appropriate utilization of maternal health services, improved pregnancy outcomes, decreased risk of postpartum depression among women, and better educational, behavioral, and developmental outcomes in children. Previous qualitative work with Indigenous women illuminates the clear need for enhanced support networks during pregnancy; their partner was often cited as the most critical support person. However, the roles and identities of many Indigenous men in relation to masculinity, fatherhood, and family have been disrupted through major historical harms, including residential school policies and practices. Moreover, there is very little research on the perspectives of contemporary Indigenous fathers, particularly during pregnancy.

THE STUDY
This qualitative study is part of a community-based participatory research (CBPR) project in collaboration with the large Nehiyaw (Cree) First Nations community of Maskwacis in Alberta. All of the work was based upon an equitable partnership. The objective of this study was to qualitatively explore the needs of Indigenous Nehiyaw men who are considered role models and involved fathers, as they provided support to their partners during pregnancy. In depth one-to-one semi-structured interviews were conducted. Some of the participants also took part in an additional photovoice project where they provided photographs (new or preexisting) of things, people, or places that address what it means to be a supportive partner during pregnancy. A second round of interviews were carried out to discuss the importance of participants’ photographs in relation to the study objective.

PARTICIPANTS
Maskwacis is a rural community, approximately 90 km south of Edmonton, Alberta, within Treaty 6 area of Canada. A particular sample of adult Nehiyaw fathers (18 years or older) who were considered role models and involved fathers were sought out from the community. Six fathers with an average age of 31 years took part in the study, with four of them taking part in the additional photovoice piece. All of the participants had some postsecondary education and five of the six were employed. Three of the participants were married, one was in a common-law relationship, one was engaged, and one was single. All the fathers shared rich and personal reflections related to their partner’s most recent pregnancy.

CONCLUSION
The capacity of fathers to support their partners is a key aspect of perinatal care. Attempts to improve perinatal care and outcomes should allow more inclusion of and support for Indigenous fathers through genuinely incorporating into care traditional culture and Elders, families, flexibility, cultural understanding, and reconciliation.

FINDINGS
PREGNANCY IS AN OPPORTUNITY
Pregnancy is a chance for Nehiyaw fathers to rise above negative colonial impacts (residential schools particularly) and reclaim their roles within families and communities. Each of the fathers felt above all during the pregnancy that they had to be there to “support”, “love”, “honor” (respect), and “care” for their partner in any way necessary.

FATHERS NEED SUPPORT TOO
To be there for their partners in a meaningful way, Nehiyaw fathers themselves need to be supported. Key features of father’s support networks were family and maintaining a connection to faith and traditional culture, as was having a stable upbringing centered on Nehiyaw family systems and consistent and positive male role models.

FATHERS NEED TO BE INCLUDED
All of the participants described varying degrees of exclusion during the pregnancy. Genuinely incorporating traditional culture and Elder support, flexibility, cultural understanding, and reconciliation into perinatal care approaches may help support and include Indigenous men, ultimately improving outcomes for pregnant Indigenous women and infants.


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