

ABSTRACT

Title of Document: THE ROLE OF CROSS-CULTURAL EXPERIENCES AND ETHNIC IDENTITY IN TRANSRACIAL ADOPTEES' SELF-ESTEEM

Joclynn Stephenson, Master of Science, 2015

Directed By: Associate Professor Leigh A. Leslie
Department of Family Science

Research into mental health outcomes of minority transracial adoptees has been fueled by debate over white parents' ability to prepare minority children for experiences of individual and institutional racism. However, studies show transracial adoptees do not differ from others in self-esteem, one criterion used to gauge mental health. Among minorities, ethnic identity is correlated with self-esteem, but studies show that transracially adopted adolescents often face ambiguous ethnic identity. Cross-cultural experiences have proven to increase ethnic identity in minorities, but little research has been done on their effect among transracial adoptees. The current study explored whether cross-cultural experiences bolster self-esteem in minority transracial adoptees through mediation of adoptees' ethnic identity. One-hundred-three transracially adopted minority adolescents completed online self-report surveys. Results indicated a significant negative link between cross-cultural experiences and ethnic identity and a moderately significant negative link between cross-cultural experiences and self-esteem in this population. Findings and possible explanations are discussed.

THE ROLE OF CROSS-CULTURAL EXPERIENCES AND ETHNIC IDENTITY
IN TRANSRACIAL ADOPTEES' SELF-ESTEEM

by

Joclynn Briann Stephenson

Thesis submitted to the Faculty of the Graduate School of the
University of Maryland, College Park, in partial fulfillment
of the requirements for the degree of
Master of Science
2015

Advisory Committee:
Leigh Leslie, Associate Professor, Chair
Jinhee Kim, Associate Professor
Carol Werlinich, Instructor

© Copyright by
Joclynn Briann Stephenson
2015

Table of Contents

List of Tables and Figures.....	iii
Chapter I: Introduction.....	1
Statement of the Problem	1
Theoretical model.	4
Chapter II: Literature Review	7
Transracial Adoption in America	7
Self-esteem in Transracially Adopted Minority Adolescents	9
Ethnic Identity, Self-esteem, and Minority Adolescents' Mental Health	11
Ethnic Identity in Transracial Adoptees	14
Cross-cultural Experiences and Ethnic Identity	16
Gaps in the Literature	20
Hypotheses	20
Chapter III: Methods.....	22
Sample	22
Procedure.....	23
Measures.....	24
Independent variable: Cross-cultural experience.....	24
Mediator: Ethnic identity.....	26
Dependent variable: Self-esteem.	26
Chapter IV: Results.....	28
Primary Analysis	30

Secondary Analysis	30
Chapter V: Discussion	33
Limitations.....	38
Clinical Implications	39
Conclusion.....	40
Appendices	
Appendix A – Demographic Information.....	43
Appendix B – Study Announcement.....	47
Appendix C – Parental Consent Form.....	48
Appendix D – Adolescent Consent Form.....	50
Appendix E – Multicultural Experience Inventory	52
Appendix F - Multigroup Ethnic Identity Measure.....	54
Appendix G – Rosenberg Self-Esteem Scale	55
References.....	56

List of Tables and Figures

Figure 1: Conceptual Diagram.....	4
Table 1: Demographics of Adolescents	23
Table 2: Descriptive Information on Variable/Measures.....	29
Table 3: Correlations Between Study Variables.....	30
Table 4: Correlations Between Recoded Study Variables	31
Table 5: Correlations Between MEI Items and Study Variables	32

Chapter I: Introduction

Statement of the Problem

As the number of transracial adoptions in the US continues to grow, research is being done to learn what conditions and practices best predict positive mental health outcomes for transracially adopted minority adolescents. The mental health of these adolescents has been the subject of study since the 1960s and 70s, decades during which African American and Native American interest groups pushed back against federal programs meant to facilitate adoption of minority adolescents by well-off white couples. These interest groups argued that white parents were ill-equipped to provide minority adolescents with the skills necessary to thrive in a racist society, likening transracial adoption to cultural genocide (National Association of Black Social Workers, 1972; 1991). Such claims sparked a firestorm of research into mental health outcomes among transracially adopted minority adolescents that continues to this day. Past studies have used many variables, including social adjustment, depression, substance use, criminal behavior, incidence of suicide, and hospitalization, to assess the well-being of transracially adopted adolescents (Lee, 2003). Though there is some debate over what measures best reflect outcomes for this population, many researchers agree that self-esteem is one of the most powerful indices of well-being in transracially adopted adolescents (Hayes, 1993; Burrow & Finley, 2004).

Research has suggested that development of self-esteem in transracially adopted minority adolescents is complicated by their complex social situation, including multiple, sometimes conflicting sources of communication about the self, likely comparisons to individuals outside of the child's racial group, and the necessity of adapting roles to their family and surroundings (McRoy, Zurcher, Lauderdale, & Anderson, 1982). Their

rationale is based in the symbolic-interactionist theory of self-concept, which holds that a person's self-esteem is built via social interaction with others that results in (1) messages about the self from others, (2) comparison of self to one's immediate peers, and (3) a role or roles assigned by the community (McRoy, et al., 1982). McRoy et al. predicted that complications in these areas would lead to lower self-esteem in transracially adopted minority adolescents compared to those adopted by parents of the same race. Though the results of an initial study showed that there was no measurable difference in self-esteem between the two groups, it did lead researchers to question how the development of self-esteem might differ among transracially adopted minorities and other populations, particularly minority adolescents.

Previous studies of non-adopted minority adolescents have found that self-esteem is positively correlated to a sense of belonging to one's ethnic group (i.e., ethnic identity), regardless of ethnic background (Helms, 1990; Phinney, Cantu, & Kurtz, 1997). But studies of adolescent transracial adoptees show that this population often faces ambiguous or confusing ethnic identity, which is associated with behavioral problems, psychological distress, and other negative mental health outcomes (Cederblad, Hook, Irhammar, & Mercke, 1999). For minority adolescents raised by their biological families, ethnic identity is developed and informed by the socialization received from their parents or caregivers and their peers (Umaña-Taylor, Bhanot, & Shin, 2006). But the parents of transracially adopted minority adolescents may struggle to balance their own cultural background and a racially homogenous community with efforts to educate their minority adolescents about their ethnicity and culture of origin.

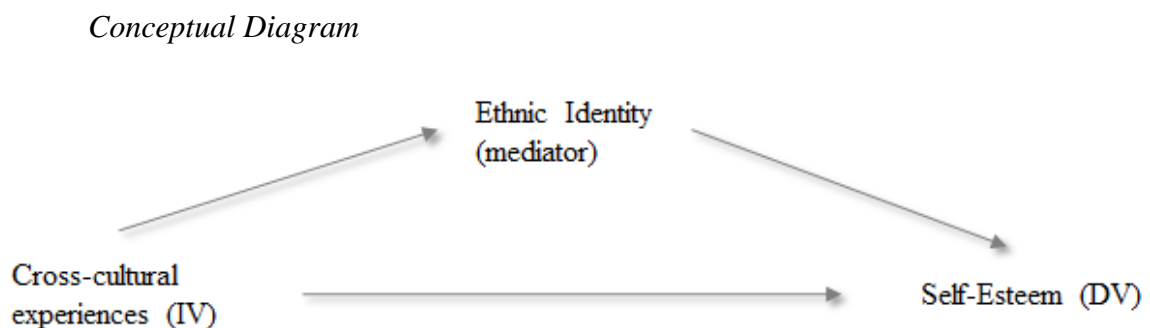
In the general population, unrealized ethnic identity leads to poor mental health outcomes for minorities. Roberts et al. (1999) found that among African American middle school students, ethnic identity is inversely related to depression and feelings of loneliness. Among African American high school students, racelessness (i.e., identification with white culture over African American culture) was associated with anxious and depressive symptoms (Arroyo & Zigler, 1995). When lacking the necessary education and experiences to develop their own ethnic identity, it seems fitting that transracially adopted minority adolescents might suffer these same negative outcomes.

Cross-cultural experiences are one of many factors that correlate with ethnic identity in the general minority population (Helms, 1984), but as of yet little research has been done to test their correlation with ethnic identity among transracial adoptees. In the study cited above, McRoy et al. found that regular opportunities for positive interactions with other people of the same ethnicity were a key factor in transracially adopted adolescents' positive ethnic identity. Without such opportunities, adolescents expressed low ethnic identity even as--perhaps counterintuitively--their self-esteem remained high. Though this study presents compelling findings, the researchers' conclusions were based on an extremely limited sample of 30 transracially adopted minority adolescents and 30 same-race adopted minority adolescents, using qualitative methods. The current study seeks to add to the body of knowledge surrounding this topic through use of quantitative measures with a larger population sample size of 101 transracially adopted adolescents. Through this new analysis, the researcher seeks to find whether or not cross-cultural experiences solidify otherwise ambiguous ethnic identity for transracial adoptees,

though it remains to be seen whether ethnic identity in this population correlates with self-esteem.

There is already some support for the assertion that cross-cultural experiences and self-esteem could be related among the general population. Recent research has found that cross-cultural experiences later in life are positively associated with other gauges of mental health outcomes, including personal development and academic, intellectual, and social self-confidence among college students (Denson & Chang, 2008). But again, there is a dearth of knowledge regarding this relationship for adolescent transracial adoptees. The current study seeks to discover whether cross-cultural experiences predict self-esteem in transracially adopted minority adolescents via a direct effect on ethnic identity. In this model, ethnic identity functions as a mediating factor to explain how cross-cultural experiences may lead to self-esteem in transracially adopted minority adolescents (See Figure 1).

Figure 1



Theoretical model. Symbolic-interaction is the theoretical framework of the current study. Symbolic interactionism is concerned first and foremost with the meanings that individuals attribute to different aspects of their lives. Herbert Mead and other symbolic interactionists sought to understand how meaning is socially constructed

and passed on from one generation to the next (White & Klein, 2008). Within this theory, the process of socialization—often done predominantly by a child’s primary caregivers—is seen as the conduit by which a child learns meaning, through the inculcation of the greater culture’s beliefs and attitudes. This same socialization serves to teach the child about his or her roles in the family, community, and society at large, thus contributing to the shaping of his or her identity.

Symbolic interactionism can similarly serve to explain the process by which an individual’s self-esteem development may be influenced by his or her social relationships. Just as an adolescent learns his or her role in the world from his or her family and community, he or she internalizes messages regarding his or her social standing from these same sources. Symbolic interactionism suggests that these messages are most often communicated in the ways family and community members interact with the individual (Shrauger & Schoeneman, 1979). If the individual experiences mostly positive interactions with his or her family and community, he or she is more likely to develop a theory of self based on positive social standing. If the individual has mostly negative interactions with family and community, he or she is more likely to develop a theory of self based on negative social standing. Thus, an adolescent who has many friends might develop strong self-esteem, believing him- or herself to be likeable and worthwhile, while one who struggles to connect with others may develop low self-esteem, internalizing others’ rejection.

Transracially adopted adolescents are subject to socialization and the influence of perceived social standing in much the same way that same-race adoptees and non-adoptees are. As in other families, early socialization in transracially adoptive families is

completed by the parent(s) of the child. Over time, the child's social spheres grow with him or her and the work of socialization expands to his or her peers, as well as adults outside of the child's nuclear family unit. Interactions with and treatment by familial and extrafamilial influences contribute to the adolescent's development of self-concept and self-esteem. Simultaneously, these influences teach the child meaning and mores that will prepare him or her to move through various social spheres as an adult. At times the nuclear family may struggle internally as the child adopts meanings different from those of his or her parents.

While all families may grapple with differences in meaning between generations, these differences are magnified for transracially adoptive white parents, who must acknowledge their minority child's ethnicity carries with it differences in meaning. Minorities' experiences in America can differ in myriad ways from those of white people, and it may be difficult for white parents to foresee or imagine the experiences of racism, discrimination, and prejudice their minority children may face. For these parents, learning the appropriate meanings to socialize their children in a way that prepares them for life as a minority adult can be a hefty undertaking. At the same time, these parents must find ways to counteract possible negative messages and interactions from forces outside the family which threaten the self-esteem of the child. But research suggests purposeful inclusion of cross-cultural experiences in their lives may aid white parents in the socialization of their adolescent minority children. It is thought that cross-cultural experiences provide adoptees the opportunity to interact with other minorities who provide important lessons in meaning, identity, and self-esteem they might otherwise miss.

Chapter II: Literature Review

This literature review will include a brief discussion of the history and statistics of transracial adoption in the United States. Further discussion will include a review of literature on the variables of interest in the current study—self-esteem, ethnic identity, and cross-cultural experiences—and the links between each of them in the lives of minority adolescents. Research on these variables is more well-established with minority youth, in general, but is limited with transracial adoptees. Thus, unless otherwise noted, the studies cited in this review were completed using general minority populations. Finally, this review will close with a discussion of gaps in the literature and the rationale for the current study.

Transracial Adoption in America

Arnold Silverman (1993) defines transracial adoption as the “joining of racially different parents and children together in adoptive families” (p. 104). Within transracial adoption, a distinction is made between international and domestic adoption, two very different processes. International adoption began in the U.S. in the late 1940s, when American soldiers and their families began adopting young war refugees from poor Asian countries (Silverman, 1993). Adoptive families of international children have been studied extensively (Lee, Grotevant, Hellerstedt, Gunnar, & the Minnesota International Adoption Project Team, 2006); in fact, much more extensively than domestic transracial adoptions.

The U.S. government first began facilitating domestic transracial adoptions via the Indian Adoption Project, which sought to assimilate Native American children by separating them from their families on reservations and placing them with well-to-do

white families. This project lasted from 1958 to 1967; during those nine years, the government also instituted programs to similarly place black orphans in white homes. However, these programs faced push back from minority interest groups such as the National Association of Black Social Workers (NABSW), who argued that these efforts to assimilate minority children into the majority white culture could not succeed in properly preparing the children for the realities of minority adult life (Lee, 2003). These concerns, voiced also by Native American representatives, led to the dissolution of the Indian Adoption Project in 1978 and social service agencies' reprioritizing same-race family placements for minority children.

However, concern was also raised about agencies' efforts at same-race family placements (Hollingsworth, 1999). Opponents of NABSW's position argued that emphasis on same-race adoptions did a disservice to the overabundance of minority children left in limbo in foster care or group homes. In their view, these children suffered more by not being placed in a forever home than they would being raised by white parents. Further, many white adoptive parents understandably balked at claims they were unequipped to provide the love and guidance needed to successfully raise their minority children. State governments had little reason to continue their current policies without empirically-based outcome studies to back them. State social security agencies, responding to calls for change from dissenters represented by the National Coalition to End Racism in America's Child Care System (Howe, 1995), again reassessed their policies regarding race considerations in adoption, and in the early 1980s transracial adoption began again in earnest (Hollingsworth, 1998).

This change in policy culminated in 1994, when the US government passed the Multi-Ethnic Placement Act (MEPA), prohibiting agencies receiving federal funding from denying or delaying foster or adoptive placements based on the child or parent's race, color, or national origin. Two years later, in 1996, MEPA was amended by the Interethnic Placement Act (IEP), which forbade discrimination directed toward children and parents based on race or color, or membership in communities previously ineligible to adopt (Department of Health and Human Services). These acts cleared the way for transracial adoption to resume. According to a survey completed by DHHS in 2007, 28% of foster care and 21% of private domestic adoptions currently result in transracial family placements (DHHS, 2007).

Self-esteem in Transracially Adopted Minority Adolescents

Prior research supports the importance of self-esteem in the lives of adolescents. Numerous studies have shown how variance in self-esteem correlates to disparate well-being outcomes in the general population (e.g., Donnellan, Trzesniewski, Robis, Moffitt, & Caspi, 2005; Wild, Flisher, Bhana, & Lombard, 2004), and for many, social identity formation is an important part of one's self-esteem (Tajfel & Turner, 1986). Many assume that adoptees' self-esteem development can be problematic due to issues surrounding their identity formation, such as the likely break in familial ties and lack of connection to their culture of origin (Sorosky, Baran, & Pannor, 1975). Researchers speculate that these difficulties are compounded for transracial adoptees, who, in addition to the above issues, may face ambiguous or conflicting messages about the self (Hayes, 1993; McRoy, et al., 1982). Despite such assumed complications, research shows no

difference in self-esteem levels among same-race adoptees, transracial adoptees, and the general population (McRoy, et al., 1982; Juffer & van IJzendoorn, 2007).

In their meta-analytic quantitative study, Juffer and van IJzendoorn (2007) set out to determine whether or not adopted children differ in self-esteem from their non-adopted counterparts. The researchers surveyed 88 studies that made use of several different self-esteem measures, including the Harter Self-Perception Profile for Children (Harter, 1985), the Rosenberg Self-Esteem Scale (1979), the Coopersmith Self-Esteem Inventory (Coopersmith, 1981), and the Piers-Harris Children's Self-Concept Scale (Piers, 1984), and compared non-clinical samples of adopted children to non-adopted children. In total, they compared 10,997 adoptees' scores on self-esteem with those of 33,862 non-adoptees, and found no difference. Likewise, the researchers found no difference when comparing samples including transracial adoptees and samples without transracial adoptees. Interestingly, when the researchers tested for variance in adoptees' self-esteem across age groups, they found no difference, suggesting that adoptees' self-esteem is fairly stable across time and various life stages, including adolescence. Juffer and IJzendoorn also separately analyzed 18 studies that compared transracial and same-race adoptees. Data analysis on 2,198 adoptees again showed no difference in self-esteem scores between transracial and same-race adoptees.

In a quantitative study, McRoy, et al. (1982) interviewed 60 black children and their adoptive parents. One half of the sample (n=30) was made up of transracially adoptive families; the other half of the sample (n=30) consisted of entirely black adoptive families. The mean age of the children surveyed was 13.5 years. The researchers interviewed each child using the Total Overall Level of Self-Esteem index from the

Tennessee Self Concept Scale (Fitts, 1965). The results of this study showed no difference in self-esteem scores for transracially adopted and same-race adopted adolescents. When the researchers compared the adoptees' scores to those of the norm population for the Tennessee Self Concept Scale, they found no difference (McRoy, Zurcher, Lauderdale, & Anderson, 1982).

Based on the research it appears that—contrary to expectations—transracially adopted youth have comparable self-esteem to their same-race adopted and non-adopted counterparts. This, despite researchers' assumption that transracially adopted adolescents face several risk factors that threaten their well-being and overall functioning. Although transracial adoptees appear to have self-esteem comparable to same-race adoptees and minority youth in general, researchers have continued to focus on determining whether the predictors for self-esteem in these groups are the same, particularly given their disparate experiences. This work includes identifying protective factors which may be aiding transracial adoptees in their self-esteem development. One variable which has received considerable attention in both the minority adolescent literature and the adoption literature is ethnic identity.

Ethnic Identity, Self-esteem, and Minority Adolescents' Mental Health

Ethnic identity—the portion of an individual's identity rooted in his or her inclusion in a particular ethnic group—has been correlated with positive mental health outcomes in minority adolescents. In a quantitative study of ethnic identity, Roberts and colleagues (1999) surveyed 5,496 middle school (i.e., sixth through eighth grade) students with a mean age of 12.9 years. The population included self-identified African-, Chinese-, European-, Indian-, Mexican-, Pakistani-, and Vietnamese-Americans, as well

as Central Americans, Pacific Islanders, and persons of mixed ancestry. Each adolescent was administered Phinney's Multiethnic Identity Measure (MEIM; 1992) to measure ethnic identity, as well as several measures of psychological well-being, including Rosenberg's Self-Esteem Scale, the Life Orientation Test (LOT-R; Scheier & Carver, 1985), which measures levels of optimism, and two measures developed by the authors, one a coping scale based on work by Rosenbaum (1980) and Folkman and Lazarus (1980), the other a measure of mastery based on the work of Pearlin (Pearlin & Schooler, 1978). The results of this study showed that ethnic identity was positively correlated with each of these indicators of well-being (Roberts et al., 1999).

In their study of ethnic and American identity among African American, Latino, and white adolescents, Phinney, Cantu, and Kurtz (1997) surveyed 669 American high school students using the MEIM and the Rosenberg Self-Esteem Scale. In addition to these measures of ethnic identity and self-esteem, the researchers included questions meant to gauge the adolescents' American identity and other-group attitudes. Their results showed that African American and Latino adolescents scored significantly higher on measures of ethnic identity than white adolescents, suggesting that ethnic identity is a much more salient aspect of identity for minority adolescents. These findings reflect those of Roberts and his colleagues, who also found that, of all the ethnic groups they studied, European-Americans scored lowest on the MEIM (Roberts et al., 1999). However, for all three groups, Phinney and her colleagues found that ethnic identity was a significant predictor of self-esteem (Phinney et al., 1997).

Relatedly, Greig (2003) summarized recent literature on ethnic identity in minority adolescents. She compiled findings from studies published from 1988 to 2002,

focusing on the relationship between ethnic identity and positive mental health outcomes for minority adolescents. In reviewing that research, Greig concluded that ethnic identity is particularly important for minority adolescents, as it is closely related to their development of “positive self-concept, self-efficacy, and positive coping styles” (p. 319).

Such findings make it clear that ethnic identity is a large part of minority adolescents’ social and mental development. But how do minority adolescents develop ethnic identity? Recent research has shown support for the idea that minority adolescents’ ethnic identity development is bolstered in part by ethnic socialization. The process of ethnic socialization is most often completed via the adolescent’s family, as well as through interaction with members of the same race within their community. In one such study, Umaña-Taylor, Bhanot, and Shin (2006), tested quantitative data from a survey of 639 Chinese, Filipino, Vietnamese, Asian Indian, and Salvadoran high school students living in the United States. The mean age of the population was 15.52 years and each participant was asked to self-identify as a specific ethnicity. The survey consisted of the Familial Ethnic Socialization Measure (FESM; Umaña-Taylor, 2001, as cited in Umaña-Taylor, Bhanot, & Shine, 2006) to gauge perceived familial efforts at ethnic socialization, and the MEIM to measure actual ethnic identity. The results showed a positive correlation between scores on the FESM and MEIM, indicating that minority parents’ efforts at ethnic socialization (e.g., discussing with children the importance of their ethnic/cultural background, or including ethnic art or music in the home) contribute to adolescents’ ethnic identity development. (Umaña-Taylor, Bhanot, & Shin, 2006).

Ethnic Identity in Transracial Adoptees

While minority adolescents may develop ethnic identity naturally and easily via socialization by their same-race parents and communities, research shows that transracially adopted adolescents struggle in this area (Cederblad, Höök, Irhammar, & Mercke, 1999; Andujo, 1988). Researchers speculate that many transracially adoptive families live in relatively racially homogenous, majority white areas, making it difficult for adoptees to find positive same-race role models or peers with whom to interact. In a qualitative study of transracially adoptive families in Sweden, Cederblad, Höök, Irhammar, and Mercke (1999) interviewed 211 Indian, Thai, Chilean, and Ethiopian children, aged 13 years and older, from 147 adoptive Swedish families. Along with answering open-ended questions regarding their ethnic identity, subjects were asked to complete the Symptom Check List (SCL-90; Derogatis & Cleary, 1977), a checklist of psychosomatic and other symptoms which indicate emotional distress, and the “I think I am...” inventory, which measures self-esteem and acceptance (Ouvinen-Birgerstam, 1984, as cited in Cederblad, Höök, Irhammar, & Mercke, 1999). Parents were asked to complete the Child Behavior Check List (Achenbach, 1991), which includes items regarding problematic behaviors and four scales measuring children’s competence.

When the researchers compared the subjects’ scores to those of a demographically similar population taken from a Swedish epidemiological study, they found, as with the studies cited above, transracial adoptees did not differ from their non-adopted counterparts on measures of mental health. However, they also found that subjects who self-identified as more non-Swedish than Swedish had higher incidences of externalizing and internalizing behaviors and lower self-esteem. These subjects often struggled to

reconcile their Swedish culture with their non-Swedish ethnicity. This ambiguity in identity contributed to negative mental health outcomes in the lives of these transracial adoptees (Cederblad, Höök, Irhammar, & Mercke, 1999).

Further evidence of the importance of adoptive parents' behavior in the development of strong, positive ethnic identity in their minority children is offered in Andujo's (1988) mixed measure study of Hispanic adoptees' ethnic identity. Andujo surveyed 60 Hispanic adolescents—30 adopted by non-Hispanic (i.e., white) parents and 30 adopted by Hispanic parents. Each adoptee completed the Tennessee Self Concept Scale, the Twenty Statements Test (Kuhn and McPartland, 1954), which measures self-concept using open-ended questions, and the Mexican-American Value Attitude Scale (Lopez, 1970), which measures subjects' ethnic identity in terms of self-perception, ethnic awareness, social relationships, and social environment (i.e., school and community). Parents were given a 60-item interview covering topics such as their motivation for adoption, engagement in development of their child's ethnicity and their feelings toward it, as well as their feelings regarding transracial adoption.

Andujo found that, in socializing their children, the majority of transracially adoptive parents surveyed downplayed their children's ethnicity in favor of stressing their humanity. However, in doing so, these parents may have directly contributed to their adopted adolescents' ethnic and identity confusion. Adoptees whose parents deemphasized their ethnicity also tended to minimize their ethnic heritage, identifying as American more than Hispanic American. This self-identification can become problematic as adoptees' identity fails to align with their physical characteristics, leaving them lacking a whole, resolved sense of self (Andujo, 1988). To prevent this, Andujo

recommended that transracially adoptive parents' efforts at socialization include education and experiences that reflect the ethnicity of the adopted child. One way to provide such education is through the concerted availability of cross-cultural experiences.

Cross-cultural Experiences and Ethnic Identity

Cross-cultural experiences refer to any opportunity for an individual to interact with and/or learn about people from a wide range of ethnic and cultural backgrounds. Such opportunities have been positively correlated with positive ethnic identity among minorities. Root (1998) conducted a qualitative study of racial identity development among multiracial young adults, interviewing 20 sibling dyads. Each participant first completed a packet containing inventories on body image, mental health, racial experiences, and identity. The dyads were then interviewed separately twice, answering questions about their identity and racial awareness.

After compiling and analyzing the data from these interviews, Root concluded that several life experiences directly affected participants' ethnic identity. Among these, "increased racial integration in the structure of society" (p. 242) was correlated with stronger ethnic identity. In other words, for participants who grew up in communities that included ethnically similar neighbors and peers, purposeful socialization was less important for secure ethnic identity. But for those who were separated from such communities, development of ethnic identity proved much more difficult (Root, 1998).

Similarly, in a qualitative study, Jourdan (2006) used Root's model of identity development (1998) to explore the impact of the family environment on late adolescents' ethnic identity. Jourdan interviewed five college students who self-identified as multiethnic. Each interview lasted for about 1.5 hours, and included open-ended

questions about the participants' past and present family environment(s), friendships, identity, discrimination, and feelings of not belonging.

Three out of the five participants reported that their families refused to acknowledge or support exploration of their multiethnic background. These participants reported feelings of discomfort surrounding their ethnic identity, as well as discomfort in interactions with people of various ethnicities. In contrast, the two participants who reported that their families accepted and encouraged their exploration of their ethnic identity reported much stronger, secure ethnic identity. Additionally, they reported having friends of various ethnic backgrounds, and feelings of ease during interactions with people of other ethnicities (Jourdan, 2006).

In their study of self-esteem and socialization among transracially adopted adolescents, McRoy et al. (1982) interviewed 30 transracially adoptive white families and 30 same-race adoptive black families. The mean age of the adolescent participants was 13.5 years. Researchers administered the Total Positive Overall Level of Self-Esteem index of the Tennessee Self Concept Scale, the Twenty Statements Test, and a survey including items regarding adolescents' home and school environments, friendships, and self-perception of their racial identity. Parents in this study likewise took the Tennessee Self Concept Scale and answered interview questions about their family demographics, the child's community and school environment, and the parents' perception and attitudes toward the child's racial identity.

Results reinforced other findings that transracially adopted adolescents do not differ in self-esteem levels from their same-race adopted peers. The data also indicated that parents' attitudes regarding their children's racial identity were strongly predictive of

their children's self-perception. Transracially adopted black and mixed race adolescents whose parents downplayed their ethnicity were less likely to identify as black than those whose parents acknowledged and educated them about their ethnic differences.

Interestingly, those adolescents whose parents downplayed their ethnicity—many of whom lived in majority white communities and attended majority white schools—were also more likely to express negative beliefs and opinions about black people. This was not true for transracially adopted adolescents in integrated communities and schools, and those whose parents accepted their ethnic differences. McRoy and his colleagues concluded that opportunities for positive interaction with black people—be they parents' friends, adolescents' classmates, or community members—could be extremely important in helping transracially adopted black children develop positive ethnic identity (McRoy, et al., 1982).

It is important to note that in each of these example studies, exposure to individuals of similar ethnicity should be understood as a proxy for cross-cultural experiences. In Jourdan's study, each of the participants grew up with at least one parent from their family of origin, but most of them lost access to a parent via divorce or separation (Jourdan, 2006). The remaining parents and adult family members of these multiethnic individuals had a powerful influence on their thoughts and feelings about race, exercised explicitly by the messages they gave the participants as children, and implicitly by the communities and people with whom they allowed them to socialize. Those participants who lost access to one parent reported less secure ethnic identity if their remaining parent or family members discouraged their interaction with people who shared their absent parent's ethnic background. Participants who reported strong ethnic

identity were those whose remaining parents made concerted efforts to expose them to communities that shared other components of their ethnic make-up. Thus, cross-cultural experiences for this population include any that allow the individual to explore the parts of their ethnicity not shared by their parent(s). Similarly, adolescents in McRoy et al.'s study (1982) of transracial adoptees displayed more secure ethnic identity when their parents provided them with opportunities to interact with people of similar ethnicity. These experiences can be understood as cross-cultural because many of the adolescents likely live around or attend school with people of their parents' ethnicity.

Outside of McRoy et al.'s small, qualitative study, there has not been much research on the relationships between cross-cultural experience and ethnic identity in transracially adopted minority adolescents. There has, however, been research on cross-cultural experiences and one correlate of ethnic identity in the general population: measures of well-being. Denson and Chang (2009) surveyed a multiethnic population of over 19,000 college students across the United States, each of whom completed a Student Information form during their first year of college. This form included items about their backgrounds prior to starting college and was followed by a College Student Survey (CSS) at the end of their fourth year, which included items regarding their college experience. Of particular note, the CSS included five items that measured students' levels of cross-racial interaction (i.e., cross-cultural experience) based on the people they reported studying, dining, interacting, and socializing with while at school.

Based on results from their analysis, Denson and Chang (2009) posit that cross-racial interaction is positively correlated to measures of self-efficacy, general academic skills, and racial-cultural engagement. This suggests cross-cultural experiences can lead

to better overall adjustment for college students, regardless of racial, cultural, or familial background.

Gaps in the Literature

In reviewing the literature regarding mental health outcomes, ethnic identity, and cross-cultural experiences, it is clear that correlations exist among these factors in the lives of minority adolescents and adults. Studies like that of Roberts et al. (1999) and Phinney et al. (1997) show the positive correlation between self-esteem and ethnic identity for minority youth, while research like that by Root (1998) and Jourdan (2006) show the correlation for minorities between ethnic identity and cross-cultural experiences. But outside of McRoy et al.'s (1982) study, there has been limited research on the relationship between these three factors in the lives of transracially adopted adolescents. The current study proposes a direct link between transracially adopted adolescents' cross-cultural experiences and self-esteem, mediated by ethnic identity. Specifically, it is predicted that the provision of cross-cultural experiences in the lives of transracially adopted adolescents leads to an increase in their self-esteem, by supporting their increased ethnic identity.

Hypotheses

The hypotheses tested in the current study are as follows.

- 1.a. There will be a positive relationship between cross-cultural experience and ethnic identity for transracially adopted adolescents.
- 1.b. There will be a positive relationship between cross-cultural experience and self-esteem for transracially adopted adolescents.

2. There will be a positive relationship between ethnic identity and self-esteem for transracially adopted adolescents.
3. Ethnic identity will mediate the relationship between cross-cultural experiences and self-esteem for transracially adopted adolescents.

Chapter III: Methods

Sample

The current study employs preexisting data collected by Leslie, Smith, and Hrapczynski (2013) in their study on racial socialization in transracially adoptive families. Surveying dyads consisting of one white parent and his or her adopted minority child, the researchers sought to explore the familial traits and factors that affect transracially adopted children's well-being, including self-esteem and ethnic identity. Most of the parental data was provided by adoptive mothers. All of the children had been placed in their adoptive homes by their third birthday, had lived in the US for the majority of their lives, and were between 13 and 18 years of age at the time of survey.

The current study employed adolescent measures exclusively, resulting in an overall sample size of 103 adolescents. The mean age of the adolescent participants was 15.04 years. As seen in Table 1, 13.6% of the adolescents were 13 years old ($n=14$), 26.2% were 14 years old ($n=27$), 21.3% were 15 years old ($n=22$), 7.8% were 16 years old ($n=8$), 7.8% were 17 years old ($n=8$), 9.7% were 18 years or older ($n=10$), and 13.6% declined to answer ($n=14$). Of the adolescents surveyed, 60.2% of the adolescents identified as female ($n=62$), 26.2% identified as male ($n=27$), and 13.6% declined to answer ($n=14$). Asked to provide the ethnicity with which they most identify, 39.8% of the adolescents identified as Asian or Pacific Islander ($n=41$), 14.6% as Black/African-American ($n=15$), 10.7% as Hispanic ($n=11$), 11.7% as biracial ($n=12$), 4.8% were other ($n=5$), and 18.4% declined to answer ($n=19$) (See Table 1).

Table 1

Demographics of Adolescents

		Total Number	Percentage
Gender	Male	27	26.2
	Female	62	60.2
	No Answer	14	13.6
Age (in years)	13	14	13.6
	14	27	26.2
	15	22	21.3
	16	8	7.8
	17	8	7.8
	18+	10	9.7
	No Answer	14	13.6
Ethnicity	Asian/Pacific Islander	41	39.8
	Black/African-American	15	14.6
	Hispanic	11	10.7
	Biracial	12	11.7
	Other	5	4.8
	No Answer	19	18.4

Procedure

Participants were recruited via web-based advertisements, adoption group newsletters, and messages to adoption support and education listservs. Parents interested in participating reached out to the lead researcher and completed a screening survey to determine their eligibility. Researchers then sent eligible parents further information about the study and a consent form containing the survey the adolescents would be asked to complete. Once the parent consented to the adolescent's participation, he or she provided the name and phone number or email address of the adolescent to the researchers. The researchers contacted the adolescents to invite them to participate and sent the parent and adolescent unique links to the survey once the adolescent consented.

Parents completed a 164-item survey which included measures assessing family demographics, family interaction characteristics, and child outcome variables.

Adolescents completed a 136 item survey which included measures of family interaction characteristics, racial identity, experiences of racism, and personal well-being. Upon completion of the survey, adolescents received an iTunes gift card worth \$10. If a respondent failed to answer a single question, the researchers calculated the mean response score on the measure to fill in the missing data. If a respondent failed to answer more than one question, the researchers removed that data from the sample.

Measures

Independent variable: Cross-cultural experience. The Multicultural Experience Inventory (MEI) (Ramirez, 1998) was used to measure each adolescent's cross-cultural experience. The MEI has been revised many times since the original draft in 1983 and currently consists of 26 items divided into two scoring types. Seventeen of the items (Type A) consist of prompts such as "My childhood friends who visited my home and related well to my parents were..." and are answered via Likert scale ranging from 1 (Almost Entirely My Ethnic Group) to 5 (Almost Entirely Whites). Nine of the items (Type B) consist of prompts such as "I go to events that are predominantly of my own ethnic group in nature" and are answered via Likert scale ranging from 1 (Extensively) to 5 (Never). The original version of the MEI showed split-half reliability coefficients for Types A and B of .79 and .68, respectively.

In scoring Type A in the original inventory, responses 1 and 5 ("Almost Entirely My Ethnic Group" and "Almost Entirely Whites", respectively) receive one point, responses 2 and 4 ("Mostly My Ethnic Group with a Few People of Color from Other

Groups” and “Mostly Whites with a Few People of Color”, respectively) receive two points, and response 3 (mixed (Whites and People of Color About Equally)) receives three points. In other words, endpoints of all white or all minorities were scored the same since the focus was on measurement of multi-cultural exposure. Given the population of interest in the current study is transracial adoptees, it seemed the scoring focus should be on their amount of exposure to people of their own ethnicity of race. Therefore responses to Type A items were scored on a sliding scale with “Almost Entirely White” receiving 1 point and “Almost Entirely My Ethnic Group” receiving 5 points.

Type B items are traditionally scored such that responses 1 and 2 (“Extensively” and “Frequently”, respectively) receive 2 points. All other responses receive 1 point. In the current study, the majority of Type B items were scored in Likert Scale from 1 (Never) to 5 (Extensively), with a response of “Never” indicating more experience with white people, while an “Extensively” response would indicate more experience with minorities. Three of the Type B items are statements specifically inquiring into the respondents’ interactions with white people. In these items, an “Extensively” response would indicate more experience with white people, while a response of “Never” would indicate more experience with minorities. These three items were reverse coded, with “Never” receiving 5 points and “Extensively” receiving 1 point.

Scores were then summed, with higher scores indicating greater opportunities for experience with people of one’s own race. It should be noted that the original inventory includes five items regarding participants’ employment, as well as their experiences in high school. As the population of study was made up of adolescents, these five items were deemed inapplicable and were omitted during analysis.

Mediator: Ethnic identity. To measure subjects' ethnic identity, the researcher used the abridged version of Phinney's Multigroup Ethnic Identity Measure (MEIM; Phinney & Ong, 2007). This six-item version of the MEIM is based on the original, 14-item measure (Phinney, 1992). Both the original and abridged MEIMs employ a five-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree) to explore adolescents' understanding of their ethnic background, desire to learn about their ethnicity, and feelings of belonging to their ethnic group. The abridged version of the MEIM includes items such as "I have a clear sense of my ethnic background and what it means to me."

Both versions of the MEIM demonstrate good reliability. The 14-item version had a Cronbach's alpha of .81 when used with high school students and a .90 with college students. Phinney and Ong (2007) tested their abridged version and found it had a two-factor model: (1) exploration of one's racial identity, and (2) commitment to one's racial identity. The Cronbach's alphas for exploration and commitment were .76 and .78, respectively. Overall, the abridged measure showed a reliability of .81.

Dependent variable: Self-esteem. For the purposes of this study, self-esteem was measured using Rosenberg's 10-item (1965) Self-Esteem Scale. This scale measures adolescents' feelings and positive beliefs about themselves, and has been used in many studies of transracial adoptees. Westhues and Cohen (1997) tested the scale and found that it showed a construct validity of .56-.83 when compared to similar measures of self-esteem. In a separate population of 468 transracially adopted Asian adults, the scale had a reliability of .90.

Example items include “On the whole, I am satisfied with myself” and “I feel that I have a number of good qualities” and are answered via a Likert scale ranging from 1 (Strongly Agree) to 4 (Strongly Disagree). Scores are calculated by summing responses, with a possible score range of 10 to 40 points. Scores below 15 are considered below average self-esteem. Scores above 25 are considered above average self-esteem.

Chapter IV: Results

The purpose of the current study was to determine whether there was a relationship between cross-cultural experiences and transracial adoptees' self-esteem, mediated by their ethnic identity. The hypotheses in the present study were the following:

- 1.a. There will be a positive relationship between cross-cultural experience and ethnic identity for transracially adopted adolescents.
- 1.b. There will be a positive relationship between cross-cultural experience and self-esteem for transracially adopted adolescents.
2. There will be a positive relationship between ethnic identity and self-esteem for transracially adopted adolescents.
3. Ethnic identity will mediate the relationship between cross-cultural experiences and self-esteem for transracially adopted adolescents.

Prior to testing the hypotheses, a summary of the distribution of scores on the variables was calculated and is shown in Table 2.

Table 2

Descriptive Information on Variables/Measures

	Cross-cultural Experiences (IV*)	Ethnic Identity (Mediator)	Self-esteem (DV**)
Measure	Multicultural Experience Inventory (See Appendix E)	Multigroup Ethnic Identity Measure (See Appendix F)	Rosenberg Self-Esteem Scale (See Appendix G)
Items	24 (of 29)	All (6)	All (10)
Range of possible scores	24-120	6-30	10-40
Range of reported scores	30-93	6-29	15-40
Mean	59.02	15.96	31.11
Standard deviation	12.22	5.34	5.62

*IV = Independent Variable

**DV = Dependent Variable

The analysis for this study was guided by the recommendations for testing mediation offered by Baron and Kenny (1986). This model is based on three conditions. First, the independent variable must affect the mediator. Second, the independent variable must affect the dependent variable. Third, the mediator must affect the dependent variable. If and only if these three conditions are met, a test for mediation can be conducted to determine if the independent variable exercises less of an effect on the dependent variable in the presence of the mediator. In the current study, this means that (1) cross-cultural experiences must affect ethnic identity, (2) cross-cultural experiences must affect self-esteem, (3) ethnic identity must affect self-esteem, and (4) cross-cultural experiences must affect self-esteem less when entered into the regression equation with ethnic identity.

Primary Analysis

To evaluate hypotheses 1a, 1b, and 2, a test of correlation was completed for each set of variables in each hypothesized relationship. There was a trend between cross-cultural experiences and self-esteem ($p=.055$), but no correlation between ethnic identity and self-esteem (see Table 3), indicating that neither hypothesis 1b nor hypothesis 2 were supported. As prescribed by Baron and Kenny (1986), this lack of significance led to a halt in analysis as the requirements for a test of mediation were not met.

Interestingly, there was a significant negative correlation between cross-cultural experiences and ethnic identity, a reversal of the suggested relationship in hypothesis 1a (see Table 3). A similar reversal of the predicted relationship was seen between cross-cultural experiences and self-esteem (hypothesis 1b), though again, this trend was not very strong. In other words, adolescents who had the highest level of experiences with same-race individuals had the lowest ethnic identity and self-esteem.

Table 3

Correlations Between Study Variables

	Cross-cultural Experiences	Ethnic Identity	Self-esteem
Cross-cultural Experiences	—		
Ethnic Identity	-.425**	—	
Self-esteem	-.215*	.061	—

**Correlation is significant at the .01 level (2-tailed).

*Correlation is significant at the .055 level (2-tailed).

Secondary Analysis

The negative correlations between cross-cultural experiences and both ethnic identity and self-esteem ran contrary to the researcher's expectations. In an effort to further understand these results, two sets of analyses were conducted. First, the

researcher sought to explore whether alternative coding of the cross-cultural experience measure (i.e., the MEI) had some effect on its correlation to either ethnic identity or self-esteem. In the primary data analysis the researcher had employed a linear scoring method, such that lower scores were applied to responses indicating the most interaction with white people and higher scores were given to responses indicating the most interaction with minorities. It was thought that this scoring method might best capture the extent of adolescents' exposure to other minority individuals. For this second analysis, the researcher recoded the data such that lower scores were applied to responses indicating either all white or all minority social experiences and higher scores were given to responses indicating a mixture of the two. In other words, this scoring was meant to measure the level of racial integration in adolescents' social experiences. The researcher then ran a test of correlation on the updated data. With this recoding, cross-cultural experiences were not significantly related to either ethnic identity or self-esteem (see Table 4).

Table 4

Correlations Between Recoded Study Variables

	Ethnic Identity	Self-esteem
Cross-cultural Experiences	-.034	.031

Finally, the researcher was curious whether there existed any pattern or theme among the cross-cultural experience items significantly correlated with ethnic identity and self-esteem. This was explored by looking at the correlation between ethnic identity, self-esteem, and each of the 24 items on the cross-cultural experiences measure.

Statistically significant correlations can be seen in Table 5.

Table 5

Correlations Between MEI Items and Study Variables

MEI Items	Ethnic Identity	Self-esteem
My childhood friends who visited my home and related well to my parents were...	-.348**	
The people with whom I have established close, meaningful relationships have been...	-.223*	-.262*
At present, my close friends are...	-.278*	-.224*
I enjoy getting together with people who are...	-.410**	
When I study or work on a project with others, I am usually with persons who are...	-.310**	
When I am involved in group discussions where I am expected to participate, I prefer a group of people who are...	-.354**	
I am active in organizations or social groups in which the majority of the members are...		-.241*
When I discuss personal problems or issues, I discuss them with people who are...	-.334**	
I most often spend time with people who are...	-.323**	-.273*
I go to events that are predominantly of my own ethnic group in nature. ¹	-.406**	
I visit the homes of whites. ²	-.257*	
I visit the homes of persons of my ethnic group (other than relatives). ³	-.395**	
I invite persons of my ethnic group (other than relatives) to my home. ⁴	-.347**	

**Correlation is significant at the .01 level (2-tailed).

*Correlation is significant at the .05 level (2-tailed).

¹ This item is Type B and reflects the original 1 (Never) to 5 (Extensively) coding.

² As discussed in the Measures section, this is one of three Type B items that were reverse coded such that a response of "Never" received 5 points and "Extensively" received 1 point.

³ This item is also Type B and reflects the original 1 (Never) to 5 (Extensively) coding.

⁴ This item is also Type B and reflects the original 1 (Never) to 5 (Extensively) coding.

Chapter V: Discussion

The aim of the current research was to examine the extent to which cross-cultural experiences affect transracially adopted adolescents' self-esteem. The researcher hypothesized that there would be a relationship between these two variables, mediated by the adolescents' ethnic identity. Previous research has explored the correlations between cross-cultural experiences and ethnic identity, and ethnic identity and self-esteem among minority adolescents, but there has been limited research on the relationship among cross-cultural experiences, ethnic identity, and self-esteem in the lives of transracially adopted minority adolescents. This research was conducted with the goal to add to existing knowledge and literature on transracial adoption, particularly exploring issues leading to positive outcomes in transracially adopted youth.

Results indicated that there was a significant negative correlation between cross-cultural experiences and ethnic identity, and a negative trend between cross-cultural experiences and self-esteem. However, there was no significant relationship between ethnic identity and self-esteem. Thus, a mediating role between cross-cultural experiences and self-esteem was not established for ethnic identity among transracial adoptees.

The results of the current study were surprising. Given the previous research on minority adolescents discussed in the literature review, the likelihood of finding positive correlations between cross-cultural experiences, ethnic identity, and self-esteem in transracially adopted minority adolescents would appear high. Despite these precedents, no correlation was found between ethnic identity and self-esteem, and only a trend was found between cross-cultural experiences and self-esteem. Even more surprising, results

indicated that both the significant correlation between cross-cultural experiences and ethnic identity, and the trend between cross-cultural experiences and self-esteem were negative, a conclusion which flies in the face of previous research positively linking each of them. These results seem to suggest that, unlike in non-adopted minority adolescents, for whom interaction with other minorities bolsters ethnic identity and self-esteem, high levels of interaction with minorities are associated with lower ethnic identity and self-esteem in transracially adopted adolescents. Given that these are correlational data, it is impossible to make statements about the direction of causality. However, in an attempt to better understand the connection between these variables, individual items on the cross-cultural experience measure were examined.

In the secondary, itemized analysis, it became clear that those items on the cross-cultural experience measure regarding current preference for social groups and leisure activities almost solely with members of one's own race were most strongly negatively correlated with ethnic identity. It appears that those adoptees who choose to spend the least leisure time with and/or go to fewer events with Whites scored lower on the ethnic identity measure. While this could be explained in any number of ways, it is important to recall that this is a case of correlation and not causation. Spending time with same-race peers may in fact be damaging transracial adoptees' ethnic identity; however, a more likely explanation might be that transracial adoptees struggling to solidify their ethnic identity are more inclined to seek out same-race peer groups and social activities. These data suggest that the process of developing a strong ethnic identity may be different for minority youth raised by white parents than it is for minority youth raised by same-race parents. It may also lend support to the scholars who have suggested ethnic identity

development may be not only different, but more difficult for transracially adopted youth (Hayes, 1993; McRoy, et al., 1982). Further study is needed to explore this correlation and the process of ethnic identity development for this population.

Having run a test between the cross-cultural experience items and self-esteem, it appears that items regarding close relationships were most strongly negatively correlated with self-esteem. Specifically, transracial adoptees who spend more time with or feel closest to minority individuals reported the lowest levels of self-esteem. Such a result seems counterintuitive given the importance of ethnic socialization and the presence of same-race peers for the self-esteem of non-adopted minority adolescents. One possible explanation is that a lack of integrated friend and social groups may lead to lower self-esteem in transracially adopted minority adolescents. Of course, it may also be true that low self-esteem leads to a lower likelihood of transracial adoptees seeking out friends or peers of other races.

In combination, these findings suggest that something about being raised by white parents leads minority adoptees to struggle with ethnic identity development, not in spite of, but in conjunction with access to peers and role models of the same race. Further, this access to same-race individuals is somehow tied to lower self-esteem among this population. One possible explanation for this could be that transracially adopted minority adolescents may struggle to find acceptance in same-race peer groups due to their membership in non-traditional (i.e., white parent) families. Perhaps these adolescents seek to establish their ethnic identities by aligning themselves with same-race peers. If these peers then reject them or question their ethnic authenticity due to difference or perceived privilege, the adoptees' ethnic identity and self-esteem could suffer as a result.

Such phenomena would fall well within the predictions of symbolic interactionism. Rejection by one's chosen same-race peer group represents a negative social message that would most certainly affect one's self-esteem, and would further call one's ethnicity into question. Even if transracial adoptees are accepted by same-race peer groups, their preference can ultimately lead to internal conflict. Adoptive parents who attempt to ignore or otherwise downplay their adolescents' race may send messages that are in direct conflict with those from the adolescents' peers and community. If symbolic interactionists are correct in their assumption that ethnic identity and self-esteem are affected by social relationships, it follows that these would be negatively affected if adoptees received conflicting messages about themselves from their white parents and minority peers. In the context of those conflicting messages, learning and integrating meaning could become a harrowing process, leading to ambiguous identity and lowered self-worth.

Further study into this topic could go in any number of directions. It might be useful to explore adoptees' perceptions of acceptance from different races in relation to their self-esteem and ethnic identity. How do adoptees' perceptions of acceptance from white and minority individuals affect their internalized ethnic identity? Demographic factors might also be of interest in such future studies. How might family income and other socioeconomic factors affect adoptees' perceived levels of acceptance from same-race peers? Are there differences in self-esteem and ethnic identity development between male and female transracially-adopted adolescents? Past research has shown gender differences in factors affecting self-esteem among non-adopted adolescents (Bognini, Plancherel, Bettschart, & Halfon, 1996). Perhaps this is also the case with transracially-

adopted adolescents. How do the correlations among cross-cultural experiences, ethnic identity, and self-esteem in transracial adoptees vary across different minority groups? For example, do Hispanic adoptees exhibit the same patterns as black, Asian, or Native American adoptees? Does this negative link vary by the racial composition of the neighborhood or school in which the adolescent spends his or her time? For instance, does a black adolescent spending most of his or her time with other black people have different meaning when the adolescent attends a predominantly White school, versus an integrated school, versus a predominantly black school?

Being that the hypotheses of the current study were based on studies of minority adolescents in black parent households, it stands to reason that research into a different population might offer possible alternative hypotheses on self-esteem and ethnic identity development in transracial adoptees. One population worth researching is biracial adolescents. Previous research into this population has found that biracial adolescents often struggle to incorporate two or more ethnicities within their own identity (Bracey, Bámaca, & Umaña-Taylor, 2004; Poston, 1990). It is possible that these adolescents' experiences may more closely mirror those of transracially-adopted minority youths, who must balance the culture of their white parents with that of their own ethnic group. In the future, research on biracial adolescents' self-esteem and ethnic identity development might serve as a suitable starting point for further study of transracial adoptees.

Even though these negative correlations are surprising, and potentially of concern, it is heartening to find that overall, the transracial adoptees who participated in this study do not seem to suffer below average self-esteem, a finding which reflects prior research (McRoy, et al., 1982; Juffer & van IJzendoorn, 2007). On the contrary, the mean on the

self-esteem measure (31.11) indicates these adolescents report self-esteem well above the normal range (between 15 and 25). Further exploration could expand upon these findings and identify factors other than cross-cultural experiences and ethnic identity which may contribute to transracial adoptees' resilience.

Limitations

This study was based on analysis of preexisting data from a study undertaken some years ago. As such, it is limited strictly to those measures deemed appropriate by the original researchers, leaving little flexibility in choosing measures best suited for the current study. Given the unexpected nature of the results, this study may have benefited from the availability of more than one measure of each variable. This is especially true for the cross-cultural experiences variable, the scoring of which was adapted to better fit the needs of the study. Use of an additional measure of cross-cultural experiences might have served to reinforce the results found in the primary analysis.

The sample for this study came from self-selecting adolescents who were recruited only after permission was given by their parents. As such, the self-selecting nature of the study's sample may limit the variability in experiences and results. It is possible that parents of the adolescents who participated in this study are likely to have engaged in purposeful socialization in a way that lowered variability in levels of ethnic identity and/or cross-cultural experiences. While the original researchers made efforts to recruit participants from across the US and socioeconomic and ethnic backgrounds, a larger sample using other recruitment methods might increase variability and generalizability of the results.

Finally, study data was collected at a single point in time despite the possible fluidity of the variables in question. Prior research suggests that ethnic identity, much like self-esteem, is a changeable characteristic that goes through a process of development. As such, the self-esteem and ethnic identity of adolescents, including those in this study, are likely to undergo change over the course of time. For example, prior studies found that from age 14 to 23 years of age, boys' self-esteem increased while girls' self-esteem decreased (Block & Robbins, 1993). Similarly, previous research by Phinney suggests a three-stage process by which minority adolescents progress from unexamined ethnic identity, to an ethnic identity search, and finally to ethnic identity achievement (Phinney, 1989). This fluidity of self-esteem and ethnic identity is age-appropriate given adolescents' developmental stage (Beyers & Çok, 2008). It is not possible to know the stage of ethnic identity development the adoptees' in this study had each achieved, but it might be assumed that at least some of them had yet to reach full achievement. As such, future study might involve a longitudinal design that allows for multiple periods of measurement that better track these changes overtime. It is also possible that cross-cultural experiences become more or less related to self-esteem and ethnic identity in transracial minority adoptees over time, thus warranting further study.

Clinical Implications

The results of this study point to important clinical implications. First, the development of ethnic identity and self-esteem in transracial minority adoptees continues to be a topic of curiosity and inquiry. Though the results of this study indicate little relationship between adolescent adoptees' self-esteem and ethnic identity, prior research points to ways in which these factors become increasingly important over the life course

in predicting positive or negative outcomes (Cederblad, Hook, Irhammar, & Mercke, 1999). With the addition of the findings from the current study, it is becoming increasingly apparent that development of self-esteem and ethnic identity in transracially adopted minority adolescents is vastly different from that of non-adopted and same-race adopted minorities. Something about the status of being raised by white parents is correlated with low self-esteem and ethnic identity in those minority adolescents who show preference for the company of minorities. Why that is the case remains to be seen.

Second, these results underlie the importance for clinicians to approach transracially adoptive families with the same sense of curiosity and lack of judgement accorded to other families and clients. The challenges specific to these families may at times be large, but research indicates that transracially adopted children are no worse off than their non-adopted and same-race adopted counterparts. Above all, the clinician should respect the unique viewpoints and experiences of these families, in order to provide the most useful therapeutic experience possible. This means taking into account the fact that, for transracially adopted minority adolescents, the process of ethnic identity development is likely non-traditional. Transracially adoptive parents may find themselves at odds with their adolescent children as they seek to find and achieve their own identity, leading to stress within the family unit. Clinicians will do well to give special attention to ethnic identity and the clients' own perceptions of its importance in their lives.

Conclusion

In conclusion, ethnic identity appears to have no correlation with self-esteem in the transracially adopted minority adolescents in this study. Analysis was completed to

test the hypothesis that cross-cultural experiences might be positively correlated to ethnic identity and self-esteem, but results indicated the opposite. For the purposes of this study, interactions with same-race individuals were considered cross-cultural experiences because minority transracial adoptees are often raised in ethnically-homogenous, white-dominated communities. However, for those transracial adoptees who reported preference for minority-dominated peer groups, these cross-cultural experiences appear to have a significant negative correlation with ethnic identity, and a moderately significant negative correlation with self-esteem. These findings reinforce the need for further study into the unique factors which impact development of ethnic identity and self-esteem in minority adolescents being raised by white parents.

Despite its apparent lack of correlation with self-esteem, this study's findings do not negate the importance of ethnic identity development in transracially adopted minority adolescents. The correlations between ethnic identity, self-esteem, and the adoptees' preferences for same-race peer groups point to the importance of social relationships in the lives of these adolescents, and provides some justification for the use of symbolic interactionism as a theoretical base. Continuing research must seek to understand what factors determine how transracial adoptees work through this process to achieve ethnic identity and meaning for themselves.

Appendix A – Demographic Information

Please answer the following questions about yourself:

1. Current Zip Code: _____
2. Sex:
 - 1 Male
 - 2 Female
3. Your Racial/Ethnic Background: _____
4. What is your current relationship status?
 - 1 Never Married
 - 2 Never Married, Living Together
 - 3 Legally Married
 - 4 Separated/Divorced, Remarried
5. If married or living together, what is the duration of your current relationship?
_____ (months/years)
6. What is your household income? _____
7. What is your religious affiliation (circle one)?
 - 0 No religious affiliation
 - 1 Catholic
 - 2 Protestant
 - 3 Latter-Day Saints
 - 4 Non-denominational Christian
 - 5 Jewish
 - 6 Buddhist
 - 7 Muslim
 - 8 Unitarian
 - 9 Atheist
 - 10 Other: _____
8. How often do you participate in organized activities of a church, house of worship, or religious group?
 - 1 Rarely or never
 - 2 Once or twice a year
 - 3 Several times a year
 - 4 Once a month
 - 5 Several times a month
 - 6 Once a week
 - 7 Several times per week
9. How important is religion or spirituality in your daily life?
 - 1 Not at all important
 - 2 Not very important
 - 3 Somewhat important
 - 4 Important
 - 5 Very Important

Please answer the following questions about the child who will be participating in this study:

1. Current age: _____

2. Sex:
 - 1 Male
 - 2 Female
3. Adoption Status:
 - 1 Open
 - 2 Closed
4. Was the adoption:
 - 1 Domestic
 - 2 International
5. Racial/Ethnic Background: _____
6. What was your marital status when this child was adopted?
 - 1 Never Married
 - 2 Never Married, Living Together
 - 3 Legally Married
 - 4 Separated/Divorced, Remarried
7. Were there other children in the home at the time this child was adopted?
 - 1 No
 - 2 Yes
8. If yes, please answer the following questions about these children (If no, skip to question 9):
 - Child 1.) Current age: _____
 - Sex:
 - 1 Male
 - 2 Female
 - Adopted:
 - 1 No
 - 2 Yes
 - Racial/Ethnic Background: _____
 - Child 2.) Current age: _____
 - Sex:
 - 1 Male
 - 2 Female
 - Adopted:
 - 1 No
 - 2 Yes
 - Racial/Ethnic Background: _____

Child 3.) Current age: _____

Sex:

- 1 Male
- 2 Female

Adopted:

- 1 No
- 2 Yes

Racial/Ethnic Background: _____

9. Have other children entered the home after the child who is participating in this study?

- 1 No
- 2 Yes

How Many? _____

Child 1.) Current age: _____

Sex:

- 1 Male
- 2 Female

Adopted:

- 1 No
- 2 Yes

Racial/Ethnic Background: _____

Child 2.) Current age: _____

Sex:

- 1 Male
- 2 Female

Adopted:

- 1 No
- 2 Yes

Racial/Ethnic Background: _____

Child 3.) Current age: _____

Sex:

- 1 Male
- 2 Female

Adopted:

- 1 No
- 2 Yes

Racial/Ethnic Background: _____

10. If you adopted more than one child, are any of the children biological siblings?

- 1 No
- 2 Yes

11. Is the child participating in this study part of the biological sibling group?

- 1 No
- 2 Yes

Appendix B – Study Announcement

Transracial Adoption Study

Faculty in the Department of Family Science, in conjunction with The Center for Adoption Support and Education (CASE), are initiating a national survey of transracially adopted adolescents and their families. The specific focus of the study is to examine the impact of family characteristics on the overall adjustment, self-esteem and racial identity of racial minority youth adopted by white parents.

(Agency Name) is supporting this research because we believe it will benefit us in providing better services to the youth and families we serve. We encourage you to consider participating.

Who can participate?

If the parent or parents in your family are white and there is at least one racial minority adolescent between the ages of 14-18, you may qualify

What will I be asked to do?

Both parent and child will be asked to complete an on-line survey that will take approximately 20 minutes. Adolescents who complete the survey will receive a \$10 iTunes gift card.

How do I find out more about the study?

If you would like to know more about the study or are interested in participating, contact:

Dr. Leigh Leslie
Department of Family Science
The University of Maryland, College Park
301-405-4011, lleslie@umd.edu

Appendix C – Parental Consent Form

Transracial Adoption Study

Why is this research being done?

This is a research project being conducted by Dr. Leigh Leslie and a research team at the University of Maryland, College Park in collaboration with the Center for Adoption Support and Education (CASE). We are inviting you to participate in this research project because you are the parent of a transracially adopted adolescent. The purpose of this research project is to better understand factors that contribute to healthy outcomes for transracially adopted youth.

What will I be asked to do?

The procedures involve the completion of an online questionnaire gathering information about your family (e.g. demographic information, parenting practices, family functioning, and adolescent behavior). We anticipate that the questionnaires should take 20 minutes to complete. There will be no identifying information on the questionnaire and you are free to stop your participation at any time or skip questions without penalty. Once you complete the online questionnaire, your participation in this study will end.

What about confidentiality?

We will do our best to keep your personal information confidential. To help protect your confidentiality, you have been given a username. You have also created a password that will grant you secure access to your questionnaire. The online questionnaires will not contain any information that may personally identify you. Although you have logged in using your e-mail address, the e-mail address and password are stored separately from the information on the questionnaire in password-protected files. Hard copies of identifying information will be stored in a locked filing cabinet in Dr. Leigh Leslie's office. Only Dr. Leslie will have access to the key. If we write a report or article about this research project, your identity will be protected to the maximum extent possible in that no identifying information will be used and results will be reported for groups only.

What are the risks of this research?

While there are no known risks associated with participating in this research project, some questions may make you feel uncomfortable by addressing emotionally distressing issues in your family.

What are the benefits of this research?

This research is not designed to help you personally, but the results may help the investigator learn more about family processes that affect adolescents in transracially adopted families. We hope that, in the future, other people might benefit from this study through improved understanding of transracial families and transracially adopted youth and the development of better programming for this population.

Do I have to be in this research? May I stop participating at any time?

Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, you will not be penalized or lose benefits to which you otherwise qualify.

What if I have questions?

This research is being conducted by Dr. Leigh Leslie at the University of Maryland, College Park. If you have any questions about the research study itself, please contact Dr. Leigh Leslie at 1204 Marie Mount Hall, University of Maryland, College Park, College Park, MD 20742, (telephone) 301-405-4011; (email) lleslie@umd.edu.

If you have questions about your rights as a research subject or wish to report a research-related injury, please contact: Institutional Review Board Office, University of Maryland, College Park, Maryland, 20742; (e-mail) irb@deans.umd.edu; (telephone) 301-405-0678

This research has been reviewed according to the University of Maryland, College Park IRB procedures for research involving human subjects.

Statement of Age of Subject and Consent

If you read and understand the above statement, please click the “Continue” button below to indicate your consent to participate in this study. By clicking “Continue” you are indicating that you are 18 or older and are agreeing voluntarily to participate in this study.

Appendix D – Adolescent Consent Form

Transracial Adoption Study

Why is this research being done?

This is a research project being conducted by Dr. Leigh Leslie and a research team at the University of Maryland, College Park in collaboration with the Center for Adoption Support and Education (CASE). We are inviting you to participate in this research project because you are a transracially adopted adolescent. The purpose of this research project is to better understand factors that contribute to healthy outcomes for transracially adopted youth.

What will I be asked to do?

The procedures involve the completion of an online questionnaire gathering information about your family (e.g. demographic information, parenting practices, family functioning, and adolescent behavior). We anticipate that the questionnaires should take 20 minutes to complete. There will be no identifying information on the questionnaire and you are free to stop your participation at any time or skip questions without penalty. Once you submit the online questionnaire, your participation in this study will end and you will receive a \$10 iTunes gift card in the mail.

What about confidentiality?

We will do our best to keep your personal information confidential. To help protect your confidentiality, you have been given a username. You have also created a password that will grant you secure access to your questionnaire. The online questionnaires will not contain any information that may personally identify you. Although you have logged in using your e-mail address, the e-mail address and password are stored separately from the information on the questionnaire in password-protected files. Hard copies of identifying information will be stored in a locked filing cabinet in Dr. Leigh Leslie's office. Only Dr. Leslie will have access to the key. If we write a report or article about this research project, your identity will be protected to the maximum extent possible in that no identifying information will be used and results will be reported for groups only.

What are the risks of this research?

While there are no known risks associated with participating in this research project, some questions may make you feel uncomfortable by addressing emotionally distressing issues in your family.

What are the benefits of this research?

This research is not designed to help you personally, but the results may help the investigator learn more about family processes that affect adolescents in transracially adopted families. We hope that, in the future, other people might benefit from this study

through improved understanding of transracial families and transracially adopted youth and the development of better programming for this population.

Do I have to be in this research? May I stop participating at any time?

Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, you will not be penalized or lose benefits to which you otherwise qualify.

What if I have questions?

This research is being conducted by Dr. Leigh Leslie at the University of Maryland, College Park. If you have any questions about the research study itself, please contact Dr. Leigh Leslie at 1204 Marie Mount Hall, University of Maryland, College Park, College Park, MD 20742, (telephone) 301-405-4011; (email) lleslie@umd.edu.

If you have questions about your rights as a research subject or wish to report a research-related injury, please contact: Institutional Review Board Office, University of Maryland, College Park, Maryland, 20742; (e-mail) irb@deans.umd.edu; (telephone) 301-405-0678

This research has been reviewed according to the University of Maryland, College Park IRB procedures for research involving human subjects.

Statement of Age and Consent

If you read and understand the above statement, please click the “Continue” button below to indicate that you are 18 years of age or older and are agreeing voluntarily to participate in this study.

Appendix E – Multicultural Experience Inventory

Next to each item, indicate the number of the response that best describes your past and present behavior using this scale:

- 1 = almost entirely my ethnic group
- 2 = mostly my ethnic group with a few people of color from other groups
- 3 = mixed (Whites, my ethnic group, and people of color, about equally)
- 4 = mostly Whites with a few people of color
- 5 = almost entirely Whites

- 1 2 3 4 5 1. The ethnic composition of the neighborhoods in which I lived
 - 1 2 3 4 5 (a) Before I started attending school
 - 1 2 3 4 5 (b) While I attended elementary school
 - 1 2 3 4 5 (c) While I attended middle school
 - 1 2 3 4 5 (d) While I attended high school
- 1 2 3 4 5 2. My childhood friends who visited my home and related well to my parents were...
- 1 2 3 4 5 3. The teachers and counselors with whom I have had the closest relationships have been...
- 1 2 3 4 5 4. The people who have most influenced me in my education have been...
- 1 2 3 4 5 5. In high school, my close friends were...
- 1 2 3 4 5 6. The ethnic backgrounds of the people I have dated have been...
- 1 2 3 4 5 7. In the job(s) I have had, my close friends have been...
(skip if you have not been employed)
- 1 2 3 4 5 8. The people with whom I have established close, meaningful relationships have been...
- 1 2 3 4 5 9. At present my close friends are...
- 1 2 3 4 5 10. I enjoy getting together with people who are...
- 1 2 3 4 5 11. When I study or work on a project with others, I am usually with persons who are...
- 1 2 3 4 5 12. When I am involved in group discussions where I am expected to participate, I prefer a group of people who are...
- 1 2 3 4 5 13. I am active in organizations or social groups in which the majority of the members are...
- 1 2 3 4 5 14. When I am with my friends, I usually go to events where the people are...
- 1 2 3 4 5 15. When I discuss personal problems or issues, I discuss them with people who are...
- 1 2 3 4 5 16. I most often spend time with people who are...

For the next 6 items, use the following scale to rate the statement that best describes you past and present experiences:

- 1 = Extensively
- 2 = Frequently
- 3 = Occasionally
- 4 = Seldom
- 5 = Never

- 1 2 3 4 5 17. I go to events that are predominantly White in nature.
- 1 2 3 4 5 18. I go to events that are predominantly of minority groups other than my own.
- 1 2 3 4 5 19. I go to events that are predominantly of my own ethnic group in nature.
- 1 2 3 4 5 20. I visit the homes of Whites.
- 1 2 3 4 5 21. I invite Whites to my home.
- 1 2 3 4 5 22. I visit the homes of persons of my ethnic group (other than relatives).
- 1 2 3 4 5 23. I invite persons of my ethnic group (other than relatives) to my home.
- 1 2 3 4 5 24. I visit the homes of minorities other than of my own ethnic group.
- 1 2 3 4 5 25. I invite persons of minorities other than those of my ethnic group to my home.

Appendix F - Multigroup Ethnic Identity Measure

In the United States, people come from many different countries and cultures, and there are many different words to describe the different backgrounds or ethnic groups that people come from. Some examples of ethnic groups are Latino, African American, Mexican American, Asian American, Chinese American, and many others. These questions are about your ethnicity or your ethnic group and how you feel about it or react to it.

Please fill in: In terms of ethnic group, I consider myself to be _____.

Use the numbers below to indicate how much you agree or disagree with each statement.

(5) Strongly agree (4) Agree (3) Neutral (2) Disagree (1) Strongly disagree

1. I have spent time trying to find out more about my ethnic group, such as its history, traditions, and customs.

2. I have a strong sense of belonging to my own ethnic group.

3. I understand pretty well what my ethnic group membership means to me.

4. I have often done things that will help me understand my ethnic background better.

5. I have often talked to people in order to learn more about my ethnic group.

6. I feel a strong attachment towards my ethnic group.

Appendix G – Rosenberg Self-Esteem Scale

Indicate the extent to which you agree or disagree with the following statements about yourself using the following scale:

- | | 1 | 2 | 3 | 4 |
|---|----------------|---|---|-------------------|
| | Strongly Agree | | | Strongly Disagree |
| 1. On the whole, I am satisfied with myself. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 2. At times I think I am no good at all. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 3. I feel that I have a number of good qualities. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 4. I am able to do things as well as most other people. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 5. I feel I do not have much to be proud of. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 6. I certainly feel useless at times. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 7. I feel that I'm a person of worth, at least on an equal plane with others. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 8. I wish I could have more respect for myself. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 9. All in all, I am inclined to feel that I am a failure. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |
| 10. I take a positive attitude toward myself. | 1 | 2 | 3 | 4 |
| | Strongly Agree | | | Strongly Disagree |

References

- Achenbach, T. M. (1991). *Manual for the child behavior checklist/4±18 and 1991 profile*. Burlington, VT: University of Vermont, Department of Psychiatry.
- Andujo, E. (1988). Ethnic identity of transethnically adopted Hispanic adolescents. *Social Work, 33*(6), 531-535.
- Arroyo, C. G., & Zigler, E. (1995). Racial identity, academic achievement, and the psychological well-being of economically disadvantaged adolescents. *Journal of Personality and Social Psychology, 69*(5), 903–914.
- Baron, R., & Kenny, D. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology, 51*(6), 1173-1182.
- Beyers, W., & Çok, F. (2008). Adolescent self and identity development in context. *Journal of Adolescence, 31*, 147-150.
- Block, J., & Robins, R. (1993). A longitudinal study of consistency and change in self-esteem from early adolescence to early adulthood. *Child Development, 64*, 909-923.
- Bolognini, M., Plancherei, B., Bettschart, W., & Halfon, O. (1996). Self-esteem and mental health in early adolescence: development and gender differences. *Journal of Adolescence, 19*, 233-245.
- Bracey, J., Bámaca, M., & Umaña-Taylor, A. (2004). Examining ethnic identity and self-esteem among biracial and monoracial adolescents. *Journal of Youth and Adolescence, 33*(2), 123-132.

- Burrow, A., & Finley, G. (2004). Transracial, same-race adoptions, and the need for multiple measures of adolescent adjustment. *American Journal of Orthopsychiatry*, 74(4), 577-583.
- Cederblad, M., Höök, B., Irhammar, M., & Mercke, A. (1999). Mental health in international adoptees as teenagers and young adults: An epidemiological study. *Journal of Child Psychology & Psychiatry & Allied Disciplines*, 40, 1239–1248.
- Coopersmith, S. (1981). *SEI: Self-esteem inventories*. Palo Alto, CA: Consulting Psychologists Press.
- Denson, N., & Chang, M. (2009). Racial diversity matters: The impact of diversity-related student engagement and institutional context. *American Educational Research Journal*. doi: 10.3102/0002831208323278
- Department of Health and Human Services. (2007). Part 1: The population. In *Adoption USA: A chartbook based on the 2007 national survey of adoptive parents*. Retrieved from <http://aspe.hhs.gov/hsp/09/nsap/chartbook/chartbook.cfm?id=13>
- Derogatis, L., & Cleary, P. (1977). Confirmation of the dimensional structure of the SCL-90: A study in construct validation. *Journal of Clinical Psychology*, 33(4), 981-989.
- Donnellan, M., Trzesniewski, K., Robins, R., Moffitt, T., & Caspi, A. (2005). Low self-esteem is related to aggression, antisocial behavior, and delinquency. *Psychological Science*, 16(4), 328-335.
- Fitts, W. (1965). *Tennessee self concept scale manual*. Nashville, TN: Counselor Recordings and Tests.

- Folkman, S., & Lazarus, R. (1980). An analysis of coping in a middle-aged community sample. *Journal of Health and Social Behavior, 21*, 219-239.
- Friedlander, M. (1999). Ethnic identity development of internationally adopted children and adolescents: Implications for family therapists. *Journal of Marital and Family Therapy, 25*(1), 43-60.
- Greig, R. (2003). Ethnic identity development: Implications for mental health in african-american and hispanic adolescents. *Issues in Mental Health Nursing, 24*, 317-331.
- Harter, S. (1985). *Manual for the Self-Perception Profile for Children*. Denver, CO: University of Denver.
- Hayes, P. (1993). Transracial adoption: Politics and ideology. *Child Welfare, 72*, 301–310.
- Helms, J. (1984). Towards a theoretical explanation of the effects of race on counseling: A Black and White model. *The Counseling Psychologist, 12*, 153–165.
- Helms, J. (1990). *Black and white racial identity: Theory, research, and practice*. Greenwood, New York.
- Hollingsworth, L. (1998). Promoting same-race adoption for children of color. *Social Work, 43*(2), 104-116.
- Hollingsworth, L. (1999). Symbolic interactionism, african american families, and the transracial adoption controversy. *Social Work, 44*(5), 443-453.
- Howe, R. (1995). Redefining the transracial adoption controversy. *Duke Journal of Gender Law and Policy, 2*(131), 131-164.

- Jourdan, A. (2006). The impact of family environment on the ethnic identity development of multiethnic college students. *Journal of Counseling and Development, 84*, 328-340.
- Juffer, F., & van IJzendoorn, M. (2007). Adoptees do not lack self-esteem: A meta-analysis of studies on self-esteem of transracial, international, and domestic adoptees. *Psychological Bulletin, 133*(6), 1067-1083.
- Kuhn, M., & McPartland, T. (1954). An empirical investigation of self-attitudes. *American Sociological Review, 19*(1), 68-76.
- Lee, R. (2003). The transracial adoption paradox: History, research, and counseling implications of cultural socialization. *Counseling Psychology, 31*(6), 711-744.
- Lee, R., Grotevant, H., Hellerstedt, W., Gunnar, M., & The Minnesota International Adoption Project Team. (2006). Cultural socialization in families with internationally adopted children. *Journal of Family Psychology, 20*(4), 571-580.
- Leslie, L., Smith, J., & Hrapczynski, K. (2013). Racial socialization in transracial adoptive families: Does it help adolescents deal with discrimination stress? *Family Relations, 62*, 72-81.
- Lopez, E. (1970). *Anxiety, acculturation and the urban chicano*. Berkeley: California Book.
- McRoy, R., Zurcher, L., Lauderdale, M., & Anderson, R. (1982). Self-esteem and racial identity in transracial and inracial adoptees. *Social Work, 27*(6), 522-526.
- National Association of Black Social Workers. (1972). Position paper on trans-racial adoption. New York: Author.

- National Association of Black Social Workers. (1991). Preserving African-American families (position statement). Washington, DC: Author.
- Negy, C., Shreve, T., Jensen, B., & Uddin, N. (2003). Ethnic identity, self-esteem, and ethnocentrism: A study of social identity versus multicultural theory of development. *Cultural Diversity and Ethnic Minority Psychology, 9*(4), 333-344.
- Pearlin, L. & Schooler, C. (1978). The structure of coping. *Journal of Health and Social Behavior, 19*, 2-21.
- Phinney, J. (1989). Stages of ethnic identity development in minority group adolescents. *Journal of Early Adolescence, 9*, 34-49.
- Phinney, J. (1992). The Multigroup Ethnic Identity Measure: A new scale for use with adolescents and youth adults from diverse groups. *Journal of Adolescent Research, 7*, 156-176.
- Phinney, J., Cantu, C., & Kurtz, D. (1997). Ethnic and american identity as predictors of self-esteem among african american, latino, and white adolescents. *Journal of Youth and Adolescence, 26*(2), 165-185.
- Phinney, J., & Ong, A. (2007). Conceptualization and measurement of ethnic identity: Current status and future directions. *Journal of Counseling Psychology, 54*(3), 271-281.
- Piers, E. (1984). *Piers-Harris Children's Self-Concept Scales*. Los Angeles: Western Psychological Services.
- Poston, W. (1990). The biracial identity model: A needed addition. *Journal of Counseling & Development, 69*, 152-155.
- Ramirez, M. (1998). *Multicultural/multiracial psychology: Mestizo perspectives in*

- personality and mental health*. New Jersey: Jason Aronson, Inc.
- Roberts, R., Phinney, J., Masse, L., Chen, Y., Roberts, C., & Romero, A. (1999). The structure of ethnic identity of young adolescents from diverse ethnocultural groups. *Journal of Early Adolescence*, 19(3), 301-322.
- Root, M. (1998). Experiences and processes affecting racial identity development: Preliminary results from the biracial sibling project. *Cultural Diversity and Mental Health*, 4(3), 237-247.
- Rosenbaum, M. (1980). A schedule for assessing self-control behaviors: Preliminary findings. *Behavioral Therapy*, 11, 109-121.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.
- Rosenberg, M. (1979). *Conceiving the self*. New York, NY: Basic Books.
- Scheier, M. F., & Carver, C. S. (1985). Optimism, coping, and health: Assessment and implications of generalized outcome expectancies. *Health Psychology*, 4, 219-247.
- Shrauger, J., & Schoeneman, T. (1979). Symbolic interactionist view of self-concept: Through the looking glass darkly. *Psychological Bulletin*, 86(3), 549-573.
- Silverman, A. (1993). Outcomes of transracial adoption. *Adoption*, 3(1), 104-118.
- Sorosky, A., Baran, A., & Pannor, R. (1975). Identity conflicts in adoptees. *American Journal of Orthopsychiatry*, 45(1), 18-27.
- Tajfel, H., and Turner, J. (1986). The social identity theory of intergroup behavior. In Worchel, S., and Austin, W. (eds.), *Psychology of Intergroup Relations*. Chicago, IL: Nelson-Hall.

- Umaña-Taylor, A., Bhanot, R., & Shin, N. (2006). Ethnic identity formation during adolescence: The critical role of families. *Journal of Family Issues, 27*, 390-414.
- Westhues, A., & Cohen, J. (1997). A comparison of the adjustment of adolescent and young adult inter-country adoptees and their siblings. *International Journal of Behavioral Development, 20*(1), 47-65.
- White, J., & Klein, D. (2008). *Family theories*. (3rd ed.). Thousand Oaks, CA: Sage.
- Wild, L., Flisher, A., Bhana, A., & Lombard, C. (2004). Associations among adolescent risk behaviours and self-esteem in six domains. *Journal of Child Psychology and Psychiatry, 45*(8), 1454-1467.