

Competencies for Counseling the Multiracial Population

Multi-Racial/Ethnic Counseling Concerns (MRECC) Interest Network of the American Counseling Association Taskforce

Co-Chairs/Authors: Kelley R. Kenney, Mark E. Kenney

Taskforce Members/Authors:

Susan B. Alvarado, Amanda L. Baden, Leah Brew, Stuart Chen-Hayes, Cheryl L. Crippen,

Hank L. Harris, Richard C. Henriksen, Jr., Krista M. Malott, Derrick A. Paladino,

Mark L. Pope, Carmen F. Salazar, Anneliese A. Singh*

In memory of Dr. Bea Wehrly for her tireless work and advocacy. The publication of her book, Counseling Interracial Individuals and Families, by the American Counseling Association in 1996 was a major part of this journey.

*Authors are listed alphabetically

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Competencies for Counseling the Multiracial Population: Couples, Families, and Individuals; and Transracial Adoptees and Families

The Multiracial/Ethnic Counseling Concerns (MRECC) Interest Network of the American Counseling Association has developed the following competencies in order to promote the development of sound professional counseling practices to competently and effectively attend to the diverse needs of the multiple heritage population.

Section I: Overview

This document is intended to provide counseling competencies for working with and advocating for members of the multiracial population including interracial couples, multiracial families, and multiracial individuals, and transracial adoptees and families. The document is intended for use by counselors and other helping professionals; individuals who educate, train, and/or supervise current and future counseling and other helping professionals; as well as individuals who may conduct research and/or other professional activities with members of the multiracial population. To this end, the goal is for these competencies to serve as a resource and provide a framework for how counseling and other helping professionals can competently and effectively work with and advocate for members of the multiracial population.

Acronyms

Several acronyms will be presented and used in this document. The first, *MRECC* (Multiracial/Multiethnic Counseling Concerns) is the name of the group that has been working to raise awareness about interracial couples, multiracial families, and multiracial individuals, and transracial adoptees and families in the counseling and other helping professions since the mid-1990s. Further information about this group follows. The term *multiracial population* is used to refer to the communities commonly acknowledged by and included under this broad umbrella,

interracial couples, multiracial families, and multiracial individuals, and transracial adoptees and families. We use *LGBT* (Lesbian, Gay, Bisexual, and Transgender) to address the experiences of interracial couples and families of these identities. *LGBQQIA* (Lesbian, Gay, Bisexual, Queer, Questioning, Intersex, and Ally) is used to address the experiences of multiracial individuals through the lens of other possible identities.

Several adoption-specific acronyms are offered for clarification as follows. We use *TRA* (Transracial Adoption) when we are referring to the practice of transracial adoption (which can include international adoptions, also referred to as transnational adoptions or transcultural adoptions). When using *TRAs* (Transracial Adoptees), we are referring to transracial adoptees (again, this includes international adoptees who are also transracially adopted). Within the adoption community and literature, a common term used to refer to adoption stakeholders is the Adoption Triad, which refers to adoptees, adoptive parents, and birth parents. However, for most of this section of the document, we chose to use a more inclusive term, Transracial Adoption Kinship Network (TrAKN), to include extended family within adoptions and foster families and to include those impacted by transracial and international adoption.

Multiracial/Multiethnic Counseling Concerns Interest Network (*MRECC*)

The document is presented by members of the Multiracial/Multiethnic Counseling Concerns Interest Network of the American Counseling Association (*MRECC*). Prior to the mid-1980s to mid-1990s, with the exception of some publications (Brandell, 1988; Herring, 1992, 1995; Ibrahim & Schroeder, 1992; Kerwin & Ponterotto, 1995; Nishimura, 1995; Poston, 1990; Root, 1990, 1994; Sebring, 1985; Solsberry, 1994; Wardle, 1991, 1992) there were few efforts within the counseling and other helping professions to address the needs of members of the multiracial population. *MRECC* began in 1996 as a group of counseling professionals

interested in raising the profession's awareness of the issues and concerns of the multiracial population; it functioned as a Sub-Committee of the Professional Standards Committee of the Association for Multicultural Counseling and Development (AMCD). In 1997 the group functioned as an entity of AMCD's Interdivisional Collaboration Committee. This position allowed the group to broaden its focus and expand its impact by bringing the issues and concerns of the multiracial population to the awareness of the various divisions of the American Counseling Association (ACA). In 1998 as a result of the recognition MRECC had begun to achieve and with support from then ACA President, Dr. Courtland Lee steps were taken for the group to pursue status as a special interest network within ACA. MRECC continued its work promoting awareness of the multiracial population within ACA from 1998 to 2001, when with support from then president Dr. Judy Lewis the group drafted a proposal to become an Interest Network. In 2002, during the presidency of Dr. Jane Goodman, ACA's Governing Council voted to approve four Interest Networks. MRECC was one of those four.

MRECC is comprised of many members who are themselves part of the multiracial population or are allies of the population. Hence, they come from a vast array of identities, backgrounds, worldviews, and lived experiences. Over the course of MRECC's 19 years of existence the collective efforts of its members have included books, book chapters, articles, monographs, and training videos; state, national and international conference presentations; training workshops; graduate course curricula developed to focus on multiracial concerns; as well as advocacy and collaborative activities with other organizations and the multiracial community. This competencies document is meant to build on these efforts and further MRECC's contribution to raising the awareness, knowledge, and skill levels of members of the

counseling and other helping professions as they work with and advocate for increasing numbers of multiracial couples, individuals, and families.

The next two sections comprise the major contribution this document is intended to provide. Section II addresses that segment of the multiracial population that includes interracial couples, multiracial families, and individuals. Section III addresses that segment of the population that includes transracial adoptees and families. Both sections provide an overview of the population that includes (a) the contextual framework used to inform and construct the competencies specific to the population; (b) the language and definitions specific to the population; (c) current issues and stances; and (d) the competencies specific to the population. The actual competencies are further organized to address the groups included within each segment of the population. Hence, in Section II the competencies are organized as follows:

- A. Competencies for Working with Interracial Couples and Multiracial Families
- B. Competencies for Working with Multiracial Individuals

In Section III the competencies are organized as follows:

Competencies for Working with Transracial Adoptees and the Transracial Adoption Kinship Network

The competencies are delineated according to the 2009 Council for Accreditation of Counseling and Related Educational Programs (CACREP) Standards eight common core areas, as follows:

- A. Human Growth and Development
- B. Social and Cultural Diversity
- C. Helping Relationships
- D. Group Work
- E. Career Development

F. Assessment

G. Research and Program Evaluation

H. Professional Orientation and Ethical Practice

References and resources used to construct the competencies and deemed as beneficial to those who may utilize this document are provided at the end of the document, followed by a complete glossary of terms utilized in the document and in various oral and written discussions about the mixed race and transracial adoption experience.

Section II: Interracial Couples, Multiracial Families, and Multiracial Individuals

Since the repeal of anti-miscegenation laws in the United States brought about by the Supreme Court's landmark *Loving v. Virginia* decision in 1967 there has been a dramatic increase in interracial marriages and partnerships. Subsequently, there has also been a dramatic increase in the rate of births of children from these marriages and partnerships. Data from the 2010 U.S. Census revealed that 8.4% of all marriages and 15% of all new marriages in the U.S. were interracial (Wang, 2012). In addition, nine million individuals or 2.9% of the total U.S. population were identified as being of two or more socially constructed racial categories, with over 4.2 million of these individuals being under the age of 18 (U.S. Census Bureau, 2012). Despite these dramatic increases, multiracial couples and individuals continue to confront environmental systems that are biased and to deal with stressors associated with negative and hostile encounters rooted in racism and other forms of oppression.

Micro, meso, and macro environmental factors figure prominently in the daily experiences of members of the multiracial population and over the course of the lifespan. The impact of these factors are best observed in Root's (2002) Ecological Framework for Understanding Multiracial Identity, a model designed to provide a structure for understanding the racial identity

development of multiracial individuals (Root, 2003). The model is borne out of the sociological constructs of interaction and includes the variables gender; regional history of race relations; inherited influences, encompassing languages spoken at home, parent's identity, nativity, extended family, names, home values, sexual orientation, and phenotype; traits, encompassing temperament, social skills, talents, and coping skills; social interaction with community, encompassing home, school/work, community, friends, outside the community; and identity, which encompasses and includes designated or chosen racial and ethnic identity (Root, 2003). These factors and variables alone and in combination have considerable impact and influence on multiracial identity development, and are important to understanding multiracial individuals in the context of the systems and environments in which they exist. The model is not only useful for understanding the variables impacting the lived experiences of multiracial individuals, but also has implications for understanding the issues that impact the lived experiences of multiracial couples and their families as they navigate the various systems of their environment. To this end, the model informs and provides the context out of which the competencies in this document were constructed.

It is important for counselors and other helping professionals to understand that for members of the multiracial population, their status as mixed race couples, families, or individuals may not be the impetus when presenting for services. Rather they may be seeking services to deal with the on-going stressors of navigating challenging environmental systems. Hence, the competencies provide guidelines for working with multiracial couples, families, and individuals that address these challenges.

Language and Definitions

The language utilized in referring to interracial couples, multiracial families, and multiracial individuals in these competencies speak to the most commonly accepted, current, and inclusive language utilized within the community, as well as in the professional and scholarly literature. Terms that have been proposed and used in discussing this segment of the multiracial population include *biracial*, *mixed race*, *multiracial*, *multicultural*, and *mixed heritage* (Aspinall, 2009; Henriksen & Paladino, 2009; Jackson, Yoo, Guevarra, & Harrington, 2012; Root & Kelley, 2003). The terms *interracial* and *multiracial* have been the most commonly utilized terms in recent decades, with the term *multiracial* being the most frequently used due to its acknowledgement of the possibility of two or more racial backgrounds (Root & Kelley, 2003; Henriksen & Paladino, 2009). However, there has been a resurgence in the use of the term *mixed race* in the past ten years by members of the community consisting of scholars, activists, and artists who have been coming together to examine, address, and engage in critical discourse around salient issues and concerns (CMRS, 2013). Finally, the term *multiple heritage*, has been posed and utilized (Henriksen & Paladino, 2009) as it acknowledges the intersectionality and multiple dimensions of identity including, race and culture that influence the worldview and lived experiences of the population (Henriksen & Paladino, 2009). The term *multiple heritage* is consistent with the authors' thinking and decision to use the Root (2002) Ecological Framework as the theoretical underpinning for the construction of these competencies. Hence, *multiple heritage* is used synonymously with *interracial* and *multiracial* throughout these competencies.

Current Issues and Stances

As previously mentioned, this document is intended to be a resource for counseling and other helping professionals as they educate themselves about the needs of increasing number of

multiracial couples, families, and individuals. In addition to gaining knowledge however, the authors believe it is of even greater importance for counseling and other helping professionals to be aware of any assumptions or biased attitudes and beliefs they may hold about these couples, families, and individuals. Counselors and other helping professionals are not immune to and often hold the same stereotypes and misinformation about groups of people as the general populace. However, they have a ethical and legal obligation to examine their views and areas of bias, ignorance, and inexperience, and to engage in on-going self-monitoring. By failing to do so, professionals impede the counseling process and run the risk of doing harm to their clients. This is spelled out and addressed in the ethical codes of ACA, the American Psychological Association (APA), and the National Association of Social Workers (NASW), as well as in the ethical guidelines and standards of the American College Personnel Association (ACPA) and the National Association of Student Personnel Administrators (NASPA).

A common stereotype or misperception about multiracial couples and their respective families is that one of the partners and parents is Black and the other is White. Multiple heritage couples, families, and individuals are an extremely diverse population. Professionals interested in gaining more information about the demographics of this growing population need only examine census reports of the past two decades to learn about the diversity that exists within this population. In addition, in the last two decades a wealth of knowledge about the multiracial population has emerged from the professional and scholarly literature in the fields of counseling, psychology, social work, student affairs and higher education. While this information has informed our thinking with regard to techniques, interventions, and best practices for a host of professional services, there are limitations with respect to the scholarly literature available on particular racial, ethnic, and cultural compositions of couples, families, and individuals. For

example, there is a significant body of literature that addresses couples and families in which one of the partners/parents is White, but a dearth in the literature examining families in which both partners/parents are of color. Finally, as with some other populations, the limits of research due to bias, lack of access to information, and lack of normative information must be acknowledged.

A. Competencies for Working with Interracial Couples and Multiracial Families

Human Growth and Development

Culturally Competent Counselors will:

- Understand that the transitions across the life span for each individual within the couple may impact each partner's personal cultural worldview and interpersonal communications.
- Understand that biological, familial, and psychosocial factors contribute to each individual within the couple's unique cultural assumptions, which may define their roles within the relationship.
- Recognize that each couple will develop its own process of negotiating cultural differences and that this process is dynamic based upon stage of development both as individuals and as a couple.
- Appreciate how each generation (such as the Silent Generation versus Millennial) and geographic location (country, region, state/province, urban, suburban, rural or neighborhood) has varying degrees of acceptance of interracial, interethnic, diverse sexual orientations and gender identity/expression and contextualize this understanding when working with couples.
- Understand that the specific gender and or racial combination of the couple or family (Black/White, Native American/White, Asian/Hispanic) has varying degrees of societal acceptance.
- Understand that interracial, interethnic, and diverse sexual orientation and gender identity expression couples have the resiliency to live fully functioning, healthy, lives despite experience with prejudice, discrimination, oppression and/or privilege.
- Recognize, acknowledge, and understand the intersecting identities for each partner (e.g. social class, religion/spirituality, gender identity and expression, diverse sexual orientation, race, ethnicity, culture [including level of acculturation], nationality, ability, immigration status), the developmental tasks for each partner, as well as the formation and integration of each partner's multiple identity statuses.
- Understand how each partner's family of origin's reaction to either partner's racial ethnic and/or diverse sexual orientations and gender identity/expression differences could impact their relationship with their families and with each other. Process this experience to facilitate the couple's creation of a mutual healing direction.

- Understand that each partner may have different experiences with Racial Minority Identity, White Racial Identity, Multiracial Identity Development, and/or Lesbian/Gay/Bisexual Identity Development.
- Understand that identity is a fluid process and how this process impacts the relationship
- Recognize how prejudicial attitudes, discrimination, and pressure to stay with one's particular race or ethnic group may affect developmental decisions made by interracial/interethnic families and couples regardless of their efforts to be resilient.

Social and Cultural Diversity

Culturally Competent Counselors will:

Counselor Awareness:

- Understand their personal cultures and how these cultures might impact the assumptions they have about their clients' culture and intercultural status as a couple/family.
- Acknowledge and recognize when the counselor's culture may impact the way the couple perceives the counselor as safe or unsafe in establishing a therapeutic relationship.
- Identify the phase of cultural identity development of each member of the couple or family and make this an explicit part of the counseling process when needed.
- Acknowledge that couples and families are existing within a dominant U.S. cultural worldview value set that may negatively impact differences in values within the couple.
- Understand that racism and heterosexism still exist and that interracial/interethnic couples may experience prejudice and discrimination from outside their relationship along with their own internalized messages.
- Understand the ways in which oppression, prejudice and discrimination impact a couple's relationship.
- Familiarize themselves with the cultures of each member of the couple and family through research and by asking the clients about their cultures and each of their unique processes with acculturating into the dominant U.S. cultural worldview perspective.
- Acknowledge that racism, sexism, heterosexism, classism, and religious oppression are worldviews as well as value systems that may undermine healthy functioning of a couple or family.

Couples and Family relationship within the context of differences:

- Understand that a couple with two different ethnic or racial identities could be experiencing the world from three cultural views: the ethnically or racially different worldviews of each partner along with navigating the dominant U.S. cultural worldview.
- Understand important cultural constructs (e.g., individualism, collectivism, high versus low context communication, *familisimo*, filial piety, *machismo*, *Marianismo*, stereotypical gender roles, and hierarchical versus egalitarian power structures) and how these cultural assumptions impact relationships that are interethnic, interracial, diverse sexual orientations and/or gender identity/expressions.

- Appreciate that culture goes beyond race and ethnicity and includes factors such as gender, religion/spirituality, diverse sexual orientations and gender identity/expressions, social class, (dis)ability and other areas that impact their cultural assumptions.
- Understand the importance of the potential differences of experiences based upon the various racial or ethnic combinations of couples with a special focus on two persons of color and Lesbian, Gay, Bisexual and Transgender relationships.
- Appreciate the diversity of intercultural family systems, and the extent to which each member ascribes different importance and meaning to cultural diversity within the family.

Couples and Family relationship within the context of similarities:

- Understand that conflicts in relationships may or may not be related to racial, ethnic, or other cultural differences.
- Recognize and explore cultural value similarities in the relationship in order to strengthen the relationship.

Helping Relationships

Culturally Competent Counselors will:

- Maintain an orientation of wellness and appreciate that each couple or family has the right to negotiate cultural differences in its own way without imposing any agenda on the couple or family.
- Seek consultation or supervision to ensure that their own biases or knowledge deficits about other races, ethnicities, diverse sexual orientations and gender identity/expressions do not negatively affect the helping relationship.
- Use models of counseling that are culturally appropriate for and sensitive to the couple's cultures.
- Maintain a therapeutic balance between an understanding of the potential challenges and the sources of opportunities for intercultural couples and families.
- Be aware of misconceptions and myths of the various cultures with which each partner identifies.
- Be familiar with resources (e.g. books, websites) available to intercultural couples and families.

Group Work

Culturally Competent Counselors will:

- Understand that different races and ethnicities have different styles of communication (e.g., high context vs. low-context) that may be perceived as offensive, misunderstood, or misinterpreted, and which therefore might need to be discussed as part of the group process.
- Recognize that group members may be at different stages of cultural identity development and may harbor prejudice with members from other racial or ethnic groups.

- Intervene actively when either overt or covert disapproval of one member threatens member safety, group cohesion, and integrity.
- Utilize a group leadership style and facilitate a group process that is culturally sensitive and appropriate for the specific racial and ethnic make-up of the group members
- Intervene as a cultural mediator to decode and reframe conflicts, comments, or behaviors through a cultural lens.
- Assess each couple to make sure the partners are appropriate for each particular group and for group work.
- Be alert that power and privilege differentials will be experienced within and between couples in group work.
- Acknowledge that there may be appropriate times to create a separate group for Lesbian, Gay, Bisexual, and Transgender couples.
- Understand how intersecting identities and oppressions affect group members' lived experiences and may affect group process, member roles, and experiences in the group.

Career Development

Culturally Competent Counselors will:

- Counter the occupational stereotypes that restrict the career development and decision making of interracial, interethnic, diverse sexual orientations and gender identity/expression couples.
- Help couples to make career choices that facilitate both identity formation and job satisfaction.
- Appreciate the interrelationship between work, family, and other life roles and how being in an interracial, interethnic, diverse sexual orientations and gender identity/expression couple may intersect with gender role expectations.
- Understand how experiences of discrimination, oppression, prejudice and/or violence in the workplace may create additional inter/intrapersonal barriers between partners especially when there is a lack of awareness regarding “privileged statuses ” and/or when other intersecting identities contribute to one or both partners' experiences as (a) marginalized individual(s).
- Be aware that the racial or ethnic make-up of a couple could be a challenging factor in terms of work relocation (by either choice or force transfer) because of the regional racial/ethnic history of the geographic location in which this new work site resides.
- Understand that cultural worldview (deep culture) differences could exist for a couple regarding the saliency of each partner's tendency to make career decisions through one's lenses of individualism or collectivism.

Assessment

Culturally Competent Counselors will:

- Use instruments with couples that are culturally appropriate and culturally sensitive to both individuals within the couple.

- Use culturally appropriate assessment instruments to understand the role of culture in relationship dynamics, patterns of communication, and to facilitate dialogue with intercultural couples and families.
- Conduct a family cultural assessment to situate the broader cultural context of the couple and family, and to understand the transmission and blending of cultural values through patterns of migration and partnerships.
- Assess couples using a variety of measures beyond assessment instruments in order to attend to all cultural aspects of the couple.
- Assess the stage of cultural transition and strategies of adjustment and decision-making among intercultural couples and families.
- Appreciate that the individuals within the couple each have their own culture that are simply differences and are not correct or incorrect when making assessments.
- Appreciate that the way the partners in the couple navigate their differences is the choice of the couple and may not be congruent with dominant U. S. cultural worldview.

Research and Program Evaluation

Culturally Competent Counselors will:

- When conducting research, formulate questions that include interracial, interethnic, and diverse sexual orientations and gender identity/expression couples and include these couples in research.
- Consider the challenges involved in conducting research with interracial, interethnic, or diverse sexual orientations and gender identity/expression couples.
- Recognize that interracial, interethnic, and diverse sexual orientation and gender identity/expression couples may co-construct their relationships in ways that may not fit existing stereotypes of how couples and families are currently understood; avoid attempts to fit these couples and families into existing phenomenological views.
- When conducting literature reviews, be cognizant that much of the research may have heterosexist, cisgender, or racial or ethnic biases that may negatively influence the direction of the research.
- When conducting research, address their own lack of awareness of the sociocultural and historical difference between diverse sexual orientation and gender identity/expression communities and the heterosexual community within the multiracial population.
- Thoughtfully select the study participants to be inclusive (e.g., avoid focusing on White and person of color couples only, or upper middle class, or heterosexual, or cisgender, or highly educated partners and/or families).
- Include measures of study participants' levels of acculturation or cultural identity development.
- Include discussions to carefully prevent the reader from over-stereotyping based upon study results.
- Help readers avoid generalizing study results from one nationality to another by including participants' national origin identity.

- Help readers avoid overgeneralizing from a regional experience to a national experience by including the uniqueness of regional geography and participants' ethnic/racial identity histories.
- Acknowledge the methodological limitations when generalizing quantitative research with interracial, interethnic, or diverse sexual orientations and gender identity expression couples.
- Be aware that the counseling field has had a history of pathologizing interracial, interethnic, and diverse sexual orientations and gender identity/expression couples.
- Be current and well informed on the most recent scholarship with interracial, interethnic, and diverse sexual orientations and gender identity/expression couples.

Professional Orientation and Ethical Practice

Culturally Competent Counselors will:

- Know the history of the helping profession including significant factors and events that have compromised interracial, interethnic, and diverse sexual orientations and gender identity/expression couples (i.e., Miscegenation laws, *Loving v Virginia*, 1967 U.S. Supreme Court decision; and the Defense of Marriage Act, *United States v Windsor*, 2013 U.S. Supreme Court decision).
- Familiarize themselves with the needs and counseling issues of interracial, interethnic, and diverse sexual orientations and gender identity/expression couples and families and use non-stigmatizing and affirming mental health, educational, and community resources.
- Recognize the importance of educating professionals, students, supervisees, and consumers about interracial, interethnic, and diverse sexual orientations and gender identity/expression couples' issues.
- Recognize and strategically confront misinformation and biases about interracial, interethnic, and diverse sexual orientations and gender identity/expression couples when interacting with other professionals, students, supervisees and consumers.
- Use professional development opportunities to enhance their attitudes, knowledge, and skills specific to counseling interracial, interethnic, and/or diverse sexual orientations and gender identity/expression couples and families

B. Competencies for Working with Multiracial Individuals

Human Growth and Development

Culturally Competent Counselors will:

- Understand that multiracial individuals may identify in different ways based on their connection to and knowledge and understanding about their identity (e.g. biracial, multiracial, multi-ethnic, multiple heritage, interracial, monoracial).
- Recognize that developmental tasks of multiracial children, adolescents, adults and older adults may be influenced by experiences of oppression and discrimination.
- Demonstrate understanding of the many ways multiracial individuals self-identify; work to validate those identities.

- Notice that monoracial identity development models do not account for individuals living within multiple racial, ethnic, or cultural identities.
- Recognize that the racial and ethnic identities of multiracial individuals intersect with other identities of sexual orientation, gender identity, class status, disability status, and other social identity groups.
- Understand that the unique make-up of multiracial individuals, their surrounding environment, and their chronological and developmental age will affect how they experience personal identity development.
- Seek opportunities to gain insight into the various life experiences of multiracial individuals.
- Affirm the life experiences of multiracial individuals and seek opportunities to gain further insights into how those experiences aid the identity development of multiple heritage individuals.
- Refrain from labeling the client's multiracial identity as the main reason for attending counseling or for the presenting problem, unless specified by the client, until understanding the client's presenting issue.
- Understand the systemic (family), political, psychosocial, biological (e.g., phenotype) and ecological influences (e.g., family, community, school settings, work settings) that shape the multiracial individual's identity.
- Recognize how stigma, prejudice, discrimination, and oppression by family, community, and society can affect developmental decisions and milestones in the lives of multiracial individuals.
- Understand that historical and sociopolitical events will be uniquely experienced by multiracial individuals depending on their multiple heritage backgrounds or identities, chronological age, development, and prior direct or vicarious experiences.
- Understand that multiracial identity development is complex, personal and unique to each individual with every outcome being correct for that individual.
- Understand that the multiracial individual does not necessarily share a common experience or racial, ethnic, and cultural background with his or her family or with other multiracial individuals due to the complexity of the multiracial make-up.
- Understand that multiracial individuals do not look alike even if they share the same cultural and ethnic make-up. Phenotype varies from individual to individual and this may influence variation in individuals' identity development and personal identity preference.

Social and Cultural Diversity

Culturally Competent Counselors will:

- Learn the identity development models for the biracial, multiracial, and (multiple heritage) population and gain knowledge and skills for applying those models when working with multiracial individuals.
- Become familiar with general themes and salient concerns of multiracial people and communities (e.g., uniqueness, acceptance and belonging, physical appearance, identity, sexuality, self-esteem, visibility).

- Understand that the multiracial population continues to be a hidden population that is often excluded from many discussions of racial and ethnic issues due to multiple heritage individuals' lack of identity with any one racial or ethnic group.
- Understand the importance of using appropriate language when referring to multiracial individuals, paying attention to the changing terms and definitions used to refer to multiracial individuals.
- Understand the importance of using race and cultural terminology that connects with the individual's perception of his or her identity.
- Understand and appreciate that religious and spiritual values, or atheist or agnostic identity, of multiracial individuals may influence coping and well-being.
- Understand the historical impact of the "one-drop rule," anti miscegenation, and labeling in the U.S. Census on multiracial individuals
- Understand sociopolitical influences (e.g., history of anti-miscegenation laws, societal stereotypes and biases) on multiracial individuals and communities.
- Be familiar with the ACA competencies regarding multiculturalism, social justice, advocacy, transgender, and LGBTQIA people, and use these competencies as a lens to develop advocacy and empowerment interventions with multiracial individuals.

Helping Relationships

Competent Counselors will:

- Understand that multiracial identity may not be the reason for seeking counseling
- Communicate counselor understanding and valuing of multiracial clients' backgrounds and experiences.
- Refrain from assumptions that counselor experiences of multiracial backgrounds will be similar to a client's experiences of multiracial backgrounds.
- Assess and collaboratively identify client strengths and challenges related to multiracial backgrounds if identity is the focus of counseling.
- Assess the degree to which clients experience resilience and oppression related to their multiracial backgrounds.
- Advocate for multiracial clients when there are institutional and/or systemic barriers impacting the client.
- Understand that the counselor's cultural identity, cultural expression, and beliefs about multiracial individuals are relevant to the helping relationship, and these identities and concepts influence the counseling relationship and process.
- Recognize that if multiple heritage identity development concerns are part of the counseling process, counselors acknowledge experience, training and expertise in working with multiracial individuals at the initial visit while discussing informed consent. Counselors seek supervision and consultation as necessary.
- Recognize and acknowledge that, historically, counseling and other helping professions have compounded the discrimination of multiracial individuals by being insensitive, inattentive, uninformed, and inadequately trained and supervised to provide culturally sensitive and proficient services to multiracial individuals.

- Facilitate an open discussion to identify the effects of prejudice and discrimination experienced by multiracial individuals and help them overcome potential negative beliefs about themselves and their multiracial or multiple heritage identities.
- Work collaboratively with the client to explore the client's ecological world for support and resistance if multiracial identity is the reason for seeking counseling.
- Understand that client chronological and developmental age may shape counseling focus, direction, and theoretical approach. If multiracial identity development concerns are the reason for seeking counseling, encourage the client to freely explore all parts of his or her identity through multiple means (e.g. talk therapy, bibliotherapy, genealogy work, family counseling, internet exploration).

Group Work

Culturally Competent Counselors will:

- Be aware of their experiences of multiracial people and how these experiences influence their cultural awareness, skills, and ability as a group leader to provide a culturally congruent and affirming group experience for multiple heritage group members.
- Understand the unique experiences of race/ethnicity that multiracial individuals may have had in society that will affect them as group members.
- Provide explicit support as a group leader for multiracial individuals.
- Refrain from assumptions that group members are monoracial or monoethnic.
- Be familiar with the ways that multiracial individuals may define wellness, health, and other mental health constructs.
- Provide opportunities for multiracial group members to identify themselves any way they select and know that individuals with similar cultural, racial, and ethnic backgrounds may choose to identify differently.
- Be aware of the unique status of an individual who may be the only multiracial group member and create a safe group environment in which that person can share his or her experiences. It is important to ensure that appropriate and affirmative language is used to refer to multiracial individuals.
- Be aware that general group theories have not been normed on the multiracial population
- Recognize that although group support can be very helpful for multiracial individuals, peer pressure from group members to conform to specific racial and/or ethnic identities may emerge within the group and should be addressed.
- Seek consultation and supervision to ensure that the group leader's potential biases and knowledge deficits do not negatively affect group dynamics for the multiracial individual.
- Recognize that multiracial individuals in groups may be at different identity development levels and embrace different viewpoints about what it means to be multiracial.
- Embrace the idea that groups can be a microcosm of society, which may influence the group dynamics and a multiracial individual's presence as a group member depending on how the individual has been affected by society.
- Understand societal influence on client experiences of multiracial identity and provide safe and inviting group spaces that allow openness regardless of group type (e.g., psychoeducation, group task, counseling, psychotherapy, brief)

Career Development

Culturally Competent Counselors will:

- Assist multiracial individuals with exploring career choices that best facilitate identity formation and job satisfaction.
- Acknowledge the potential problems associated with career assessment instruments that have not been normed for the multiracial population.
- Link clients with racially and culturally open individuals who can serve as mentors and connect them with resources that increase their awareness of career options.
- Be aware that many career and lifestyle development theories were not developed with multiracial individuals in mind, nor have many been normed on these groups.
- Conduct a thorough cultural assessment when assessing career and lifestyle development with multiracial individuals.
- Understand that the ways multiracial individuals are racially and ethnically viewed by co-workers may affect their work satisfaction and comfort in their environment.
- Understand how multiracial individuals' physical appearance can affect their career and work choices.
- Understand that physical appearance can affect others' perceptions of multiracial individuals' career and work choices.

Assessment

Culturally Competent Counselors will:

- Understand how racism and other oppressive systems influence the use of assessment with multiracial individuals, and identify ways to address inequities when using assessments with this population.
- Recognize that multiracial identity and expression vary from one individual to the next, and that this natural variation should not be interpreted negatively.
- Understand that a goal of counseling with multiracial individuals is to provide a comprehensive psychosocial mental health assessment that should encompass all life areas including: race, ethnicity, religion, language, sexual orientation, and all other cultural factors that affect identity development of multiracial individuals.
- Have knowledge of how single race/ethnicity identification is promoted and maintained within society, and how these dynamics influence the assessment of multiracial individuals.
- Apply ethical standards when utilizing assessment tools such as tests, measurements, and the current edition of the DSM, and recognize that these assessments that may not have been normed with multiracial individuals.
- Recognize that when utilizing race and cultural assessments not all have been normed with multiracial individuals.
- Understand that there has been limited work on creating instruments normed with multiracial individuals.

- Recognize that intake, screening, assessment and other demographic forms have historically grouped the multiracial identity into an “other” category or asked for the client to “check one box” when identifying race.

Research and Program Evaluation

Culturally Competent Counselors will:

- Understand that research with multiracial individuals is not free of bias on the part of the researcher. Explicitly identify any researcher bias about multiracial (multiple heritage) individuals, couples, and families in any study activities, publications, or presentations that will incorrectly skew researcher methodologies and/ or findings.
- Refrain from comparing multiracial individuals to individuals of monoracial status.
- Be aware of existing and current multiracial research and literature regarding social and emotional wellbeing and challenges, identity formation, resilience and coping with discrimination, and issues involving medical treatment options.
- Understand the evolution of multiracial research when designing a current study focusing on this population.
- Consider limitations of existing literature and existing research methods regarding multiracial individuals such as sampling, confidentiality, data collection, measurement, and generalizability.
- Be aware of the gaps in literature and research regarding the experiences of counseling multiracial individuals and related counseling needs and concerns.
- Consider how critical consumption of research may assist with understanding needs, improving quality of life, and enhancing counseling effectiveness for multiracial individuals.
- Make multiracial-focused research available to the multiple heritage community by making the results and implications of research accessible for the community, practitioners, and academic community. Conduct research activities that will enhance the identity development of multiracial individuals.

Professional Orientation and Ethical Practice

Culturally Competent Counselors will:

- Acknowledge that although a comprehensive understanding of all issues and concerns faced by multiracial (multiple heritage) individuals may not be possible, it remains important to know where to access affirmative information about and resources for this population.
- Seek consultation and/or supervision to ensure that personal biases do not negatively affect the client-counselor relationship or the counseling outcomes of the multiracial individual.
- Seek professional development opportunities to enhance attitudes, knowledge, and counseling skills related to working with multiracial individuals.
- Support a public dialogue that affirms multiracial identity expression.

- Provide advocacy efforts at the micro, meso, and macro levels to develop consciousness-raising and public awareness of the multiracial population's concerns, history, sociopolitical influences, resilience, and strengths.
- Understand that the ACA Ethics Code and related standards (e.g., cultural competence, nonmaleficence, integrity, justice) guide counseling work with multiracial individuals and communities.

Section III: Transracial Adoption

The practice of placing children into adoptive families across racial and often cultural lines has been utilized in the U. S. for over 60 years. Sixty-four percent of Americans reported being affected by adoption via personal experience, familial relationships, or friendships (Evan B. Donaldson Adoption Institute, 2002). Recent estimates suggest 84% of all international adoptions are transracial (Vandivere, Malm, & Radcl, 2009) and that at least 40% of all adoptions in the U.S. are transracial (Evan B. Donaldson Adoption Institute, 2011). Despite an increase in social and cultural references to transracial adoption in society, the practice of transracial adoption in particular and adoption in general continues to carry a social stigma (Wegar, 2000), with a well-documented history of mental health concerns (Miller et al., 2000).

Language and Definitions

Those affected by transracial adoption have been referred to as the *adoption triad* (adopted persons, adoptive parents, and birth parents). However, this term fails to incorporate all stakeholders in transracial adoption. We use the term *transracial adoption kinship network* (TrAKN) throughout this document, encompassing the adopted persons, adoptive parents, birth parents, foster parents, grandparents, and extended family members who are affected by and live with transracial adoption. With respect to terminology, transracial adoptions are also often international (also known as transnational or intercountry adoptions) and may be transcultural as well. Within the field of adoption, the term *interracial adoption* is also used interchangeably to

refer to transracial adoption. For the purpose of this document, the term *transracial adoption* will be used throughout.

Many misconceptions and much misinformation exist about the practice of transracial adoption. In an attempt to redress such misconceptions, details related to the transracial adoptive kinship network competencies are described below, including a brief overview of the history and practice of transracial adoption.

Overview of Transracial Adoption

The histories of transracial adoption and international or intercountry adoption have distinct trajectories yet also overlapping outcomes. Essentially, international adoptions are often transracial in nature (racial ethnic differences) yet they also have the additional element of cultural and country of origin differences (Baden, Treweeke, & Ahluwalia, 2012). Clinical, developmental, and identity issues for adoptees and their families may be similar for both transracial and international adoptees, but other facets of international adoptees' historical and environmental experiences may differ due to social, political, and economic disparities between the sending and receiving countries in international adoption. Below we highlight some pivotal events that impact the experience and practice of transracial adoption.

Domestic transracial adoption. Between 1958 and 1967 under the Indian Adoption Project, domestic transracial adoptions began to be practiced wherein Native American children were removed from birth families and reservations and placed in white American homes (US Department of the Interior, 1966). In the 1960s, American children of African descent and biracial children were placed with White adoptive parents (Lee, 2003). This practice of transracial adoptive placements came under scrutiny and was highly criticized in the statement issued in 1972 by the National Association of Black Social Workers (NABSW). The NABSW

predicted negative consequences for Black children's racial identity, adjustment, and preparation for coping with racism and oppression; referred to transracial adoption as "cultural genocide;" and called for a halt on these adoptions (NABSW, 1972).

Similarly, the Indian Child Welfare Act (ICWA) of 1978 was enacted to end the forcible relinquishment and adoption of Native American children. These events had important repercussions. A preference for same-race adoptions was promoted and the beginning of a new research literature base commenced in which transracial adoptions and their outcomes were the focus of empirical investigations. Researchers focused primarily on the adoptions of Black and biracial children with African ancestry and their psychological adjustment and racial identities. In response to the overrepresentation of children of color in foster care and without permanent placements, the Multiethnic Placement Act of 1994 and the Interethnic Placement Act of 1996 were passed to prohibit agencies that received federal funding from denying or delaying placements of children based on race, national origin, or color and required agencies to develop strategies to recruit families that represented available children's racial and ethnic diversity.

The lived experiences for members of the TrAKN include multiple challenges: (a) development of varied identities (adoptive, racial, ethnic, and cultural), (b) navigation through the process of reculturation (Baden et al., 2012), (c) decision making regarding search and reunion, and (d) resolution of adoption-related stressors. Racial differences within families can further complicate the experiences for transracial adoptees and their kinship network.

International or intercountry adoption. Some of the first large scale transracial adoptions were also international adoptions following World War II and the Korean War (Brumble & Kampfe, 2011; Zamostny et al., 2003). Children orphaned or abandoned during these wars were adopted by U.S. parents who were almost exclusively White. Despite the drastic

decrease in domestic transracial adoption after 1972, international adoptions continued to be practiced where foreign born children were orphaned or abandoned due to war, poverty, social, or political problems. Major sending countries in international adoption have shifted over the years depending on the political, social, economic, and cultural events that have contributed to the need for social welfare solutions. From the 1950s to the present, South Korea has often been a major sending country. Other prominent sending countries have included Vietnam, Russia, China, and Guatemala. In 2004, the numbers of international adoptions to the U.S. reached their highest point (22,991 adoptions) but have been in rapid decline since that time due to increased regulatory oversight internationally (e.g., The Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption) as well as due to changes politically, economically, and socially in sending countries (Selman, 2012b). Despite these shifts in rates of international adoption, overall more than one million children have been adopted internationally (Selman, 2012a); almost a quarter of million were adopted between 1999 and 2013 (Bureau of Consular Affairs, U.S. Department of State, n.d.a).

The Hague Convention has been instrumental in shifting the trajectory of international adoptions. This international agreement, established in 1993 and signed by the U. S. in 1994, was not enacted by the U. S. until 2008 (Bureau of Consular Affairs, U.S. Department of State, n.d.b). The purpose of this agreement was to prevent child trafficking or abduction, to ensure placements in the best interests of children, and to find permanent homes for children when such homes are unavailable in their home countries.

The changes described above and the burgeoning ethical questions raised about international adoption placements have created an atmosphere in which critiques and questions about the practice of international adoptions contribute to the complexity of international

adoption. Disparities (e.g., cultural, political, economic, social) that exist among adoptees, adoptive parents, and birth parents are a major source of challenge in navigating adoption and the meaning adoptees make of their adoptions. Other complex aspects of international adoption include establishing and managing intercountry relationships between birth parents and adoptees (pre- and post-reunion) and incorporating the realities of international adoption history into adoptees' self-stories. All these tasks and challenges can be addressed more effectively by counselors who have attained high levels of adoption competence.

Competencies for Working with Transracial Adoptees and the Transracial Adoption Kinship Network

Human Growth and Development

Culturally Competent Counselors will:

- Have knowledge of the lifelong impact of adoption and understand that the transracial adoption kinship network (TrAKN) experiences adoption-specific tasks throughout the lifespan as described within the Adoptive Family Life Cycle (e.g., Hajal & Rosenberg, 1991).
- Understand that Adoption Related Developmental Tasks (e.g., Brodzinsky, Schechter, & Henig, 1991) may vary depending on age at placement, relinquishment factors, and adoptive parents' intentions when adopting.
- Recognize that racial, ethnic, and adoptive identity development may span throughout the individual and family's lifetime and may not parallel mainstream identity development models as a result of adoptive context, stigma, and other social factors (e.g., reculturation and ethnic/racial socialization).
- Understand that the racial differences between adoptees and their parents may result in shifting parent-child relationship dynamics around race, culture, and adoption throughout the lifespan.
- Be aware of the complex challenges that search, reunion (e.g., between birth family members and adoptees), and reunification (e.g., youth in foster care returning to biological parents) efforts, both domestic and international, can have on relationships and the developmental processes for all members of the TrAKN.
- Understand the implications of closed versus open adoption experiences on the TrAKN throughout the lifespan.
- Have knowledge of the challenges experienced by birth parents/first parents throughout their lifespan (e.g., ambiguous loss, grief, trauma) that are often unacknowledged and hidden due to the stigma of transracial adoption placement.
- Recognize that adoptive parents also have pre-adoptive histories (e.g., grief, attachment

styles, adjustment, adoption acknowledgment, racial consciousness) that impact their parenting and their adopted children's adjustment, mental health, identities, and coping skills.

- Recognize the impact of the parent-child relationship throughout the lifespan that may be due to the adoptive parents' pre-adoptive histories as they may influence their parenting and their adopted children's development.
- Recognize the pervasive stigma of adoption found across all institutions, including mental health, educational, and medical communities, manifested as a bias toward biologicalism and the over-pathologizing of members of the TrAKN.
- Recognize current and historical biases in society that ascribe greater pathology to families formed through adoption, or to birth parents choosing adoption, which can negatively affect the identity development processes of TrAKN.
- Understand that all members of the TrAKN will have unique and distinct identities and related self-descriptors, that (a) are uniquely formed and dynamic across the lifespan, (b) may be different from and similar to their adopted and nonadopted peers, and (c) may or may not reflect an affiliation with adoption or their biological race or culture.
- Promote a community network of supportive adults and peers reflecting their adoptive racial and ethnic status, to facilitate healthy and positive identity development of all related TAKN members.
- Possess understanding of one's own developmental process and status in regards to universal developmental milestones and racial and cultural identity development, including awareness of how one's own intersecting identities will affect the counseling process with TAs and members of the adoption kinship network (TrAKN).
- Commit to staying abreast of contemporary research related to the healthy identity development of all TrAKN members.

Social and Cultural Diversity

Culturally Competent Counselors will:

- Be self-aware of one's own racial and cultural identities and attitudes, beliefs, and biases toward the practice and experience of transracial adoption.
- Understand the importance of strong racial and cultural identities for transracial adoptees as providing a buffer against societal discrimination, with the ability to educate essential others (e.g., adoptive parents, teachers) of this fact.
- Understand the racial identity development process for TAs as a nonlinear process and acknowledge the broad range of identity development models, including those specific to transracial adoptive identity.
- Understand racial and ethnic discrimination within society, the damaging impact of a "color blind" attitude and a lack of racial consciousness, and their potentially negative effects on TAs and transracial families as a whole.
- Assess and strengthen racial and cultural identities of TAs, explore the impact of internalized racism and oppression, and educate parents on ways to address those issues as they impact adoptees.
- Advocate for transracial adoptees who experience racial, ethnic, or cultural

discrimination or oppression (including education of related family members and community groups).

- Recognize that TAs' strengths and resiliencies allow them to live fully functioning, healthy lives despite experiences of discrimination and oppression, and avoid the historical tendency to over-pathologize adoption and communities of color.
- Recognize the complex ways intersecting identities (e.g., adoption status, race, ethnicity, sex, class, ability, sexual identity, national origin, religious affiliation) influence the behaviors and developmental process of TAs, to engender contrasting experiences of oppression and privilege.
- Recognize the impact of racial microaggressions and adoption microaggressions experienced by transracial adoptive families and individuals.
- Explore with TAs the distinctions among the culture of adoption (e.g., shared knowledge of behaviors, language, vocabulary, experiences related to adoption), birth culture, adoptive family culture, and lived culture to support the identity development of TAs.
- Recognize the importance of TAs' engagement in reculturative activities (i.e., immersion, education, and experience, to reclaim aspects of birth culture) in the process of racial, cultural, and adoptive identity development.

Helping Relationships

Culturally Competent Counselors will:

- Recognize their own status within the adoption community (i.e., adoptive person, adoptive parent, nonadoptive individual) and how that may impact the counseling process (e.g., transference and countertransference).
- Ensure that all clinical-related paperwork and intake processes provide transracial adoption-related language/options that are inclusive, including for same-sex parents, and affirming of adoption.
- Broach racial, cultural, and adoption topics (Day-Vines et al., 2007) to effectively facilitating the racial and cultural identity development of the TrAKN and efficacious parenting of the TrAKN.
- Seek continuing education and current knowledge in contemporary evidenced-based theories, practices, and laws/policies related to the TrAKN.
- Seek consultation/supervision to address biases or to supplement any knowledge deficit in TrAKN best practices.
- Utilize a strengths-based approach with TrAKN members experiencing typical transracial adoption challenges rather than a deficit or pathology-based model.
- Be skilled in attachment-based therapies (e.g., Theraplay, Filial Family Therapy, Multidimensional Family Therapy) and be able to form a working alliance with TrAKN members.
- Form therapeutic alliances with key family members within the TrAKN to strengthen collaborations within counseling relationships.
- Throughout the counseling relationship, recognize the fluctuating salience of both adoption-related and race-related concerns in TrAKN members.
- Collaborating within the counseling relationship to apply the model of oppression, power,

and privilege and to acknowledge adoption stigma when working with TrAKN members.

- Understanding the risks and benefits of reunion, including international reunions, and subsequent reunion maintenance issues for all members of the TrAKN.

Group Work

Culturally Competent Counselors will:

- Recognize the benefits of group services (distinct from pre-adoption educational courses), including counseling, therapeutic, psychoeducational, and support groups in aiding all TrAKN members at both pre-and-post adoptive periods.
- Recognize the efficacy of group work in normalizing TrAKN members' experiences and identities, thereby acknowledging and reinforcing a culture of adoption.
- Recognize core areas to address in group work with TrAKN members, such as (but not limited to) identity development, attachment parenting, discrimination, parenting skills, antiracist advocacy, and grief and loss.
- Facilitate discussions of race and culture in groups, including recognition of member biases; address varied levels of awareness and comfort around such topics.
- Confront TrAKN members' biases related to race and culture, including beliefs, internalized oppression, and external actions that may be biased in nature.
- Create group rules that reduce bias (such as the dominant norm of biologicalism), judgment, and stigma toward TrAKN group members.
- Increase understanding of their own sociocultural identities, positive and negative beliefs regarding transracial adoption, and the way such tenets will influence group members and the group process.
- Integrate best practices into group work with TrAKN members, including evidence-based practices for group modalities, and use of supervision and consultation.

Career Development

Culturally Competent Counselors will:

- Understand how issues related to adoption (e.g., identity development; unresolved grief; disrupted attachment with biological parents) may impact the development of interest and skills that inform career choices of TrAKN members.
- Identify and explore TAs' skill sets, aptitudes, and interests that are uniquely informed by biology (creativity, athleticism, academics) and that may differ from those of the adoptive parents.
- Acknowledge the barriers related to career choice for people of color (such as systemic oppression; lack of same-ethnic or racial role models in positions of power) that affect certain members of the TrAKN community.
- Acknowledge the incongruence between TAs' lived experience of oppression as people of color and their experience of White privilege through affiliation with their adoptive family, and the impact this may have on TAs' career self-efficacy.
- Educate family members and appropriate helping professionals regarding potential career barriers experienced by TrAKN members from marginalized populations.

- Address occupational stereotypes experienced by TAs, stemming from cultural and racial stereotypes and enacted through racial microaggressions (e.g., adoptees of African descent as inherently athletic, and adoptees of Asian descent as skilled at math and science).
- Understand the discord that can result from a mismatch between adoptive parents' and adoptees' academic and career aptitudes.
- Recognize that tasks related to racial/ethnic identity development (i.e., immersion in one's birth culture, or reunion with birth family members) may delay and alter career development and decision making activities.
- Stay abreast of the current literature on career counseling and research according to best practices with clientele of color, to consider ways it may uniquely apply to members of the TrAKN community.

Assessment

Culturally Competent Counselors will:

- Understand and adhere to the legal and ethical guidelines regarding best-practice standards for assessments (e.g., ACA Code of Ethics, Standards for Multicultural Assessment), and know current literature on the spectrum of adaptive and healthy TrAKN functioning, to meet the unique needs of TrAKN members.
- Seek supervision/consultation with TrAKN communities and resources to supplement knowledge base, minimize bias, and avoid inappropriate or harmful assessments.
- When assessing clients, recognize that initially presented issues in counseling may mask adoption-related issues in need of clinical attention and assessment (e.g., relationship challenges as masking issues with oppression or internalized oppression).
- Avoid assessments that over-pathologize TrAKN members. Seek to eliminate bias toward TrAKN members in assessments through careful consideration of the theories utilized, item content, adoption insensitive language and meaning, normative samples, referral questions, and dynamics in assessment interactions.
- Understand that primary considerations in assessment (e.g., measure development/item development, normative samples, psychometric properties) must account for the diverse experiences of TrAKN members in the creation, norming, administration, scoring, interpretation, and report-writing aspects of assessment.
- Advocate for the creation of appropriate norming groups for assessment measures that are used with TrAKN members, particularly TAs, to prevent biased interpretations of assessments in various domains including adjustment indicators such as aptitude, cognitive ability, personality, career, substance abuse, and interpersonal relationships.
- Use assessment measures including intake paperwork, interview protocols, and screening measures that contain inclusive, adoption-sensitive language and that allows for the diverse family constellations and identities of TraAKN members (e.g., same sex parents, foster and adopted family members, first/birth parents, diverse racial identifications within families).
- Recognize that comprehensive assessments for TrAKN members includes attention to their adoptive and relinquishment histories as well as the impact of early trauma, multiple

adoption/foster placements, relinquishment, oppression (racial, cultural, and adoptive), adoption placement, pre-adoptive history, post-adoption adjustment, adoption disruptions or dissolutions, search and reunion attitudes and actions, identity, and racial and cultural development on TrAKN members' counseling concerns.

- Recognize the impact that standard assessment measurements including diagnostic tools such as the *Diagnostic and Statistical Manual of Mental Disorders* reinforce stereotypes and assumptions that negatively affect members of the TrAKN community (e.g., adoption leads to attachment disorders and identity problems, preferences for biological familial relationships, norms based on dominant, European American populations).
- Understand that the results and labels generated by assessments may harmfully impact TrAKN members, particularly the labeling of symptomology due to stress related to adoption or racial and ethnic discrimination (e.g., “angry adoptee,” a label that can be used to dismiss an adoptee’s complex feelings and reactions).
- Understand that assessment may lead to an overrepresentation of TrAKN members in clinical populations (e.g., residential treatment, substance abuse/rehabilitation treatment, counseling clientele, or special needs schools) due to myriad factors: (a) lack of counselor training in adoption development and interventions; (b) ineffective early intervention with normative adoption-related concerns; and (c) counselor lack of awareness of stigma toward TrAKN members.
- When assessing and diagnosing TrAKN clients, recognize that presenting concerns may originate from varied sources, including: (a) universal developmental tasks; (b) racial/ethnic, cultural, and adoptive identity development statuses; (c) adoption-related developmental tasks; (d) adoptive family life cycle tasks; and (e) symptoms of psychopathology.

Research and Program Evaluation

Culturally Competent Counselors will:

- Keep abreast of current empirical findings and evidenced-based practices related to all TrAKN members (e.g., social and emotional well-being and challenges to TA identity formation, resilience and coping with oppression, as well as ethical and empirically supported treatment options).
- Recognize weakness and pathology-based research perspectives of TrAKN members as potentially harmful, unethical, and biased.
- Ensure that TrAKN-related scholarship is driven by strengths based, non-biased, adoption-sensitive constructs and language (such as use of “made an adoption plan” as opposed to “gave up her child”).
- Recognize the unique strengths and information yielded with use of varied research methods (qualitative, quantitative, and mixed-methods) in TrAKN-related research.
- Understand how to collaborate with members from the TrAKN community to implement and/or critically interpret adoption-related research.
- Understand limitations of existing adoption literature and research methods regarding: sampling (e.g., racial/religious diversity), confidentiality (e.g., certain adoptive identities or stories that have not been shared with adoptive youth), and generalizability (e.g.,

research on internationally adoptees may not generalize to those adopted domestically).

- Utilize research and program evaluation participation incentives to provide valuable resources to TrAKN individuals and communities.
- In adoption-related research, assess and account for participants' contextual variables to increase accurate interpretation of TrAKN members' experiences (e.g., heritability, pre-post adoption histories, adoptive parenting styles, TAs' environments, adjustment, mental health concerns, or other psychological constructs).

Professional Orientation and Ethical Practice

Culturally Competent Counselors will:

- Develop and apply ethical decision-making models that account for the needs and concerns of the TrAKN, and recognize the ethical issues inherent in adoption practice and the clinical ramifications of unethical practice (e.g., coercion to relinquish children for adoption, child trafficking, poorly regulated adoption systems).
- Advocate for improved clinical competence among professionals, including school and mental health counselors, counselors-in-training, supervisees, teachers, and the medical community about issues and treatment needs unique to the TrAKN population.
- Recognize their ongoing ethical and clinical responsibility to all members of the TrAKN when working with families that experience disruption, dissolution, or displacement, and commit to providing ethical and responsible follow-up to provide continuity of care for all members (including minors) of the TrAKN.
- Acknowledge the unique confidentiality issues related to open adoption, open birth certificate access, and sensitive pre-placement information of TrAKN members (e.g., revealing relinquishment information or mental health histories of adoptees and birth parents).
- Obtain training and supervised experience in family counseling and family systems to ethically and competently work with the TrAKN.
- Be able and willing to advocate for TrAKN clients' dignity and welfare when challenged by supervisors/colleagues/other professionals who may act upon personal beliefs or biases regarding adoption or race/ethnicity.
- Seek specialized training/education through professional workshops and conferences, professional literature, community engagement, and current news and events for TrAKN individuals and communities.
- Advocate for and support TrAKN individuals and communities by providing affirmation, acceptance, and supportive counseling services, and by engaging in social justice efforts that address biased and oppressive institutional laws/mental health policies that affect the TrAKN.
- Remedy the lack of adoption-sensitive training for working with members of the TrAKN within Counselor Education programs by incorporating adoption-related information, skills, and training within core curriculum coursework.

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Organizations:

Comeunity – www.comeunity.org

Critical Mixed Race Studies – www.criticalmixedracestudies.org

The Future of Children – www.futureofchildren.org

Endorsed and adopted by the ACA Governing Council, March 2015

Loving Day – www.lovingday.org

MAVIN Foundation – www.mavinfoundation.org

Mixed Heritage Center – www.mixedheritagecenter.org

Mixed Race Studies – www.mixedracestudies.org

National Council for Adoption – www.adoptioncouncil.org

PACT: An Adoption Alliance – www.pactadopt.org

Glossary

Adoptee: A person who has been legally integrated into a family by parents to whom they were not physically born. The term *adopted child* often indicates an adoptee who is still a child (Russell, 1996).

Adoption: Legally, adoption is the legal transfer (of a child) from birth parents to the care of adoptive parent(s) who then assumes all the rights, responsibilities, and privileges of being the child's parent (Sifferman, 1993).

Adoptive family life-cycle: Refers to the tasks and patterns common among families who adopt (e.g., making the decision to adopt; application for adoption; the adoption; children's involvement in outside world; adolescents; young adulthood; later) (Hajal & Rosenberg, 1991). Risk of dysfunction or emergence of symptoms is highest during the transition points between stages or events.

Adoption-related developmental tasks (Brodzinsky, Schechter, & Henig, 1992): Adoption stakeholders (particularly adoptees, adoptive parents, and birth parents) face various tasks at each Eriksonian stage of development such as adjusting to the initial information they receive about their adoption, exploring options for searching for birth parents, and coping with adoption-related loss.

Adoptive identity: Refers to adopted individuals' sense of self as and their integration of their adoption status and experiences into their personal narratives (Grotevant, 1997). Adoptive identity must also incorporate adoption as being an assigned identity as opposed to a chosen identity construct (also see "*culture*").

Adoptive parent(s): A person or persons who become the permanent parent(s) to a child not born to them from the legal process of adoption, with all the social and legal rights and

responsibilities of any parent (Sifferman, 1993).

Anti-miscegenation: Against race mixing and/or interracial marriage (Kelley & Root, 2003; Root, 1992).

Attachment: Child's connection to a parent or other caregiver that endures over time, establishes an interpersonal connection, and aids in the development of a sense of self.

Attachment parenting: This describes an overall parenting style that seeks to promote secure attachment strategies within the parent and child relationship.

Biologicalism: This refers to the preference within society for families formed biologically over families formed through adoption or foster care. Families formed through biology are viewed as more permanent and authentic than those formed through other means.

Bicultural: Refers to a person who is a product of two distinct cultural groups and moves between two sets of cultural norms and expectations (Gibbs, 1989; Root, 1990).

Biracial: Refers to an individual whose parents are of two distinct socially constructed racial groups. However, the term also accurately refers to an individual who has parents of the same socially constructed racial group, when one or both parents are biracial or where there is a known multigenerational family history of racial mixing that is significant to how the individual chooses to identify (Kelley & Root, 2003; Root, 1992).

Closed adoption: An adoption that involves total confidentiality and sealed records, providing no contact or identifying information between the individuals involved in the adoption (Gritter, 1997). Adoption in the past century in America was dominated by this practice (Gritter, 1997; Melina & Roszia, 1993, Pertman, 2000).

Culture: Is comprised of a set of shared beliefs, values, practices, attitudes, and traditions that are associated within a group of people often linked by geographical and physical shared traits.

Birth Culture: Refers to the culture into which a person was born and refers to one's culture of origin. Adopted individuals, particularly those adopted internationally and/or transracially, are removed from caregivers and communities that represent their culture of origin and are reared and adopted into a different culture.

Adoptive Family Culture: is the culture into which children are adopted. This culture is usually the culture of the adoptive parents. Adoptive family culture goes beyond the general family rules and dynamics that all families possess; instead it refers to the larger culture of the adoptive family that is often tied to ethnic and racial groups of the adoptive parents.

Adopted/Lived Culture: refers to the culture that adopted persons practice. This culture may not be their birth culture and many not be their adoptive family's culture but instead may be some combination (Baden, Treweeke, & Ahluwalia, 2012).

Disrupted Attachment: This refers to attachment relationship disconnections that can occur as a result of the removal of a child from one family to a different family or placement (via adoption, foster care, separation or divorce), when either the parent/caregiver or child experiences trauma that impedes attachment, or via the death of a parent/caregiver.

Ethnicity: A social construct used to refer to a group of people who share similar aspects, such as geographical locale, origins, religion, language, history, values, traditions, foods, and beliefs. (Jones, 1997; Phinney, 1990). People who share an ethnicity can report different racial identities (see the definition of *race*, below).

Hapa: A Hawaiian term used to refer to an individual of Hawaiian and another national or racial background. More recently used to refer to any individual of Asian or Pacific Islander ancestry and another racial background or "someone who is both Japanese and Korean" (Kelley & Root,

2003, p.viii).

Interracial: Involving two or more socially constructed racial groups. The term typically pertains to couples where each partner is of a different racial background; however the term is also used to describe offspring of these unions and families (Kelley & Root, 2003).

Microaggressions: “Brief, commonplace, daily verbal, behavioral, or environmental indignities, *whether intentional or unintentional*, that communicate hostile, derogatory, or negative ... slights and insults ...” (Sue et al., 2007, p. 271). Racial microaggressions are race-based, and are often referred to as more subtle, modern forms of racism. Microaggressions can also target other groups beyond race (e.g., ethnic, religious, and gendered groups).

Miscegenation: The act of sexual mixing within or out of marriage and between persons of distinctly different racial backgrounds (Spikard, 1989).

Mixed Heritage: A term used to describe persons who are of two or more different racial backgrounds that considers the biological and cultural variables that underlie designations of race and ethnicity (Stephan, 1992).

Mixed Race: Used to describe persons who are of two or more distinct racial backgrounds as a result of their parents or grandparents being of different racial backgrounds (Kelley & Root, 2003).

Monoracial: Being of, or claiming, a single racial heritage (Kelley & Root, 2003).

Multiethnic: Being of multiple ethnic backgrounds or heritages (Kelley & Root, 2003).

Multicultural: Being of multiple or several cultures (Kelley & Root, 2003).

Multiple Heritage: Defined in terms of an “individual that possesses multiple aspects of heritage including, race, ethnicity, religion, language, gender, and national origin” (Henriksen & Paladino, 2009, p. xiii). By defining the individual in terms of multiple dimensions, we are able

to see the impact of the many aspects of the individual and the “intersections of gender, ethnicity, religion and spirituality, sexual orientation, national origin, indigenous heritage, geographic region, and other cultural factors” (Henriksen & Paladino, 2009, p. xiii).

Multiracial: Refers to being of two or more racial heritages (Kelley & Root, 2003). The term is used in reference to couples, families, and individuals of two or more racial heritages.

Multiracial Population: An umbrella term inclusive of interracial or multiracial couples, individuals, and families, and transracial adoptees and families.

Open Adoption: Open adoption is an arrangement agreed to by the adoptive parents and birth parents in which there is an ongoing connection between them, to be determined by the parties involved” (Pavao, 1998, p. 128). Various degrees of openness may exist including mediated (agency workers share information with birth and adoptive) and fully disclosed adoptions (adoptive and birth families directly share information without the use of a mediator) (Grotevant & McRoy, 1997).

Postadoption adjustment: This refers to the collective process by which adopted persons, adoptive parents, and birth/first families emotionally, psychologically, and physically adapt to and function after adoption placements (Brodzinsky & Livingston, 2014; Goldman & Ryan, 2011).

Race: A social construct often used to refer to one’s physical features (e.g., skin color, facial features, hair texture). Smedley and Smedley (2005) cautioned that: “racial groups are not genetically discrete, reliably measured, or scientifically meaningful” (p.16). The legal and personal meaning and definition of race has changed over time and differs according to geographic regions (and nations).

Racial Microaggressions: See microaggressions, above.

Reculturation: The process by which transracial and international adoptees seek to reclaim birth culture that was lost upon adoption placement with racially and culturally different parents (Baden et al., 2012).

Relinquishment: Other words used to describe relinquishment include *surrender* or the phrase “making an adoption plan for one's child.” Indicates a voluntary release/termination of parental duties and rights, which allows a child to then be adopted.

Reunion: A meeting between birth relatives and an adoptee. This is a result of a closed adoption, whereby there is no contact between the birth family and adoptee.

Search: An attempt by an adoptee, birth parent, or adoptive parent to connect a biological child and a birth parent. The search process can be an emotionally stressful experience.

TA = Transracial Adoptee: A child who has been adopted by adults who are of a different ethnicity or race from him or her.

Transracial adoption kinship network (TrAKN): Members of the transracial adoption kinship network (TrAKN): adoptive parents/parents; biological parents/birth parents/first parents/natural parents; adoptee/adopted person; extended members from the birth/first/natural/bio family; extended members from the adoptive family; foster parents

Types of Adoption:

- *Domestic Adoption:* Adoption of a child in the nation where that child was born.
- *Foster Care:* refers to the placement of children into a family for temporary care when the children's birth family is unable to care for them due to various challenges or when awaiting future adoption.
- *Foster to Adopt or Foster Adoption:* is a child placement with a foster family who will adopt the child if the child becomes available for adoption. In these cases, birth parents'

parental rights may be in the process of being terminated.

- *International Adoption*: is the adoption of a child from another country (often referred to as a “sending country”) by an adult(s) of another country (often referred to as a “receiving country”). These adoptions involve the immigration of the adopted child. This is also referred to as transnational adoption or intercountry adoption.
- *Kinship adoption*: Sometimes called relative adoption or kinship care. Refers adoption by a relative, such as grandparent, aunt, uncle, tribe or clan, stepparents, or other extended family member, godparent, or someone who is has a kinship bong with the child. In kinship adoption, the adoption is formal and legal whereas in kinship care, the caregiving may be informal or foster care.
- *Third Party Reproduction*: refers to reproduction processes that go beyond the male-female couple and may involve eggs or sperm from another person or the use of a surrogate (woman who carries an unrelated fertilized fetus to term).
- *Same-sex adoption*: is when people of the same sex adopt a child. International adoption was traditionally restricted to heterosexual couples but more recent practice has opened adoption to same-sex couples. For many same-sex couples, one member of the couple would adopt as a single parent but both members of the couple would parent.
- *Single parent adoption*: or the practice of adopting a child or children by a single person without a partner, like same-sex adoption, has long been legal but was rarely practiced until recent decades.
- *Stepparent Adoption*: most common form of adoption, refers to the adoption of a child by the new spouse of the birth parent.
- *Transcultural Adoption*: refers to adoptions in which adoptive parents and adopted

persons are from two different cultures of origin. Many of these types of adoptions are also transracial (see below).

- *Transracial Adoption*: refers to an adoption in which the adoptive parents and the adopted person are from two different racial and/or ethnic groups. Another term used for this type of adoption is *interracial adoption*.