ORIGINAL ARTICLE

Cultural Dynamics, Substance Use, and Resilience Among American Indian/Alaska Native Emerging Adults in Urban Areas

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Abstract

Identity development during emerging adulthood helps lay down the structure of values, social bonds, and decision-making patterns that help determine adult outcomes, including patterns of substance use. Managing cultural identity may pose unique challenges for American Indian/Alaska Native (AI/AN) emerging adults in "urban" areas (away from tribal lands or reservations), who are relatively isolated from social and cultural connections. This isolation is in turn a product of cultural genocide and oppression, both historically and in the present day. This paper uses qualitative data from 13 focus groups with urban AI/AN emerging adults, parents, and providers to explore how cultural dynamics are related to substance use outcomes for urban AI/AN emerging adults. We found that cultural isolation as well as ongoing discrimination presents challenges to negotiating cultural identity, and that the AI/AN social and cultural context sometimes presented risk exposures and pathways for substance use. However, we also found that culture provided a source of strength and resilience for urban AI/AN emerging adults, and that specific cultural values and traditions — such as mindfulness, connection to nature, and a deep historical and cosmological perspective — offer "binding pathways" for positive behavioral health. We conclude with two suggestions for substance use prevention and intervention for this population: (1) incorporate these "binding pathways" for health and resilience explicitly into intervention materials; (2) emphasize and celebrate emerging adulthood itself as a sacred cultural transition.

Keywords Intervention development · Emerging adulthood · Cultural identity · Native American · Qualitative

Introduction

During the past two decades, emerging adulthood (ages 18–29) has received recognition as a distinct phase of human development (Arnett et al., 2014). Longitudinal work shows youth move in and out of phases of identity development based on exploration and commitment to different components of their identity (Meeus et al., 2002; Schwartz et al., 2005). Within the last decade, research has focused increasingly on racial-ethnic identity, and how identity exploration and commitment may play out for individuals who are members of racial and ethnic underrepresented groups (Syed & Mitchell, 2013), such as American Indian and Alaska Native adolescents and emerging adults.
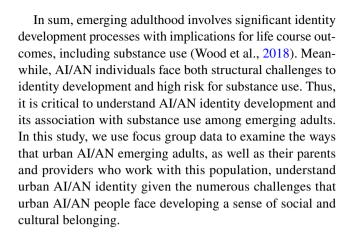
Identity development during emerging adulthood is crucial because it helps establish the structure of values, social bonds, and decision-making abilities necessary for the transition to adult roles (Piotrowski et al., 2020). Research has explored how identity development may differ for members of different racial-ethnic groups. The identity development process may pose unique challenges for AI/AN emerging adults who live off of reservations or tribal lands (henceforth referred to as "urban"), often isolated from culture and traditions that prevail on reservations and tribal lands. This cultural isolation is partially a

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result of deliberate genocidal and cultural erasure policies throughout US history (Brave Heart, 1998; Ehlers et al., 2013), as well as discrimination that continues today. For example, in urban areas, relocation policies ensured that AI people would not be concentrated in any single urban area, and thus they are dispersed across cities, making it difficult to connect with other AI individuals. As a result, AI/AN emerging adults in urban areas face challenges to identity development due to mixed heritage and complex racial-ethnic identities, limited opportunities for social connections with other AI/AN emerging adults, diminished social and economic capital among urban Native communities, geographic distance from tribal lands, and limited opportunities for engaging in traditional practices (Brown et al., 2016; Jacobs & Merolla, 2017; Kulis et al., 2013). Separation from one's ethnic or cultural homeland across a wide variety of populations has been shown to confer risk for behavioral health issues, as suggested by research on US immigrant and refugee groups (Meca & Schwartz, 2020).

The legacy of cultural and population genocide that the United States has perpetrated against the AI/AN population has also created challenges for AI/AN emerging adults as they negotiate the life course and develop a sense of identity. Although the AI/AN community has displayed tremendous resilience in the face of this genocidal campaign and the legacy of structural racism it has left, poverty and discrimination still pose systemic barriers for many AI/AN communities in both rural and urban areas (Evans-Campbell, 2008; Sotero, 2006). This creates additional structural and psychosocial challenges for AI/AN emerging adults; for example, discrimination has been linked to negative physical and mental health outcomes among AI/AN individuals, and this association may be especially strong earlier in the life course (Danyluck et al., 2021).

In the face of these numerous social structural challenges, developing a sense of AI/AN identity has been shown to contribute to resilience, including lower substance use. Previous work on identity among AI/AN urban adolescents indicates that teens who were identified as AI/AN by parents or community members and also self-identified as AI/AN or as AI/AN and another category (e.g., White or Hispanic) reported better mental health, less frequent alcohol and marijuana use, and fewer delinquent behaviors in comparison with adolescents who did not self-identify as AI/AN (Brown et al., 2019). Other studies have exhibited links between AI/AN ethnic identity and better school and psychosocial outcomes (Jones & Galliher, 2007). However, links between cultural identity or other cultural factors and outcomes are inconsistent and not always positive (Walls et al., 2016). This raises the importance of understanding how, why, and when cultural identity is related to risk versus protective pathways.

In sum, emerging adulthood involves significant identity development processes with implications for life course outcomes, including substance use (Wood et al., 2018). Meanwhile, AI/AN individuals face both structural challenges to identity development and high risk for substance use. Thus, it is critical to understand AI/AN identity development and its association with substance use among emerging adults. In this study, we use focus group data to examine the ways that urban AI/AN emerging adults, as well as their parents and providers who work with this population, understand urban AI/AN identity given the numerous challenges that urban AI/AN people face developing a sense of social and cultural belonging.

Methods

Sample and Recruitment

This study draws upon a larger longitudinal clinical trial (D'amico et al., 2021). Phase I of TACUNA employed extensive qualitative research to inform the development of a culturally based substance use prevention intervention for AI/AN emerging adults (aged 18–25) who reside in urban areas. TACUNA is focused on helping emerging adults understand their social relationships and cultural connections, as well as how these relationships and connections influence substance use, participation in traditional practices, and resilience to stress. It consists of three workshops that include discussion of participants' personal networks, as well as participation in a guided traditional practice. Following the start of the COVID-19 pandemic, the TACUNA intervention was moved online and opened to AI/AN emerging adults across the USA not currently living on tribal lands or reservations. Phase II is ongoing at the time of this manuscript, and consists of the implementation of this intervention, followed by analysis of longitudinal health and behavioral outcomes, and evaluation of sustainability in community settings.

In this study we analyzed content from the phase I focus groups. Recruitment occurred in three urban areas in California (Northern, Central, and Southern), targeting emerging adults, parents, and providers to participate in dedicated focus groups. To be included, emerging adults and parents had to reside in an urban area and self-identify as AN/AN. Providers could participate if they had experience working with AI/AN emerging adults; self-identification as AI/AN was not required. The recruitment effort was coordinated through our long-standing community partner, Sacred Path Indigenous Wellness Center (SPIWC), and included distribution of flyers at community events and AI/AN organizations across California. All recruitment materials, data collection, and analysis plans were approved by the lead author's Institutional Review Board and our Elder Advisory Board. Focus

group attendees received $50 gift cards in appreciation of their 2-h time commitment.

Data Collection

We conducted thirteen focus groups: six with emerging adults (two each in Northern, Central, and Southern California), four with parents (two in Northern California, and one each in Central and Southern California), and three with providers (one each in Northern, Central, and Southern California) in person over 4 months (November 2019–February 2020). Focus groups involved a total of 91 individuals: 32 emerging adults, 26 parents, and 33 providers. Further information on focus group demographics is available in Table 1.

Each group was moderated by at least two members of our research team, all of whom are trained in qualitative methods and have experience interviewing vulnerable populations. Most of the research team also had prior experience working with adolescents and emerging adults across AI/AN communities. Two team members (DD and CJ) are AI/AN. DD is Alaska Native (Inupiaq) and CJ is Wahpeton Dakota.

The focus group protocol centered on eliciting formative data with a view to developing an opioid prevention intervention that integrates AI/AN traditional practices and motivational interviewing (D'Amico et al., 2020; Miller & Rollnick, 2013). Based on the literature and the team's prior experience, and considering the study's objective, discussion prompts were divided across five domains: (1) social networks and social relationships (e.g., healthy relationships, the pathway between social relationships and opioid use); (2) AI/AN identity (e.g., degree of connection to Native identity, experiences, traditions, connectedness); (3) opioid use (including non-medical use of prescription opioids and heroin use), alcohol, marijuana, and other drug use (e.g., reasons why emerging adults may start using, risk and protective factors); (4) intervention content (e.g., feedback on proposed intervention materials, suggestions of preferred traditional activities, optimal strategies for engaging emerging adults); and (5) culturally sensitive intervention recruitment and retention (e.g., logistical aspects of recruitment, attendance barriers, suggested facilitators for attendance and retention). We include the complete protocol in Supplement 1. Each focus group lasted approximately 2 h. The groups were audio recorded and transcribed verbatim.

Analysis

All transcripts were de-identified and uploaded to Dedoose, a collaborative software platform used for qualitative data management and analysis (*Dedoose Version 8.2.32*, 2020). The analysis followed an inductive exploratory approach to establish the thematic range and saliency regarding our research question. The lead author (RAB) coded the transcripts over several iterations, frequently consulting with the research team on codebook structure. The process resulted in eight main codes or themes, all of which are presented in this paper.

Results

Challenges to AI/AN Identity Are Rooted in Historical Trauma and Ongoing Oppression

Two of the themes we discovered in our FG data addressed the historical trauma of oppression and genocide at the hands of White American colonizers, as well as the cascade of ensuing events that have created challenges of AI/AN populations through ongoing structural racism and discrimination. First, 11 out of 13 FGs (4 emerging adults, 4 parents, 3 providers) discussed historical and intergenerational trauma and how this has led to cultural loss. For example, one provider explained:

> . . .like a lot of the times when I meet with families in a Native home, the grandma probably experienced either the Relocation Act, forced assimilation. . .boarding school. . . [Their] [c]hild, probably [is experiencing] loss of culture, probably substance use disorder (SUD), probably depression. Then you have your young adults who is now dealing with resentment towards the culture, trauma and shame, also, of not having that cul-

Table 1 Sample demographics (*n* = 91)

	Young adults (*n* = 32)	Parents (*n* = 25)	Providers (*n* = 33)
Age range (mean)	18–25 (21.5)	27–78 (46.5)	23–72 (48.9)
Sex *n* (%)			
Male	10 (31%)	4 (16%)	7 (21%)
Female	22 (69%)	21 (84%)	26 (79%)
Race *n* (%)			
American Indian/Alaska Native	22 (69%)	19 (76%)	19 (58%)
Mixed Heritage (AI/AN plus Other)	10 (31%)	4 (16%)	6 (18%)
Other (White, Hispanic, Black)	0 (0%)	2 (8%)	7 (21%)

ture. So I see that one very often, even working in the field of SUD. It's traditionally we don't practice ceremony, traditions if we're living in that way, if we're living with domestic violence, substance abuse, abuse. So there's a big disconnect already, you know?

Furthermore, FG participants described how oppression has not stopped with historical events but continues in the form of offensive forms of cultural appropriation, stereotyping, and outright discrimination. Seven focus groups discussed this theme, including 2 emerging adults, 4 parents, and 1 provider FG. For example, one parent described how her granddaughter faced overt discrimination in the classroom:

> My granddaughter was asked a question in school. The teacher asked a question to all the students. And it was about Natives being called savages. It was like, 'Do you really think the Natives were savages?' And all the other kids go, 'Yeah, they were savages. They did this. They did that.' And my granddaughter, she was the only one that stood up for the Natives.

Challenges to AI/AN Identity Are Especially Pronounced in Urban Areas

Respondents went on to describe how both historical and modern forces of oppression create special challenges for AI/AN emerging adults in urban areas. Eleven FGs (4 emerging adults, 4 parents, and 3 provider) described how cultural genocide through forced relocation has created persistent urban/rural differences that adolescents and emerging adults must negotiate when living in the city, while still having familial and cultural connections to tribal lands in rural areas. For example, one emerging adult described: "There're so many different tribes and you'll have, like, a room full of Natives, which is hard out here. And let's say you have a room full of 10, all 10 of them aren't from the same tribe. So, when they're going to do some sort of cultural or ceremonial practice or whatever, which tribe do they pick from?".

Nine FGs (3 emerging adults, 3 parents, 3 providers) also described how these urban/rural differences have sometimes led to a sense of cultural isolation for urban AI/AN emerging adults. For example, one parent described how they "didn't grow up on a reservation. I grow up here—grew up here in [CITY]. And I felt isolated because I was the only Native American girl in my school."

Similarly, FG participants described how these challenges with AI/AN identity in urban areas led some to experience cultural distance from their AI/AN heritage and lack of connection to traditional practices. Seven FGs (3 emerging adults, 3 parents, and 1 provider FG) described how this had happened at some point in life, sometimes due to their

parents' ambivalence about their own AI/AN heritage. For example, one emerging adult FG participant explained,

> You know, I'm only a quarter, but still, like, my mom's roots, that's where I get my Native side. And she was, like, not traditional at all. She didn't want me going to ceremony, she didn't sing me songs, she didn't do any of that stuff. And she didn't have a—my family wasn't very traditional either.

Participants also talked about challenges meeting tribal requirements for membership — both in terms of formal requirements for being an enrolled member of a Federally recognized tribe but also keeping pace with specific cultural knowledge. Nine focus groups (5 emerging adults, 2 parent, 2 provider) discussed the role of tribally specific boundaries and requirements in AI/AN identity. For example, one emerging adult focus group participant explained, "...it's like sometimes they feel stuck or they feel invalid. Maybe it goes back to you're not tribally enrolled so they feel invalid as an indigenous person."

Less commonly, respondents noted how other urban residents often lacked knowledge about AI/AN, creating further challenges to identity. Four out of 13 focus groups (1 emerging adult, 2 provider, and 1 parent FG) described the challenges of being accepted as AI/AN in urban areas. For example, one parent described how it was difficult to live in an urban area and not be from a federally recognized tribe:

> . . .it's like my uncle used to say being raised in his neighborhood like he always identified Native, but whenever they [other urban residents] would ask him what tribe or what res he was from he said, "No, we're from here, you know. We're Californian. We're from here. We didn't get a reservation like all of them [other AI/AN tribes] did." So they said, "Oh, you're a fake Indian, you know. You're just a fake Indian." He used to go through that a lot and he would ask his dad; he goes, "How come you don't say anything? How come you don't say where we're from; who we are?" And he goes, "They don't teach it in school. So it doesn't matter. They're not going to listen. You're just some little person telling them who you are. Well, nothing to back it up, so what's the point?"

FG participants described these struggles with identity in urban areas as being partially rooted in having mixed racial-ethnic heritage and the responses of other urban residents to this mixed heritage. Seven FGs (1 emerging adult, 3 parents, and 3 providers) discussed the challenges of dealing with this mixed background, including a perceived "dilution" of local of connection to AI/AN identity or other racial-ethnic identities. For example, one provider spoke about the identity struggles of an AI/AN emerging adult with whom she worked:

And I've asked her, her mom is Mexican and her dad is part of the XXXX Nation. And I've asked her, "Why do you just stay in your room? Why are you just—" and she smokes marijuana. As far as we know, that's the only thing that she's doing right now. But in answer to isolation—because at one point in her life, she was told that she's not Mexican enough and she's not Native enough. So she's like, "I don't even want to deal with these two facets that's out there telling me that I'm not enough of one thing." So for me I want her exposed to people that are "mixed" and let her know that it's okay and that there is a certain percentage of people that would tell you you're not enough of one thing.

Sometimes, Risk Is Generated Within the AI/AN Cultural and Social Milieu

Participants also described how the historical legacy of oppression, which can affect the understanding of one's identity, has created social environments that may increase risk through substance use. In total, 12 focus groups (5 emerging adults, 4 parents, 3 providers) talked about this risk. Many of these examples discussed family or home environments as mechanisms for conferring this risk. For example, "...it's harder to be sober for the youth too, also, because sometimes it's like it's either adults or your family bringing it to you and you're doing it. And it's kind of hard to say no..." Respondents also described how the legacy of using substances, including within certain families, could follow individuals and lead to persistent stigma.

A less common theme (5 focus groups; 3 emerging adults, 2 providers) was that sometimes AI/AN reservations or other social contexts did not provide the appropriate resources or understanding for individuals to achieve sobriety. For example, one emerging adult participant stated, "I think they need more Native American programs that deal with AA or NA because when you go back home where we're from, like, there's none...there's nothing there for us." Another emerging adult participant indicated that individuals from families who use substances can become stigmatized and then will not have further life opportunities. And one provider indicated that shame around substance use and program rules about sobriety made it hard for some struggling individuals to connect with services:

That's why some of them don't come because they're very ashamed. You know, some of our families out here that are from the original families that relocated, I know they need to be here desperately but they're ashamed to come because they're using and they don't want to be judged. And we have rules, you know? You

can't be inebriated if you're in the building. So, they need our services but we're not reaching them.

AI/AN Populations Have Strategies to Protect and Enhance Cultural Identity in Urban Environments

Despite challenges to AI/AN identity in urban areas, FG participants described a range of adaptive strategies to confront and overcome challenges of understanding one's identity. Every focus group (6 emerging adults, 4 parent, 3 provider) included a discussion of how urban AI/AN individuals have developed a range of approaches to AI/AN identity in order to increase resilience. For example, one provider explained how they incorporated this diversity into their intervention work;

I think we're on this continuum of like acculturation, especially here in the urban setting because there's over 500 tribes. So depending on the way that we were taught, even within one's tribe there are different ways to honor and respect the circle. So, I think it's just encouraged that everyone share and honor the way that they were taught.

In a similar vein, respondents described how pan-Indianism has allowed for a wide range of AI/AN identities to be included and accepted in the urban environment. Nine focus groups (4 emerging adults, 2 parent, 3 provider) described how pan-Indianism creates an inclusive, "big tent" environment. For example, one provider focus group emphasized how a pan-Indian approach to culture is important for intervention programming:

. . . our circle here is we're about inclusion, you know? And we represent and recognize that we are an inter-tribal, intercultural community. . . .You've got to think about the way everything's evolving in generations. So, we're just becoming more inter-tribal. . .we have to be able to stay inclusive in our drive, in our traditional ways so when we embrace because those are the core teachings that keep us healthy, keep us connect or make us even want to reach out to who are my ancestors, you know? What's the drive behind that, you know? I think with Native people that there's something there that makes you want to be like, "Yeah, I want to know about where I come from," or something about that that connects you to your roots.

Respondents also noted that even with the challenges of AI/AN identity for emerging adults in urban environments, emerging adults still showed high levels of interest and enthusiasm for being Native and learning more about their Native roots. Seven FGs included discussions of explicit pride or strong interest in learning more about AI/

AN heritage. For example, one emerging adult participant described how — despite not having strong connections to tribal cultural traditions — they had gradually established a healthy and positive sense of AI/AN identity over the years:

> I think that with a lot of Natives like a lot of them don't really know their culture. Because for my tribe, for example, there isn't like a lot of like culture there. They're still trying to like dig things up and find things. And some people kind of have an identity crisis where they feel like, you know, where do I belong? Do I even like belong here, you know? A lot of people don't know that they're even here till like later in life because I didn't know until probably two or three years back. And I just assumed that I was Hispanic until I learned through—I did a search and talked to other relatives and found out, yeah I am Native. And when I found out that I was and I started going around the community and being part of the events, it made me like a lot happier and gave me a bigger sense of belonging as well.

Cultural Values and Practices Show "Binding Pathways" for Avoiding or Recovering from Substance Use

Respondents described several mechanisms by which AI/AN cultural practices and beliefs helped to prevent substance use and create or reinforce a healthy sense of self and positive well-being. Perhaps the most important mechanism described by focus group participants was how AI/AN identity, practices, and beliefs were incompatible with substance use and/or provided pathways to avoid or recover from substance use; nine focus groups (4 emerging adults, 3 parent, 2 provider) discussed this theme.

Respondents described how AI/AN cultural ceremonies and practices often encouraged or even required sobriety. For example, one emerging adult focus group participant explained:

> Like, one time I was dancing in the pit and then they had somebody that was drunk in the pit that wasn't supposed to be in there, which is not nice. . . .You're not supposed to be bringing—yeah, especially if there's a baby and you're dancing for a sick child, that's what you're supposed to do. Sobriety is one of the major things that is supposed to be in our culture. It was never introduced until, like, until the Europeans came and we started drinking, we started using other things. Like, that's one like the major parts of being— that being in your tradition and your culture, you're supposed to be sober, you supposed to do that, you're supposed be brining good medicine, not bad medicine or anything toxic from the outside world.

Similarly, a parent described how cultural revitalization in their community had reinforced the importance of sobriety:

> . . .now that it's revitalized and they've brought back dances that haven't been done for a long time there's really more of an emphasis on being clean and being sober and it being a sober environment. . . .If you're not clean, if you're using alcohol and you're doing these things it's not a good environment. It's not a good environment; you're not making good medicine.

Focus group participants also explained the healing and protective properties of ceremonies and cultural activities. For example, one provider explained:

> . . .I think about community members said once about a drum group, that they get healing being there. And I was thinking about all these things, like, matter something to us, powwow, whatever it is, but that shows you the desperation, you know, of like where they're at and where they're living. I feel like that time, even in that hour, they could sit around and drum or they can be whatever moment that is, it's helping them, whatever. If it's combatting against opioids or whatever it is, it's doing something, it's promoting the healthy thing.

Participants discussed nine strong elements of AI/AN culture that cut across geography and different social groups and help provide preventative and healing properties. These were:

- Ancestral/family connections/respecting elders
- Connection to nature
- Origin stories of humankind
- Interconnectedness of all things
- Marking life transitions during the life course
- Slowing down/mindfulness
- Warrior identity/fight/struggle
- Balance in life
- Subsistence and the responsibility to support oneself and one's family

For example, one provider described how AI/AN culture blended a sense of the warrior's struggle, mindfulness, balance in life, and connectedness to nature and each other in a way that provides healing properties:

> . . . to fight and to keep on fighting and to keep standing up for ourselves. But all of that goes along with what he was saying and then just the belief and the balance and you get that from nature, you get that from just understanding your place in the world. But we don't stay quiet enough I feel like today. And Western society calls it mindfulness, but we just called it just sit in your space, you know? Like my grandpa said,

"How did you think we sat and gathered and got feathers or different types of pelts?" Because you sat there for a while and took in your space and we don't do that enough, and I think that would be helpful. I know we did a women's empowerment group and that was the number one thing that all the women enjoyed was the quiet and connection that they had with each other and then also trying to invoke it in nature when possible.

In a similar vein, a parent spoke of the importance of using nature to build a foundation of resilience, nothing how it was important to tell:

. . .those stories of nature and the animals in relations to how to explain to the children how life things—you know, things that are going to come up are things that are hard in our life, that this is how it is in nature. And this is how it makes them—they're strong for this reason and then you just translate it into like a tree. Like the willow tree is bendable but it doesn't break. And it's like all these things that they use, the elements of nature and animals into like relating towards us and teaching us to be strong and all of this and being—like how the animals, like they always—the way they survive there together in groups sometimes are some of them are more independent.

One provider noted how creation stories could help bring emerging adults together and help establish a sense of Native identity; "I always try to ask them to look for their creation story. Because not only do they learn a little bit about how they come into existence in this reality, in this world, but they also when everybody shares, they also find and see that connection that there's something similar in all those creation stories." Meanwhile, a provider in a different focus group described how marking life transitions could incorporate notions of warrior identity and subsistence or providing for others:

Coming of Age ceremonies. What does it mean to be a man? What is your behavior like when you're a man? What is it to be a protector? What does the word "warrior" mean? Does it really mean "warrior" or does it mean "protector of the people?" These are that type of ceremony. But not just to have the ceremony and then let the kids stand on their own. There has to be mentorship afterwards to continue that teaching. Because that teaching just doesn't happen in the ceremony; that's a process. And the process of self-discipline, that's also in becoming a man or a woman, is learning self-discipline.

At this point in the discussion, a different provider responded to connect this discussion of resilience and maturity to respect of elders, "...the way we live is that we are looking forward to becoming an elder. But to be able to be that elder, what do you do? You help people along the way."

Discussion

Many changes occur in identity during emerging adulthood. The current paper focused on understanding the unique context of developing and negotiating AI/AN identity for emerging adults in an urban environment. Identity development can be more challenging for many racial and ethnic underrepresented youth because they have to navigate discrimination, may lack of knowledge about their heritage, and also may lack opportunities to reconnect with tradition, which can affect how they view themselves and their social and cultural milieu (Lucero, 2010). Our findings highlight the difficulty many urban AI/AN emerging adults face in the modern world as they develop their AI/AN identity due to the effects of deliberate genocide and attempted cultural erasure through historical trauma and oppression, but also the strength and adaptiveness of AI/AN emerging adults and their families and communities in finding ways to connect with cultural identity and traditions.

As with urban AI/AN adolescents (Brown et al., 2016; Jones & Galliher, 2007), we found that AI/AN emerging adults continued to struggle with limited access to AI/AN communities and resources and negotiating mixed racial-ethnic identity in urban settings. AI/AN urban emerging adults — as well as their parents and practitioners involved with this population — talked with great sophistication about these challenges, and noted how urban poverty itself presented additional challenges to involvement in traditional practices.

First, focus group participants discussed the degree to which AI/AN social networks and cultural contexts could be protective as well as confer risk for substance use, requiring complex negotiations and adaptations for those who wished to practice a sober lifestyle. Participants also discussed the degree to which the apparent "hard line" between substance use and traditional practices was in reality sometimes quite blurred. Thus, pursuing harm reduction strategies that help foster urban AI/AN emerging adults' interests in learning about their culture rather than requiring them to first be "totally abstinent" might be more effective and more appealing to this population.

Meanwhile, participants strongly reinforced previous work in this area emphasizing that AI/AN cultural identity and cultural practices can be protective against substance use (Brown et al., 2016; LaFromboise et al., 2006; Shepherd et al., 2017; Whitesell et al., 2012). Perhaps due to the complexity and sophistication of identity exploration during emerging adulthood, participants articulated a broad range of ways in which AI/AN cultural values provided natural
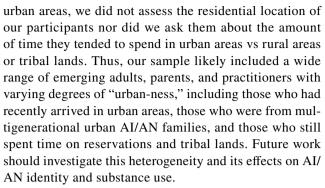
pathways to resilience, including a sense of deep historical time (Bruehlman-Senecal et al., 2016), celebration of life course transitions (Friesen et al., 2015), mindfulness and connectedness to nature (Jimenez et al., 2021; Tang et al., 2015), and positive aspects of AI/AN roles (such as being a warrior or subsistence provider). These different pathways provide frameworks for culturally based interventions that leverage existing evidence-based work showing how values and practices can help increase resilience, decrease substance use, and improve mental health. Finally, participants' responses to video presentations of AI/AN identity and resilience highlight the importance of focusing on positive aspects of identity, which can inspire discussion around exploring and committing to one's identity in group interventions.

Results from focus groups provide two main take-aways for designing and implementing interventions. First, results emphasize the wide spectrum of experiential backgrounds and narratives of cultural and racial-ethnic identity voiced by urban AI/AN emerging adults. Emerging adults, their parents, and providers described how this underlying variability could be addressed by starting outreach and communication using a pan-Indian identity framework. Furthermore, respondents described a variety of pan-Indian values and practices shared across the AI/AN community. Whereas specific tribes often have their own list of core values, focus groups indicated that a list of values shared across the AI/AN community could be a useful starting place and teaching tool for interventions.

Second, the significant identity development and negotiation around emerging adulthood for urban AI/AN individuals suggests that emphasizing this developmental period itself as its own important — or even sacred — developmental stage and celebrating this could be a useful strategy for interventions during this stage of life. As participants described, AI/AN culture celebrates life transitions, and previous work provides models of Native-centric understanding for developmental processes that could be used in substance use interventions (Best Start Resource Centre, 2010; Our Stories, 2020), thereby highlighting traditional norms around health, responsibility and providing for one's family, and other Native-centric conceptions of adulthood that are at odds with substance use.

Limitations and Conclusion

Findings presented in this study come from a convenience sample of emerging adults, parents, and providers in Northern, Central, and Southern California — and therefore may not generalize to other regions of the USA. Furthermore, although our data collection occurred in urban areas, we did not assess the residential location of our participants nor did we ask them about the amount of time they tended to spend in urban areas vs rural areas or tribal lands. Thus, our sample likely included a wide range of emerging adults, parents, and practitioners with varying degrees of "urban-ness," including those who had recently arrived in urban areas, those who were from multigenerational urban AI/AN families, and those who still spent time on reservations and tribal lands. Future work should investigate this heterogeneity and its effects on AI/AN identity and substance use.

Furthermore, the qualitative nature of our data and analysis, as well as our small sample size, inherently prohibits us from investigating other components of heterogeneity in our sample — such as age and gender — and their association with identity and substance use. Future work with larger samples that take a quantitative or mixed method approach would be helpful to determine the degree to which such heterogeneity has implications for designing interventions to mitigate substance use among urban AI/AN emerging adults. Also, even though we used the same protocol for all focus groups, we cannot infer that those themes which did not come up in some of the focus groups mean that these themes were not important to some of the members of that focus group. Similarly, if a topic was discussed in a group, it is impossible to determine how many of the participants endorsed the sentiment, due to the interaction among group members during the discussion. Determining the true prevalence rate of endorsement of themes in this population would require other methods, such as a survey with an independent sample. Thus, counts of themes across focus groups provide a rough guide to potential prevalence only.

Despite limitations, this study takes an important first step in understanding how urban AI/AN emerging adults think about their identity, highlighting both the challenges for substance use that can be generated within AI/AN family and cultural contexts, and the strong protective role that culture can play for this population. Overall, findings indicate specific "binding pathways" in which AI/AN culture inculcates healthy values, beliefs, and practices that have been proven by the existing evidence base to increase resilience against the numerous life course challenges that can occur for this population during this crucial developmental period.

Declarations

Ethics Approval All research procedures were reviewed by the RAND Corporation's Institutional Review Board (Human Subjects Protection Committee/HSPC): Approval #2019–0477.

Conflict of Interest The authors declare no competing interests.

Consent to Participate All individuals involved in this research provided informed consent for participation.

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