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What's love got to do with it? "Love" and Alcohol Use among U.S. Indigenous Peoples: Aligning Research with Real-world Experiences

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Abstract

This research examines how Indigenous families report experiences of love (a component of family resilience) and its association with urgent health disparity of alcohol abuse. This exploratory mixed-methods first identified emergent results from qualitative data (n=436), which was then explored with follow-up and quantitative data (n=127) from a sample of Indigenous families in two Southeastern tribes. Love was a highly salient qualitative theme and component of family resilience. Quantitative results revealed cross-generational changes in family resilience, which was negatively associated with alcohol use. Current families may be transcending the effects of historical oppression and expressing love and family resilience.

Love is a highly salient concept in non-academic contexts that receives surprisingly little scholarly attention, despite its direct relevance to health and mental health equity. Moreover, whether love relates to important outcomes of interest such as alcohol use, is not wellunderstood. The purpose of this articles is for Indigenous participants to describe their experiences of love, see how it varies across time and whether it relates in any systematic way to a primary health problem for many Indigenous: Alcohol use. Historically, the three varieties of love include (a) intimacy: feelings of closeness, warmth, and bonding; (b) passion: or sexual arousal and intensity; and (c) commitment: or the intentional choice to love and maintain that love with someone (Sternberg, 1986). Yet, this theory has primary focused on love between romantic partners, rather than love within the broader family unit. This mismatch between the language used by the general population in comparison to the conceptualizations made by researchers marks a concerning incongruence between research and clinical practice. Indeed, the direct investigation of love is rarely included in health and mental health research; instead, love is broken down into its various conceptual elements, such as warmth and attachment, with little scholarly agreement on which conceptual elements best reflect how people experience love.

Although explicit attention to love is lacking, the indirect definition of love in scholarly research seems to operationalize it as affection, bonding, warmth and comfort. Indeed, recent research has found that many conceptual elements associated with love promote mental health including parental bonding (Xu, Morin, Marsh, Richards, & Jones, 2018),

family affection (León-del-Barco, Fajardo-Bullón, Mendo-Lázaro, Rasskin-Gutman, & Iglesias-Gallego, 2018), and comfort and affection (Lowe, Joshi, Pietrzak, Galea, & Cerdá, 2015), which are associated with positive mental health outcomes. Aspects of love were also found to be protective factors against suicidal ideation (Armstrong & Manion, 2015), juvenile offending (Barnert et al., 2015), and depression (Breton et al., 2015), lending further support for the clinical significance of love and its many dimensions. However, surprisingly little research has examined the influence of love on alcohol use and addictions. These are important areas of inquiry, especially among Indigenous peoples who experience a number of health and mental health disparities compared to the general U.S. population, including alcohol abuse (Les Whitbeck, Chen, Hoyt, & Adams, 2004; Yu & Stiffman, 2007). A distinct trust responsibility by the federal government to provide to the health and wellbeing of 573 federally recognized tribes (Bureau of Indian Affairs, 2018), based on treaty agreements with politically sovereign tribes, makes this an urgent concern.

Alcohol abuse is a primary risk factor for Indigenous health disparities and is associated with the leading causes of death, such as cardiovascular disease (CVD) and diabetes (Chartier & Caetano, 2010; Thayer et al., 2017) as well as suicide (Author(s), 2014; Author(s), 2017; Masten & Monn, 2015; Sarche & Spicer, 2008; Tolan, Gorman-Smith, & Henry, 2006). Indigenous peoples tend to experience disproportionately high rates of alcohol abuse disorders, which drive increased mortality rates and are associated with family violence, including intimate partner violence (IPV) and child maltreatment (Bassuk, Dawson, & Huntington, 2006; Masten & Monn, 2015; Mokuau, 2002; Tolan et al., 2006). Age-adjusted mortality rates for alcohol, chronic liver disease, and cirrhosis among Indigenous peoples are 6.2 and 4.2 times higher than the general U.S. population, respectively (Whitesell, Beals, Crow, Mitchell, & Novins, 2012).

According to the Framework of Historical Oppression, Resilience, and Transcendence (FHORT), Historical oppression has undermined Indigenous communities and families through the imposition of historical traumas (e.g., boarding schools that stripped families' ability to socialize and transmit culture and language to their children), impairing the healthy transmission of affection and love and replacing such beliefs with antagonistic and oppressive social norms (Author(s), 2015). Consequently, social problems such as alcohol abuse and violence have increased; and, over time, these social ills may become internalized and normative, giving rise to various health disparities, such as substance abuse (Author(s), 2015). Despite being externally imposed, these problems may inadvertently become exacerbated and inter-generationally transmitted within Indigenous communities. Love, a core component of family resilience (the ability of families to overcome challenges) (Walsh, 2016) also relates to alcohol use.

Family tends to heavily influence substance use and health behaviors among Indigenous peoples (Author(s), 2018a; Author(s), 2018b; Martin & Yurkovich, 2014), making the connection between familial love and alcohol use a promising area for health disparities research. Because love is an integral part of family resilience, or the ability of families to bounce back and withstand adversity, this study examines the influence of love and family resilience on alcohol use, a leading precursor to health disparities amongst Indigenous peoples (Les Whitbeck et al., 2004; Yu & Stiffman, 2007).

This exploratory mixed-methods study begins with and prioritizes results from the qualitative component, and follows up with exploratory quantitative inquiry (Creswell, 2015). First, the lived experiences of love amongst Indigenous peoples are qualitatively analyzed, with an emphasis on love as a component of family resilience and strength. Second, quantitative analysis is used to examine intergenerational changes in expressions of love as a component of family resilience, measured by the Family Resilience Inventory (FRI), which includes items on verbal and physical expressions of love. Third, the relationship between family resilience and alcohol use, a key health disparity among Indigenous peoples, is quantitatively examined. Rather than preemptively defining love, using the FHORT as a lens, through qualitative research this reveal the perceptions and experiences of love through the lens of Indigenous peoples from two Southeastern tribes. We identify how love and family resilience may vary across generations, and how love, a key component of family resilience, relates to alcohol use.

Family Love in Cross-cultural Contexts

Love is recognized as a fundamental human need that significantly impacts social and psychological well-being (Bauer, 2016; Gulledge, Hill, Lister, & Sallion, 2007; Noller, 1996; Riehl-Emde, Thomas, & Willi, 2003). Culture has been shown to influence the way that individuals experience a number of emotions, including love (Heshmati et al., 2017; Schmitt et al., 2009). Schmitt and colleagues (2009) observed cross-cultural variations in love in a quantitative study of 48 nations. Heshmati and colleagues (2017) found that, in addition to individual differences amongst people's perceptions of what it means to feel loved, cultural differences also greatly impact how love is expressed. Other research indicates cultural variations perceptions and experiences of love (Karandashev, 2015).

In addition to cultural differences, love between family members is an important area of clinical focus, but a relatively neglected area of research. What limited research does investigate love tends to focus on intimate relationships, rather than whole family love (Graham, 2011; Riehl-Emde et al., 2003). Family love is believed to be affected by culture, and to have emotional, behavioral, and cognitive aspects (Noller, 1996) – all of which merit scholarly attention and clinical interest to enrich understandings of family resilience. Families resilience and support are integral for all members, and can protect members from the adverse outcomes and social problems that are often exacerbated due to the historical oppression of ethnic minorities (Author(s), 2016a; 2017; 2018). Family resilience describes how the family collectively adapts to challenges and promotes family members' wellness and the wellness of the family as a whole (Masten & Monn, 2015). Family love is central to family resilience processes.

Studies of love amongst family members often focus on parental warmth and affection. Previous research has shown the value of physical and verbal affection in family systems, with particular attention to the influence of parental expressions of love on children's self-esteem and socio-emotional development (Sabey, Rauer, Haselschwerdt, & Volling, 2018). Indeed, a review of the literature in this area revealed that physical affection within families positively impacts a variety of physical, social, and psychological outcomes (Gulledge et al., 2007) for family members. Moreover, in a systematic review specific to Indigenous peoples

(Author(s), 2016a), the quality of family relationships was a prominent theme predicting key behaviors related to Indigenous mental health and alcohol and other drug use disorders. Specifically, parental warmth, parental attachment, family support, caring, and communication were all found to play a protective role for abstaining from substance abuse amongst Indigenous young people (LaFromboise, Hoyt, Oliver, & Whitbeck, 2006). This literature suggests that family love may play a protective role for Indigenous children and youth who might otherwise use alcohol and other substances, warranting further examination of the relationship between love, family resilience, and alcohol abuse as a means to inform health and mental health interventions for Indigenous families. To our knowledge, this is the first study to examine this.

Methods

This exploratory mixed-methods study places precedence on results from both qualitative data, and follows this with a quantitative exploratory investigation (Creswell, 2015). A critical ethnography (study of culture that considers power dynamics in the analysis) was used to understand how family resilience and protective factors affect Indigenous peoples' alcohol abuse and well-being. The overarching research question was "What do Indigenous people see as the most important components of family resilience and strength?" Critical ethnographies prioritize the voices of participants, reporting results using language in participants' own words.

After qualitative data collection and analysis were complete, a survey was conducted to examine how themes identified in qualitative research (i.e., love and family resilience) predicted alcohol abuse outcomes, using a quantitative approach. This survey was administered to members of the same two Southeastern tribes that were sampled in the qualitative component of the study. Multiple forms of ethnographic data were collected from both tribes (existing, qualitative, and quantitative survey data) (Carspecken, 1996).

Setting

The inclusion of two tribes enabled the examination of universal themes and distinctions across populations. The identity of the tribes is kept confidential in line with tribal resolution agreements and as recommended by the aforementioned toolkit (Author(s), 2014). The "Inland Tribe" is a federally recognized tribe, whereas the "Coastal Tribe" is a state, but not federally recognized tribe, which influences the structure and resources of tribes immensely. The federally-recognized Inland Tribe provides tribal schooling, health services, social and family services, along with criminal justice and law enforcement. The state-recognized provides programs for youth, and employment and educational programs. Both tribes have experienced severe historical oppression through educational discrimination, poverty, and racism.

Data Collection

Recruitment efforts for all data (qualitative and quantitative) included word of mouth and disseminating fliers through Facebook, community agencies, tribal websites, and newsletters.

Qualitative.—After tribal and IRB approval, data collection included: (a) participant observation; (b) individually-focused interviews; (c) family interviews; and (d) focus groups across the two tribes. Participant compensation for individual interviews and focus groups was a \$20 gift card to a local department store, whereas compensation for family interviews was a \$60 gift card for the whole family. Research questions derived from our research aims were developed into a semi-structured interview guide for focus groups and interviews. Following the methodological and cultural recommendations, individually-focused interviews took on a life history approach (Carspecken 1996). Examples of probes from the semi-structured interview guide included: "What do you think is the most important thing about strong families? What keeps families strong? What is the 'glue' that holds families together? How do/did you know that you were cared for?" All participants who could be reached were given a copy of their individual life history interview, and wording was geared for 5th-grade comprehension-level.

Sample.—A total of 436 participants were included across individually focused interviews, family interviews, and focus groups, with 228 Inland Tribe and 208 Coastal Tribe participants. We gained perspectives from participants across the lifespan (elders, adults, and youth) in addition to professional perspectives from human service workers engaging tribal members. Individual interviews lasted, on average, 64 min minutes, whereas family interviews lasted, on average, 70 minutes; focus groups lasted, on average 57 minutes.

Quantitative.—Participants completed a survey, delivered online through Qualtrics (Qualtrics, 2014). All survey participants were entered into a drawing for a \$50 gift card with over half (n = 70, 55%) receiving this gift card. Participants' names were kept separately from data and collected only for compensation purposes. In total, 161 participants started the survey with 79% completing the survey (n = 127).

Data Analysis

Qualitative

Collaborative and team-based data analysis methods were used given the extensive ethnographic data collected (Guest & MacQueen, 2008). All qualitative data were professionally transcribed before being transferred to NVivo software for analysis. To enhance cultural sensitivity, data analysis teams included Indigenous PhD students from each tribe and two non-Indigenous PhD students along with the first author. Reconstructive analysis, a specific method of thematic qualitative analysis, was used throughout, which involved: (a) immersion in transcripts multiple times, arriving a holistic conception of data (b) creating hierarchical codes and sub-codes which were arrived at through through consensus; and (c) in-depth analysis of the implicit and explicit meanings. Interrater reliability was evaluated using Cohen's Kappa coefficients (McHugh, 2012), which were extremely high (.90 or above).

Unifying and culturally-specific themes were identified by indicating the tribe in the results for reference. The theme "love" was coded across 95 sources and referenced 158 times. Broken down by tribe, this theme was spoken about by 48 Inland Tribe sources (i.e., individual interviews, family interviews, and focus groups) and referenced 76 times, and by

47 Coastal Tribe sources and referenced 82 times. The sub-themes identified for this article are those related to love that most frequently occurred across tribes. Regarding gender breakdown, for the Inland Tribe, themes were reported across 39 female participants and 15 male participants, four focus groups, and eleven family interviews. For the Coastal Tribe, themes were reported across 44 female participants and 14 male participants, two focus groups, and nine family interviews.

Rigor.—Meeting the standards of rigor for this particular method (Carspecken, 1996), each participant who was reachable received a summary of the results, copies of the interview, survey information, and opportunities to make any changes to the interview transcript or results (i.e., member-checks). No participants disagreed with interpretations, and many extended and elaborated upon results. Results were disseminated to tribes on more than 10 occasions by providing trainings, along with tribal agency, tribal council, and community group presentations and community dialogue groups. Weekly debriefing took place across research team members, and 'consistency checks' ensured participants' explanations were congruent with what was reported. Multiple participants (55.5%) were interviewed more than one time.

Quantitative

Qualitative results informed the emergent hypotheses that (a) family resilience in one's current family will be higher than in one's family of origin; (b) family resilience in one's family of origin and in one's current family will be negatively associated with alcohol abuse symptoms. The analyses, using SPSS software, proceeded in three steps. First, descriptive characteristics and bivariate relationships between the independent variables (e.g., family resilience – family of origin and family resilience – current family) and alcohol abuse symptoms were examined, following the conceptual model. Second, significant differences between family resilience in one's family of origin versus one's current family were determined using a paired sample t-test. Third, hierarchical regression was used to examine the multivariate main effects of the predictor variables. This analysis identified the specific amount of variance in alcohol abuse symptoms that was accounted for in three different steps (George & Mallery, 2013). In Step 1, demographic variables (gender, age, marital status, educational attainment, and income) were entered. In Step 2, perceptions of family resilience in one's family of origin were added. In Step 3, perceptions of family resilience in one's current family were added to the model. Listwise deletion was used for such data. No multicollinearity problems were observed among all independent variables.

Measures.

Demographics.—Age (raw), gender (male/female), educational attainment (higher levels indicated by higher numbers), and marital status (single, engaged, living together, or married) were included in the models as controls. Annual household income at the ordinal level, ranging from 1 (*less than \$2,000*) to 9 (*greater than \$100,000*) was also reported.

Alcohol Use.—Individual's abuse symptoms were measured by the CAGE questionnaire, which stands for the extent a person thought they should Cut down, were Annoyed, Guilty, or had an Eye opener related to drinking (Ewing, 1984). Participants indicated yes/no (0/1),

and when added, any score that is 2 or above is clinically significant. Cronbach's alpha was .88.

Family Resilience – Upbringing and Current family.—Family resilience was assessed through a 20-item scale of family protective factors, the Family Resilience Inventory (Author(s) own 2018b), which was created from emergent qualitative results with the sample population. Participants completed a family of origin and current. Items were added with a yes/no format and included, "We express love and affection freely (hugs, kisses, saying "I love you")," and "We stick with each other through thick and thin." The total score ranged from 0-20 for each scale with higher values indicating greater family resilience. Cronbach's alpha was .88.

Qualitative Results

Both the Inland and the Coastal tribes emphasized 'love' as the most important thing that holds families together. Along with sticking with each other and showing understanding through hard times, participants tended to describe verbal, physical, and frequent rituals of affection as components of the love they described. Results are presented separately for each tribe. First, both tribes clearly explicitly identified "Love" as an important aspect of their families.

Inland Tribe

Participants emphasized love for their family members as the essence of family resilience and strength. A woman stated the most important thing in her current family, stating: 'Love. Love. You got to love your children. Love your father. Love your son. Daughter. ... They need to learn that." A male participant emphasized the importance of, "structure, and a deep love of a parent to stay behind them – but allow them to make mistakes and help them to succeed." Similarly, another woman stated: "I think, just show them [children] love. ... I think that is- it really starts with the parents. ... show some comfort and support and love." Twin boys in a family interview commented on how love made their family resilient: "I'd say it's our love for each other... I know that because no matter what, we still stick together no matter what."

Coastal Tribe

Participants in the Coastal Tribe also referenced the importance of love explicitly. A woman interviewed asserted that "the love" was what held her family together. Another woman emphasized the importance of, "Respect. Love." A man interviewed explained, "[A] strong family to me would be have a lot of love for each other, getting along, and I think that's the part of it, is love each other." Many Coastal tribal members spoke about not having a lot of economic resources but being rich in love. A participant in a family interview stated, "We were not rich. We were poor, but we were rich in being together and as a loving family." A woman interviewed related, "My mom passed away ... We always said we were poor but loved... She raised us to love each other and to stand by each other and support each other. ... We do that to this day."

Verbal Affection

Verbal expressions of love were essential ingredients to what participants perceived as love. Using loving words and letting family members know you love them was crucial.

Inland Tribe.—Telling children they were loved was considered important at any age in the Inland Tribe. A female participant noted that what matters in families is, "I guess it's really love. Now that I know what love is –how you, we [she and her son] talk – how you treat, how we treat each other ... what I say to him. You know, things like that. Everything is positive." Relatedly, when asked about what's important for families, as woman in a focus group, stated,

Communication is the main key. ... That's another way to express all your feelings amongst each other, um, and show an affection $-\dots$ show that there is love in the home."

A woman in another focus group stated, "The communication part, too... – my child is –he's gonna be 22, um, but I still give him a hug, and tell him I love him." When asked about what keeps families together, this same woman replied, "The glue? It's the communication and, you know, telling them you love them." When asked how she knew she was cared for, another woman answered, "Cause they always tell me when I'll feel down, or something. They'll tell me that they love me, and they'll take us out to eat."

Coastal Tribe.—Verbal affection was echoed as a valued means of expressing love among family members in the Coastal Tribe. One woman responded that "Love for each other" was the glue that held she and her extended family together. She added, "We're bonded. Like my brothers, the last three— it's like they on the boat [work on a boat], but every day, I talk to them. The one after me, every night he calls me and tells me, "Goodnight, I love you," and my other brothers, the little ones, they call. We just close." Similarly, a daughter in the family, describing phone calls with her sister, described, "When we hang up on the phone, before we hang up, she says, 'I love you.' I say, 'I love you more,' sometimes she say, 'I love you most."

Physical Affection

For both tribes, physical affection was an important means of showing love for family members. Participants across tribes described hugs, kisses, and other forms of physical touch between many different family members as key indicators of love within the family.

Inland Tribe.—The importance of showing physical affection to children in the family was frequently emphasized by the Inland Tribe. A female participant her parenting of her children: "We both hug and kiss our kids. It's weird. My dad never did it to us, but with my kids, he'll hug and hold them and kiss them. Maybe it's different when it's your grandkids."

Physical affection was also perceived as an important component of comfort and support, particularly from mothers, consistent with recent research (Sabey, et al., 2018). One female participant explained that she knew her mother cared for her because her mother helped her when she was in need and displayed physical affection, stating "She, uh, provides me with,

uh, like, when I'm sad or something she'll help me or when I just want a hug." Similarly, another woman stated, "My mom kind of had a sixth sense when I was feeling down." This participant went on to remark that there was daily hugging and statements that "I love you".

Coastal Tribe.—Physical affection from parents to children was also frequently described in the Coastal tribe, with an emphasis on female caregivers. A woman interviewed stated, "My mom was very demonstrative. Hugs, kissing and that kind of stuff." A male participant described his mom: "She was affectionate. She always showed us love. She always tried to show us." Displaying affection for one another physically was also important to maintain closeness amongst other family members. A woman from the Coastal Tribe described how her parents showed their affection, explaining, "Where one went, the other one went."

A mother in a family interview stated the glue that held the family together was, "That connection and love." When asked how they know, she answered: "If I'm simply just watching TV ... I may say go get a blanket and then we'll cuddle together. ... I think once you get too busy for those little things you end up with distance." As her statement shows, those "little things" are considered important ways that families show love to one another regularly.

Frequent Rituals of Love and Affection

Participants from both tribes demarcated the presence of loving rituals as a part of daily activities. Like many rituals, these interactions between family members are a part of the family routine, often occurring at specific times each day.

Inland Tribe.—For example, when asked how she knew she was cared for, a woman stated, "Our love, I think." This participant stated she knew she was loved, "Because every night, we will tell each other [they love each other] and everything before we go to bed." Another woman recalled her most positive memories growing up based on the love her parents showed through their daily routines, stating "I had the best parents, I would say. Because they always participated in every school activity that parents were allowed to get in and stuff. They always told me they loved me a lot – Every time I'd go to sleep and everything. We still do. Yeah. Every time I go somewhere, I always give hug and kisses before I go and everything."

Coastal Tribe.—In the Coastal Tribe, rituals of love were frequently described as important parts of the family routine. One woman interviewed highlighted the importance of rituals of verbal and physical expressions of affection, explaining, "Yeah, before we'd go to bed, good night, I love you. Before we'd leave for school, bye, I love you. Always give a hug and a kiss on the cheek." Participants in a family interview described a simple ritual of verbal affection between parents and children, and between siblings: "We hang up [the phone], we say to each other, 'We love you.' She say, 'We love you more.'"

Generational Changes in Expressions of Love

Across both tribes, participants often described how the ways that they express love have changed from one generation to the next. The most common example of this was

participants' statements revealing a contrast between the relative lack of open expression of love during their upbringing in their families of origin compared to the intentional and explicit expression of love practiced in their current families.

Inland Tribe.—While many members of the Inland Tribe express love and affection in their current families, a number of interviewees reported that they did not experience such open expressions of love during their upbringing. A woman explained that the lack of parental affection during her childhood resulted parenting her own children differently, stating:

I love my kids. We give each other hugs and tell each other we love each other and that kind of thing that my grandmother never used to do to us, or my mother never did to us. Everything that they never did to us, I do for them. I ... try to teach them things.

Echoing this, a man in a family interview expressed:

My family ... they never gave us that love and affection. I don't think most Indians do that. They don't hug. ... I try to teach my kids different. I want them to love each other and have respect for each other. ... I don't think too many families around here hug their kids. They never tell each other they love each other. I try to raise my kids different.

Similarly, a woman described the importance of love within the family, and indicated that the absence of open expressions of love amongst tribal members was cause for concern, stating:

"I think the [Tribal members] never say "I love you" to the kids. And that's what they need. They need attention." Also commenting on generational changes in the expression of love, a woman conveyed that she expresses love and affection, although she did not receive it as a child:

My mom and dad ... I don't think they'd ever told us, "I love you." ... For me, raising my children and stuff ... that was kind of a learned thing. It was, it was hard for me to be affectionate, um, and to tell them that, that I love them. But I make a point of doing it.

Coastal Tribe.—Changes in the expression of love from generation to generation were also observed by members of the Coastal Tribe, with an emphasis on the lack of affection expressed from fathers to sons. A man interviewed described how the absence of love and affection in his family of origin taught him to be different with his own children, as stated:

I'm the parent who I always wanted as a kid. I'm that parent to my kids, as far as someone who shows emotion to my kids, um, kisses them, hugs them, reads to them, talks to them, knows what's going on. Uh, I'm that parent that I wanted as a kid, which I never had.

Another man interviewed wished he had heard more words of affection growing up, stating his longing: "Probably to hear my dad tell me. I mean, he's still around now, but for me to

hear him tell me he loved me more probably...I might have heard that being said about five times in my life." He added, "My mom said it all the time," but that he needed that from his dad. He went on to explain the intergenerational cycle of a lack of affection from father figures:

My dad didn't always say it because my grandpa probably never said it to him. ... He wasn't always going to tell you that he loved you, but his actions showed that he did. I don't think action is enough. ... If you don't say it, how are they going to ever hear it?

Similarly, a woman interviewed revealed the contrast between her family upbringing and the way she parents: "They're not really affectionate people. I'm like that with my kids though, I'm really affectionate. I guess that's why I am because I grew up with not that much affection, you know? I changed that cycle a lot." These qualitative results indicate that love is perceived as a critical aspect of family strength and resilience by members of both the Inland Tribe and the Coastal Tribe. The focus now turns to investigating these themes quantitatively.

Quantitative Results

Based on qualitative results, quantitative analyses aimed to reveal a potential link between family resilience (of which, love is a component) and alcohol abuse, a prevalent and well-documented risk factor amongst tribal members. Qualitative results illustrating the changes in the expression of love between generations were particularly influential in formulating two hypotheses: (a) family resilience in one's current family will be higher than in one's upbringing; (b) family resilience in one's upbringing and in one's current family will be negatively associated with alcohol abuse symptoms. Confirmation of these hypotheses could serve to bolster qualitative results surrounding changes in the expression of love as a component of family resilience from one generation to the next, and provide initial evidence indicating that family resilience is a family-level protective factor against alcohol abuse.

The average score for alcohol abuse symptoms among participants was 0.7 (SD = 1.29 range = 0-4). In total, 73.2% (n = 93) of participants reported no alcohol abuse symptoms, whereas 21.2% (n = 27) of participants reported alcohol abuse symptoms in the clinically significant range. At the bivariate level, each of the independent variables was significantly associated (p < .01) with the dependent variable of alcohol abuse symptoms, in the expected direction – which supports our hypotheses (Family Resilience –Upbringing, r = -.272 p < .003; and Family Resilience – Current, r = -.223 p < .015).

A paired samples t-test was conducted to compare significant differences in family resilience in one's upbringing versus in one's current family. As predicted, family resilience in one's upbringing (M=16.06, SD=4.94), on average, was reported at lower levels than in one's current family (M=18.03, SD=3.22) affirming the tentative hypothesis based on qualitative results that verbal and physical affection and love, along with other family resilience indicators, are higher for the current family than one's family of origin (t=4.387, df=118, p. <000).

For Step 1, demographic variables explained 4.6% of the variance (R^2), though education, age, gender, income, and marital status were not significant across any of the models. Family of origin resilience (Family Resilience – Upbringing) factors explained an additional 4% of the variance for a total of 8.6% of the variance (R^2) accounted for in this step. Age and education remained significant, and higher perceived historical oppression and lower reported levels of family resilience predicted significantly higher levels of alcohol abuse symptoms. In the final step, current family resilience and daily hassles explained 12.6% of the variance (R^2), an increase of 4.1% from step two. The change in Step 2 was significant (R=.293, $R^2=.086$, F(1,100)=1.567, p<.038), as well as in Step 3 (R=.356, $R^2=.126$, F(1,99)=2.047, p<.035), supporting the hypothesis that higher levels of family resilience both in one's current family and in one's upbringing are negatively associated with alcohol abuse symptoms.

Discussion

Qualitative

This article prioritized participants' own words in qualitative results, and explicitly honored their language and descriptions of resilient, strong families (Author(s), 2011; 2014). Qualitative results overwhelming supported the expressed importance of love, manifested amongst family members in several ways including verbal affection, physical affection, and rituals of affection, and the resilience of sticking together through hard times and combatting struggle with understanding and support. In both tribes, participants described acts of verbal and physical affection as important expressions of love between parents and children, as well as other family members. Rituals of love and affection were incorporated into daily family routines by members of both tribes, offering the opportunity for love to be expressed and felt regularly. Parents from both tribes also provided insight into how they are breaking intergenerational cycles by openly expressing their love for their family members, especially children, although this was not always a common practice in previous generations. In the Inland Tribe, a lack of parental affection was perceived to be a risk factor for children; in the Coastal Tribe, lack of affection was commonly experienced between fathers and sons.

Qualitative results also suggested that verbal and physical expressions of love within the tribal communities involved in this research may have a gendered component, with females being more verbally and physically expressive across both tribes. Verbal affection was strongly associated with mothers and female caretakers, as it was most often mothers who described their own use of verbal affection with children, and other participants most often mentioned receiving verbal affection from their mothers and grandmothers. This is an important finding amongst Indigenous communities that warrants further research, as studies have shown that father love significantly impacts social, emotional, and cognitive outcomes for children and young adults (Li & Meier, 2017). However, results also indicate that cultural (and potentially gendered) norms surrounding the expression of love are changing over time. The present generation emphasizes open expressions of love and affection, especially from parents to children, which was perceived to be a shift from previous generations. Many participants reported that they learned from their childhood experiences that were significantly lacking in parental affection, breaking this inter-generational cycle by

choosing to do things differently within their current families; thus family resilience may enable transcendence despite experiences of oppression (Author(s), 2016b).

Quantitative

Quantitative results also revealed interesting phenomena. First, clinically significant alcohol abuse was present among 21% of the sample, a striking number. Supporting the data from qualitative results, family resilience during one's upbringing was, in fact significantly lower than in one's current family, indicating a revitalization and resurgence of loving behaviors. This may indicate that the current generation is beginning to transcend the effects of historical oppression and express love to a greater degree. Importantly, the FRI, a culturally-specific and validated measure (Author(s), 2018b), was used to conceptualize and measure family resilience in this study, which included specific items from the qualitative methods employed, namely, "We express love and affection freely (hugs, kisses, saying "I love you"); we laugh a lot; I feel it is stable, safe, and predictable; we are close knit; we come together during hard times, rather than going our separate ways; and, we stick with each other through thick and thin."

Quantitative analysis also revealed that family resilience had an effect on alcohol abuse in both models. Family resilience in one's upbringing significantly impacted alcohol abuse symptoms in the 2nd model, however, the significance of this effect was not maintained in the 3rd model in which family resilience in one's current family was included. These results indicate that family resilience in one's current family mediates the impact of family resilience during upbringing on alcohol abuse symptoms. This provides the promise of changing and improving intergenerational patterns, and that current family promotive processes, such as the expression of love, are highly important related to alcohol abuse outcomes. Despite other research examining risk factors for alcohol abuse, such as parental substance abuse, this is the first known study that examines the potential association between family resilience and alcohol abuse, a glaring and well-documented health disparity among Indigenous peoples.

Limitations

This study used mixed methodology as part of an in-depth, culturally-grounded, and community-based research project, exploring Indigenous peoples' perceptions of love, and finding several significant variables associated with alcohol abuse symptoms for men and women across two tribes, despite a relatively small sample size. The qualitative and quantitative results bolster one another, and support the FHORT. Importantly, this is the first study to examine love as it relates to alcohol abuse, however, as with all studies, there are limitations to this work that merit discussion. First, results from this convenience sample cannot be generalized beyond their context. Second, all variables were assessed via self-report measures. Additionally, some variables, such as gender, age, and educational status were not found to be significant. Given the diversity of Indigenous peoples, these results require further investigation across distinct contexts and with larger samples for a fuller understanding.

Implications and Future Research

Given the frequency with which love came up as a theme in participants' own words, it is striking that a literature search on love yielded no current research on families, nor any research related to love, family resilience, and alcohol abuse. It is unlikely that the importance of love is limited to this sample. More qualitative and quantitative research examining love specifically is warranted, not only to honor the conceptions meaningful to the specific research participants included in study samples, but to investigate promising directions to prevent and address persistent health disparities, such as alcohol and other drug abuse. The intentional bridging of the gap between the conceptualizations of important factors, like love, proposed by participants versus researchers is a needed approach to increase the relevance and applicability of research to the families and communities it endeavors to impact. The development of alcohol abuse prevention and intervention efforts that involve the entire family system, and focus on facilitating the expression of love as a component of family resilience are promising clinical implications.

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