



## “What about the Men?”

### Researchable questions posed by Oakland fathers

In March 2019, UCSF researchers with the California Preterm Birth Initiative (PTBi-CA) conducted two focus groups (one interview) with five men from Oakland who identified as African American and Latino. These men shared their experiences and priorities for research to reduce preterm birth and improve outcomes. The Oakland-specific priority research topics, priority research questions, and full list of researchable questions, sorted by topic, are shown below.

We call for researchers, healthcare providers and communities to work together to answer these questions - and to share and implement best evidence-based practices – for the health of parents, babies and families everywhere.

#### Communication/attitudes of healthcare providers

- Why is there no system to communicate with men and parents?
- Why aren't men acknowledged as the experts for their family?
- Do providers really care or are they just too busy?
- Why are providers so dismissive of men's questions?
- Why don't men feel comfortable asking questions?
- How can providers help patients feel more comfortable?
- Why do providers act defensive when men ask questions?
- Why do providers think my questions are too detailed or too intelligent? Are they worried about being accountable?
- Are men of color being treated differently? Is racism or classism a reason why providers do not give men of color answers to their questions?
- Why do men have to work so hard to navigate the provider relationship to ask questions?
- What can be done to improve relationships with patients and providers?
- How can providers communicate better with men?
- How can providers create comfortable environment for men to ask questions?
- Are providers aware when patients are illiterate or have trouble understanding health topics?
- Why do providers wait to give an epidural until my partner was crying and in so much pain?
- Why do providers make decisions before checking for patient understanding?
- Why do doctors only present grim and negative statistics of bad outcomes without giving the positive outcome?
- Why can't doctors show more emotion and create a more human experience for families?
- Why can't doctors relay hard information more humanly?

#### Profit and insurance issues

- What is the purpose of dual medical coverage?
- Is universal healthcare really universal for everyone?
- Is there a connection between type of insurance and early discharge from the NICU?

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## Information needs of partners

- How do providers confirm a pregnancy?
- Why are pills given for pregnancy termination when the patient has not decided what she will do?
- What happens during an abortion procedure?
- What are all the treatment options for spina bifida?
- Does chemical exposure to Dioxin #3 cause spina bifida or other neural defects?
- Why do mothers need RhoGAM?
- Who are all the types of providers that can give prenatal care? What are their roles?
- What is the difference between a doula and a midwife?
- Why is the epidural given in the back if it causes so much back pain?
- Do most women who have epidurals have chronic back pain? What are the percentages?
- Why do mothers have to pass gas before being discharged from the hospital after a cesarean section?
- How can a baby have an allergy to breastmilk?
- Does having a cervical procedure before pregnancy increase your risk of having a preterm baby? Do multiple cervical procedures increase that risk?
- If there is increased risk of preterm birth with cervical procedures, why isn't full consent given to families?
- Can a woman have a vaginal birth without part of her cervix?
- Does cervical cancer harm a baby?
- Screening and diagnostic testing in pregnancy

## Preterm baby health

- How much weight does a baby need to gain before discharge from the NICU unit?
- Why isn't there a class to educate parents about what to expect in the NICU unit?
- Why do babies get discharged early if providers are not sure about weight gain progress?
- What are the steps needed to choose a pediatrician? Is there some way providers can help families decide?
- Why can't there be a liaison to advocate for parents in the NICU for making decisions about care?

## Methods and complications of birth

- Why are mothers limited to only three cesarean sections?
- What are the risks of having multiple cesarean sections?
- What are the reasons for doing a cesarean section?
- What are the reasons for getting an episiotomy and why isn't it explained?
- Why is a cesarean section needed when a mother is 9cm dilated?  
What are the key indicators that a provider sees to call an emergency during a birth?
- How long does the provider wait before calling for help during an emergency?
- Which providers should be present to respond to a hemorrhage?

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## Parent health during/before pregnancy

- How do families get more information about their own medical history, because it may impact pregnancy and family planning?
- What is the impact of previous postpartum depression?
- What is needed to help motivate mothers after birth to overcome depression?
- What makes a women more susceptible to diabetes during pregnancy?
- If a woman has a history of gestational diabetes, why is she more likely to get it again?
- Why is a woman more susceptible to high blood pressure during pregnancy?
- Why do we see more complications of chronic disease in communities of color?

## Diet during pregnancy

- What can be done to improve men's access to health information for natural remedies and nutrition?
- How does weight gain impact the pregnancy?
- Are there foods that negatively impact the baby but not the mother?
- Which foods have the biggest impact on maternal mental health?
- How do diets impact pregnancy?
- What is the required amount of calories and weight gain for a healthy pregnancy?

## Father's role in pregnancy

- What can be done to reframe stereotypic views of men's work inside and outside of the home?
- What can be done to change social views of dad's involvement in children's lives as normal?
- Why is the work of parenting not recognized for men?
- Why are men's values of traditional home remedies not valued?
- Why isn't the value of community support recognized for men of color?
- Why does society exclude men of color in health?

## Men's health

- How can there be better choices offered to men that don't compromise their personal health?
- Why do men have to make hard choices between their health and their family's health in order to access services?
- Why do men have to sacrifice their own health for the sake of their children's health?
- Why aren't men of color more included in health decisions?
- Why aren't there places for fathers to gather and vent and process difficult decisions during pregnancy and birth?

## Support for families

- Are there free resources at the hospital to help men cope and support their partner during a birth?
- Why aren't their more classes and funds available to help support men in the birth process?

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### **Public health resources for communities**

- Why aren't public health policies updated more frequently and based on current statistics?
- Why are public health finances continually being cut for our communities?
- Why can't underutilized land in East Oakland be used for community gardens for healthy eating?
- Why is it hard to access public resources for healthy living?
- How can public health entities support greater access for individuals to obtain their medical history records?

### **Trauma and Stress During Pregnancy**

- What happens during pregnancy when the mom/baby experience physical trauma from an accident?
- What does stress do to a pregnancy after a traumatic accident?
- How can men create a protective boundary for their spouse from family influences and stress?
- How does a negative family environment impact the pregnancy?

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