WOMEN’S REPRODUCTIVE AND SEXUAL HEALTH EXPERIENCES AMONG A GULF COAST INDIGENOUS TRIBE

AN ABSTRACT

SUBMITTED ON THE 25th DAY OF MARCH 2021

TO THE CITY, CULTURE & COMMUNITY DOCTORAL PROGRAM

IN PARTIAL FULFILLMENT OF THE REQUIREMENTS

OF THE SCHOOL OF LIBERAL ARTS

OF TULANE UNIVERSITY

FOR THE DEGREE

OF

DOCTOR OF PHILOSOPHY

BY

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ABSTRACT

Indigenous women experience heightened sexual and reproductive health disparities in the United States. Both historically and contemporarily, Indigenous women have frequently been subject to reproductive injustices and exploitation, including forced sterilization, and the removal of children. Despite these experiences, Indigenous women are resilient, proactively engage in, and facilitate the creation of holistic forms of community and individual health. The purpose of this research was to explore the sexual and reproductive healthcare experiences of women in a non-federally recognized Gulf Coast Indigenous tribe. The following theories guided this research: reproductive justice, eco-systemic theory, Indigenous critical theory, resilience theory, and life-course theory. I used a qualitative description methodology, with hues of an ethnographic life history approach. I conducted semi-structured life history interviews with 31 women from the Gulf Coast Indigenous tribe. Results include: Healthcare Experiences (with subthemes of Sexual and Reproductive Health Experiences; Childbirth and Pregnancy Experiences; Traditional Health Experiences, Preferences and Knowledge; and Intersecting Discrimination) and themes related to women’s Family and Community (with subthemes of Impact and Role of Community specific results related to health and community support; Impact and Role of Family Throughout the Life Course; Impact and Role of Fathers, Spouses or Romantic Partners; and Gendered Values and Experiences). This dissertation research is distinctive for focusing on resilience and strengths in analyzing
health experiences of Indigenous women, while also identifying barriers. Results indicate
that tribal members are strong, resilient, and value the health of themselves, their families
and communities. Results also suggest that additional important factors which promote
health for community members, such as strong family and community support, in addition
to important barriers, such as negative provider relationships, and inadequate healthcare
infrastructure exist. Emergent findings contribute both practical and theoretical
knowledge about reproductive justice issues and suggest that the resilience of women,
and family and community support are often essential in filling existing healthcare gaps.
This research provides important knowledge about how to develop interventions which
both address reproductive healthcare gaps and promote existing tribal strengths.
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A DISSERTATION

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This dissertation is dedicated to all the strong Indigenous women, who act as healers, leaders, and teachers, in their families and communities.
This dissertation involves research with an Indigenous tribe in the Gulf Coast. As part of my ability to do my research, I had to complete a tribal Institutional Review Board (IRB) application in addition to Tulane's IRB. The tribal governing council requires that no research that is produced about the tribe be published with any identifying information of the tribe's identity. The dissertation has substantial detail and context about the tribe, and therefore is not being made available for access electronically. A de-identified, bound, printed copy will be maintained onsite in the Tulane University Archives.