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Doctoral Thesis

Exploring Transracial and Transethnic International Adoption

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Thesis Abstract

This thesis explores 'transracial' and 'transethnic' international adoption from the perspectives of adoptees. It includes a systematic literature review of transracial adoptees' experience of racial/ethnic identity; a research paper of international Romanian adoptees' life stories; a critical appraisal of the research process and an ethics section.

Section one synthesises qualitative research which has explored international transracial adoptees' experiences of 'racial/ethnic' identity development. The review synthesised findings from 12 studies and proposes a conceptual model for understanding racial/ethnic identity development. Three themes are included in the model: Becoming aware of difference: Identity as 'other'; Exploring identity: Identity as 'in-between'; and Negotiating identity: Identity as meaningful'. Implications for working with transracial adoptees, particularly focusing on their experiences of discrimination are discussed in addition to study limitations and suggestions for future research.

Section two explores the life stories told by international Romanian adoptees. Due to the historical socio-political context and evident public narratives of Romanian adoptees, a narrative analysis was conducted. Four life chapters are presented to illustrate a shared story of identity construction told across the stories of ten Romanian adoptees: Chapter 1: Setting the scene – The adoption story; Chapter 2: Constructing the self; Chapter 3: Who am I? Quest for self-discovery; and Chapter 4: Negotiating the selves. The findings are discussed with relation to existing theory and research and implications for clinical practice are provided.

Section three presents an account of my own research story by offering an extended discussion of findings from section one and two; reflections on the research process; and the relevance of the findings to clinical psychology and my professional identity. This account is presented across four chapters: 1. Motivation for the study: Reservation and reconnection; 2.

Disentangling ‘race/ethnicity’, ‘racism’ and ‘racialisation’; 3. Challenges of the narrative approach; 4. Using a reflective journal; and 5. My ongoing identity as a clinical psychologist.

Declaration

This thesis reports research undertaken for Lancaster University Doctorate in Clinical Psychology between June 2015-May 2016. The work presented within the thesis is my own except for those instances where due reference has been made to other authors. This thesis has not been submitted for any other academic award.

Signed…….

Name……..

Date……

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Firstly, I would like to thank the participants for so boldly sharing their stories with me. Without your enthusiasm, this would not have been possible. What an honour to have been in contact with such wonderful people from different corners of the earth.

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Contents Page

Section One: Literature review

Abstract 1-1
Method 1-8
Results 1-12
Discussion 1-23
Implications for Practice 1-26
Limitations and Future Research 1-27
Conclusion 1-28
References 1-29
Figure 1. Process of Study Selection 1-37
Table 1. Study characteristics 1-38
Table 2. CASP Scores 1-40
Table 3. Key Themes Extracted From Studies 1-41
Table 4. Contribution of the Studies to Theme 1 1-45
Table 5. Contribution of the Studies to Theme 2 1-49
Table 5. Contribution of the Studies to Theme 2: 1-50
Table 6. Contribution of the Studies to Theme 3: 1-52
Figure 2. Conceptual Model of Transracial adoptees' 'Racial/Ethnic' Identity Development. 1-54
Appendix 1-A: Adoption Quarterly: Guidelines for Authors 1-55
Appendix 1-B: Example Data Extraction 1-58

Section Two: Empirical Paper

Abstract 2-2
Method 2-8
Findings 12
Clinical Implications 2-27
Limitations and Future Research 2-28
Conclusion 2-28
References 2-30
Table 1. Participants' Demographic Details 2-41
Figure 1. Process of narrative analysis. 2-42
Figure 2. Illustration of life chapters from the Narrative Analysis. 2-43

Appendix 2-A: Adoption Quarterly: Guidelines for Authors 2-44
Appendix 2-B: Example Summary Story 2-47
Appendix 2-C: Example of Narrative Segments 2-50
Appendix 2-D: Core Elements of Participants' Narratives 2-51
Appendix 2-E: Reflective Extracts 2-61
Section Three: Critical Appraisal
Abstract 3-2
References 3-16
Table 1. Reflective Journal Extracts 3-23
Section Four: Ethics
Ethics Application Form 4-2
PFACT project information and ethics questionnaire 4-11
Provisional Research Ethics Committee Approval Letter 4-15
Final Research Ethics Committee Approval Letter 4-17
Appendix 4-A: Research Study Protocol 4-18
Appendix 4-B: Recruitment advert 4-34
Appendix 4-C: Information Sheet 4-35
Appendix 4-D: Lone Worker Guidance 4-38
Appendix 4-E: Narrative Interview Question 4-39
Appendix 4-F: Consent Form 4-40
Appendix 4-G: Demographics Questionnaire 4-41
Appendix 4-H: Debrief Sheet 4-42

RUNNING HEAD: TRANSRACIAL ADOPTEES' IDENTITY DEVELOPMENT

Section One: Literature review

How do International Transracial Adoptees Develop 'Racial/Ethnic' Identity? A Meta-Synthesis

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[1]Prepared for submission to Adoption Quarterly

[1] See Appendix 1-A for author guidelines

Abstract

This meta-synthesis sought to understand 'racial/ethnic' identity development for international transracial adoptees. A systematic search for studies was conducted across five databases resulting in the inclusion of 12 studies in the meta-synthesis, which was informed by meta-ethnography methodology. The study proposes a conceptual model of 'racial/ethnic' identity development, which was represented by three overarching themes: 1. Becoming aware of difference: Identity as 'other'; 2. Exploring identity: Identity as 'in-between'; and 3. Negotiating identity: Identity as 'meaningful', which were influenced by sociocultural norms and contextual influences. Implications for practice, research limitations and suggestions for future research are provided.

Keywords*:* Transracial Adoption, Meta-Synthesis, Identity, Qualitative Research

There is a lack of consensus regarding the meaning of terms such as 'race' and 'ethnicity' in adoption research and policy (Scherman, 2010). Such terms are used interchangeably without consideration of their historical and sociocultural complexity. Unless otherwise specified, I will use the term 'transracial adoptee' in this paper to refer to international adoptions where there are both phenotypical (e.g. skin colour) and cultural (e.g. language) differences between an adoptee and their adoptive family. Quotation marks are used to demonstrate the contention of these terms and to indicate my position that 'race' and 'ethnicity' are social constructs (see section 3 for further discussion).

Moreover, because of the synonymous use and overlapping meaning between constructs such as 'race' and 'ethnicity', I recognise the inability to fully separate these terms. Therefore, I will use the combined term 'racial/ethnic' unless deliberately distinguished when referring to the work of another author. Thus, for this paper, the use of 'racial/ethnic' identity refers to the myriad of phenotypical and cultural characteristics inclusive of beliefs, attitudes, feelings, thoughts and perceptions attributable to transracial adoptees' heritage culture.

Transracial Adoption

The 1960s-1970s saw a substantial increase in domestic transracial adoptions in Western countries because of changing cultural attitudes towards birth control, abortion and single parenthood, resulting in fewer White babies available for adoption, along with a political agenda to challenge racial stereotypes and promote racial integration (Hayes, 1995; Hollingsworth, 2008; Jacobson, Nielsen & Hardeman, 2012). Concurrently, international adoption became more accessible (Lee, 2003) as a result of countries making their children available, and cultural changes in 'receiving' western countries such as decreased stigma around mixed 'racial/ethnic' families (Bartholet, 2006).

The increased practice of transracial adoption has been surrounded by controversy. For instance, the National Association of Black Social Workers (NABSW) in the USA refuted the

ability of White parents to support the development of transracial adoptees' 'racial/ethnic' identity (Hayes, 1993; NABSW, 1972). Concerns regarding transracial adoption facilitated new regulations, including revision of standards in the USA giving preference to same-race domestic adoption (Child Welfare League of America, 1973). Moreover, in the UK, the Social Services Inspectorate proposed that 'race/ethnicity' should be given 'due consideration' in adoptions, leading to prohibition of transracial adoption or strict vetting of white parents within some local authorities (see Hayes, 1995).

During the 1980s-1990s, increased media and legal attention was given to the issue of adoption applications being rejected on grounds of 'race' and the significant number of children from 'racial/ethnic' minority groups in foster care awaiting adoption. As a result of this and research evidence indicating the benefits of transracial adoption, revisions to policy were made (Alexander & Curtis, 1996; Garrett, 2002; Lee, 2003). For instance, in the UK the White Paper: *Adoption: The Future,* advocated for less emphasis on 'race' in adoption (Department of Health, 1993) and in the USA the Multi-Ethnic Placement Act (US Congress, 1994), which prohibited discrimination within adoption on the grounds of 'race', 'colour' or 'national origin'.

'Racial/ethnic' Identity

In response to the social and political controversies associated with transracial adoption, along with an increase in the population of transracial adoptees the past twenty years has seen a surge of research studies exploring adoptees' 'racial/ethnic' identity. Research has produced conflicting findings, with some studies evidencing positive 'racial/ethnic' identity and associated psychological well-being (Basow, Lilley, Bookwala, & McGillicuddy-DeLisi, 2008; Mohanty, Keoske & Sales, 2007), whilst others have found poor 'racial/ethnic' identity – less affiliation with their heritage culture (Cederblad, Höök, Irhammar, & Mercke, 1999; Hollingsworth, 1997; Lee, Yun, Yoo & Nelson 2010). This has

been attributed to transracial adoptees being strongly acculturated within the cultures of their adoptive families (Lee, 2003). Moreover, some research has found that despite a positive 'racial/ethnic' identity, transracial adoptees experience identity discomfort and/or confusion (e.g. Brooks & Barth, 1999; Friedlander et al., 2000; Westhues & Cohen, 1998). Evidence regarding whether or not transracial adoptees develop a positive 'racial/ethnic' identity and its relationship to psychological adjustment is mixed, suggesting variability (Lee, 2003).

The role of 'racial/ethnic' socialisation has been considered in relation to 'racial/ethnic' identity development, which involves the passing of values, beliefs and customs from parents, family and wider communities to children to foster 'racial/ethnic' identity and provide ways of coping with racism and discrimination (Lee, 2003). Within transracial adoptions, because parents and adoptee belong to different 'racial/ethnic' and cultural groups, they must engage in 'racial/ethnic' socialisation. This includes reading books on the child's 'race/ethnicity', attending cultural events, joining cultural groups/heritage programmes or travelling to the child's country of origin (Westhues & Cohen, 1998). However, due to inconsistencies reported across research findings, the importance of socialisation in 'racial/ethnic' identity development and psychological adjustment is unclear (e.g. Bascow et al., 2008; DeBerry, Scarr, & Weinberg,1996; Lee et al., 2010; Mohanty et al., 2007; Sarubbi, Block-Lerner, Moon, & Williams, 2012; Yoon 2001; Westhues & Cohen, 1998).

Inconsistencies across research findings may be a result of lack of clarity and consistency in how psychological and identity constructs are defined and measured. Terms such as 'race', 'ethnicity and 'culture' are used interchangeably and studies use a range of transculturally irrelevant measures, ad-hoc self-report items, parent reports, open-ended questions or projective measures of racial preference (Boivin & Hassan, 2015; Lee, 2003). Moreover, samples are comprised of participants spanning a large age range of both domestic

and international transracial adoptees, failing to distinguish between the two or acknowledge the important differences between them (Boivin & Hassan, 2015). The reliance on quantitative, cross-sectional descriptive data and absence of personal accounts of transracial adoptees' experiences (Patel, 2005) portrays them as "passive recipients" in the identity process (Lee, 2003, p. 721).

Finally, research has primarily been conducted to 'disprove' opponents of transracial adoption, losing sight of adoptees themselves (Baden, 2002). To meet educational, therapeutic and developmental needs, professionals must understand the differences among transracial adoptees' identities (Baden, 2002). A way of achieving this is to develop a framework to understand transracial adoptees' 'racial/ethnic' identity development, however, no such framework exists (Lee, 2003).

'Racial/ethnic' Identity Theories

Several theories exist to explain the process of 'racial/ethnic' identity development for 'racial/ethnic' minority groups (e.g. Atkinson, Morten & Sue, 1998; Cross, 1971; 1978; Kim, 1981; Phinney, 1993). These theories can be synthesised into four stages: (i) Pre-exploration: identification with White culture and rejection of heritage culture; (ii) Initiation of 'racial/ethnic' identity exploration: event or series of events that necessitate exploration of 'racial/ethnic' identity; (iii) Identity Exploration: immersion in 'racial/ethnic' identity exploration and rejection of white culture; and (iv) Secured 'racial/ethnic' identity: integration of 'racial/ethnic' identity and majority group identity.

However, they are inapplicable to transracial adoptees as they cannot represent the experience of those who are brought up in 'racially/ethnically' integrated families **(**Baden & Steward, 2000; Ung, Harris & Pillidge, 2012). Moreover, the notion that belonging to a group of racial similarity is integral means transracial adoptees are disadvantaged by being adopted into an environment of no racial reference and suggests they are unable to develop a

positive 'racial/ethnic' identity (Ung et al., 2000). The frameworks also suggest finite identities and do not consider the ongoing interaction between adoptees and their environment (Ung et al., 2000).

Cultural-racial identity model. In an attempt to address the shortcomings of existing models, Baden and Steward (2000) proposed the Cultural-Racial Identity model which separates 'culture' and 'race'. The authors define culture as "…ideals, beliefs, tools, skills, customs, languages and institutions into which individuals are born" (p. 324). Although 'race' is not defined, it is assumed by the use of "black" and "white" (p. 326) that this refers to the socially constructed definition. The model proposes that within transracial adopting families, combinations of two 'racial' and two cultural groups (parent/adoptee) result in four possible identities: pro-self, bicultural, culturally undifferentiated and pro-parent. In addition, 'racial' identity development may be affirmed or discounted by the environment in which the individual is raised.

This model extends understanding of transracial adoptees' 'racial/ethnic' identity as it considers variation, and the role of others and environment. However, it retains the focus on parental attitudes and beliefs. Moreover, it presents finite racial/ethnic identities as outcomes, not accounting for the influence of socio-political and economic contexts (Ung et al., 2012).

Model of Racial Identity: An Ecological Approach. Ung et al. (2012) propose transracial 'racial' identity develops across five dimensions. (i) 'Genetic racial identity': biological traits (e.g. skin colour or hair texture) inherited from birth parents - often misconstrued as 'race'. All TRAs' 'racial' identity commences with birth information that connects the past to the present and future. Moreover, adoptees' access to information about their birth family forms the basis of their 'racial' identity. (ii) 'Imposed racial identity': identity that is assessed and given to the adoptee by others regardless of its accuracy and is given

immediately after 'genetic racial identity'. This is either a 'racial' group that the transracial adoptee is affiliated with or the outcome of a societal meaning ascribed with one's 'genetic racial identity', i.e. it is a label given to the adoptee based on others' perceptions of their race. Thus, 'race' is socially constructed and influenced by transracial adoptees' social network, community and political environment. (iii) 'Cognitive racial identity': What the adoptee knows themselves to be. This is an integration of an internalised imposed identity with known or unknown information about genetic identity. (iv) 'Visual racial identity': the colour of skin one sees, which may not be congruent with transracial adoptees' internalised 'race'. (v) 'Feeling racial identity': the result of adoptees' experiences along with their perception of language, beliefs, rituals and values situated within 'racial/ethnic' traditions. This can be incongruent with 'imposed' or 'cognitive identities', which may be intensified by limited knowledge of their 'genetic racial identity'.

Moreover, the model proposes that adoption-specific factors impact on one's racial identity via four systemic routes: individual (e.g. gender or age of adoption); family (e.g. internalised messages about 'race' through values or ways of living) community (e.g. views about race in peer/community groups); and society (e.g. wider policy debates).

Although Ung et al. (2012) provide a comprehensive model of 'racial/ethnic' identity, it draws on few autobiographical accounts to evidence its assertions. Accordingly, no formal analysis was carried out to establish whether these experiences are shared by other adoptees. Consequently, no adequate model of transracial adoptees' 'racial/ethnic' identity development exists.

Current Meta-Synthesis

There is an evident need to build on existing theories to understand how transracial adoptees develop 'racial/ethnic' identity. Addressing limitations of former research focusing on quantitative methods, qualitative studies have explored transracial adoptees' experiences

of 'racial/ethnic' identity development, yet no synthesis has been conducted. This identified gap in the adoption literature provides the rationale for the current study. In attempt to address the aforementioned limitations of existing theory, the current meta-synthesis aims to 'go beyond' the findings from primary studies to offer a conceptual model of transracial adoptees' 'racial/ethnic' identity development (Barnett-Page & Thomas, 2009; Stern & Harris, 1985).

Method

Search Strategy

I created a mind map to identify key terms related to concepts to be explored (Shaw, 2012). Search terms included variants of transracial adoption (transracial adoption OR interracial adoption OR international adoption OR intercountry adoption); identity (identity formation OR ethnic identity OR racial identity OR self-concept OR social identity); and qualitative research (qualitative OR qualitative analysis OR qualitative research OR interpretative phenomenological analysis OR phenomenological OR grounded theory OR thematic analysis OR narrative analysis OR narrative inquiry OR interviews OR focus group OR diaries).

I identified studies by searching relevant databases in October 2015, including: PsychINFO, Academic Search Complete, Social Care Institute for Excellence, Institutional Bibliography of the Social Sciences, Web of Science and SCOPUS. This initial search yielded 422 papers and I read all titles to determine their relevance. Where this could not be determined, I read abstracts or full texts (Figure 1).

INSERT FIGURE 1

I included papers if: (1) participants were international transracial adoptees; (2) accounts from participants aged 16 or over were used to evidence the findings; (3) inductive

qualitative methods were used for data collection and analysis; (4) they were written in English; (5) they were published in peer reviewed journals; and (5) the findings had a focus on identity. I excluded papers if: (1) case study design was used, due to no inductive analysis of participants' accounts (*n*=1) and (2) accounts from those other than adoptees were used to evidence the findings, due to the focus on transracial adoptees' experiences (*n*=19). The application of these criteria resulted in the identification of 12 studies.

Study Characteristics

The experiences of 228 participants are represented, overrepresented by female participants (*n*=172). The majority of studies were carried out in the USA (*n*=10) with other studies conducted in Sweden (*n*=1) and Australia (*n*=1), mainly comprising transracial adoptees adopted from Korea (*n*=9). The majority used opportunity sampling (*n*=9*)* and all used interviews as the primary method of data collection. Finally, methods of thematic analysis (*n*=5) and grounded theory (*n*=5) were referenced most frequently for data analysis (Table 1)

INSERT TABLE 1

Quality Appraisal

I appraised the studies using the Critical Appraisal Skills Program (CASP) tool for qualitative research (Public Health Resource Unit, 2006). This consists of two screening criteria assessing the clarity of the study's aims and the appropriateness of qualitative methodology. The following eight items relate to study design, recruitment, data collection, reflexivity, ethics, analysis, findings and value of the research and I gave a score of 1-3 (weak, moderate or strong) to denote the strength in a given area (Duggelby et al., 2010). Scores ranged from 11 to 21, representing a range in quality across papers (Table 2).

Despite a large score range, the contributions to the themes was not related to the quality of the research studies. For instance, Docan-Moran (2010) scored highly yet contributed most minimally to themes. Moreover, studies rated as 'poorer quality' provided more descriptive accounts of participants' experiences with more participant quotes compared to those rated as 'high quality'. Although these studies could be considered as lacking in analytic 'rigour', the descriptions and quotations supported themes from other studies. Thus, it could be argued that further analysis of the data would have led to similar themes.

Overall, studies scored poorly on reflexivity and ethics, which arguably are more practically applied rather than given written attention in research reports. For instance, emerging research findings and epistemological positions may have been discussed and not documented in the report. Moreover, to be published in a peer reviewed journal research studies must have gained ethical approval. Therefore, an absence of these areas in the written research reports does not indicate an absence in the research process.

I included studies if they met initial screening questions and excluded none on the basis of quality. Instead, this was used as a method for acknowledging the range of quality across studies (Atkins et al., 2008; Murray & Forshaw, 2012). The decision to include all studies was based on the recognition that quality appraisal is focused on the written research paper, rather than the research itself (Sandelowski & Barosso, 2002). INSERT TABLE 2

Analysis

For the analysis I drew on methods of meta-ethnography (Noblit & Hare, 1988). Th process involved familiarisation with the studies and data extraction of first order constructs, i.e. those that reflect participants' understandings, and second order constructs i.e. authors' interpretations of participants' experiences (Atkins et al., 2008) (Appendix 1-B).

I then determined how the studies were related. This involved extracting relevant metaphors, ideas and concepts from the findings tables (Table 3) (Noblit & Hare, 1988). Moreover, to remain true to the meaning of the ideas expressed in the original studies, I preserved the authors' terminology (Britten et al., 2002).

INSERT TABLE 3

Through listing key concepts it was evident that although not every concept was apparent in all studies, the findings from papers did not refute one another (Britten et al., 2002). Thus, I used methods of reciprocal translation (Noblit & Hare, 1988). I translated key metaphors, themes, and concepts from each study into the next (Dixon-Woods et al., 2005). Recognising the changing socio-cultural and political impact on concepts such as 'race' and 'ethnicity', I did this in chronological order to establish whether the ideas remained consistent over time. This resulted in the identification of three overarching themes (Tables 4-6).

INSERT TABLES 4-6

The next phase, line of argument synthesis, involved "making a whole into something more than the parts alone imply" (Noblit & Hare, 1988, p. 28). I carried out this process to develop a 'third order' construct: a model of transracial adoptees' 'racial/ethnic' identity development (Atkins et al., 2008). It is recognised that the exact processes carried out during this phase cannot be reduced to a list of mechanical tasks (Britton et al., 2002). I developed the line of argument synthesis by considering the relationship between the three themes identified through reciprocal translations. This recognised 'racial/ethnic' identity development as a process of moving from one theme to the next.

Results

'Racial/ethnic' identity development was identified as a complex process for transracial adoptees which involved negotiating and renegotiating aspects of identity as well as their position within different groups. Moreover, the accounts of participants' experiences were located among wider social discourses and contexts which influenced identity construction. Three themes reflected the stages of 'racial/ethnic' identity development which will be presented below.

1. Becoming Aware of Difference: Developing an Identity as 'Other'

Transracial adoptees expressed a desire to "blend in" (Meier, 1999, p. 40) and develop a sense of community within their predominantly White, adoptive environment. However, this process was significantly hindered by the experience of being 'othered' on the basis of physical attributes. The process of othering was a result of being made to feel different through racialisation and racism.

Blending in: "I tend to act white so I don't stand out". As illustrated by the quote in the sub-theme title (Walton, 2015, p. 405) during initial stages of identity development, namely in childhood and adolescence, adoptees sought to fit in and identify as 'White' in order to blend in with their peers (Hoffman & Peña, 2013; Koskinen, 2015; Langrehr, Yoon, Hacker & Caudill, 2015; Meier, 1999; Walton, 2015). For instance, participants deliberately engaged in 'White' activities to fit in and some even wished to change their physical appearance to appear more 'White' (Meier, 1999; Ramsey & Mika, 2011):

> When I grew up . . . I wanted to be a white, blond haired Norwegian girl like every other girl in my class so that's what I tried to be . . . I was real active in high school. I was a cheerleader, I was in sports...in a small town you can be active in everything. And that's exactly what I did ...I tried as much as I possibly could to convince myself that I wasn't Korean (Meier, 1999, p. 21).

The desire to fit in and associated immersion in White culture led adoptees to deny, forget or reject their birth heritage (Docan-Morgan, 2010; Hoffman & Peña, 2013). For instance, participants resisted attempts, predominantly from parents, to engage in 'racial/ethnic' exploration' through socialisation (e.g. Langrehr et al., 2015; Shiao & Tuan, 2008; Meier, 1999):

> They took me [to this dinner with all these Koreans] and I wouldn't talk. I [thought] 'none of these people are like me, this food is disgusting' and I sat there and pouted. And my parents took me home and said 'Well, I guess that's the end of that.' And they never exposed me to it anymore. (Meier, 1999, p. 21).

In addition, transracial adoptees avoided or distanced themselves from people from their birth country (e.g. Koskinen, 2015; Langrehr et al., 2015; Meier, 1999).

Experiences of racialisation and racism and the impact on identity. The desire to fit in and identify with 'White' culture was continually disrupted as adoptees were infrequently in environments where they did not "stand out" (Hoffman & Pena, 2013, p.160) due to their "racialized features" (Docan-Morgan, 2010, p.150) and "non-white bodies" (Walton, 2015, p. 406). Participants were consistently racialised by others; being assigned a racial category by visual assessment of their physical attributes (Samuels, 2010). Within adoptive communities, ascription of a racialised identity was suggested to be due to 'Whiteness' being the "invisible norm" (Ramsey & Mika, 2011, p.613).

Racialisation was experienced both in public and within more intimate relationships. For instance, participants were mistaken for exchange students, refugees or the romantic partner of a family member and stared at by others in public (Docan-Morgan, 2014; Koskinen, 2015):

> There were five empty benches in front of me and behind me and the same emptiness on the other side of the aisle. And from the other end of the bus a crowd of people

> stared at me quietly. And the same thing happened on the way to school and on the way home (Koskinen, 2015, p. 176)

Transracial adoptees were faced with questions about their identities based on their physical differences to their families and surrounding White communities (Docan-Morgan, 2010; Kim, Suyemoto, & Turner, 2010; Koskinen, 2015; Randolph & Holtzman, 2010; Tigervall & Hübinette, 2010). These questions related to the their adoptive identities (e.g. "Why did your real parents abandon you?", Koskinen, 2015, p.178) and their 'racial/ethnic' origins (Tigervall & Hübinette, 2010). These experiences were described as "intrusive" (Docan-Morgan, 2010, p.149) or a "bombardment" (Tigervall & Hübinette, 2010, p. 497).

Participants were also treated differently based on racial assumptions, e.g. colonialist stereotypes: "…I'm supposed to be good at sports and have a good sense of rhythm because of my African background. This makes me really laugh as I'm so much the opposite of this, because I'm so rubbish at both of these" (Koskinen, 2015, p.179). In addition, entangled within socio-cultural norms regarding 'race' and 'ethnicity' were discourses about gender (Koskinen, 2015; Meier, 1999; Shiao & Tuan, 2008). For instance, female transracial adoptees' non-white identities were associated with exoticism, permissiveness and submission (Koskinen, 2015; Meier, 1999);Asian males with being "effeminate or weak" (Meier, 1999, p.38); and being non-White and with violence, e.g. "the dangerous Black man" (Essed, 1991 cited in Koskinen, 2015, p.181):

> …when I'm going home from the pub and someone passes by, and they become afraid. Okay, they are afraid because I'm black, they show it pretty well. And old ladies who are holding their handbags tightly, as if I'm a criminal and an immigrant who is going to rob them. And when I'm entering a supermarket, a guard is following me, and when I am in a jeweller's shop, they remove the gold (Tigervall & Hübinette, 2010, p.496).

Participants were not only racialised by strangers, but also by those close to them. For instance, they recalled being racialised within school, where they were grouped with peers who had a foreign background, irrespective of their country of origin, or by family members and significant others who frequently reminded them of their different heritage:

> I have always been singled out at home. As soon as there is something about Korea on television, they have said – look it's about Korea! And if something about Korea comes up, they have always emphasized it towards me, as if I didn't get it the first time (Tigervall and Hubinette, 2010, p. 502)

There was uncertainty among transracial adoptees in some studies with regards to whether they could consider these experiences as racism, or as a subtler reminder of difference (e.g. Koskinen, 2015; Tigervall & Hübinette, 2010). However, other studies reported overt racism (Hoffman & Peña, 2013; Kim et al., 2010; Koskinen, 2015; Langrehr et al., 2015; Meier, 1999; Randolph & Holtzman, 2010; Ramsey & Mika, 2011; Tigervall & Hübinette, 2010). Whereas racialisation was the ascription of a racial identity onto adoptees, racism here referred to negative or abusive treatment as a result of such ascribed identities. Studies reported that participants were "targets" for racism (Hoffman & Peña, 2013, p.162), which ranged from subtle to more overt and aggressive forms of racism. For instance, commencing as early as childhood, transracial adoptees were subject to pejorative comments and taunting for their physical appearance (Hoffman & Peña, 2013; Langrehr et al., 2015; Meier, 1999; Randolph & Holtzman, 2010; Tigervall & Hübinette, 2010):

> I remember kindergarten perhaps or even first grade, you know, "Chinese, Japanese, dirty knees" …They would pull at their eyes, and they would be like, "How can you see out of slits like that?" And so there was a lot of taunting as I grew up (Hoffman & Peña, p. 160)

Racism persisted to adulthood often in a subtler form, such as exclusion, however in the worst cases, adoptees experienced physical assault:

> The worst experience when I was physically harassed…A quite ordinary Finnish woman got into my face and said, "You damn nigger whore!" and then she hit me with her fist. At first I began to laugh, because the situation was so absurd. But later I started to cry because I felt so hurt (Koskinen, 2015, p 182-183)

Some studies reported that experiences of racialisation could have been a result of curiosity and some participants were not negatively affected by questions about their adoption. It is possible that those who were not caused discomfort grew up around those more similar to themselves:

> It totally didn't bug me…the first time someone…said, "Why don't you look like your parents?" I was like..."I'm adopted"…there was a huge population of people who were adopted around me, and so, it wasn't that big of a deal at all (Ramsey & Mika, 2011, p.616).

However, for the majority, having to explain and provide information about their identity caused discomfort and frustration (e.g. Docan-Morgan, 2010). Furthermore, being racialised resulted in an incongruence between how they were perceived by others and how they viewed their own identity (Godon, Green, & Ramsey, 2014; Walton, 2015). This paradox rendered transracial adoptees as 'other' or 'different' which, along with difficult experiences of racism, led to exclusion and a sense of not belonging to the dominant White communities (Godon et al., 2014; Kim et al., 2010; Koskinen, 2015; Ramsey & Mika, 2011; Randolph & Holtzman, 2010; Walton, 2015). Not only did experiences of racialisation and racism bring a sense of 'otherness' between transracial adoptees and the dominant White culture, it also fostered an internal sense that there was something 'wrong' with their identity

(Hoffman & Peña, 2013). This, along with exposure to other cultures, meant that adoptees began to explore their identities.

2. Exploring Identities: Developing an Identity as 'In-between'

Either through being 'forced' by a developing sense of otherness or through increased institutional and environmental opportunities, transracial adoptees embarked on an exploration of their 'racial/ethnic' identities. This was referred to as "ethnic self-discovery" (Hoffman & Peña, 2013, p.161) or "ethnic exploration" (Shiao & Tuan, 2008, p.1023). This process involved a shift in focus from physical characteristics to a desire to become more connected with aspects of birth culture; who they were and where they had come from (Meier, 1999). However, not all experiences of identity exploration were positive, leading some to feel excluded from their birth and adoptive environments and develop an identity as 'in-between'.

For some, institutional settings in childhood provided opportunities for modest identity exploration (Godon et al., 2014; Hoffman & Peña, 2013; Meier, 1999; Shiao & Tuan, 2008). For instance, heritage camps introduced participants to their birth culture and were often an attempt by parents to address differences in 'race/ethnicity' and culture (Godon et al., 2014; Hoffman & Peña, 2013; Ramsey & Mika, 2011; Randolph & Holtzman, 2010). However, the overal impact on identity formation was minimal as they were often based on information that could reinforce 'racial/ethnic' stereotypes and did not prepare adoptees for interactions with people from their birth heritage (Ramsey & Mika, 2011). In fact, for some, it was the connection with other transracial adoptees that was of interest over and above learning about the culture itself: "it became fun mainly because I started becoming friends with other kids that attended the camp. Besides that, and maybe for the food, I cared less about what we actually had to do while we were there" (Langrehr et al., 2015, p. 16).

However, growing up in areas with little 'racial/ethnic' diversity meant that transracial adoptees largely had no "language for ethnic identity" (Shiao & Tuan, 2008, p.1039) as there was no resource, such as access to peers or role models from their birth country, to explore their own heritage and culture (Langrehr et al., 2015; Randolph & Holtzman, 2010). This finding is further supported by participants who had contrasting experiences as those who were raised in more diverse communities and had more exposure to those from their birth country experienced greater sense of belonging and their identity was less complicated (Kim et al., 2010). Moreover, for those who were more accepted by the white communities, 'racial/ethnic' exploration was unnecessary (Shiao & Tuan, 2008), highlighting the significance of the environment in shaping 'racial/ethnic' identity.

For most participants the move to more diverse environments through leaving home and gaining independence gave them increased opportunity to interact with those from diverse backgrounds and identity exploration (Godon et al., 2014; Langrehr et al., 2015; Meier, 1999; Tigervall & Hübinette, 2010). Transracial adoptees wanted to learn more about their heritage and began to independently seek opportunities to engage in this searching process. This included more modest ways to incorporate aspects of their birth culture into their lives, from going to restaurants and festivals to learning the language of their birth country (Godon et al., 2014; Langrehr et al., 2015). Moreover, higher educational settings facilitated 'racial/ethnic' identity exploration (Godon et al., 2014; Hoffman & Peña, 2013; Langrehr et al., 2015; Meier, 1999; Shiao & Tuan, 2008)). Some participants elected to join societies, take courses and write assignments about their birth country or adoption:

> I joined the Asian Pacific American Youth Council…so I joined that and ended up making my own personal connections…I think I just savored that, and then for me that was important because that was something I then sought out when I was in college (Hoffman & Peña, 2013, p. 162)

In addition, higher education settings exposed adoptees to a more culturally diverse environment where they could connect with people from their birth country for the first time (Godon et al., 2014; Hoffman & Peña, 2013; Langrehr et al., 2015; Shiao & Tuan, 2008). Compared to childhood experiences, where participants tended to avoid individuals from their birth culture in order to fit in, they were able to move past discomfort and develop positive relationships (Shiao & Tuan, 2008; Hoffman & Peña, 2013; Langrehr et al., 2015):

> Sophomore year I lived with two Koreans…Yeah, I really got into it freshman and sophomore year… I had a Korean boyfriend. I met a lot of Asian Americans, in my classes and stuff. And it's funny—it happened in almost every class— Asian Americans would just sort of gravitate together. It wasn't so much Korean to Korean, but, you know, a lot of the friends I made were Asians in college (Shiao & Tuan, 2008. p. 1047)

For some, building relationships with those from their birth cultures was a pleasant experience, yet they continued to keep a "friendly distance" (Shiao & Tuan, 2008, p. 1047). However, some sought to find a place of belonging within a group that reflected their own 'racial/ethnic' identity. For these, identity exploration involved a more extensive search where they travelled to their country of birth and/or contacted their birth families (Godon et al., 2014; Hoffman & Peña, 2013; Meier, 1999; Shiao & Tuan, 2008; Walton, 2015). In contrast to feeling 'other' as discussed above, being in their country of birth was an experience of 'blending in' and embracing 'racial/ethnic' identity. This experience was a chance to "feel" what it was to be 'Korean', for instance, rather than merely viewing this identity on paper (Walton, 2015, p.407). The anonymity and experience of fitting in was described as a "privilege" (Shiao & Tuan, 2008, p.1053), or a "relief" (Meier, 1999, p.29):

> I felt right at home. It was a great experience. The most significant thing I remember was getting off the plane at the Seoul Airport and seeing all this black hair…just tons of

> black hair. And that's when it first hit home…Wow, I've never experienced this before (Meier, 1999, p. 29)

However, travelling to birth countries was not always a pleasant experience as adoptees were met with challenges. This included a "culture shock" where expectations of birth countries were not met (Shiao & Tuan, 2008, p. 1051). For instance, some witnessed poverty and thus gained an awareness of how their lives may have been had they not been adopted (e.g. Godon et al., 2014; Meier, 1999; Walton, 2015).

In addition, although connecting with others either in their birth country or through institutional opportunities enhanced adoptees' sense of 'racial belonging', further exclusion was experienced (Godon et al., 2014; Hoffman & Peña, 2013; Kim et al., 2010; Langrehr et al., 2015; Meier, 1999; Ramsey & Mika, 2011; Shiao & Tuan, 2008; Walton, 2015). Whereas 'racial/ethnic' assumptions were made about participants within their adoptive communities, cultural assumptions were made within interactions with people from their birth country. For instance, they were faced with the expectation of being able to speak the language of their birth country and had a lack of cultural competence (Godon et al., 2014; Hoffman & Peña, 2013; Kim et al., 2010; Langrehr et al., 2015; Meier, 1999; Ramsey & Mika, 2011; Shiao & Tuan, 2008; Walton, 2015):

> They look at you instantly like there's something wrong with you. If you can't speak Korean, it's really odd because you have this Korean face, you have this Korean body, and you can't speak their language: what's wrong with you? . . . You go there thinking I'm going to fit in, they're going to accept me, they're going to be glad I came back, and that's not how it is (Meier, 1999, p.28)

Being unable to speak the language of those from their birth country and being unknowledgeable about culture left transracial adoptees feeling fraudulent within these communities. For instance, study authors used phrases such as "not being a 'real' Korean"

(Ramsey & Mika, 2011, p. 618) and "not feeling 'Asian or Korean enough'" (Hoffman & Peña, 2013, p.160) to highlight their feelings of exclusion. This sense of exclusion was based upon 'cultural censure', where participants were challenged, questioned or belittled for their limited cultural competence by those within their birth culture, leaving them to feel rejected (Godon et al., 2014; Shiao & Tuan, 2008).

The experience of cultural exclusion mirrored earlier experiences of 'racial/ethnic' exclusion resulting in transracial adoptees feeling alienated and not fitting in anywhere: "we know we're not American and we know we're not white...if we go and we find we're not very Korean, well, what are you? You're left with this sort of non-identity." (Meier, 1999, p.26-27).

This led participants to develop an 'in-between identity' where they were stuck between two groups (Godon et al., 2014; Hoffman & Peña, 2013; Langrehr et al., 2015; Meier, 1999; Ramsey & Mika, 2011). This was referred to as "non-identity", being "neither here nor there" (Meier, 1999, p.27) and "caught between the expectations of two groups" (Godon et al., 2014, p.14). Transracial adoptees experienced distress, discomfort and a sense of fragmentation as they attempted to negotiate between groups (Godon et al., 2014) and continued to not have a community in which they were fully accepted (Hoffman & Peña, 2013). Being an outsider in both communities meant that participants continued in search of an identity that more fully encapsulated their complex identities.

3. Negotiating Identities: Identity as Meaningful

Although transracial adoptees' relationships with their developing identities were not always easy and were associated with distress, ambivalence, fear and sadness (Godon et al., 2014; Meier, 1999), they continued to negotiate their identities and sought to establish a sense of belonging.

One way adoptees negotiated their identities was to integrate their two separate identities into a single overarching 'racial/ethnic' identity (Godon et al., 2014; Kim et al., 2010; Koskinen, 2015; Meier, 1999; Ramsey & Mika, 2011; Shiao & Tuan, 2008). This was a process of gradually being able to claim "different simultaneous identities" (Kim et al., 2010, p. 185), (i.e. their 'White' and 'racial/ethnic' identitities) in order to hold a "double" or "hybrid" identity (Koskinen, 2015, p.188; Shiao & Tuan, 2008, p. 1055, respectively). Participants identified 'racially/ethnically' with their birth backgrounds and culturally with their adoptive environments: "My looks don't match how I feel inside or how I speak or how I sound or how I act…Culturally or ethnically I would say [I am] American. And if you are going to define race as kind of physical characteristics, then I'm Asian" (Kim et al., 2010, p.186). This multifaceted approach allowed adoptees to embrace the different elements of their identity and resolve earlier tensions.

It is of interest to note that these integrated identities were described mainly in terms of 'racial/ethnic' or cultural identities, which had more salience than adoption within identity construction (e.g. Meier, 1999; Randolph & Holtzman, 2010). However, one study reported that all participants defined themselves as Finnish and their 'racial/ethnic' differences were of no issue once it was clear to others that they could speak the language of their adoptive community (Koskinen, 2015). In addition, these participants reported that their adoptee identity diminished any significance of being non-White and allowed them to be considered separately to those from other 'racial/ethnic' minority groups, such as immigrants. Again, this highlights the influence of socio-cultural norms on = 'racial/ethnic' identity.

A second way participants negotiated their identities was finding a sense of belonging through shared experiences, regardless of 'race/ethnicity'. For instance, they developed a strong sense of unity with other international adoptees or others who were 'non-White' (Godon et al., 2014; Kim et al., 2010; Koskinen, 2015; Ramsey & Mika, 2011). For some,

the connection to other adoptees or multicultural groups was founded on the shared experience of holding complex identities, whereas for others this was underpinned by shared experiences of racism and discrimination:

> I started to identify with other minority groups, like Latinos and Black girls…People view you as a minority, and clumped as minority, not as Asian, which had pluses and minuses. So, you start to identify with them…The feeling of oppression can unify people (Kim et al., 2010, p.187).

Overall, the studies presented neither a final identity resolution, or a concrete "complete self" (Walton, 2015, p.410) nor a fragmented or fraught sense of self, but instead highlighted the ways in which adoptees found meaningful identities which supported their complexity.

Discussion

This meta-synthesis presents a conceptual model of transracial adoptees' 'racial/ethnic' identity development consisting of three themes (Figure 2). These are distinct yet represent 'racial/ethnic' identity development as an ongoing and challenging process that transracial adoptees engage with across their lives in order to navigate the complexities of their identities. Moreover, underpinning 'racial/ethnic' development are sociocultural norms and contextual influences.

INSERT FIGURE 2

The theme 'becoming aware of difference – identity as other' shows the difficulties transracial adoptees face when they wish to fit in with the majority culture, yet due to their visible differences this is challenging. The model is consistent with existing 'racial/ethnic' identity theories that propose a stage of 'pre-exploration' as adoptees initially identify as White to align with their environment, concurrently rejecting their heritage culture (Atkinson et al., 1998; Cross, 1971; 1978; Kim, 1981). However, the model extends existing understanding by suggesting that unlike other 'racial/ethnic' minority groups, transracial

adoptees' preference for White culture is further reinforced by living within White families and often they have no exposure to those from their own heritage group. Thus, the degree to which they hold a White identity is affirmed by parents' attitudes as well as the White communities in which they live. Although some adoptees actively distanced themselves from people from their country of origin, for those who have little or no direct exposure to such people, 'rejection' is evident by disengagement from parents' attempts at 'racial/ethnic' socialisation. This supports research that found no association between socialisation and 'racial/ethnic' identity (DeBerry et al., 1996; Sarubbi et al., 2012; Westhues & Cohen, 1998).

The model proposes that identifying as White is continually disrupted through experiences of racialisation and racism, impacting on how transracial adoptees identify. The role of racialisation supports Ung et al.'s (2012) 'imposed racial identity' dimension as transracial adoptees are ascribed the 'racial/ethnic' identity corresponding to societal meanings associated with their physical characteristics, regardless of the accuracy. This gives adoptees a sense of not belonging to the dominant White group and an automatic, incorrect association with their heritage group (Ung et al., 2012). However, it is proposed that these automatic associations do not fit with transracial adoptees' group affiliations nor internalised White identities, leading to an identity as 'other'.

The theme 'exploring identities – developing an identity as in-between' supports existing theories of 'racial/ethnic' identity by proposing that, when sufficiently distressing, negative events such as racism can lead to an exploration of 'racial/ethnic' identity (e.g. Atkinson et al., 1998; Cross, 1971; 1978; Kim, 1981; Phinney, 1993). For transracial adoptees, developing an identity as other can trigger an intense exploration of their 'racial/ethnic' identity, involving learning about their heritage, connecting with people from their birth country and attending cultural events. However, the model contributes to existing understanding as, in contrast to the aforementioned theories, it suggests that transracial

adoptees cannot complete their exploration by seeking information from families or their local communities, as they have limited, if any, knowledge of their birth culture. Therefore, identity exploration is dependent upon environmental opportunities, supporting the notion that external factors influence 'racial/ethnic' identity exploration (Baden & Steward, 2000; Ung et al., 2012). This is evident by an increased opportunity for exploration as adoptees move away from home and/or to higher educational institutions and through travelling to their birth country where they become exposed to greater 'racial/ethnic' diversity. Although exposure to more diversity offers a sense of 'racially/ethnically' blending in, it can lead to further exclusion based on a perceived cultural incompetence. This contributes to current understanding by highlighting an additional layer of rejection that transracial adoptees face compared to other racial/ethnic minority groups who, by being raised by biological parents, supposedly have knowledge of their heritage culture and are therefore not rejected by their own group.

Moreover, in line with Phinney's (1993) 'racial/ethnic' identity theory, yet contrasting others (e.g. Atkinson et al., 1998; Cross, 1971; 1978; Kim, 1981) the model proposes no evidence that transracial adoptees reject the dominant White culture. Instead, it is suggested that they develop an identity as 'in between' based on their experiences of rejection from both the dominant White group and their own heritage group. This aligns with the notion of a 'cognitive racial identity' (Ung et al., 2012) as transracial adoptees integrate what they have internalised from imposed identities, i.e. a sense of 'otherness', with what is known or unknown about their 'genetic identity', which may remain inaccessible.

As represented by the theme 'negotiating identities – identity as meaningful', the model proposes that transracial adoptees navigate the complexities of their identities into a meaningful 'racial/ethnic' identity. This contributes to the debate regarding the ability of

transracial adoptees to develop a 'racial/ethnic identity within White families by suggesting that it is possible and that it is expressed in different ways.

The model proposes that, for some, identity negotiation is akin to 'secured' racial/ethnic identity (e.g. Atkinson et al., 1998; Cross, 1971; 1978; Kim, 1981; Phinney 1993) or Baden and Steward's (2000) final identity combinations, as some transracial adoptees internalise a 'racial/ethnic' identity through its integration with their White identity. For others, negotiating an identity can be found through shared experience, for instance with other international adoptees or minority/multicultural groups. This extends existing understanding by proposing an additional way that transracial adoptees develop a meaningful 'racial/ethnic' identity over and above integration. Moreover, this provides a potential explanation for the variation reported in research exploring transracial adoptees' 'racial/ethnic' identity which has only been measured through identification with birth versus adoptive community (see Boivin & Hassan, 2015; Lee, 2003), rather than identification with other groups.

Implications for Practice

The proposed model has implications for practice at an individual, systemic and policy level. The study identified the potential for 'racial/ethnic' or cultural exclusion from majority and 'racial/ethnic' minority groups. This suggests a need for education and training for practitioners, parents and transracial adoptees. At each of these levels this should be focused on creating an awareness of the potential for transracial adoptees to be 'racialised' and confronted with questions about their own 'race/ethnicity' and to experience more overt acts of racism and exclusion on the basis of their visible differences to parents. Moreover, education and training is recommended on ways to respond and to cope with the impact of these experiences. Moreover, professionals working with transracial adoptees such as social

workers, psychologists, and post-adoption charities are encouraged to ask about experiences of racism and associated impact on 'racial/ethnic' identity.

The variability of transracial adoptees' experiences of 'racial/ethnic' socialisation reinforces the need for tailored support, considering factors such as age, environment and personal desire to explore 'racial/ethnic' identity. With this in mind, practitioners should have knowledge of available resources and opportunities for 'racial/ethnic' socialisation to provide at an appropriate time. Parents and transracial adoptees could be made aware of the various institutional opportunities for 'racial/ethnic' exploration, such as culture camps or colleges offering specialist courses. In addition, as heritage camps and cultural activities alone were not sufficient methods of 'racial/ethnic' socialisation, more meaningful ways of socialisation should be offered, such as integration of the transracial adoptee's heritage culture into the adoptive family or visiting their birth country. Theycould also be supported with practical issues, such as connecting with culturally diverse communities or other transracial adoptees, and learning their heritage language in order to facilitate more positive connections with this group. In addition to health and social care professionals, these recommendations may be useful for education settings as exploration is positively facilitated through institutional opportunities.

Limitations and Future Research

The findings should be considered in light of a number of limitations. Although considered necessary to allow for thorough analysis of data, the restrictions placed on the selection process may have led to valuable findings from other studies being excluded (Sandelowski, Docherty & Emden, 1997). For instance, studies were only included if they were peer reviewed and although this promotes quality (Barosso & Powell-Cope, 2000), the inclusion of unpublished studies can reduce publication bias (Beck, 2002). Thus, this study is subject to publication bias and exclusion of valuable data. Moreover, studies were only

included if they were written in English. This, in part, was due to time and financial restraints of the current study. However, given the international focus and the topic of 'racial/ethnic' identity where language may be central to an individual's identity, this is a further limitation. Future research could address these limitations by considering unpublished data and those written in languages other than English.

Characteristics of the studies included in the review limit the applicability of the findings by: an overrepresentation of female participants; being primarily conducted in America; and the majority of participants adopted from Korea. Given the unique historical, and social context surrounding Korean adoptions, it would be unwise to presume that all transracial adoptees have the same experiences (Docan-Morgan, 2010). This calls for further qualitative research into transracial adoption to explore the experiences of transracial adoptees' 'racial/ethnic' identity across different host and birth countries.

Finally, the model proposes 'racial/ethnic' identity as a process occurring across time, however it is based upon participants' retrospective accounts at a single point in time. Acknowledging 'racial/ethnic' identity as a concept that changes across time and in response to the environment (Ung et al., 2012), this is a limitation. Therefore, further longitudinal studies are called for to explore development of transracial adoptees' 'racial/ethnic' identity.

Conclusion

This review has highlighted the complex process of 'racial/ethnic' identity development faced by transracial adoptees which is shaped by changing sociocultural norms and contextual factors. 'Racial/ethnic' identity development is proposed as an ongoing process, which included experiences of exclusion from both the majority White group, and from those within their heritage group. Despite these experiences, the findings suggest that transracial adoptees are able to assimilate meaningful 'racial/ethnic' identities.

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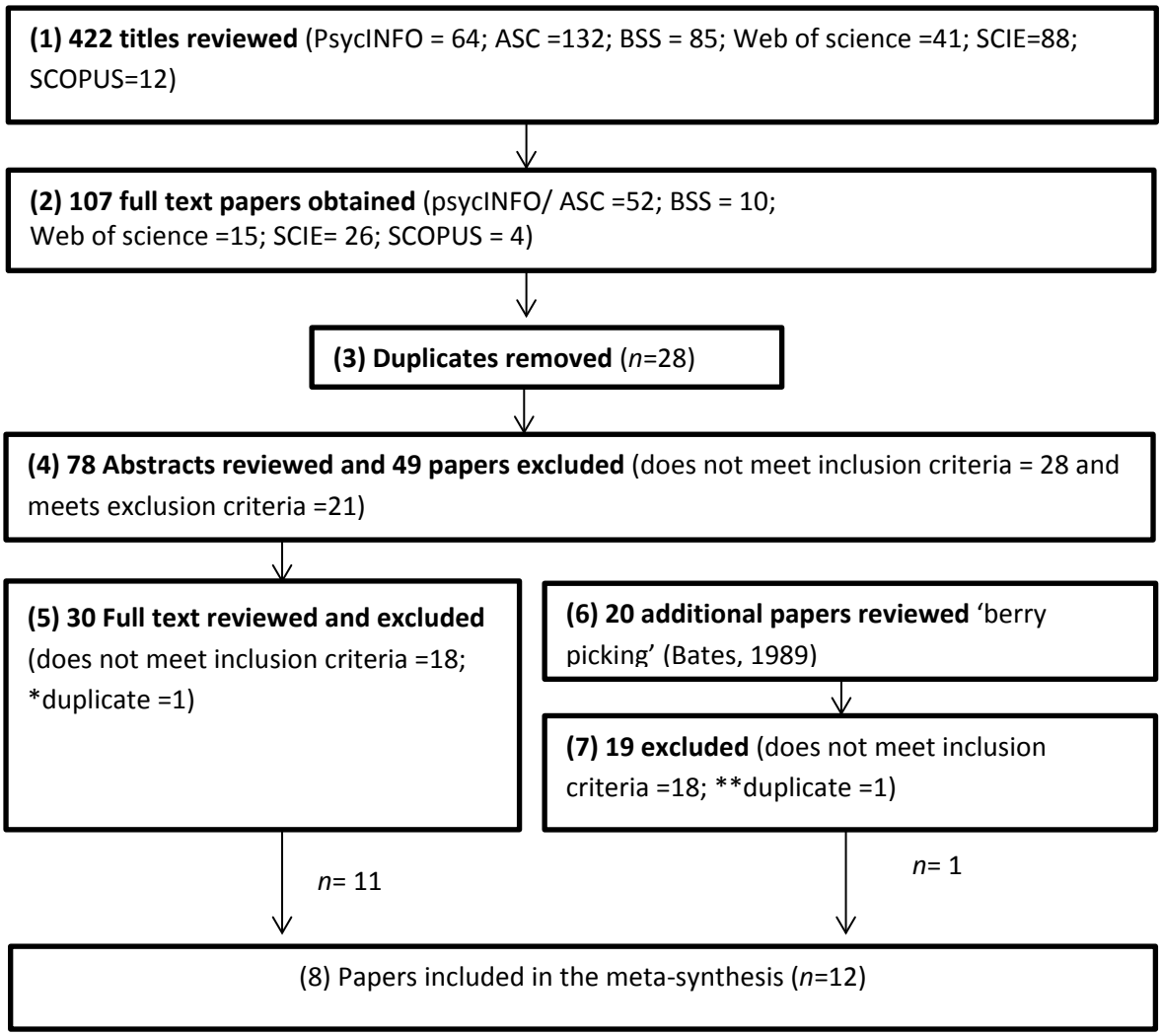

Figure 1. Process of study selection

ASC = Academic Search Complete; SCIE = Social Care and Institute of Excellence; BSS= Institutional Bibliography of the Social Sciences; * Duplicate paper published in another journal; **Same participants in paper already included in review

Table 1. Study characteristics.

Author/Title	**Participants (F, M); Age range/mean**	**Country of study/ Adoptees' Country of origin**	**Recruitment; data collection; analysis**
Docan-Morgan (2010)	34 TRAs (26,8); 18-40 years/ 26.17 years	America/Korean	Opportunity sample; Individual interviews/ open ended survey; Thematic analysis
Godon, Green, & Ramsey (2014)	11 (8,3); 21 years	America/ South Korea, India, Haiti & Philippines	Stratified sampling; semi-structured interviews; thematic analysis
Hoffman & Peña (2013)	12 (8,3); 22-31 years	America/Korea	Theoretical & Opportunity sampling; Semi structured interviews; Grounded theory
Kim, Suyemoto & Turner (2010)	14 TRAs (13,1); 20-30 years/25.6 years	America/Korea	Opportunity & Snowball sampling; semi-structured interviews; thematically following the grounded theory paradigm
Koskinen (2015)	12(8,4); 23-31 years	America/Korea	Opportunity sample; semi-structured interviews; grounded theory
Langrehr, Yoon, Hacker & Caudill (2015)	12 TRAs (6,6); 25-50 years/ 32.83 years	America/Korea	Opportunity sample; semi-structured interviews; Thematic analysis

Table 1. Study characteristics continued.

Author/Title	**Participants (F, M); Age range/mean**	**Country of study/ Adptees' Country of origin**	**Recruitment; data collection; analysis**
Shiao & Tuan (2008)	58 (39,19); 35.9 years	America/ Korea	Gender stratified random sampling; semi-structured interviews; grounded theory
Meier (1999)	23 (12, 11); 19-35 years	America/ Korea	Opportunity sample; semi structured, life history interviews; Thematic analysis (organised along thematic lines)
Ramsey & Mika (2011)	5 (5,0); 18-23 years	America/ Korea	Opportunity sampling; open ended interviews; Hatch's (2002) inductive analysis procedures;
Randolph & Holtzman (2010)	5 (2,3); 18-35 years/ 24 years	America/ Korea	Opportunity & snowball sampling; semi-structured interviews; 'qualitative, interpretative research techniques'
Tigervall & Hübinette (2010)	20 (11,9) 21-48 years	Sweden/ Korea, Ethiopia, Sri Lanka, Iran, Bangladesh, Colombia, Chile, Morocco & the Dominican Republic	Opportunity sample; semi-structured interviews; thematic analysis
Walton (2015)	22 (19,3); 19-39 years	Australia, America, Sweden, Switzerland & Canada/ Korea	Purposive & Snowball sampling; semi-structured email/face to face interviews; Constructivist grounded theory

Table 2. CASP Scores

Author	Design	Recruitment Strategy	Data collection	Reflexivity	Ethics	Analysis	Findings	Value	Total score
1. Docon-Morgan (2010)	3	3	3	1	2	2	3	3	20
2. Godon, Green & Ramsey (2014)	2	3	2	1	1	2	3	3	17
3. Hoffman & Peña (2013)	3	2	3	1	1	2	2	3	17
4. Kim, Suyemoto & Turner (2010)	3	3	2	2	1	2	3	3	19
5. Koskinen (2015)	3	3	3	2	2	2	2	3	20
6. Langrehr, Yoon, Hacker & Caudill (2014)	2	3	3	2	2	3	3	3	21
7. Meier (1999)	1	2	2	1	1	1	2	2	12
8. Ramsey & Mika (2011)	2	1	2	1	2	1	2	1	11
9. Randolph & Holtzman (2010)	3	3	2	1	2	3	2	3	19
10. Shiao & Tuan (2008)	3	3	2	1	1	2	2	1	14
11. Tigervall & Hübinette (2010)	3	2	2	1	1	1	1	1	12
12. Walton (2015).	3	3	3	3	2	2	2	1	19

Table 3. Key themes extracted from studies.

Study	Key Themes	
Docan-Morgan (2010)	• Relational comments/Questions • Stares	• Mistaken Identities/Relationships • Adoptee-only interactions
Godon, Green, & Ramsey (2014)	• Dealing with prevailing norms and assumptions that highlighted the gap between their birth and adoptive cultures/identities • Racially isolated • Incorporate TRAs' birth cultures into the family • Find haven in diverse groups	• Feeling stressed and fragmented as they negotiated between groups • Negative assumptions about their lives if they had grown up with their birth parents • Sociocultural contexts and norms • Normative processes of identity development • Psychological distress and well-being
Hoffman & Peña (2013)	• Identity exploration: a) adoptee identity; b) ethnic self-discovery; and c) the notion of whiteness	• Experiences influencing identity exploration: a) environmental context; b) systems of support; c) missing places; and d) healing.

Table 3. Key themes extracted from studies continued

Study	Themes	
Kim, Suyemoto & Turner (2010)	• Sense of belonging and sense of exclusion from the WEA group • Sense of belonging and sense of exclusion from the KA group • Negotiating experiences of belonging and exclusion: Personal and relational identities. • Personal identities: "Korean and adopted": Adoption as identity; KA or Asian American as secondary identity	• Relational identities: Racially Asian and culturally American; redefining KA: Integrating WEA racial meanings and KA cultural meanings; Asian American and racial minority: Identity as resistance to oppression
Koskinen (2015)	• Othering stares and curiosity about adoptees' non-white bodies • Encountering racialised stereotypes • Racialised name calling and violence	• Confronting and avoiding coping response • Identification and disidentification as coping resource
Langrehr, Yoon, Hacker & Caudill (2015)	• Socialisation experiences • Racial and ethnic dissonance • Experiences with non-adopted Koreans	• Other factors: a) diverse environments; b) connecting with other KADs

Table 3. Key themes extracted from studies continued.

Study	Themes	
Meier (1999)	• Childhood and adolescence • College years and new journeys into self-discovery • Thoughts and feelings about Korea • Thoughts about Korea after adoption	• Sense of home, community and the town-city dichotomy • Asian gender stereotypes • Work place and Identity: A male connection
Ramsey & Mika (2011)	• Outsiders in their adoptive communities: physical differences; status difference • Outsiders in their Korean community: contact with Koreans growing up; Not being a "real" Korean; language barrier; trying to pass as Korean; split loyalties	• Forming identities and connecting with others
Randolph & Holtzman (2010)	• Adoption as a "blessing" and a "rocky road": Dialectics in adoptee narratives	

Table 3. Key themes extracted from studies continued.

Study	**Themes**	
Shiao & Tuan (2008)	• The necessity of opportunity • The relative salience of race and ethnicity • Pursuing exposure in college, unequal interactions and employment	• Context surround and constitute ethnic identity development (social constraint; choice; experiential feedback) • Nominal and personal exploration
Tigervall & Hübinette (2010)	• Racialisation in a public space • The meaning of different spaces	• Racialisation in school • Racialisation in the intimae sphere • To be a non-white Swede
Walton (2015)	• (Re) embodying identity – feeling white; feeling korean	

Table 4. Contribution of the studies to theme 1: 'Becoming Aware of Difference: Developing an Identity as 'Other'

Docan-Morgan (2010)	• Intrusive interactions caused embarrassment because of standing out when wanting to 'blend in': Incompatible with strong desire to fit in. • Viewing the self as white – disrupted when others initiate communication about Asian identity • 'Wanting to be perceived as normal – racialised features and lack of biological ties made them feel inherently different • Mistaken identities (e.g. immigrants, exchange students/ misconstrued relationships with family. Called into question identity as American citizen. • Relational comments/questions – could be curious; adoptees viewed as confusing and frustrating as they challenged family identity. Occurred in public places. • Questions from peers/teachers – caused discomfort/some not bothered. • Stares: due to visibility as an adoptive family. • Intrusive interactions challenged personal identities (as siblings, daughters etc.); challenged personal identities to those who considered themselves as white. • Mistaken identities/relational comments highlighted the discourse dependent nature of adoptive family members' bonds.
Godon, et al. (2014)	• Strangers made assumptions based on their race that were incongruent with their own self perceptions • Frustration with having to explain themselves; Rejected by white people due to physical differences • Sociocultural norms and context affect TRAs feelings about themselves: had to deal with prevailing normal/assumptions that highlighted the gap between their birth and adoptive identities
Hoffman & Peña (2013)	• Childhood neighbourhoods mainly white, rarely interacted with other Asians – participants identified as white and felt white; forgot they were Asian/Korean; wishing they were white. • Adoptee Identity: being raised in a white family, self-conscious of the difference. Experiences ranged from humorous to frustrating. • Daily life entailed navigating white family community as an Asian person – despite being raised in white families, ethnic identities a source of confusion and conflict. • Adoptees rarely found themselves in environments they didn't stand out in. • As few Asians – participants became targets of racist comments and microaggressions. Peers called attention to 'race/ethnicity'Teased for physical appearance – emphasised ethnic differences and sent the message there was something wrong with their identity.

Table 4. Contribution of the studies to theme 1 'Becoming Aware of Difference: Developing an Identity as 'Other'' continued

Kim et al. (2010)	• Asian identity ascribed by white European-American group – raised questions about how other people saw their identities • Exclusion from white European-American group based on race • Exclusion through imposition of stereotypes and racism • Experiences of discrimination was the beginning of racial awareness – effect on sense of exclusion and belonging. • Those who grew up in racially diverse community/positive exposure to Korean American group – more active sense of belonging, less complicated. • Experiences with white and Korean American groups, responses from significant others and societies as a whole have an influential role through ascribed identities.
Koskinen (2015)	• Adoptees considered themselves as Finnish – however, this was continually questioned as they were categorised as refugees/ Immigrants. • Stares/Curiosity about non-white bodies by white majority. Constructed adoptees as other: people that do not fit into domain of white Finnishness. Exclusionary treatment – e.g. public transport. Younger stares perceived as 'curious' whereas older stares less positive and hostile. Unsure if stares were really racism or imagination. • When Finnishness was evident through language – intrusive questions to disclose aspects of their personal life. Frustrating. Adoptees automatically classified as different. • Singled out among friends, classmates and colleagues – intense feelings of other • Racialised stereotypes: use of colonialist stereotypes; class race & sexuality; women experienced sexualised racialisation; males targets of racism on assumptions of race/gender. • Racialised name calling and violence: "Nigger" most general racist label encountered. Physical assault worst manifestation of racism. • Desire to be differentiated from people of their country of origin. • Paradox between inner and external identification puts them into the category of other – they then doubt Finnishness.
Langrehr et al. (2015)	• Racial and ethnic dissonance: as social environments became diverse consisted of two categories: 1. conscious desire to be white and 2. attempts to minimise any association with Koreans/other Asian Americans • Socialisation experiences – uninterested participants described an aversion to these events (e.g. camps) • Racism: Early encounters of overt racism, racial taunting and name calling; adolescence, participants became hyperaware of their differences and developed a sense of otherness. • Adult experiences of racism – persistent yet subtle, occurred in work setting and caused shock/irritation.

Table 4. Contribution of the studies to theme 1: 'Becoming Aware of Difference: Developing an Identity as 'Other'' continued

Meier (1999)	• Immersing in white culture –critical period of identity formation to fit in and be in step with peers; deny/forget Asian • Resisting parents' attempts to encourage engagement in Korean related activities. Those that participated (e.g. camps) lost interest, stopped going. • Avoiding other Korean Asian adoptees and association with people of color. Distanced from Koreans – rejected own heritage. • Males – deliberate immersion in traditional male activities to fir into American culture • Racism – pejorative reference to being Asian • Environment in childhood lacked racial diversity; college frustration lack of diversity and racism • Gender stereotypes: Asian women as highly sexualised, exotic, passive and submissive; Asian men effeminate and weak.
Randolph & Holtzman (2010)	• Racial differences foster discomfort/anxiety • Adoptees faced with stares, questions, scrutiny, prejudice and discrimination – impacts on racial identity • Racial differences eclipsed the need to validate one's adoptive family structure • Being made fun of by people who were prejudiced • Continually confronted with racial situations that they loathed. • Part of the impact of race on adoptees' self-perceptions was bound up with sense of belonging or lack thereof
Ramsey & Mika (2011)	• Status difference between racial group and white privilege – never accepted by whites. • Recognition of physical and status differences between them and white families/communities. • The price of fitting in – denying Korean heritage/ forget being Korean • Attempt to connect to predominantly white communities – internally and externally denied Korean identity • Targets of curiosity and discrimination – exacerbated feelings of being outsiders • Awareness of racial difference led to feeling out of place in white community • 'White privilege'- did not benefit from it because whiteness is hidden • Extent of meeting Korean people played a major role in whether/how they felt connected to Korean community – opportunities depended on where they grew up.

Table 4. Contribution of the studies to theme 1: 'Becoming Aware of Difference: Developing an Identity as 'Other'' continued

Shiao & Tuan (2008)	• The relative salience of race and ethnicity – insufficient salience, less of a mission than a secure sense of community among whites. Some found acceptance in white community which made ethnic exploration unnecessary. • Aversion to Asians and Asian Americans; Active distancing from ethnic exploration. • The necessity of opportunity – homogenous environment gave no language for ethnic identity. Few resources to stimulate development. • Societal messages of "different" and do not belong. Women encountered gendered expectations. • Identities not solely choices made by internal decisions. KTAs ethnic identities are often racialized because of physical features but experienced differently by adoptees.
Tigervall & Hübinette (2010)	• Racialisation in a public space – most common form. Bombardment of questions, seemed to practically harass adoptees. Some viewed as curiosity but others as the most subtle form of exclusion. • Non-white bodies – discrimination in everyday life: questioned by strangers on the street; hostility by placing themselves/ moving themselves signally distance/differentiation • Racialisation in school – treated differently. Common experience to be connected to classmates with a foreign background – third world mass' • Racialisation in the intimate sphere. Appearance always highlighted by others (e.g. family) • Racialisation vs racism – doubt expressed – analysed as an expression of Swedish silence around race. Always the suspicion that bad treatment is caused by something other than non-white body • Racialisation in public – adoptees in urban centres. • The meaning of different spaces – socioeconomic, ethno-cultural demographic makeup of different geographical locations is decisive when it comes to racialisation. Differences between homogenous/ethno-racially diverse. • Not possible to differentiate between race & ethnicity as a certain body goes back to a certain group and collectivity • Culturally engrained correlation between appearance, language and name
Walton (2015)	• Feeling white – through socialisation in adoptive families and experiences in wider social/cultural context • 'Feeling White' – interrupted by experiences of otherness which racialised them as 'not white' and culturally 'other' by merging race and culture. • Constantly re-embodying white identity which is disrupted by experiences that force them to become of their racialised Asian body. Disruption between how they see selves and others see them - over performing white identities • Performing whiteness or 'acting white' often exhausting and unrelenting experience • Despite being good at 'passing' and performing white identity, sense of self continually disrupted and contested through racism • Non-white bodies made it hard to maintain feelings of being white. Other people seeing Asian. • Subjective experiences situated within a broader social context – limited ability to fully embody a sense of self

Table 5. Contribution of the studies to theme 2: 'Exploring Identities: Developing an Identity as In-between''

Docan-Morgan (2010)	
Godon et al. (2014)	• Distressed and fragmented as negotiated between the groups • Discomfort at being different from white adoptive families yet unable to completely integrate into birth culture • Caught between the expectations of two groups – rejected by white people due to physical and birth ethnicity because of language • Parents tried to incorporate cultural activities heritage camps/festivals/books/restaurants: superficial and adoptees stopped
Hoffman & Peña (2013)	• Forced to examine identity because others emphasised it. Need for a biological mirror – wanting to look like someone. Daily status did not offer this. • Curiosity about biological family, learning more about family heritage. Connecting to biological parents could answer questions. Learning language to connect with Koreans • Missing pieces – absent medical records, lack of knowledge of family and desire to learn about Korean culture. Opportunities to address missing pieces, 'healing' helped to embrace identity as Asian, Korean and adopted. Birth parent searches, travelling to Korea. • Ethnic self-discovery – connecting with other Koreans/Asians; participating in heritage camps; confronting racism • In betweeness – assumed two identities, one being Korean/Asian and one being white American. • Discomfort around Asian community due to incompatibility • Did not feel Asian or Korean enough – inability to speak the language • Opportunities that promoted self-discovery – Asian/Korean organisations; taking course, heritage camps; support systems giving space to reflect; reading blogs, Asian peers
Kim et al. (2010)	• Exclusion from white groups lead to shared experiences with non-adopted Koreans – possible basis for 'racial/ethnic' identities in relation to KA group • Exclusion from KAs related to limited cultural knowledge – racial belonging but cultural exclusion
Koskinen (2015)	• Did not seek support from Finnish friends – would not be able to understand racism

Table 5. Contribution of the studies to theme 2: 'Exploring Identities: Developing an Identity as In-between'' continued

Langrehr, et al. (2015)	• Experiences with non-adopted Koreans – Initial negative experiences when faced with expectation of speaking Korean. Became increasingly aware of stigma associated with being adopted – Koreans expressed pity; peer relationships with Koreans as positive force, helped feel comfortable. Meaningful when connection was more than heritage • Socialisation experience interest derived from spending time with other Korean adoptees less to do with Korean culture • Engaging in the birth search process provided different form of cultural socialisation: barriers to information, introduced further complexity and feelings about Korea
Meier (1999)	• College a time for identity/growing intellectual curiosity of ethnic origins and beginning of active process of becoming active with ones past • Leaving home for college offered an opportunity for forays into Korean culture • Exposure to other cultures awakened own sense of difference, cultural consciousness and desire to reconnect with who they are and where they came from. • As participants negotiated emerging cultural identities, most found themselves confronted with being Korean. • As identity struggles unfolded/took shape – signed up for Korean language class/ went back to Korea. Becoming reacquainted – fraught, ambivalence, fear & anger • Relationship with expanding identity – some ambivalent, bitter, laden with fear rage and sadness. Others – hopeful full of promise and sought closure between past and present. • Not fitting in anywhere: In betweeness, neither here nor there. Not accepted in adoptive homeland or Korea.
Ramsey & Mika (2011)	• Attempts to learn about Korea/connect with Korean communities. Cultural and language barriers to making authentic contacts. For some this made them avoid contact altogether. • Opportunities to join Korean student groups in college. • Did not feel accepted the Korean community – excluded (e.g. not conversing in Korean) • Culture camps: difficult for non-Korean adults to offer anything other than superficial information that may reinforce stereotypes. Useful for bringing Koreans together but not prepare for Korean community. • Trying to "pass" as Korean – had to work hard, felt uncomfortable trying to pass – gaps in knowledge of culture; pressure to prove Korean; not integrating other parts into Korean identity • Feeling like an outsider in birth and adoptive countries. Outsiders in ancestral and adoptive communities - navigate between expectations of both groups; Alienated from birth culture and white community • Caught between two cultures; Split loyalties – as navigate between birth and adoptive groups may experience from loyalties to both groups. Peer pressure to align with group plays a role in confusion about where one belongs.

Table 5. Contribution of the studies to 'Exploring Identities: Developing an Identity as In-between'' continued

Randolph & Holtzman (2010)	• Heritage camps – sense of community, talk about experiences but impact on identity was minimal. Not sufficient in shaping identities. • Less than they might have if racial differences/challenges had been explicit discussions. Content "watered down"
Shiao & Tuan (2008)	• Some moved past initial discomfort and bonded with other Asians over racial issues • Continued/expanded college connections (coursework/socialising) – shifts in self-perception, redefinition of American identity. Institutional settings provided opportunity exploration • Persuing social exposure in college, unequal interactions and employment – appreciated new proximity to non-adopted Asian Americans but kept at friendly distance. • Exploration via assignments on Asian adoptee experience • Asia trips – contrasts between expectations and experience. Culture shock, self-reflection. Sense of blending in racially Encounter with cultural censure – heightened distinctive identity as adoptees – especially if confronted with negative stereotypes. Challenged, questioned and denigrated for weak/non-existent linguistic abilities and lack of cultural competence
Tigervall & Hübinette (2010)	
Walton (2015)	• Experiences of otherness forced adoptees to become aware of their bodies objectively as 'non-white' – despite subjective experiences • Sought to find a space consistent with their bodies where they could (re)embody Korean identity • Going to Korea – had to relearn everything and imagined how as a child speak fluently and knew how to act in culturally appropriate ways. Made participants realise who they used to be and how they might have been if they were not adopted. • Feeling Korean – being in Korea made Korean identity real – palpable rather than on paper. Could absorb the sights, smells and sounds. • Feelings of cultural exclusion – especially when had to explain they couldn't understand. • Confronting experiences – assumed to be Korean but do not feel Korean. 'Induced' as Korean until behaviours and language difficulties give them away. • In both contexts (White & Korea) racialised bodies failed to mirror their feelings of identity

Table 6. Contribution of the studies to theme 3: 'Negotiating Identities: Identity as Meaningful''

Docan-Morgan (2010)	
Godon et al. (2014)	• Positive outlooks due to negative assumptions about life if had grown up with birth parents, seen the poverty • Embraced dual perspectives • Find haven in diverse groups • Racially similar to birth family but culturally like adoptive family
Hoffman & Peña (2013)	• 'Adoptee identity' usually reflected on when reminded. • Awareness of identity omnipresent part of daily life.
Kim et al. (2010)	• Relational identities – ways of making meaning of experiences of belonging and exclusion: 1) differentiating 'race/ethnicity'; 2) redefining meanings of being KA; 3) Identifying as members of minority group.
Koskinen (2015)	• Double identity – feel Finnish but identify themselves on some level with country of origin • With respect to physical appearance adoptees identified with people of the same origin; culturally identified as Finnish • Possible for adoptees to find a balance between 1) Finnish identity; 2) feelings about ethnic origin; and 3) adoption background • Presence of others representing ethnic minorities/ same ethnic origin reduced the feeling of being different. • Strong sense of solidarity with other international adoptees and emotionally shared the burden of discrimination with adoptees. May provide a sense of belonging. • All identified as primarily Finnish (culture, lifestyle, values and tradition). Once noted they could speak Finnish –easily accepted. Adoption status diminished significance of non-whiteness.
Langrehr et al. (2015)	

Table 6. Contribution of the studies to theme 3: 'Negotiating Identities: Identity as Meaningful'' continued

Meier (1999)	• Tension between raised American and feeling culturally like mainstream Americans, and internal pull towards unearthing one's origin. • Work place and identity – a male connection. Men identity connected to work. Korean men had plans/desire to incorporate Korea into their work life. Saw work as a means to connect with Korea.
Ramsey & Mika (2011)	• Forming identities and connecting with others – developing identities that were beginning to connect with birth and adoptive backgrounds. • Found a sense of belonging with other adoptees/ multicultural groups • Forming multifaceted identities that embrace many aspects of their lives
Randolph & Holtzman (2010)	• Racial issues more salient than shaping sense of self than their adoption
Shiao & Tuan (2008)	• Reject parts of homeland culture and evaluate immigrant culture as positive hybrid and develop affection for ethnic American identity •
Tigervall & Hübinette (2010)	
Walton (2015)	• Goal is not find a complete self – about embodying an identity that is meaningful for them and learning to live with and accept complexity.

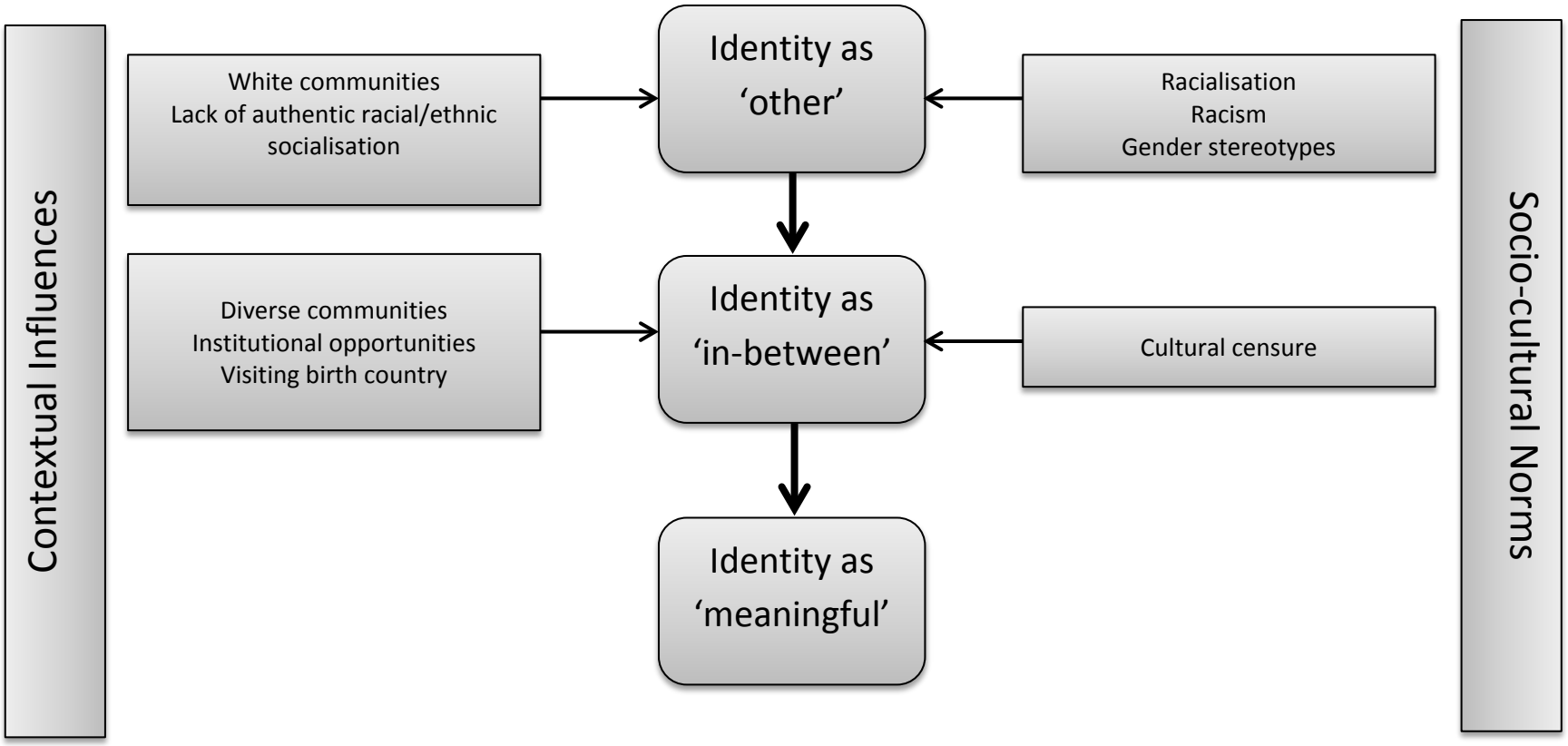

Figure 2. Conceptual model of transracial adoptees'' 'racial/ethnic' identity development.

Appendix 1-A

Adoption Quarterly: Guidelines for Authors

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Adoption Quarterly is an unparalleled forum for examining the issues of child care, the relationships between nature and nurture, and the psychological and social meanings of the word family. This international, multidisciplinary journal features conceptual and empirical work, commentaries, and book reviews from the fields of the social sciences, humanities, biological sciences, law, and social policy. In addition to examining ethical, biological, financial, social and psychological adoption issues, *Adoption Quarterly* addresses continuity in adoption issues that are important to both practitioners and researchers, such as: the intermediary task of matching adoptee, prospective adoptive parents and–most recently–birth parents, the adoptive parent's task of telling their adoptee of his/her adoption, the reality of loss as experienced differently by the individual members of the adoptive triad and the possibility of bonding on the basis of "shared fate", adoption as a premier paradigm for studying the interactions of nature, nurture, and the lifelong development of the adoptee, adoptee adjustment (now viewed in a life-span perspective), adjustment issues for birth and adoptive parents. Adoption Quarterly also explores: the ideology of adoptive kinship, adoption as an institution, infertility solutions and reproductive technologies, future trends for adoption - and much more! The complexity modern adoption issues is daunting and challenging, but also extraordinarily exciting. The place to follow this excitement is *Adoption Quarterly*!

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References

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Journal: Davis, M., & Whalen, P. J. (2001). The amygdala: Vigilance and emotion. *Molecular Psychiatry, 6*, 13–34. doi:10.1038/sj.mp.4000812

Book: Millman, M. (1980). *Such a pretty face*. New York: W. W. Norton.

Contribution to a Book: Raz, N. (2000). Aging of the brain and its impact on cognitive performance: Integration of structural and functional findings. In F. I. M. Craik & T. A. Salthouse (Eds.), *Handbook of aging and cognition* (2nd ed., pp. 1–90). Mahwah, NJ: Erlbaum.

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Appendix 1-B

Example Data Extraction

Docan-Morgan, S. (2010). Korean adoptees' retrospective reports of intrusive interactions: Exploring boundary management in adoptive families	
Data Extracted (Second order)	**Supporting Quotations (First order)**
The themes that arose from the data analysis suggested five categories of intrusive interactions. Across adoptees' narratives, the following types of interactions were common and were framed by adoptees as intrusive: relational comments/questions, compliments, stares, mistaken identities, and adoptee-only interactions. These interactions highlighted adoptive families' discourse dependency in light of outsider challenges to family identity. ***Relational Comments/Questions*** A number of adoptees recalled receiving questions or comments from strangers that inquired into and/or expressed judgments about the relationships among their adoptive family members. Consistent with Galvin's (2006) claim that outsiders challenge the "relatedness" of non- traditionally formed families, adoptees reported facing questions and comments that discursively challenged or questioned the genuineness of the adoptive family identity. Because these interactions, which were reported to occur in public places, were often initiated through questions, they seemed to require responses (i.e., external boundary management) from adoptive family members. Jill's words suggest three main relational assumptions: First, her words reflect others' assumption that adoptive families are different from other types of families and that it is acceptable to point out this difference. Second, the question, "Where are they/you from?" which Jill repeats twice in this excerpt, suggests a distinction between the adoptee and his or her parent(s), as well between as the adoptee and the asker. Indeed, this question reflects the tendency for Asian Americans to be viewed as foreigners (Lowe, 1996). The third assumption embedded in Jill's report is the outsider's belief that only biologically related families are "real." Not surprisingly, adoptees like Jill reacted against the assertion that their adoptive family members are not their "real" family. Susanna's words reflect frustration with the exclusive conceptualization of families as biologically related and also confusion about how people could question	Jill (all names are pseudonyms), who had two younger sisters also adopted from Korea, recalled the following: *[People] just asking you know like where we're from, how old we were when they adopted us . . . questions like, "Why did you decide to adopt from Korea?" or "Where are they from?" or, oh! This one question I would get all the time "Are your sisters your real sisters?" cause we were all adopted so we used to get that question a lot and um, or, when you would say you were adopted people would say "Oh, so your parents aren't your real parents." That was one of the comments we used to get a lot* Susanna, who also has a Korean adopted sister, expressed this sentiment, saying: With my sister there was always comments about, you know, whether or not, oh we're not real sisters or anything like that which is kind of frustrating because you know in my mind these are the people I grew up with. I can't even picture anybody else BUT THEM, um, and I definitely think it was hard to hear these comments, to not really understand it.

RUNNING HEAD: LIFE STORIES OF ROMANIAN ADOPTEES

Section Two: Empirical Paper

Life Stories of International Romanian Adoptees: A Narrative Study

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Word Count: 8000 (excluding tables and figures, references and appendices)

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Prepared for submission to Adoption Quarterly[1]

[1] See Appendix 2-A for author guidelines

Abstract

This study sought to explore the life stories of international Romanian adoptees who were adopted following the fall of communism in 1989. Ten participants were recruited via social media and took part in a life stories interview. Data were analysed using narrative analysis, which led to the development of four life chapters centred around identity construction: Chapter 1: Setting the scene – The adoption story; Chapter 2: Constructing the self; Chapter 3: Who am I? Quest for self-discovery; and Chapter 4: Negotiating the selves. Clinical implications, research limitations and suggestions for future research are discussed.

Key words: International Adoption, Romania, Qualitative, Narrative analysis

International adoption is a relatively new practice, becoming a legal phenomenon following World War II and hereafter expanding worldwide (Bimmel, Juffer, van Ijzendoorn & Bakermans-Kranenburg, 2003; Selman, 2010). International adoption has been the subject of debate, with advocates suggesting it provides a home to children for whom this is not possible in their birth country (Bartholet, 1993). However, due to economic disparity between sending and receiving countries, it is critiqued as an unregulated practice that exploits family poverty, with adoptees 'sold' to western families by those in poorer countries due to perceived powerlessness over their situation (Hollingsworth, 2003; Youde, 2014). By the 1980s, the growth of international adoption raised concerns regarding the abuse of adoption practice and failure to meet adoptees' needs (Selman, 1998), leading to regulation such as The Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption (Hague Convention on Private International Law, 1993) and the Intercountry Adoptions Act (US Congress, 2000). Moreover, adoptees' mental health, adjustment and 'racial/ethnic' identity attracted research interest (e.g. Bimmel et al., 2003; Boivin & Hassan, 2015; Hollingsworth, 1997; Juffer & van Ijzendoorn, 2005; 2007; Lee, 2003).

There is a tendency to view international adoption as involving 'transracial' adoptions, however many do not cross 'racial' boundaries (Scherman & Harré, 2008). International adoption can be 'transracial' or 'transethnic' which, within the socially constructed understanding of 'race' and 'ethnicity', refers to adoptions where parent and child have different phenotypical characteristics versus different cultural identification only (Boivin & Hassan, 2015). 'Transethnic' adoptions contribute widely to the numbers of internationally adopted children. During the 1990s-2000s, a significant proportion in America and Europe were from Eastern Europe, of which Romania was among the top sending countries (Selman, 2010).

International Adoption from Romania

Under the Ceauseşcu regime between 1965-1989, policy was introduced to expand Romania's workforce through increased birth rate (Hord, David, Donnay & Wolf, 1991). This was enforced by an abortion and contraception ban, with women encouraged to have at least four children. If this was not adhered to, financial punishment was a consequence (Zeanah et al., 2003). Following the downfall of communism, the challenging living conditions for children in Romanian orphanages attracted international attention (Hord et al., 1991). Moreover, the worsening economic situation in Romania (Dickens & Groza, 2004) meant that by 1994 approximately 40% of all children were living in poverty (UNICEF, 1997). Media coverage of impoverished living conditions for Romanian children led to an international response to rescue them (Castle et al., 1999; Wilson, 2003; Youde, 2014), and between 1990-1991 over 10,000 children were internationally adopted from Romania, initially from institutions, then by 1991 they were being adopted directly from their biological parents (UNICEF, 1997).

The poor physical health of children adopted from Romanian institutions led to this population being deemed 'high risk' (e.g. Johnson et al., 1992). Consequently, the Department of Health in the UK was concerned about the lack of understanding of Romanian adoptees[2]' chance of recovery following early adversity or the challenges adopting families may face. Accordingly, they commissioned research to establish the policy and practice implications of the phenomenon (Rutter, Sonuga-Barke & Castle, 2010). This 'natural experiment' allowed researchers to explore the longitudinal impact of early deprivation (Rutter, Kumsta, Schlotz & Sonuga-Barke, 2012).

The English and Romanian Adoptees (ERA) Study has researched the development of 144 children adopted into the UK following institutional care in Romania (Rutter et al., 2010)

[2] The term 'Romanian adoptee' will henceforth refer to international Romanian adoptees

and has provided evidence spanning 15 years, showing a significant physical, developmental and psychological 'catch up' following adoption for many adoptees. Concurrent research supports these findings, documenting improvements in physical health and developmental delay following adoption (Benoit, Jocelyn, Moddemann, & Embree, 1996, Morrison, Ames & Chisholm, 1995). Similar findings come from a longitudinal study of foster care placement as an alternative to institutional care in Romania (Zeanah et al., 2003). Similar to the ERA study, this study demonstrated a significant resolution of psychological difficulties for fostered children, compared with those remaining in institutions (Bos, Zeneah, Smyke, Fox & Nelson, 2010). However, a proportion of Romanian adoptees have been shown to display ongoing psychological difficulties (Kumsta et al., 2010) which has been associated with time spent in orphanages (Chisholm, Carter, Ames & Morison, 1995; Groze & Ileanea, 1996; Rutter et al., 2007).

Research has also explored Romanian adoptees' 'ethnic' identity – the sense of belonging and commitment to an 'ethnic' group (Roberts et al., 1999). The majority of participants in the ERA study at age 15 (Beckett et al., 2008), and in a study by Scherman and Harré (2008) including Romanian adoptees up to age 19, reported an interest in finding out about Romania, learning the language, and enjoying cultural activities.

In the ERA study, discrepancies were found between parent [3] and child reports of interest in Romania. Some parents reported a decline from age 11 to 15 in their child's interest, with 70% stating they no longer asked questions about Romania and they had difficulties discussing their backgrounds (Beckett et al., 2008; Hawkins et al., 2007b). However, some adoptees reported being unhappy with the level of discussion about Romania and thought their parents had difficulties talking about it, and that they did think about their birth parents. Moreover, 50% were interested in finding their birth families, but some thought

[3] The term 'parent' refers to adoptive parent unless otherwise specified

that it would hurt their parents if this were known (Beckett et al., 2008; Hawkins et al., 2007b).

These studies also found that adoptees identified with Romania to different degrees. For instance, over half identified with their host country; a third identified as a mix of the birth and host cultures; and approximately 15% identified as Romanian (Beckett et al., 2008; Scherman & Harré, 2008). Furthermore, although parents' interest in Romanian culture was associated with children's interest, it was not related to their Romanian identity (Beckett et al., 2008; Scherman & Harré, 2010). In the ERA study, children who identified as 'Anglo-Romanian' were more likely to have adoptive parents who showed earlier interest in Romanian identity, however, this was not the case for those identifying as Romanian (Beckett et al., 2008), suggesting that other factors play a role in adoptees' Romanian identity.

Scherman and Harré (2010) found that age related to identification with, and interest in, birth culture, i.e. older children showed more interest in their heritage culture and identified more strongly with it. Although this was not reported within the ERA study, the potential for cultural identity to become more salient during adulthood was highlighted (Beckett et al., 2008; Rutter et al., 2009). Adolescence to early or emerging adulthood has been proposed as a time for identity exploration (Erikson, 1968; Arnett, 2000), however this has not been explored for Romanian adoptees. In addition, those identifying as Romanian in the ERA study at age 15 reported lower self-esteem, with the authors concluding that some adoptees may struggle with their identity (Beckett et al., 2008). Whilst identity confusion is proposed as a typical experience of adolescence (Erikson, 1968; Marcia 1980), this has not been considered within the Romanian adoption literature.

Although over a third of participants in the ERA study reported bullying at age 15 (Beckett et al., 2008), as did those in Scherman & Harré's study (2008), the role of negative treatment from others was not considered in relation to identification with Romania.

Furthermore, Scherman & Harré (2008) found that over 50% of children reported feeling different to their non-adoptive peers. The ERA study reported that Romanian adoptees do not feel 'different' to others (Rutter et al., 2009), however this was asked in relation to their perceived difference to their adoptive family, rather than peers (Hawkins et al., 2007a). According to theories of identity, adolescence is a time when peers increase in importance (Erikson, 1968; Marcia 1980), and comparisons with others are central to one's identity (Mead, 1934; Argyle, 1994). Thus, Romanian adoptees' identity development across the lifespan is largely unexplored.

Current Study

Research including Romanian adoptees has mainly focused on outcomes up to adolescence. Research into adulthood has begun to emerge (Kennedy et al., 2016) however, current understanding continues to be based on quantitative research findings focused on psychological testing of adoptees , leaving the voices of adoptees only heard when they have had negative experiences, or not at all (Feast Grant, Rushton & Simmonds, 2013; Patel, 2007). Moreover, quantitative evidence provides merely a 'snap-shot' of adoption, the adoptee or their adoptive family at one point in time (Patel, 2005) therefore lacks a lifespan perspective. It also leaves unknown the processes behind Romanian adoptees' identity development, discrepancies between parents' and children's' accounts, and the impact of perceived difference and discrimination unknown.

Societal debates regarding international adoptees as 'economic commodities' (Lee, 2003), conjures a public identity for adoptees. There is a particular narrative about Romanian adoptees in the public sphere, which has continued since the 1990s where Romania was synonymous with international adoption (Dickens, 2002). For instance, news reports have continued to provide public accounts of Romanian adoptees, with titles such as 'Romanian adoptees struggle to adapt" (McGeown, 2005) or "What became of Romania's neglected

orphans" (Rogers, 2009). Such media narratives not only contribute to societal discourse, but also to individuals' personal identity (Weilnböck, 2009). No research has explored the ways in which adult Romanian adoptees construct their life experiences and identities. Consequently, in conjunction with the limitations of existing research, this provides the rationale for the current study.

Method

Design

A qualitative design was used to explore the life stories of adult Romanian adoptees adopted after the fall of communism in 1989. Given the international focus, the study employed social media and snowballing recruitment techniques, along with Skype™ for data collection. As this marks a distinct and unique period in history which has political, social and cultural implications for adoptees, data were analysed by narrative analysis which recognises story telling as a primary way in which individuals construct their identities (Murray & Sargeant, 2012; Riessman, 2008) and situates narratives within the context of specific historical, social and cultural locations (Lawler, 2002).

Recruitment

Ethical approval was granted by Lancaster University Research Ethics Committee[4]. Participants were recruited through social media forums/support groups set up for international adoptees which were invited to share a study advert (Appendix 4-B). On contacting me, I provided an information sheet (Appendix 4-C) and upon expressing interest in taking part in an interview participants were contacted to check they met the inclusion criteria: (i) age 16 and over; (ii) capacity to consent to the interview; (iii) English competencies sufficient to participate in an interview. Participants were also assessed against the exclusion criteria: (i) international adoptees from countries other than Romania; (ii)

[4] Relevant documents can be found in section 4: Ethics section

adopted prior to 1989. Participants were given the opportunity to ask questions about the study and a time and location was arranged for the interview.

Participants

Ten participants participated in the study (nine females, one male), ranging from 21-28 years of age (mean 24.7 years old). Participants were geographically spread: five in America, three in Britain, one in the Netherlands, and one in Australia. The age at which participants were adopted ranged from six weeks to eight and a half years (Table 1). Pseudonyms were used for all participants for purposes of anonymity. Six participants selected a pseudonym and the remaining four were selected using an online name generator.

INSERT TABLE 1

Data Collection

I went through the information sheet and gave participants the opportunity to ask questions. Where face-to face interviews were carried out, written consent was obtained (Appendix 4-F). For Skype™ interviews, verbal consent was obtained by reading the consent statements aloud and asking the participant to agree to each. This was transcribed and stored with written consent forms. I then collected demographic details (Appendix 4-G).

The interview followed a life stories approach (Peacock & Holland, 2009), used in previous studies with adoptees (e.g. Patel, 2007; Howe & Feast, 2003). The interview was guided by one prepared question asking participants to tell their life story with no interruptions and to include any important events (Appendix 4-E). I then offered participants the chance to add to their narrative. Following this, rather than having pre-structured questions, I asked participants questions about events they had already mentioned, using their language to encourage elaboration on their personal narrative (Jovchelovitch & Bauer, 2000). Following the interview, I thanked participants and provided them with a debrief sheet

(Appendix 4-H). Three face-to-face and seven Skype™ interviews were carried out. On average interviews lasted 63 minutes and were audio recorded.

I sent participants a summary story to invite them to correct or add additional information should they wish to. In addition, I re-sent the debrief sheet as reading this could have been an emotional experience.

Researcher Position

Narrative analysis acknowledges that the narrator and researcher co-construct narratives. Narratives are therefore influenced by each person's social, political and cultural viewpoints and experiences (Riessman, 2000, 2008). To promote transparency, it is therefore important to reflect on my position(s) in relation to the study.

I approached this study from a view that knowledge is socially constructed through language and therefore there is a need to question taken for granted assumptions (e.g.,'identity') and to view them within social, cultural and historical contexts (Harper, 2012). I see exploration of narratives as a way of making meaning of reality and do not believe research findings reflect an objective truth or reality, but that multiple truths or realities are possible. However, while I believe in the concept of multiple realities, I distinguish this from ontological 'reality', and do not deny the existence of a physical reality, nor the real impact (such as distress/oppression) of socially constructed concepts on lived experience.

I approached this research self-identifying as White-British with no experience of extended separation from my biological parents and living in my birth country. Therefore, a number of my life experiences are in direct contrast with study participants'. While I do not see this as inherently negative, I conceive it possible that contrasting experiences could lead me to make assumptions. In order to reflect on my own assumptions and potential influences

on data, I kept a reflective journal, discussed my interpretations in supervision, and kept an audit trail of analysis.

Analysis

There is no single method for conducting narrative analysis (Mischler, 1995), therefore a number of texts were used as the process developed (Crossley, 2000; Murray & Sargeant, 2012; Riessman, 2008; Weatherhead, 2011) (Figure 1).

INSERT FIGURE 1

Summary stories. Prior to transcription, I listened to interviews and created summaries of the conversations held to organise participants' narratives into a sequence of events across time (Crossley, 2000). I considered this important to honour individual stories prior to the creation of a shared narrative, and to provide participants the opportunity to comment on the summary's accuracy (Appendix 2-B).

Transcription. Transcription and analysis cannot be separated within the research process (Riessman, 1993). Recognising the inevitability of forming hypotheses and assumptions during transcription, I transcribed the interviews verbatim alongside a memo for reflections and met with my research supervisors to discuss these reflections.

Creating a shared narrative. Narrative analysis recognises the individuality in story construction, yet is interested in the shared accounts of groups in which people exist that shape their lives and identities (Murray & Sageant, 2012). Transcripts were first considered individually to inform a shared narrative that represents their commonalities. To familiarise myself with the data I read transcripts, concurrently marking segments of narrative speech to capture the ways in which participants constructed their stories (Weatherhead, 2011). I then noted the essence of the narrative segments' contents and common shifts, including topic, tone, time, focus and mode (Appendix 2-C). I also considered the core elements of participants' narratives (Crossley, 2000) (Appendix 2-D).

Throughout these processes, I was repeatedly drawn to the life chapters constructed by participants. As it is acceptable to focus on one aspect within a narrative analysis (Murray & Sargeant, 2012), these became the focus of further interrogation. Despite considerable differences in the narratives' core elements, shared life chapters centred on identity construction were evident. This was consistently referred to in my reflections, supervision and individual transcripts (Appendix 2-E).

Narrative analysis moves beyond the surface of a text to provide a broader commentary (Riessman, 2008) and without accordance with broader social narratives (e.g. identity development), however loose, individual narratives would not make sense (Lawler, 2002). Thus, the findings present the shared narrative of identity as situated within broader narratives of identity development.

Findings

The first chapter focuses on how narratives set the scene for stories of self-discovery whilst the remaining three chapters explore the ways participants constructed and negotiated their identities (Figure 2).

INSERT FIGURE 2

Chapter 1: Setting the Scene – The Adoption Story: "…let's be honest, it's a communist orphanage" (Sonya)

All but one participant told their adoption story as the first chapter which 'set the scene' by orientating narratives within the socio-political context of Romania in the early 1990s. Participants moved between descriptive and educative accounts, inviting the listener to enter the storyteller's perspective (Riessman, 2008) and laying the foundation on which subsequent plots would be built:

> …in 1991 still there was a really big push back… from the Romania government even though they had been overthrown, some of the old people left over…like they weren't

> too keen on the fact that the west had found out about the fact that 200,000 children were in orphanages…They always made it anyway very difficult for you to make an adoption. And they knew because the adoption processes, rich white Americans, rich white Canadians, rich, you know, Germans, English, whatever… so always they would find a way to get as much money out of you as possible and delay the process as long as possible (Sonya)

As most participants were adopted before an age from which they could consciously recall memories, they were reliant on other stories available to them, from parents and family members: "…these are like some of the stories they [parents] told me" (Sally). Participants drew on later acquired knowledge of Romania and documented information about their adoption, and their focus moved between self, other and context to weave together their adoption story:

> ...I was born in 1988 which was the year before the revolution in Romania and then I was adopted in 1990 which was the year after. An American family went to Romania and they got me, I was born in [removed], so just north of the capital…when my father went to get me he had a lot of trouble because, you know, the government the system was sort of, you know was in the middle of being changed so, things were crazy (Caitlin)

Through the use of factual descriptions and educative accounts of their adoptions, participants' narratives created neither a self 'as known by others' - 'me'; – nor a response to the attitudes of others and what is learnt about the self - 'I' (Mead, 1934). Having one aspect of the self without the other is considered as a self that is incomplete (Mead, 1934), however by constructing neither 'me' nor 'I', participants' identities were reflected as passive items to be selected in the adoption process: "it's like shopping for a baby" (Christina), i.e. void of an identity. Moreover, the shifts in focus between self, other, and context indicated a lack of

autonomy during this phase of their lives, suggested as an essential task in early identity formation (Erikson, 1968). Participants storied autonomy as they mastered their adoptive environments, which thereafter allowed for identity development.

Chapter 2: Constructing the Self

The next chapter centres around the period of time following participants' adoptions where, after gaining autonomy, narratives reflected development of a 'Westernised' identity which displaced their Romanian self. However, as their identity began to be questioned by others, participants developed a sense of difference.

All participants narrated striving for autonomy to navigate their new environments, akin to Erikson's (1950, 1963) autonomy versus shame stage of identity development. However, rather than being an experience between ages two to four in childhood as this theory suggests, the process was narrated by participants as occurring directly following their adoption, regardless of age. Moreover, as is documented in research with Romanian adoptees (Johnson et al., 1992; Rutter et al., 1998), participants described cognitive, developmental and/or physical delay, linking these difficulties to their previous experiences:

> I was very unwell, obviously being in an orphanage…until I was six years old…I couldn't even walk. I had pneumonia about three or four times…so I was very low educated, every kind of way, and very physically damaged in every way too (Vienetta)

Participants also told of difficulties in their attempts to adjust to the novel environment. Yet, as has been found in previous research (Rutter, Kreppner & O'Connor, 2001), they caught up quickly:

> …the orphanage - I was just in cots so I was a little bit maybe delayed in a sense…and then also, living with…the foster carer um she, like we collected water there was no like running water. So I'd not seen all that. So, when I came here they had like a dishwasher and stuff [laughs] and I'd just stand on the lid, and I broke stuff all the time and I

> flooded the room, 'cos i'd just leave taps on ‘cos I thought it was just quite cool that water could come out. And, stuff like that. But I think it was a really quick transition of it being fine (Kate)

Participants’ narratives thereafter became focused on identity construction.

Constructing the ‘Westernised’ Self – “if anyone asked me, I'd be like "oh I'm English" (Kate). Following adaptation to the environment, the focus of this chapter was on how participants developed a ‘Westernised’ self, identifying with their host country. This supports findings from the ERA study where by age 15, the majority of adoptees identified as ‘English’ (Beckett et al., 2008).

Participants’ narratives depicted how they soon learnt the language of their host country, irrespective of their level of Romanian language or age at adoption: “I came to America and I had to learn the language and I learned it really quick in like six months” (Anthony). As a consequence, Romanian language “faded away” (Sally). Language is considered a central way that one comes to represent the self (Mead, 1934). Therefore, with only English available, participants were only able to construct their identity using this language and associated culturally defined meanings (Newton & Buck, 1985).

It is also proposed that identity develops through viewing the self from different social roles. Children develop a range of social roles to guide their own behaviour and, in turn, internalise a ‘generalised other’ – the attitudes of those in one’s community (Mead, 1934). As the roles of ‘Romanian’ or ‘adoptee’ were unavailable, participants internalised a generalised other from the views of their host family and communities - constructing the ‘Westernised’ ‘me’. This was reinforced by messages from others (Argyle, 1994), either verbally: "No, you're my daughter" (Sally); symbolically: “when they got me they put American clothes on me” (Caitlin); or through the active displacement of the ‘Romanian’ ‘me’: “they [parents] did everything they could for me to forget it” (Anthony).

The ‘Westernised’ self was not internalised without attempts to explore the Romanian self. Narratives shifted from adaptation to the environment to curiosity, a process proposed in Erikson’s (1950, 1968) stage of ‘initiative versus guilt’ stage of identity. Supporting existing research (Beckett et al., 2008; Hawkins et al., 2007a; Scherman & Harré, 2008, 2010), participants began to ask questions about their life in Romania, their biological families and their adoption story:

> …I used to say things like why did I get adopted? Who are my actual parents? Who's my dad, where's my dad at? Who's my mum? Why would my mum do such an awful thing? Why would just leave me in the hospital without telling me any records of her, or who she is? Why would she leave me so confused? Why? Just all like why and what and how (Vienetta)

However, decisions about accessing information continued to be made by parents, and participants described varying degrees of parental support with questioning. Erikson (1950, 1968) suggests that if parents are unable to answer their child’s questions due to intellectual challenge or embarrassment, the child may develop guilt, leading to inhibited initiative and curiosity. Although participants’ narratives did not indicate permanent inhibition of initiative or curiosity, during this chapter they ceased to explore their Romanian self. This was due either to parents’ inability: “the questions I was asking went a bit above their heads” (Gillian); or unwillingness to answer questions: “It was more or less, 'we adopted you from Romania and you are Romanian and you're part of our family now'. And there was really no additional anything added to that” (Hannah); or their perceived discomfort with questions: “I always was kind of a bit nervous about asking my adoptive mum too much about it. I didn't want to upset her or anything” (Beatrice).

Participants also described limited or restricted access to documented information and being misinformed about the amount of information available to them. For several

participants, documentation was held in a physical location such as a book or box, yet parents controlled its access:

> they [adoption documents] were given to me and I was only really allowed to look at them with mum for a while. She'd want to, kind of, be a part of it. But when she was a part of it, I couldn't just freely look through them as such. (Kate)

Hawkins et al. (2007b) found through parent reports, by age 15, the majority of adoptees no longer asked questions about Romania, concluding that they had become 'uninterested' over time. In light of the narratives told in this study, these findings are misleading as the exploration was bound by parents' willingness to facilitate exploration, which led adoptees to eventually suppress their interest. Indeed, Hawkins et al. (2007b) reported that some Romanian adoptees found it difficult to talk about their adoptions. The study did not explore adoptees' reasons for discomfort, yet 20% perceived their parents to have difficulty in talking about adoption (Hawkins et al., 2007b). In the current study, participants' narratives indicate that it is not that adoptees' interest declines, but that it is modified by parents' approach to exploration.

Participants temporarily terminated their questions and, along with a lack of language or social roles available to represent the Romanian self, participants' narratives indicated that their identities were internalised as 'Westernised' and their Romanian self was displaced: "…for many years, I kind of ignored…how I grew up...I didn't really look back of how I was brought up or anything like that, so I just thought I was all fine and everything" (Vienetta). The way participants constructed their identities continued to lack autonomy. However, as this chapter progressed and their social environment expanded, they began to construct their responses to the attitudes of others –the 'I' component of the self (Mead, 1934).

Constructing self as different: "I knew I was from Romania, I knew I was different" (Sally). As participants moved into adolescence their social groups expanded,

indicated through an inclusion of friends and teachers in narratives. Expanded social groups provide more social roles to develop the self (Mead, 1934), however as the roles of ‘adoptee’ or ‘Romanian’ were still unavailable, it was through exposure to further Western social roles that participants constructed their identity as ‘different’.

This finding contrasts with the ERA study, which reported that Romanian adoptees did not deem themselves as ‘different’ (Hawkins et al., 2007a). However, this was asked in relation to the adoptive family, as opposed to peers, who become more salient in self-development in adolescence as individuals develop the capacity to imagine how they are judged by others (Piaget, 1959) and begin to make comparisons between the self and others (Erikson, 1950, 1963). As one’s knowledge of the self is proposed to develop simultaneously with knowledge of others (Mead, 1934), making comparisons with others facilitates one’s sense of self by allowing an individual to see what it is they are not (Argyle, 1994). A change to developing a sense of self as different to others was evident in participants’ narratives as they detailed occassions where their backgrounds were pointed out by others, including negative comments from peers: “…when I say I'm adopted from Romania then all you get is ‘oh cos your parents didn't want you.’ I mean, they're really cruel” (Sonya). Not only did this contribute to a sense of being different, it prompted participants to question their sense of self:

> … I don't have a family tree really to share so you have to adopt someone else's family tree and make it your own…and like the looks of 'oh, why do you have two names?' ‘Because I have my birth name and then I have my name now.’ And then like 'why don't you know when your grandmother was born? why don't you know any information about your mum?' It just brought up so many issues (Hannah)

The ERA study found that over a third of Romanian adoptees, particularly those identifying with Romanian identity, experienced bullying at age 15 (Beckett et al. 2008). The

content of the bullying was not explored, but an association with 'ethnic status' was speculated. In the current study, negative comments or unanswerable questions were received when participants chose to disclose information about their family composition. Thus, developing a self as different was not narrated in terms of feeling excluded based on 'racial/ethnic' differences, as speculated by Beckett et al. (2008). Rather, participants developed an identity as different through the dominant idea of the 'nuclear family' – "married couple and their children who have not attained legal majority" (Pattison, Defrancisco, Wood, Frazier & Crowder, 1975, p. 1246) - as normal.

Participants' narratives indicated that developing a sense of difference led them to consciously respond to their internalised sense of self as 'Westernised' and the attitudes of others – constructing the 'I' aspect of the self (Mead, 1934). In this chapter participants became explicitly aware of their lack of self-knowledge, important in identity development (Harter, 1983): "…one of the students asked well if you're here and your family's there, why aren't you with them? And I remember being like, I don't have an answer for that" (Sally). As a result of limited knowledge, lack of representative social roles and language, and exhausted attempts or restricted opportunities for gaining information, participants embarked on a search for self.

Chapter 3: Who am I? Quest for Self-Discovery

Participants constructed their search process as a quest to answer "who am I?" – a conscious and autonomous process of 'doing' rather than being 'done to', as illustrated in earlier chapters. Establishing a sense of identity has been identified as a key aim for adolescence and has been termed 'moratorium' (Marcia, 1980) or 'identity versus role confusion' (Erikson, 1950, 1963) – exploration of different identities before establishing a coherent sense of self. Erikson's version of adolescence is hypothesised to be ages 12 to 18 (Sokol, 2009), however participants in this study were actively continuing to search in their

twenties. This finding fits with the more recent concept of 'emerging adulthood', coined in response to demographic shifts across the past half century and associated extension of identity exploration spanning 18 through 25 (Arnett, 2000). To reflect recent shifts in conceptualising identity and in recognition of participants' exploration in younger years which continued into their twenties, the searching period in this chapter refers to age 12 to the twenties.

Search for the self: "I've been like crazy searching" (Vienetta). Participants' increase in skills during adolescence supported them to conduct more sophisticated searches, recognising their shortcomings in former years: "I think when you're thirteen or fourteen…not only do you not, when you don't have the resources on top of it, you don't really have the research skills" (Sonya). This is supported by the idea that adolescence is a time when physical development, cognitive skills and social expectations coincide allowing an individual to examine childhood identities to construct a pathway toward adulthood (Marcia, 1980). Moreover, developed cognitive skills enable systematic and methodological searches allowing adoptees to ask more sophisticated questions about the self (Piaget, 1959; Kroger, 2004).

In adolescence, parents have less of a direct influence on an adolescent's identity development, whilst their reactions during earlier stages of identity development may inform the adolescent's later exploration (Erikson, 1968). For instance, an earlier inability to foster a child's curiosity may leave them reluctant to explore untried options in adulthood (Gross, 1992). Although parental responses during earlier attempts to explore influenced participants' searching to a certain extent, they did not lead to a reluctance to explore untried options as searching commenced irrespective of parental support or constraint.

Some participants were given control of their search, symbolised by the physical transmission of documented information. Where parents were facilitative of identity

exploration, participants made a more gradual self-exploration. For participants whose parents showed discomfort with their exploration, they searched in secret, constraining the amount of time available for searching:

> …at that point my search was very unsuccessful because I had very limited access. I couldn't do stuff at home, because at that point I didn't have a computer of my own that I could search on so I didn't, I mean I pretty much had to do everything at school…because my parents would have gotten mad at me (Hannah)

All participants narrated, to varying degrees, how they searched for information about Romania, their past or biological family. The social environment facilitates self-development, and currently adolescents develop identity in a world inundated with technology and mass media (Lloyd, 2002). Indeed, most central to participants' narratives of searching was the use of media. For instance, they gained knowledge of Romanian culture, language and history through television and internet: "I started researching just more background of Romania, um, anywhere from I mean little things like climate…and the people there, what they wore, what that [sic] ate." (Hannah).

Moreover, according to Lloyd (2002), during identity formation, it is possible that 'significant others' (Mead, 1934) extend beyond peers to include media modalities (e.g. television or internet). Thus, with increased access to media representation such as television documentaries, participants had access to multiple roles unavailable in their immediate environment with which to compare:

> There was a programme 'from Romania with Love'…I was just sat there and I was just like "what?"…"oh this looks interesting." And I was just like "what?" this is so what I've been thinking…One of the girls on it … Like her story seemed the most similar to mine, and I found it amazing (Christina)

All ten participants engaged with social media in their search, enabling some to directly search for family. Some participants were successful “Facebook's there. It's just too easy, it's just no effort involved and you type it in, and it all comes up” (Kate), whereas others met barriers: “I did find multiple people with my mother's name that I added on Facebook, but the birthdates didn't match up” (Hannah).

In addition, whilst participants in the ERA study connected with other Romanian adoptees as a result of their parents’ involvement with support groups (Beckett et al., 2008), the participants in this study used social media. This difference could be due to the significant increase in use of, and access to, social media since the time of Beckett et al.’s (2008) study. Connecting with other Romanian adoptees was not narrated as a desire to replace their existing social group (Tafjel & Turner, 2001). Instead, participants’ narratives reflected that this met a need that could not be fulfilled by existing groups – to provide information about searching:

> I am part of a group on Facebook for Romanian adoptees only. Um, and one of the girls on there…sent me a message and she said 'hey, this is, I'm just kind of throwing this out here but I found my parents through this organisation, they're kind of pricey but they have a 100% success rate in finding parents of adoptees and here's the information’ (Hannah)

Visiting Romania was also a key event in the search for self. Six participants had travelled to Romania, three of whom had met members of their biological family. Of the three others, two had made unsuccessful attempts at finding their parents and one did not want to search for her family: “…I wanna know stuff but I don't wanna meet them” (Sonya). At the time of the interview, those who had not visited Romania all described planning to visit in their future script (Crossley, 2000). This supports findings from the ERA study that

by age 15, a third of participants had already been to visit Romania, and the majority wished to go in the future (Beckett et al., 2008).

The process of searching for information or biological parents was not without challenges. An incongruence was evident between the use of the internet during their search and the adoption information documentation in Romania. Thus despite the internet providing novel ways of accessing information and connecting with others, due to a "digital divide" (Kirmayer, Raikhel & Rahimi, 2013, p. 173) for some participants, despite attempts to find it, information about their families or their own adoption was inaccessible, inaccurate or non-existent. This resulted in a continued gap in knowledge making it impossible to develop a coherent past narrative to integrate into a current self. Instead, participants held multiple, distinct selves (Mead, 1995).

Constructing multiple selves: "…it's kind of like having two separate me's" (Beatrice). Participants' narratives constructed the development of a second, separate, Romanian identity. Both language and role-taking are thought to be fundamental for representing the self, and knowledge of self and of others develops simultaneously through social interaction (Mead, 1934; Combs & Freedman, 2016). Thus, through newly acquired knowledge of Romanian language, culture and history, and exposure to new social roles from which to view the self, attitudes from the Romanian community were assumed – internalising a Romanian generalised other (Mead, 1934). Narratives in this chapter conveyed more autonomy as participants storied their responses to the Romanian community and actively negotiated which aspects of Romania, or their own histories, would become part of their identity - constructing the 'I' component of the Romanian self (Mead, 1934).

Whereas in earlier life chapters participants reflected a more egocentric perspective of their adoption, void of context: "when you realise that your mother gave you up, like she wasn't willing to fight for you" (Hannah), in this chapter participants' narratives suggested

that they had developed skills to see that their behaviours and those of others are influenced by situational factors (Piaget, 1959). For instance, in light of their acquired contextual knowledge, participants reflected on and make sense of their histories:

> … there's a chance that she [birth mother] was awesome and she loved me as much as she could have and just couldn't do it…you know they don't even have money to feed themselves and the kids they have already…so I can understand like good people if you will are getting forced to get rid of children. (Caitlin)

The internalisation of the Romanian generalised other, response to the Romanian community and new positions on their own backgrounds led participants to construct a Romanian identity. Holding of multiple selves is considered, by some, a natural process, as we naturally divide ourselves according to the relationships we hold and places we occupy (Mead, 1934; Combs & Freedman, 2016). Thus, although fragmented in the sense that the two selves were not integrated, the Romanian self existed alongside the 'Westernised' self and participants were not in conflict, nor holding a negative or diffused identity (Eriskon, 1968; Marcia 1980). The construction of two individual selves led to the final chapter: self-negotiation.

Chapter 4: Negotiating the Selves: "blending the two" (Sally)

In the final chapter, participants' narratives portrayed a process of self-negotiation. Some participants explicitly narrated the process of assimilating their 'Westernised' and 'Romanian' self: "trying to, you know integrate, you know Romania and such into my life's a bit, I can't do without it anymore" (Beatrice). However, some participants' negotiation of the selves was constructed in ways other than 'integration' such as keeping the selves separate, or hidden: "it's it's not something that [pause] goes. It's like, it's just part of you isn't it. And it's not a big part of me, it's not something that comes up everyday" (Kate). Moreover, some participants who did not desire to connect with biological family negotiated their identities as

an ongoing connection and/or commitment to Romania: "…my hope is a diplomat for either the European Union or Romania" (Anthony). This way of negotiating identity supports the notion of 'intentional state understanding' of identity, as opposed to internal state understandings (e.g. 'Romanian' or 'adoptee'), which refers to one's commitments, hopes and dreams (Combs & Freedman, 2016; White, 2007).

Regardless of the way in which participants negotiated the selves, this was constructed as a work in progress, with no stories reflecting a finite identity. Although it is acknowledged that decisions about identity in adolescence are not made "once and for all" (Marcia, 1980, p.161), theories of identity development, whether from a developmental (e.g. Erikson, 1968; Marcia, 1980) or social perspective (Mead, 1934), imply one reaches a 'complete' identity.

However, this view does not comprehensively take account of contextual influences. For instance, if identity is bringing together "all the things we know about ourselves…plus all past experiences, thoughts and feelings to integrate all images of the self into a whole" and, in turn, is associated with a positive psychosocial identity (Gross, 1992), for those whose stories remain incomplete as a result of historical, social, and political influences, this may be impossible. Within this perspective, those with increased access to contextual resources, for instance exploration possibilities, are inherently privileged (Schachter, 2009).

For Erikson, the more disjointed an identity, the more confusion exists (Schwartz, 2001) and despite an evident theoretical shift in the way identity exploration is conceptualised (Arnett, 2000), the dominant message of needing a complete and stable identity remains. This is evident through the current ways that identity is pathologised within mental health systems (Combs & Freedman, 2016). For instance, 'personality disorder' diagnoses (American Psychiatric Association, 2013) are underpinned by the notion of "normal personality" versus "personality pathology" in children and adults (Tackett, Balsis, Oltmanns & Krueger, 2009, p. 688-689). Accordingly, having multiple or fluctuant identities

is seen as pathological as it deviates from the Westernised discourses of identity (Berger, 2014), perpetuating the prevailing idea that a 'complete' and assured identity is synonymous with "psychological well-being" (Erikson, 1968, p.165). Indeed, several participants spoke of receiving psychiatric diagnoses which were a result of post-adoptive circumstances rather than identity confusion: "I've got um border personalities as well and PTSD you know the traumatic war stuff" (Vienetta); "…they started thinking that I had attachment disorder, reactive attachment disorder…and then there was like ADHD, ADD and like all these things that I, I kinda think they just made it up" (Anthony).

Rather than integration, central to this chapter were the ways in which participants related to their identity. This finding may fit with more recent findings that show that identity moratorium and diffusion are increasing, whereas reaching identity achievement has decreased (Beyers & Seiffre-Krenke, 2010; Sokol, 2009). Moreover, participants' stories of continued searching were not told with a tone of turmoil, despair or psychological distress, rather as a continued quest of hope. This is not to suggest that hardship or discomfort was not evident within narratives of incompletely integrated selves, nor to detract from the real challenges participants continually faced in their search. However, despite an 'incomplete' integration of selves, participants managed discomfort, and at times put aside their search to attend to other commitments: "I was like it'll be ok to step away from it for a second…if something develops, or I have an 'aha' moment… maybe it wasn't meant to be at the time. I'll keep going with it" (Caitlin). This supports the idea that although identity exploration may cause some anxiety, individuals do not respond to challenges by becoming overcome by fear, but by gradually making their way towards laying the foundation to their adult life (Arnett, 2007).

Clinical Implications

Searching for information was central to adoptees' narratives, and parents' role in this process was critical. Whilst recognising discomfort for parents, professionals could offer reassurance that questioning and searching is a normal process and does not suggest that the adoptee is unhappy. Guidance should be provided to parents on facilitating searching; talking openly about Romania and providing age appropriate information; and being honest if the requested information is unknown/unavailable.

As social media were a key searching resource, professionals could support its access and use, offering guidance on safety. Where internet searching is unavailable, professionals could provide families with alternative methods. Furthermore, not all of the participants expressed interest in finding their birth families, therefore while it is recommended that this is open for discussion, professionals and adoptive parents should be guided by the adoptee and support them in decision making (Rutter et al., 2009).

Professionals should be mindful of the potential impact of missing information on adoptees' identity. Although narratives did not suggest undue psychological distress, some participants were still actively searching. It is possible that complete absence of information could affect adoptees' identity and/or psychological well-being. Thus, psychological support could be offered to help make meaning of adoptees' experiences in light of missing information. Moreover, where participants experienced psychological difficulties, they were related to post-adoption experiences. It is therefore important that professionals are trained in a lifespan perspective on international adoption. Each family will have a different adoption journey and will require different support, therefore a model of maintained communication between families and adoption services is encouraged (Fassee, Horton & Magnuson, 2014). This approach allows for individually tailored support across the lifespan, such as education about challenges, signposting to appropriate services and support with searching.

Finally, as the importance of documented information was underscored, it is essential that birth certificates, information regarding biological family members and medical history are appropriately documented and accessible. This involves ensuring the documents are duplicated and available in an accessible language (Bartholet, 1993).

Limitations and Future Research

Although offering global participation, the sole use of social media for recruitment is a limitation - it relies on participants having: access to a computer, technological skills, and the ability to read and converse in English. This potentially excluded adoptees of differing socio-economic status, cognitive ability and non-English speakers. The inclusion of one male may also be due to the recruitment strategy. For instance, due to a range of societal factors, males are found less likely to seek support than females (Möller-Leimkühler, 2002) and are less likely to access the internet for communication (Weiser, 2000). Thus, males may have been at a disadvantage in accessing the study. Furthermore, as the internet was central to participants' narratives, its use for recruitment leaves unknown the life stories of adoptees who do not use it. Future research could seek to recruit participants using additional recruitment methods to explore life stories of adoptees who do not use the internet.

Life story interviews typically last longer than other research interviews, spanning several meetings (Earthy, Cuncev & Cronin, 2015). This study is limited by a single interview. Although participants were given the opportunity to comment on the accuracy of their summary stories, further interviews or participant checking may have provided more in depth accounts of identity. Future studies could focus on identity for further exploration.

Conclusion

This study presented an account of Romanian adoptees' identity construction. Central to narratives was a quest of self-discovery, throughout which adoptees were confronted with bureaucratic and personal barriers. However, in the face of difficulties adoptees continued in

their quest, drawing on social media and the skills of others to aid their search. Adoptees found ways of navigating the complexities of their identities, managing discomfort and stepping away from the search when required. Narratives concluded neither with an end, nor a complete self, but as an unfinished quest to be continued.

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Table 1. Participants' demographic details

Participant	Demographic Details
Hannah	24-year-old woman who was adopted when she was 6 weeks old. Hannah was adopted into the USA. Hannah was told she was adopted when she was 10 years old.
Kate	22-year-old woman, who was adopted when she was 4 years old. Kate was adopted into the UK. Kate always knew she was adopted.
Beatrice	25-year-old woman who was adopted when she was 1-year-old. Beatrice was adopted into the UK. Beatrice always knew she was adopted.
Sally	28-year-old woman who was adopted when she was 4 years old. Sally was adopted into the USA. Sally always knew she was adopted.
Anthony	21-year-old man, who was adopted when he was 8 years old. Anthony was adopted into the USA. Anthony always knew he was adopted.
Sonya	28-year-old woman, who was adopted when she was 4 years old. Sonya was adopted into the USA but subsequently moved to the Netherlands. Sonya always knew she was adopted.
Christina	27-year-old woman, who was adopted when she was 2.5 years old. Christina was adopted into the UK. Christina always knew she was adopted.
Gillian	24-year-old woman, who was adopted when she was 2 months old. Gillian was adopted into the USA. Gillian always knew she was adopted.
Caitlin	27-year-old woman, who was adopted when she was 2 years old. Caitlin was adopted into the USA. Caitlin always knew she was adopted.
Vienetta	21-year-old woman, who was adopted when she was 5.5 years old. Vienetta was adopted into Australia. Vienetta always knew she was adopted.

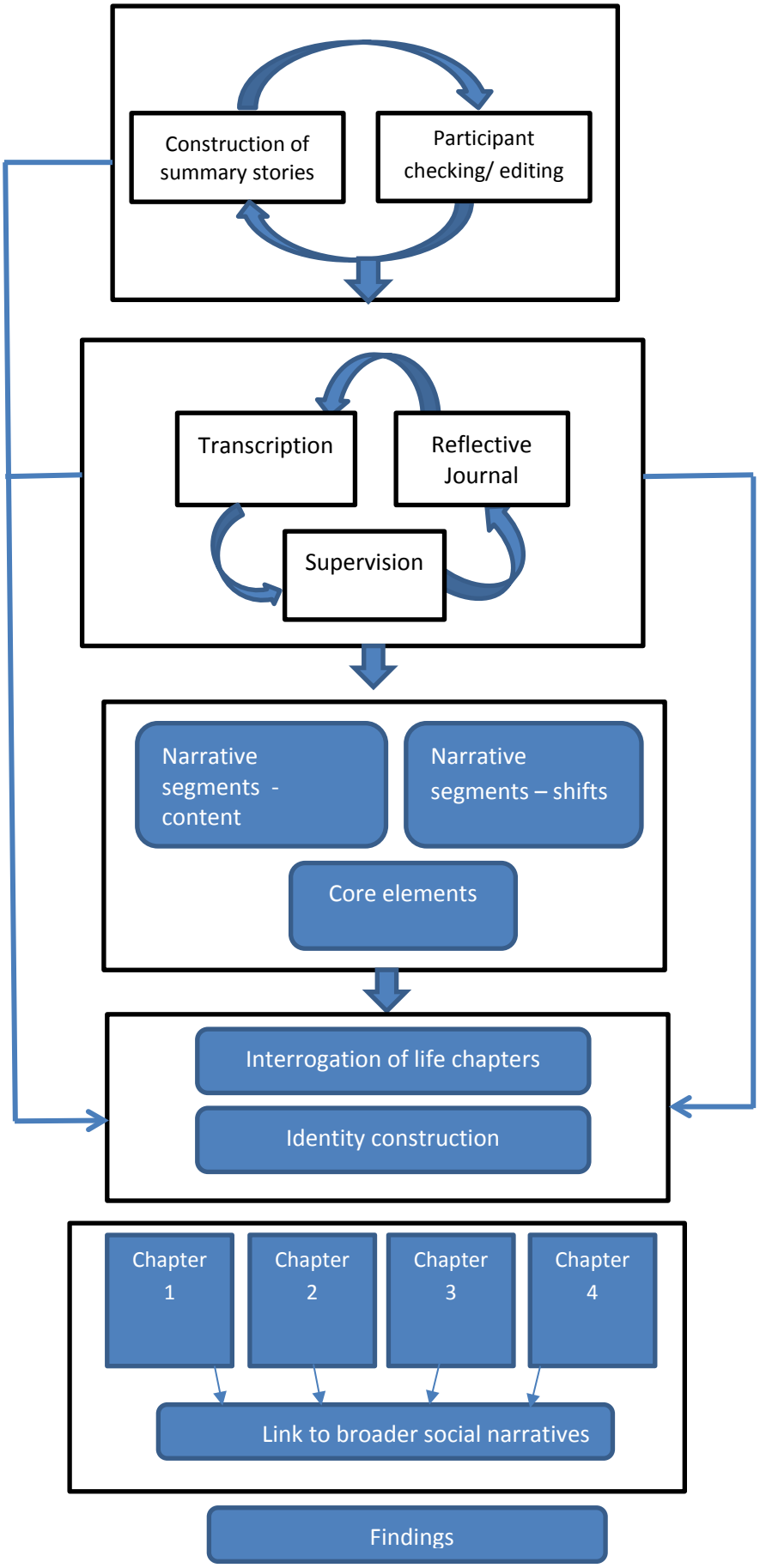

Figure 1. Process of narrative analysis.

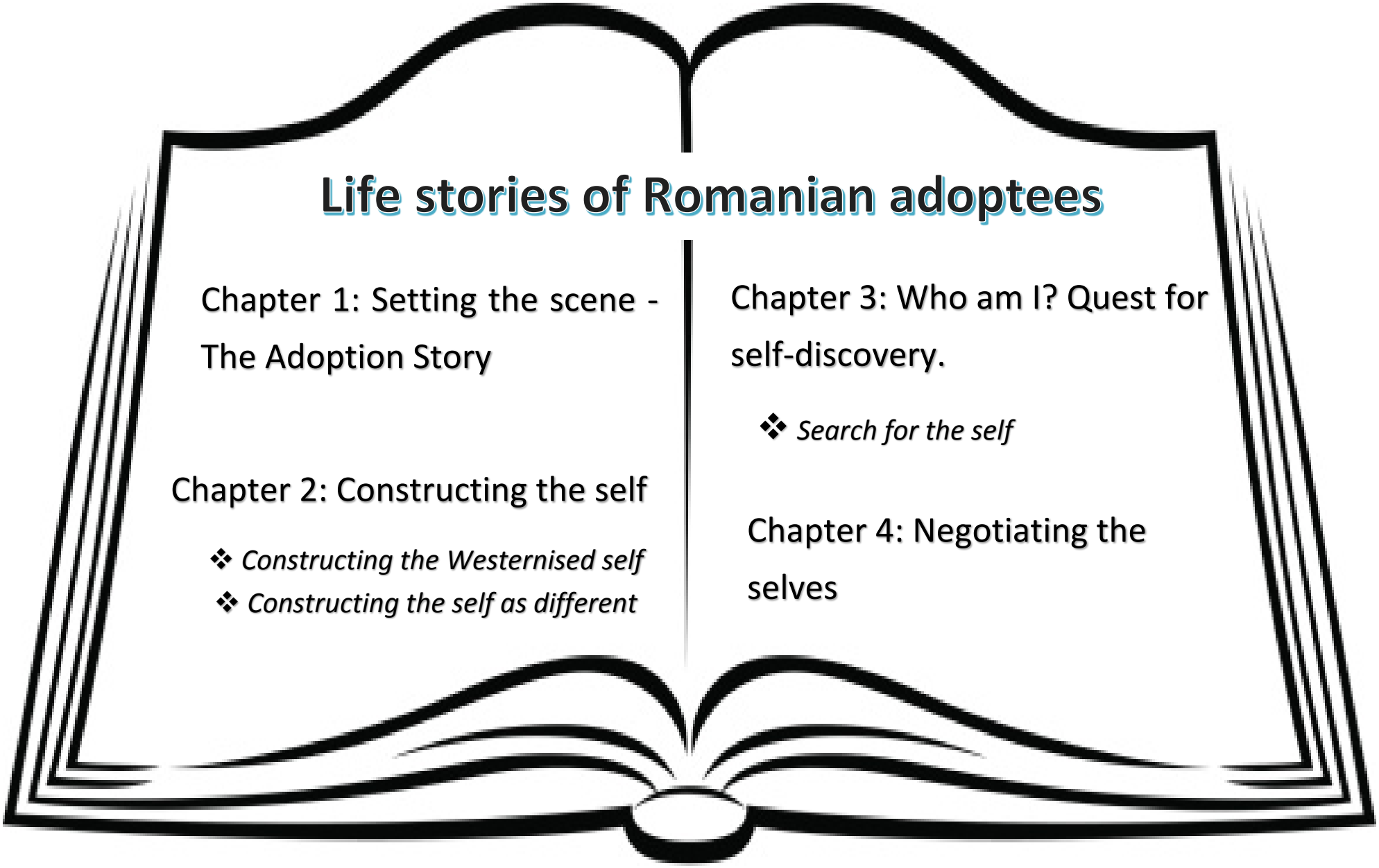

Figure 2. Illustration of life chapters from the narrative analysis**.**

Appendix 2-A

Adoption Quarterly: Guidelines for Authors

Thank you for choosing to submit your paper to us. These instructions will ensure we have everything required so your paper can move through peer review, production and publication smoothly. Please take the time to read them and follow the instructions as closely as possible.

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Aims and Scope
Adoption Quarterly is an unparalleled forum for examining the issues of child care, the relationships between nature and nurture, and the psychological and social meanings of the word family. This international, multidisciplinary journal features conceptual and empirical work, commentaries, and book reviews from the fields of the social sciences, humanities, biological sciences, law, and social policy. In addition to examining ethical, biological, financial, social and psychological adoption issues, *Adoption Quarterly* addresses continuity in adoption issues that are important to both practitioners and researchers, such as: the intermediary task of matching adoptee, prospective adoptive parents and–most recently–birth parents, the adoptive parent's task of telling their adoptee of his/her adoption, the reality of loss as experienced differently by the individual members of the adoptive triad and the possibility of bonding on the basis of "shared fate", adoption as a premier paradigm for studying the interactions of nature, nurture, and the lifelong development of the adoptee, adoptee adjustment (now viewed in a life-span perspective), adjustment issues for birth and adoptive parents. Adoption Quarterly also explores: the ideology of adoptive kinship, adoption as an institution, infertility solutions and reproductive technologies, future trends for adoption - and much more! The complexity modern adoption issues is daunting and challenging, but also extraordinarily exciting. The place to follow this excitement is *Adoption Quarterly*!

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References

References, citations, and general style of manuscripts should be prepared in accordance with the APA Publication Manual, 6th ed. Cite in the text by author and date (Smith, 1983) and include an alphabetical list at the end of the article. *Examples:*

Journal: Davis, M., & Whalen, P. J. (2001). The amygdala: Vigilance and emotion. *Molecular Psychiatry, 6*, 13–34. doi:10.1038/sj.mp.4000812

Book: Millman, M. (1980). *Such a pretty face*. New York: W. W. Norton.

Contribution to a Book: Raz, N. (2000). Aging of the brain and its impact on cognitive performance: Integration of structural and functional findings. In F. I. M. Craik & T. A. Salthouse (Eds.), *Handbook of aging and cognition* (2nd ed., pp. 1–90). Mahwah, NJ: Erlbaum.

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Tables and figures (illustrations) should not be embedded in the text, but should be included as separate sheets or files. A short descriptive title should appear above each table with a clear legend and any footnotes suitably identified below. All units must be included. Figures should be completely labeled, taking into account necessary size reduction. Captions should be typed, double-spaced, on a separate sheet.

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Appendix 2-B

Example Summary Story

Beatrice

You were born after the Romanian Revolution. You said you went to the hospital when you were one year old with problems with your lungs. After viewing the ABC documentary about Romanian orphanages your adoptive mother came to adopt you. At first your biological mum said no to the adoption, but after a second visit by your adoptive mum you and your sister were adopted. You said that your biological mum did not want you to be adopted but she was "forced" by your biological father.

You were told that your biological family could not afford to look after you, and this was the reason you were adopted. You had a book about your adoption given to you by your adoptive mother when you were younger. However, you did not know a lot about the adoption, and you said that you were nervous to ask about it because you did not want to upset your adoptive mum. You said that you repressed questions you had about Romania. Over time, you stopped thinking about the adoption as it was too "painful", but you remained "uncomfortable" when people mentioned adoption or Romania.

You said that you don't remember your childhood as much as you think other people do but you had everything you needed. You enjoyed growing up with your biological sister, you said that you are both different to your adoptive family, who you described as "high achievers". You said that you have always had a "distant" and not very good relationship with your adoptive mum. You went to private school, but you didn't fit in there among the "posh" people, and you were bullied. You were shy and anxious when you were growing up in school, and were nervous talking to new people. You were told that you had problems with paying attention and "day dreaming". You called yourself the "compliant adoptee" whereas your sister was more "rebellious", angry and acted out. Because of your sister getting in trouble a lot, you felt as though you had to make up for that to show that the adoption wasn't a "mistake". You said that you have done a lot of reading about adoption, and have talked to other adoptees online, which has made you realise some of the issues you and your sister had were related to the adoption. When you moved to secondary school, you began to enjoy school a bit more. You had one or two good teachers. You worked hard and applied for university. You moved away to study English literature and at this time you became less shy. Although it took you time to become familiar with people, you made some really good friends, who even now you are still close with.

You didn't know much about your biological family at this time. You knew your parents' names and that you had two older siblings. During the first year of university you were on a family holiday, your brother from Romania had come to your house to look for you. You felt "shaken up" by this news, as it was "out of the blue" but you went on with life. You found out later that your brother had been in Spain for work at the time he came to visit you.

In 2012, your adoptive mum told you she was going to Romania to look for somewhere bigger for your biological family to live as they all lived in the same room together. When she returned, your adoptive mum told you that your biological mum had asked why you had not been out to visit. This was the first time you knew that she would want to see you. Your adoptive mum let you know she was going out in a year, and you considered whether you wanted to go or not. You thought it would be a shame not to visit before she died, as the living conditions are not good where she is.

At this time, you finished university and you didn't know what you should do. You started a course in journalism, but this was not the right thing for you so you left it. You said you were depressed at this time and commenced taking antidepressants. You felt aimless but that you were supposed to be doing something at that time. You worked in a café to earn some money while you figured out what you wanted to do.

Your adoptive mum was going back to Romania in 2014, and you knew quickly that you wanted to go. You went with your adoptive mum and stayed with her friend in Romania. As it was getting closer to the trip you

became more and more nervous, and tearful but you were not sure why this was. Your adoptive mum's friend was supposed to call your biological family to let them know you were coming, however she decided it would be better as a surprise so she did not do this. The day you met your biological mum was "strange", and you described it as "hazey". Before you met her you were very nervous and were being sick on the drive to their home. When you arrived you instantly hugged your mum and you were crying very quickly. You met your older brother, his wife and their kids. You didn't stay too long because it was quite emotionally heavy. On this visit, you drove out to see them every day for a couple of The experience, you said, was also awkward for you because your adoptive mum was also there. You said you wanted to hold your biological mum's hand, and hug her, but you felt uncomfortable doing this with your adoptive mum there. You think your adoptive mum might have been jealous during this trip, and after you returned you think she was not happy about your contact with your biological mum.

Following your visit to Romania, you were "confused" and you went to see a counsellor who you described as "dismissive". After sharing your view that you think you have some problems as a result of adoption, the counsellor told you that you were viewing your adoption in a "negative way", which you did not find helpful. You contacted another counsellor, but your mum insisted you went to see the one she suggested. You found reading a book about adoption and sharing experiences with other people who have been adopted more helpful.

Around this time, you found your older sister on Facebook. Your sister moved away from where your biological family lived, because your step dad reportedly tried to "abuse" her. At first you were not sure if it was her, but it was and you started talking to her a lot. You said this was bad timing as you were going on holiday with your adoptive mum and did not want her to see you talking to your sister. You continued talking to your sister for a couple of months, and at the same time you were writing a letter to your biological mum. You told your mum that you have always loved and missed her, and explained that you had been nervous and this is why you hadn't been to visit her. You sent some photos of your visit to your mum in the letter also. Your letter also reconnected your biological mum and sister as they had not spoken for several years.

You had always wanted to see your adoption papers and other files so at this time you started looking in the files your adoptive mum had. Here, you found a big pile of letters from your biological mum to your adoptive mum which let her know how she was getting on, and asked to tell you and your sister that she loved you. You had never heard about those letters until this time. Before then you had trusted your adoptive mum about the adoption. You did not tell your adoptive mum that you had found the letters at first. However, when you went to send a letter to your biological mum, you had the address with you which raised questions about how you had this information. Since then, you haven't talked much to your adoptive mum about this, as you said she does not like talking about the adoption.

During a trip with your boyfriend, you received a Facebook message from your mum's neighbour to pass on your thanks for the letter you sent your biological mum. From here you started talking to your mum through your neighbour and began learning more about her. You started to send your mum some money, as you knew she did not have much and could not work at this time due to illness. You were since contacted by your older brother on Facebook. You said that your brother is similar to your dad, and that he is abusive towards your mother and his wife, and you have declined his requests to give him money as you were aware he took money from your family to buy alcohol.

Last year you were able to talk to your mum on your birthday via Facebook and you received a photograph of her on this day. You said that usually birthdays are not great, but this one was really nice. You arranged to go to visit your biological family with your boyfriend. During this trip, you went first to see your sister who you had not met before. She met you at the airport and she took you to her house, which you said was a nice place although they are very poor. Your sister arranged a party, cooked a lot of food at her house and had invited her neighbours. The first night you had some beers and listened to Romanian music together, and got along well. You said that although language was a barrier, you used google translate to help you communicate to each other.

After visiting your sister, you went to your biological mum's house. Although you were nervous at first, you described this time together as "amazing". You spent time together and you realised that you are very similar to

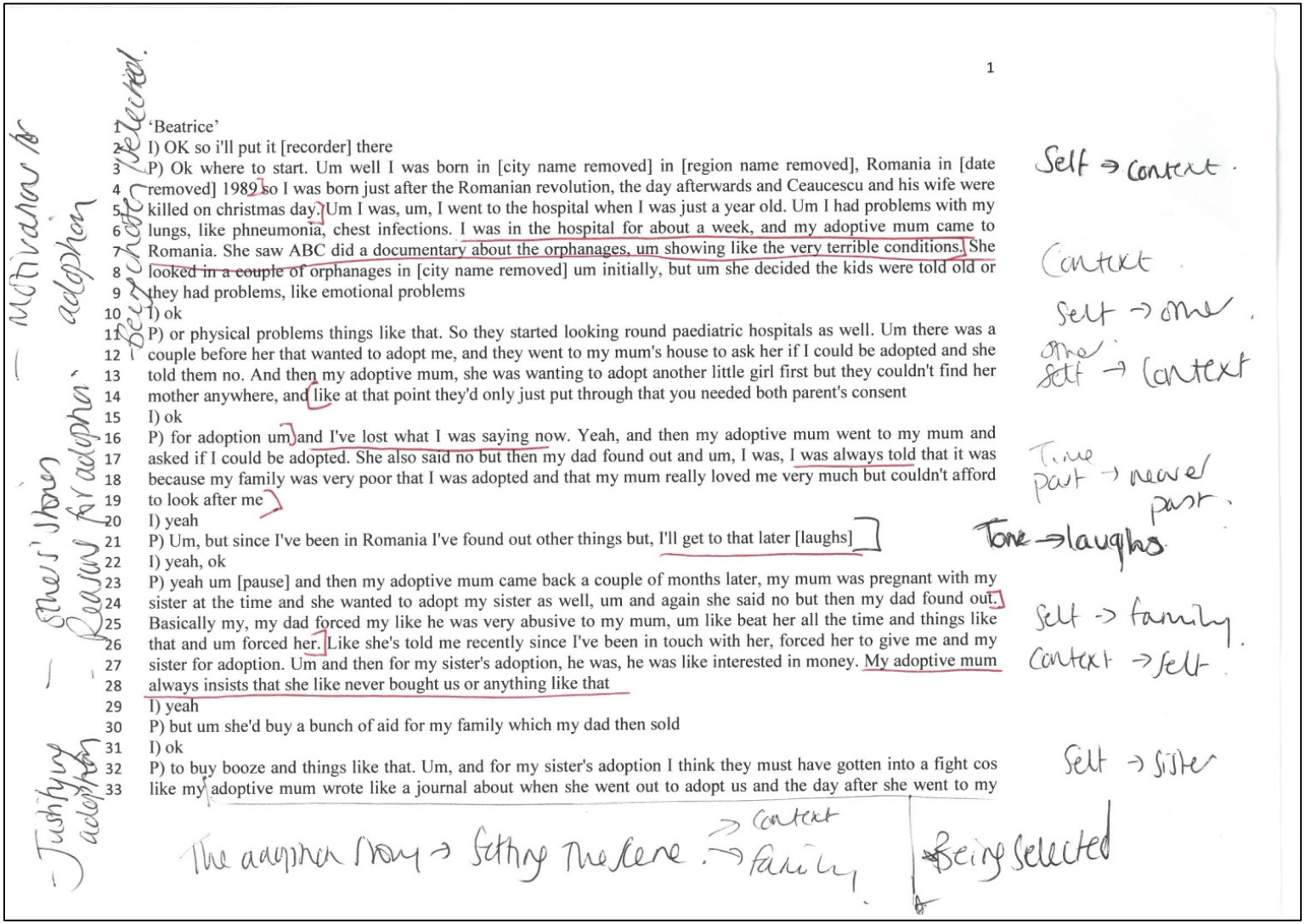
your biological mum and you got on really well together. Leaving your family was very hard, and you and your biological mum cried together when you left.

Since your trip you have been reading a lot about Romania's history, international adoption, and have joined some groups on the internet. You have learnt that Romania is under pressure to open international adoption again, and are closing the last of the institutions. You are not in favour of reopening international adoption because of your experience of seeing how upset your mum has been since you were adopted. You said you don't think removing children from their country is an "effective" way to combat poverty, but you think an answer could be to set up affordable childcare. Through watching documentaries, and learning more, you said that you have experienced "survivor's guilt". You said that you think your biological mum wanted to, and planned to, take care of you so there may have been others that needed to be adopted more urgently.

At the moment you are working to make ends meet, but you said that you do not have enough hours so will be looking for another job. You are saving money to visit your biological mum again. You said that there are two you's right now that you are trying to integrate. You said that you can't do without the Romanian side and are finding ways to integrate this into your life. You said you are still trying to find the right balance.

Appendix 2-C

Example of Narrative Segments



1

'Beatrice'

I) OK so i'll put it [recorder] there

P) Ok where to start. Um well I was born in [city name removed] in [region name removed], Romania in [date removed] 1989 so I was born just after the Romanian revolution, the day afterwards and Ceaucescu and his wife were killed on christmas day. Um I was, um, I went to the hospital when I was just a year old. Um I had problems with my lungs, like phneumonia, chest infections. I was in the hospital for about a week, and my adoptive mum came to Romania. She saw ABC did a documentary about the orphanages, um showing like the very terrible conditions. She looked in a couple of orphanages in [city name removed] um initially, but um she decided the kids were told old or they had problems, like emotional problems

I) ok

P) or physical problems things like that. So they started looking round paediatric hospitals as well. Um there was a couple before her that wanted to adopt me, and they went to my mum's house to ask her if I could be adopted and she told them no. And then my adoptive mum, she was wanting to adopt another little girl first but they couldn't find her mother anywhere, and like at that point they'd only just put through that you needed both parent's consent

I) ok

P) for adoption um and I've lost what I was saying now. Yeah, and then my adoptive mum went to my mum and asked if I could be adopted. She also said no but then my dad found out and um, I was, I was always told that it was because my family was very poor that I was adopted and that my mum really loved me very much but couldn't afford to look after me

I) yeah

P) Um, but since I've been in Romania I've found out other things but, I'll get to that later [laughs]

I) yeah, ok

P) yeah um [pause] and then my adoptive mum came back a couple of months later, my mum was pregnant with my sister at the time and she wanted to adopt my sister as well, um and again she said no but then my dad found out. Basically my, my dad forced my like he was very abusive to my mum, um like beat her all the time and things like that and um forced her. Like she's told me recently since I've been in touch with her, forced her to give me and my sister for adoption. Um and then for my sister's adoption, he was, he was like interested in money. My adoptive mum always insists that she like never bought us or anything like that

I) yeah

P) but um she'd buy a bunch of aid for my family which my dad then sold

I) ok

P) to buy booze and things like that. Um, and for my sister's adoption I think they must have gotten into a fight cos like my adoptive mum wrote like a journal about when she went out to adopt us and the day after she went to my

Appendix 2-D

Core Elements of Participants' Narratives

Anthony	**Life theme: Rejection/abandonment: "Nobody knows about us you know"**		
	Life Chapters		
Being an orphan gypsy; "It's like all the news had said" • "being an orphan and you have nothing to stand for" • Being placed in an orphanage age 4 • Moving around different orphanages • Being bullied/treated differently for being a gypsy – but changed when around other gypsies • Punished daily • Locked up • "I came out really lucky" – compared to others Adopted age 8.5	**Adjustment/not belonging** • Learning the language • Forgetting Romania/past "hated it" • Trying to forget experiences…but at the same time writing them down to remember • Forgetting language of Romania "they did everything thing they could for me to forget it" • Not enjoying America- Wanting to go back to Romania – familiar culture "not getting used to it at all" • Stealing food • Rejecting physical contact from parents • Parents replicating orphanage life • Becoming "aggressive" • Passed around, moved in and out of psychiatric care, receiving many labels – don't belong here • Medications – more aggressive • Being given up to the state "drastic" • Being told no to joining Romanian groups – being shaped into "their kid"	**Finding a place** • Shifting in and out of facilities/identities • Turning out differently to expectations • Going to university • Breaking free from parent/state care • Having an interest in "my country" – everybody was leaving it • Connecting with Romania • Joining facebook groups • Connecting with Romanians • Keeping up to date with current news in Romania • Learning Romanian • Having a strong affiliation with Romania as a country	**Connecting with Romania/ Making a change – defining self?** • More Romanian than American • Finding out still a citizen of Romania • Becoming a diplomat for Romania • No-one wants to stay in the country "You're this educated gypsy person, like we totally need those kind of people"
Significant people "The ladies" Orphanage staff, punitive 3 brothers- better than I, perfect Sister – adopted from Romania – disabled, impaired from orphanage Parents – strict, distant, reserved Grandparents – take me in, supportive 'The state' (American) – controlling, cold, not caring	**Key Events** Orphanage moving around; Getting adopted; Being suspended from school Running away; Psychiatric admissions Placed in a group home; Fight with father Being given up to the state	**Future script** Being free – settling into new identity Visiting Romania Making changes: Diplomat in Romania	**Stresses and Problems** Abuse/neglect in orphanage – trauma Problems adjusting in America – stealing, attachment, school Not fitting in with culture/parents Not fitting in with psychiatric system Distance from parents Given up to the state

<table>
<tr><td>Beatrice</td><td colspan="3">Life theme: Separated identities
Life Chapters</td></tr>
<tr>
<td>The adoption story
• Born after the revolution- The day after Ceausescu killed
• Hospital for a week, physical health problems

Adoptive Mother’s story
• Saw ABC documentary came to Romania
• Looked in Orphanages – kids too old/too many problems
• Biological mother said no to adoption, father said yes – permission to be adopted

Biological mother’s story
• Forced to give me up
• Father interested in money</td>
<td>“The compliant adoptee”
• Not connecting with adoptive family
• Feeling different
• Not fitting in
• Shy in school
• Making up for sister’s behaviour – ensuring mother did not regret adoption
• Repressed Romanian self
• Disconnected with adoption – too painful
• Uncomfortable with Romania
• Reluctant to ask about Romania – mother’s discomfort
• Confused – inconsistent stories
• Keeping letters hidden
• Distanced from adoptive family
• Less discomfort
• Made own friends
• Less shy
• Can be myself
• Brothers visit from Romania – shaken up
• Contemplating visit to Romania
• Given permission from mother to visit Romania – her in control/ difficult as she was there</td>
<td>“two separate me’s”
• Reading about adoption – connecting literature to own experiences
• Noticing similarities with other adoptees
• Contacting siblings on Facebook/ hiding from mother
• Finding out about my family
• Clarifying information
• Checking facts for myself

• Arranging own visit to Romania
• Difficulty communicating with family – use of technology
• Welcomed into my family
• Integrating the me’s- integrate Romania into my life</td>
<td>“Integrating the me’s”; Finding my place/making sense?

• Getting on well with biological mother: “utterly amazing”

• Taking position on Adoption – not in favour

• Can’t pretend it’s not there anymore; “can’t do without it anymore

• Giving financial support to family
• Move life closer to family</td>
</tr>
<tr>
<td>Significant people
Biological father: abusive, domineering,
Biological mother: Weak, abused
Biological sister: different to me, but understanding
Adoptive mother: Cold, distant, authoritarian</td>
<td>Key Events
Being adopted
Brother visiting
Visiting Romania
Breaking free – going to University</td>
<td>Future script
Integrate Romanian side into my identity
Go back to Romania
Recouperate
Find a middle ground</td>
<td>Stresses and Problems
Expectations from adoptive family
Being different/not fitting in
Making up for my sister</td>
</tr>
</table>

Caitlin	**Life theme: Romania is a part of me** **Life Chapters**		
Being signed over: Lucky to be adopted Setting the scene: Born the year before the revolution, adopted a year after Parents adoption story ABC documentary Father came to Romania "Saw me and liked me" – faxed mother "this is our girl" Everybody came to collect me Bureaucracy challenges Healthy baby, lucky as others had HIV	**American life and being Romanian (at a distance)** "Even though I didn't know an of my biological family and I grew up as an American, it was still like a part of me" Learning English quickly Talking Romanian baby talk – stories about me Immersed in American culture: "Good kid" Being proud of the "Romanian Baby" Being proud of Romanian self – told everyone Access to 'Romanian' Box – when given permission Always interested in biological family – didn't voice it Missing information about my story Parents discomfort with questions Making guesses about my adoption Being unsure – parts of the story missing	**Connecting with Romania/ Figuring it out** Connecting online with an orphan in Romania Visiting the country Sharing cultures with Romanians Volunteering in orphanage Others' commenting on 'Romanian attitude'/ confusion "what are you?" Searching on Facebook for family Visiting mothers home Searching cemeteries for mother Visiting police station/ children's services to find information Search on hold	**"do you wanna help save orphans?... I'm like "yes I do!" Giving back/ staying connected** Working with a charity to support orphanage financially Integrating Romanian language into life
Significant people Adoptive father: rescuer Adoptive mother: cautious, uncomfortable with adoption, calm Brother: cool guy, opposite to me Step father: raised me Paternal grandmother: British, cold woman Maternal Grandmother: Kisses and hugs everywhere	**Key Events** Grandma died Father died Mother remarried Grandma died – money for Romania Going to Romania Moving with fiancé	**Future script** Personal path to find career Finding ways to help the orphanage "connecting the dots"	**Stresses and Problems** Father died Not having a career

Christina	**Life theme: Lucky to have been adopted** **Life Chapters**		
"I'll start at the beginning": Shopping for an orphan Others' stories of: • Parents' hopes and motivation for adoption (saving a child from an orphanage) • Paying for help with adoption • "stumbled across me" • Bonding with mother in the orphanage • Being chosen for adoption: • "Decided" they wanted me • "apparently" in a good orphanage • Trying to get permission from the family to adopt me – unable to find them	**"Got involved…but not really understood what was going on"; Catching up/ getting your head round it** • Initial discomfort – running back to the orphanage • Confused with the outside (e.g. wind) • Others "knowing" the situation (e.g. taxi driver from orphanage) • Scared of my dad – being used to women • No English language – "rock up" to nursery not able to communicate • School as difficult – behind/different to other children • "brain caught up somewhere" • Always knew I wasn't English…but told people I was English • Asking questions about past • Mum showed me video of Ceausescu • Mum always answered questions • Making sense: "not just about me" • Connecting via media – trying to make sense of past to "get your head round it"	**"Opened my eyes"; Trying to understand** • "perfect opportunity" for exploration – careers fair, introduction to volunteering in Romania • Going to Romania, being immersed in the culture; learnt the language • Negative reactions from others – defending my adoption "sorry" • Realisation of life in "my country" • Catalyst to finding out "where am I from" and wanting to find my family • Owning identity as Romanian, "telling" I'm Romanian • Connecting to Romanians via TV – seeing their stories • "it's quite amazing what the internet does • Searching on Facebook for help with search for family • Others' passing on information and tips • Emailing others • Joined Facebook groups • Passing on of control (?) Mum gave me her Romania Journal • Receiving information about me – don't know what to do with it • Others' stories shaping own position on adoption	C**ommitting to Romania – giving back to others** • "I make sure they know what I'm talking about" – drawing on own experience to help others at work • Voluntary work in Romania – "didn't do much, just listened to them" • If I can be someone, someone else think: sharing story on TV so others can connect as I have
Significant people Adoptive father – chose me Adoptive mother – supportive, always answered my questions Woman in voluntary placement – kind, interested in my story 'Nikki' – connected, story just like me	**Key Events** Father passing away Going to Romania Seeing documentaries Receiving email with information about me	**Future script** See what happens Find my family, see if they look like me	**Stresses and Problems** Being behind others in school Coping with father's death

Gillian	**Life theme: "Proud of who I am" Adoption gave me a better life** **Life Chapters**		
"Do you like this baby?" "Yeah, are you kidding me?" "she's yours" Being adopted. • Adopted at two weeks old, stayed in Romania for 3-4 months • Parents adoption story • Unable to have children – miscarriages • Saw ABC documentary and flew to Romania • Got scammed a few times • Finding out "where did you get these babies" • Mother looked after me for another family – I was offered to her • Trying to get out in time before adoptions closed • Being taken out of mums arms for the black market – being fought for	**"…kind of bumpy":** • Homecoming in America • Always known I was adopted • Parents giving little bits of information, telling stories/ answering questions • Different approach to brother – didn't want to acknowledge adoption • I told everyone I was adopted • Biting off more than I can chew: asking to go to Romania, not understanding why not • Parents stories changing with age – learning different things when older • Looking different to family – people assuming genes from my dad • Always asked about it, receiving same answers until silenced: "let it go a little bit" • People accepting of me • Negative comments from others: "why did your mom give you up?" • Unable to answer questions • Missing information about past/family • Incentive to search • Asking parents – didn't tell us information that Romania gave • Didn't give me the letter from my biological mom • Relying on parents for searching	**"it's my roots, it's a big part of who I am"** **Searching: "something I need to do for myself"** • Watching ABC Documentaries – heart-breaking: opened a can of worms • Looking in the "security box" • Facebook searching • Joining Facebook groups • Connecting with other adoptees • Parents giving over document • Hearing other stories changing own perception of adoption: "adoption not for everyone	**Ongoing search for self: Giving back to Adoptees** • Planning trip to Romania for ongoing exploration • Planning to search for birth parents • Writing a column about adoption/ sharing story
Significant people Adoptive father: Emotional/ protective Brother: Connection to talk about adoption/frustrating due to different approach Adoptive mom: Biological mother: selfless – gave me up for a better life	**Key Events** Being adopted Coming to America Letter from biological mother Seeing ABC documentary Writing adoption column	**Future script** Find my birth mom Gaining control over search Visit Romania	**Stresses and Problems** Not having ideal/hoped for relationship with brother Negative comments from others Tension with parents – control over information/different stories

<table>
<tr><td colspan="4">Hannah Life theme: One big question mark: “I’m here but I don’t know who I am”
Life Chapters</td></tr>
<tr><td colspan="2">“Knew I was different”; “sense of I didn’t belong there”/ Sparking my interest in my life before this family

• Feeling like the black sheep of the family
• Not having the vocabulary to ask
• Realising not my blood line, without knowing
• Unsure why was different – looked like my mother/ no physical difference
• Being told adopted at 10
• Family tree – adopting another person’s
• Questions from others – why don’t you know anything
• Embraced own family – easier to deal with as didn’t understand
• Easier not to know ignored difficult feelings
• Switching schools, being with the wrong people Deep down always wanted to know information
• Things started making sense
• Being told You are from Romania, but you are part of this family
• Family unsupportive of my interest in Romania and me as a person
• Realising mother wasn’t willing to fight for me
• Questions upon questions
• Became defiant – way of dealing with it
• Realising parents hid information – found a huge folder
• Distanced from parents/stopped asking about it
• Limited searching abilities – didn’t have a computer and lived with parents</td><td>Exploring things more deeply”: “see if I could try to piece any of the puzzle together”

• Coming out of my shell – exploring past
• Becoming more accepting/understanding
• Away from family – could explore more
• Starting to learn language
• Looking into heritage
• Looking for parents
• Looking on myspace
• Connecting with other adoptees
• Connecting with Romanian culture
• Finding connections with Romanian culture = Becoming more ok with myself
• Searching on facebook
• Joining groups: Getting tips from others for search
• Hiring private investigator – on the right tracks</td><td>Blending it in’

• Blending it in – choosing Romania for project
• Emotionally draining – search stop and start
• Wanting to get closure</td></tr>
<tr><td>Significant people
Biological mother: unwilling to fight
Biological father: dead end
Adopted cousin: Kindred spirit?
Connected on another level
Adoptive parents: not facilitative of searching
Boyfriend: Supportive, by my side through searching journey</td><td>Key Events
Told I was adopted at 10
Family tree
Moving schools
Going out on my own
Graduating
Finding folder of information</td><td>Future script
Continue search for closure
Find my family
Visit Romania
Answer my question</td><td>Stresses and Problems
Fear of abandonment
Feeling different
Relationships
Uncertainty across life
Acting out
Emotional exhaustion of search</td></tr>
</table>

Kate	**Life theme: Lucky to be adopted into such a great lifestyle** **Life Chapters**		
Being "collected": Being an orphan/adoption story • Left in hospital and then put into an orphanage "straight away" • Fostered from the orphanage • Not sure if went back to orphanage • Parents "came and collected" • Parents story • Promising to take me back to visit parents	**"It's not something that goes…It's like part of you isn't it":** • Delayed – just been in cots • Broke stuff – hadn't seen it before • Hard to make friends • Learning English quickly • Few months before "it got all normal" • Went to school • "all normal ever since" • Identity as a 'project' at school • University – level playing field • Being uncomfortable with whole family • Rejected by grandmother • Being told stories about Romania • Asking questions all the time • Asking to go to Romania, being told "not the right time" • Asking to trace biological family • Mother being uncomfortable • Access to documents – knew "quite a lot" • Contacted by brother • Visit to Romania with father – explored the country – went on holiday • Didn't talk about adoption – dad there • Being supervised to look at adoption documents	**Figuring out my story/ Connecting with Romania and searching for answers** • Wanting real, not made up answers • Taking it into my own hands • "I'll do it" – typed names into Facebook • Found sister • Contacting in secret • Found out things I wanted to about family • Accessing documents • Building relationship with brother – finding out about family, sharing documents • Tried to learn the language • Communicating with brother in Romanian • Revisiting the country / experiencing stigma associated with Romanian adoptees	**Keeping it separate** • Found everything I want to know • Keep connected with my brother – close relationship • Continue to connect with Romania • Don't tell everyone I'm adopted – doesn't come up much • Only tell close friends
Significant people Adoptive father: hero, calm always there, helps with searching Adoptive mother: feisty, fiery, restrictive of search Biological brother: kindred spirit? Paternal grandmother – wise, "go to person" Maternal grandmother "old hag" Biological mother: helpless/defenseless	**Key Events** Coming to UK Starting and moving schools Entering secondary school Facebook searching Meeting brother University Going to Romania Moving in with boyfriend	**Future script** Go to visit birth place Consider meeting birth/foster parents	**Stresses and Problems** Meeting aunt: Not feeling emotional Being awkward Not fitting in Being a project Discomfort in family Rejection from wider family

Sally	**Life theme: Being ignored and silenced** **Life Chapters**		
Merging families: Adoption story • "I wasn't in an orphanage by the way" • I don't remember bad things • Adopted with older sister • One sister adopted to America • Another sister adopted to Canada • Merging with two biological daughters and two sons • Four years after adoption another boy from a different country	**"I knew I was from Romania, I knew I was different": Bounced around** • Others' stories about me: being amazing by bananas • Unable to communicate - didn't speak the same language • Starting school late: I was quiet, they just "passed me" • Learning English quickly • Romanian faded away • Having my hair cut – like in Romania • Moving around a lot/different schools – parents divorce • Connecting with horse – they don't judge you • Biological father died in Romania • Biological Brother - suicide • Family ignoring Romania questions • "Kicked out" of family home for speaking up about family • Depressed, hanging out with the wrong people • Never hid Romanian identity –always knew I was adopted • Presented Romania for class – kids asking questions: why are you here and your family is there? Didn't have the answers	**The search and finding a balance between my American side and my Romanian Side** • Difficult time – abortion: realised not OK with adoption, recognised it as "horrible" • Divorced- Changed name to Romanian • Questioning what happened to me • Lost job – catalysed the search/connection with other adoptees • "abandonment issues" – explains everything" • Learning about Romania • Joined social media for first time • Joined adoptee groups - was silenced/controlled by others, didn't like what I had to say • Looking for family members on social media • Found on Facebook by my family • Learning the language/ watching YouTube videos Visit to Romania – saw childhood home	**Blending the selves/ Sharing the story** • Trying to "blend" Romanian and American side – totally different but they make up who I am" • Don't want to blend my families – keep them separate • Published blog for a friend • Written a book chapter to get my word out • Running own social media groups
Significant people Biological siblings Biological brother Biological father: know you're there, don't know you Adoptive mother/father? Horse: Connection	**Key Events** Coming to USA; Brothers suicide Biological father died; Parents divorce Losing job; Abortion Divorce; Being forced to move out	**Future script** Writing my memoir – telling my story	**Stresses and Problems** Difficult relationships Being silenced Not finding a place of belonging

Sonya	**Life theme: Tragedy, but better than being an orphan** **Life Chapters**		
"…let's be honest, it's a communist orphanage"; Romanian orphan • "as the story has it". Setting the scene: born two years before the 'revolution' • Two available stories about how I came to the orphanage: one I was "told" and one that was "documented" • "Nobody came to visit me" – transferred to orphanage • In a 'young orphanage' then moved to one for "older children" • Being trained • Not good memories "let's be honest, it's a communist orphanage" • Having scars • Parent story – being ok'd by the doctor, despite illness • Parents took me "early": inconsolable when they left, identified them as "my parents" • Creating an identity for me	**Finding a place; moving in and out** • Frightened of the dog • Settling into town • Learning English/ having a secret language with my mother • Being regimented – learning to "go with the flow" • Sleeping at the end of my bed because of sharing beds in orphanage • Father died • School project – negative comments from others "your parents didn't want you" • Moving around • Understanding that I have been chosen not rejected • Recognising "something different" about me • Being awkward and out of place • Self as less than others? Trying to fit in/gain status (e.g. car) • Curiosity about past during teenage years • Asking to get EU citizenship: "no, you're my daughter" • In and out of college • Caring for mother	**"I think I got curious more because of outside influence…when my mother died that was more from me": Connecting with past** • Others asking if I want to meet my parents, when left with no parents "now surely you want to meet your parents" • Who am I? • Going to Romania – visiting my orphanage • Participating in research studies • Stay away from pictures/videos of Romanian orphanages (pain/trauma) • Learning Romanian • Memories coming back • Having difficult interactions with Romanians • Becoming involved in Facebook groups and disengaging – being silenced/challenged by others	**"In Romania there's still something heavy…that's still a part of their psyche" Ongoing connection with Romania** • Identifying with other adoptees, collective feeling we should be doing something in the world • Understanding Romania as a "dismal" place following the communist regime: "they haven't recovered" • Survivors guilt – "I should be doing something more" • Becoming part of EU
Significant people Adoptive father Adoptive mother Grandmother	**Key Events** Father died Grandmother died Mother died Dealing with estate/financial difficulties Professional studies/Diploma Visiting Romania	**Future script** Having time out Figuring out career path	**Stresses and Problems** Moving around Father and mother's illnesses and deaths – impacted adjustment? Moving from college Dealing with mothers estate – family feud School with the yuppies Being rejected for masters degree

<table>
<tr><td>Vienetta</td><td colspan="3">Life theme: “Hell and back”/ damaged
Life Chapters</td></tr>
<tr>
<td>“it was terrible…everyone was really really mean”: Life in Romanian orphanage

• “Flashbacks” of the orphanage
• Bullied by others for being small
• Mistreated: beaten, uncared for, poor hygiene
• Being scarred (cigarettes/bites?)
• Wanting to be rescued
• Giving up

• Rescued by parents: “amazing”
• Parents struggle for the adoption – getting the two governments involved

• Change of clothes – no longer an orphan</td>
<td>“Always on my toes”/ rescued and repaired
• Emotional/physical damage from orphanage
• No English language
• Dr predicting never walk/run
• Not trusting family
• Excitement for ‘simple’ things (e.g. textures, light); “being in heaven”
• Scared of baths & eating food
• Not feeling part of the family
• Getting used to family/learning how to communicate with them
• Turning back on Romanian self/past/ ignoring where I’ve come from
• Being different
• Bullied in school – not sure why so behind others
• Waiting for things to go wrong – to be re-abandoned
• Hearing stories about the adoption/family, family told me more as I got older.
• Asking questions about past
• Keeping Romanian surname
• Identity/ documents deleted from computer
• Let down by family – abused by father and not defended by mother
• Suicidal – diagnoses: ptsd depression, “borderline personalities”
• Lost everything</td>
<td>Who am I?

• Stopped being embarrassed: telling the ‘truth’ about Romanian background
• “Crazy searching”
• Searching for relatives
• Researching the country
• Connecting with people in Romania – via social media
• Thrown off track –informed that surname isn’t Romanian
• Joining Facebook groups
• Watching YouTube videos
• Taking to adoptees about stories of reunions

• Taking a position on adoption – want it to be reopened</td>
<td>Getting the word out

• Wanting to change Romanian Orphanages
• “they (orphans) deserve to have a bit of treatment or at least to show what they’ve been through”
• Putting a stop to orphanages “it’s illegal”

• Sharing my story – hear my story
• “I just wanna tell everybody”
• Continuing to search for information</td>
</tr>
<tr>
<td>Significant people: Adoptive father: hero turned abuser Adoptive mother; rescuer turned weak, let me down; Biological mother: totally unknown, mystery; Lady in the orphanage: nurturing; oyfriend: second hero/rescuer?</td>
<td>Key Events
Being adopted; Getting comfortable with food; Winning gymnastics/running event Leaving school; Moving out</td>
<td>Future script
Telling my story; Stop the Romanian orphanages</td>
<td>Stresses and Problems
Abuse/neglect; Fear
Bullying; Second abandonment</td>
</tr>
</table>

Appendix 2-E

Reflective Extracts

Source/date	Extract
Reflective Journal; 18/08/2015	'Hannah' (post interview reflections) – "*story seems focused around a theme of searching. Searching for her family to fill in who she is. Sense of incomplete identity? She didn't talk much about her current family…connected with parts of Romania – this was a bitter-sweet experience. No one to share it with but also sort of gave a hint of who she was?"*
	"Identity – social construct? Romanian adoptee identity has particular connotations, extra implications like you're an experiment? As though researchers are attracted to you? In the UK/internationally you might face stigma, due to media about Romanian adoptees? There's definitely a narrative about Romanian adoptees in services as "complex" or "needing specialist services", as someone told me on my learning disability service when I mentioned my research. How does this impact on identity?"
Reflective journal; 30/09/2015	'Beatrice' (post interview reflections) "*…centred around identity formation and fits with other narratives in the process of finding more about Romania and own background…'integrating the what could have been me with the actual me'- talked of the process of integrating the aspects of Romania to who they are now. Theme across participants so far"*
NVIVO; 28/11/2015	*"Ultimately, my life has been one big question mark". This seems to be reflected in other narratives where there is a process of trying to settle, or negotiate current with possible self and recognising that these would be fundamentally different.*
NVIVO:	*"…the narratives all seem to be centred around a long and windy road trying to find out who you are, without a map. A maze without a map. Puzzle with no clues" Ongoing search to self-discovery - dot to dot with a dodgy pen? "I still haven't connected the dots"*
NVIVO; 05/01/2016	*"Bureaucracy seems to be the hero in these stories. The key that opens the first door to discovery, without it the search becomes really difficult. Some people are given this key much early on in life, and some people get given a bunch of keys and have to try them all out in the door…perhaps finding out who you are is a shared process. To do this, often we need to know where we've come from, who are families are etc. However, for most of us we get the keys and stories handed to us. For the adoptees, they have to go through a maze, or through different doors to get to the centre of who they might be?"*
Reflective Journal; 05/01/2016	*"'The search' – all stories featuring this at the core. Identity: who am I? Either wanting contact only for answers, seemingly if happy with current parents. Or looking for more of a connection when not happy with adoptive parents?"*
Supervision; 25/01/2016	*"Identity as a lens for analysis to start. Focus on metaphors, language, constructions of identity. Consider processes that may be different to 'normal' identity processes.' 1) Integration of selves; 2) relying on complete/incoherent narratives; 3) not having a history to build a coherent story? Not just taken for granted information (e.g. where born)"*

RUNNING HEAD: MY RESEARCH STORY

Section Three: Critical Appraisal

My Research Story

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Word Count: 4000 (excluding references and tables)

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Abstract

Following a brief overview of the research findings, this critical appraisal provides personal reflections on the research process, further discussion of the findings, and discussion of the relevance of the findings to clinical psychology. These areas are discussed across four chapters: 1. Motivation for the study: Reservation and Reconnection; 2. Challenges of the narrative approach; 3. Disentangling ‘race’, ‘racism’ and ‘racialisation’; 4. Using a reflective Journal; and 5. My ongoing identity as a Clinical Psychologist. These chapters are supported by extracts from my reflective journal kept throughout the research journey.

Section one presented the findings from a meta-synthesis of transracial adoptees' 'racial/ethnic' identity development which suggest that they are rejected from the dominant White group due to 'racial/ethnic' differences and from their heritage group based on cultural incompetence. Thus, transracial adoptees undergo identity exploration and negotiation in order to establish a meaningful identity that fosters a sense of belonging. Section two explored life stories of international Romanian adoptees, whose narratives constructed their evolving identities across the life span. This commenced with adjustment to new environments and development of a 'Westernised' identity. However, as participants began to be questioned by others on their adoptee identity, they recognised their lack of self-knowledge and embarked on a quest of self-discovery, which developed a separate Romanian self. Finally, adoptees negotiated their different selves through integration into a single identity, an ongoing connection with Romania or keeping the selves separate.

The findings advance understanding of international adoptees' identity development by representing identity development as a complex process as adoptees reside in families from different cultural and/or 'racial/ethnic' backgrounds to their own. Moreover, the findings emphasise identity development as not merely an individualised process, but one that is shaped by contextual influences.

The findings provide an understanding of international adoptees' experiences of being 'othered' and draw out differences across the two groups - namely the salience of 'race/ethnicity' for transracial adoptees versus the adoptee status for Romanian adoptees. The importance of identity exploration for international adoptees is underscored by the studies and, in addition to more 'traditional' exploration of adolescence and emerging adulthood, they suggest an extra layer of self-discovery for international adoptees. For transracial adoptees this was finding a sense of group belonging, whilst for Romanian adoptees this was enhanced self-knowledge.

Finally, the studies contribute to the debate regarding the ability for international adoptees to develop a positive identity. Despite the above mentioned challenges, the findings evidence the potential for international adoptees to develop meaningful identities. Moreover, although some adoptees held separate or partially developed identities, this did not necessarily lead to psychological instability or distress, negating the idea that to hold an 'incomplete' identity is inherently problematic, emphasising it as a common experience as opposed to a pathological one.

The following offers reflection on the research process and, as sections one and two provided the implications for adoption practice and policy, it connects the findings to clinical psychology. The reader is directed to Table 1 for example reflective extracts made across the research process to support the ideas presented.

Chapter 1: Motivation for the study: Reservation and Reconnection

My research rationale. Prior to my undergraduate degree I undertook some voluntary work in China with an organisation supporting family placement for orphaned children and. wondered what happened to the children when they grew up. I then learnt about the English and Romanian Adoptees study at university which I continued to follow throughout academia. Learning more about the development of Romanian adoptees led to more questions: What has life been like for the adoptees? What do they think about their adoption? What has adulthood been like for them? I recognised that these questions were unanswered by the existing research and could only be answered by hearing from the adoptees themselves (Patel, 2005). These experiences influenced my interest in the research topic.

Reservation and reconnection. I was met with scrutiny about my study from some social media forums. . This recruitment method was a strength for the study as it enabled the global participation of a potentially 'hard to reach' population (Balter & Brunet, 2012) and was a cost and time effective method (Gardner, 2009; Hewson, 2003). However, the use of

this method means the researcher loses control over their research advert and contact details, and could be subject to inappropriate contact (INVOLVE, 2014). I received emails from websites requesting more information regarding the purpose of the study. I was also questioned by prospective participants requesting more information about the study and its purpose. All participants who took part asked direct questions about the rationale for the study during the interview process, such as: “Why are you doing the research? Nobody cares about orphans. Especially Britain.”

As this was an experience I had not encountered before, I experienced discomfort. I was unsure whether my requests for people’s narratives were experienced as intrusive or whether it was perceived as an attempt to ‘shame’ Romanian adoption, which has been suggested as a motive for changes to adoption policy (Youde, 2014). However, what was remarkable was the willingness of websites to facilitate the research and the gratitude of participants for having the opportunity to take part following provision of further rationale. I experienced this as a result of earning trust, important in qualitative research (Haverkamp, 2005). Considering the context in which participants were adopted, i.e. they described several incidents of their parents being misled, coerced or financially exploited during the adoption process, and the subsequent requests they received for money online from supposed family members, I speculated the importance of trust for this group. This enabled me to reflect on the importance of building trust when conducting qualitative research and asking people to share their stories. Whilst the importance of trust is considered in qualitative research, it appears to be less emphasised compared to psychological therapy, potentially due to the pragmatic differences such as amount of time spent between researcher and participant. However, much like its importance within therapeutic relationships (Wampold, 2001), trust between me and the participants was salient for this research study. This experience enabled

me to welcome further requests for information and reconnected me to my own rationale for carrying out the research.

Chapter 2: Challenges of the Narrative Approach

Narrative analysis allowed for richly-detailed and nuanced exposition of identity construction of Romanian adoptees (Josselson, 2006). However, as a novice, I experienced challenges with its flexibility and a conflict between my clinical and researcher roles.

Flexibility – A blessing and a curse. Across the study I reflected on the paradoxical nature of narrative analysis' flexibility. Although the approach aimed to give participants agency in their storytelling, it can be difficult for some people to tell their life stories from one question (Elliott, 2005). Following several interviews, I reflected on the unease of participants regarding the broadness of the question. This was symbolised through silence, laughter, or statements expressing uncertainty: "only one question?" This required further explanation as to why it was one question, which may have influenced participants' choices of life events to narrate. Additionally, the context in which life stories were asked, i.e. for research purposes, may unintentionally limit the agency promoted by the approach. For instance, participants indicated that they wished to make sure they provided me with the 'right' information. Therefore, although the open-ended nature of the narrative interview is proposed to encourage flexibility and spontaneity compared to the traditional question-answer approach of interviews (Jovchelvitch & Bauer, 2000), the approach is not exempt from researcher influence nor from the context in which questions are asked. Narrative analysis makes explicit the role of the researcher in co-constructing stories with research participants (Riessman, 1993) and within this study such co-construction was apparent before the interview process commenced.. A strength of my approach was the continual reflexivity on my own role in this process promoting transparency across the analysis process, enhancing

credibility of the findings (Morrow, 2005) and supporting the development of my own skills from one interview to the next.

The analysis phase of the study was also a time of challenge. Evidently, there is no one way to carry out narrative analysis and the researcher is encouraged to be creative with the data allowing for nuanced accounts of the subject under question. However, this created one of the main challenges of the approach: comprehending what narrative analysis actually is (Weatherhead, 2011). Narrative analysis is influenced by anthropology, philosophy and psychotherapy (Hunter, 2010), which provided a daunting mass of literature to consider and offered a multitude of angles from which to approach the research.

The way I managed this was through an iterative process of immersion in the data, reading about methodology and seeking supervision. Moreover, although daunting, the wealth of perspectives of how to carry out a narrative study allowed the process to evolve to fit the data, as opposed to the data needing to fit the methodological framework. Finally, the process of moving between methodology and data provided a continued opportunity for learning throughout the analysis and offered new insights on the data.

Researcher versus clinician identity conflict. Although the skills developed as a clinician can enable applied psychologists to be effective qualitative researchers, the relational nature of both clinical and qualitative interviews can lead to identity diffusion (Haverkamp, 2005). I have an interest in narrative therapy which is concerned with the ways in which language constructs and maintain problems and views problems as situated within socio-political and cultural contexts (White & Epston, 1990). Moreover, it privileges local knowledge and offers alternative stories through the exploration of unique outcomes (White, 2007). Thus interactions with clients are viewed as a way to ‘re-author’ problem saturated stories (Morgan, 2002). Finally, it emphasises outsider witnessing – inviting an audience to hear therapeutic conversations to acknowledge clients’ preferred stories and identities (Carey

& Russell, 2003). My interest in narrative therapy positively influenced the design of my research study, yet created conflict between my clinical and researcher identities.

The opportunity to tell a life story for research purposes allows for new perspectives on experiences, offers meaning to one's life, and even transforms experiences (Atkinson, 2002; Hunter, 2010). However, across the research I experienced conflict due to an inability to share reflections on stories I felt privileged to bear witness to. As a result, I found it challenging to maintain my researcher role (Haverkamp, 2005) and I noticed a pull to draw out unique outcomes and 're-author' narratives during the interview process and in summary stories. However, when consenting to take part in research, participants are not consenting to therapy thus one must be mindful of crossing the research to psychotherapy boundary (Haverkamp, 2005). A strength of the study was the continual reflection and transparency of my own stance in order to make it "abundantly clear on whose story is whose" (Connolly, 2007, p.453). **Chapter 3: Disentangling 'Race/Ethnicity'; 'Racism'; and 'Racialisation'**

Throughout the research process one of the most important, yet challenging, areas was the implications of using racial categories as well as the salience of 'race/ethnicity' in the findings. Considerations regarding the use of racial categories were arguably most salient whilst making decisions about the meta-synthesis. My topic choice evolved from my own research study where the first two participants I interviewed spoke of "passing" as members of their families, due to their similar 'racial' features. This posed the question of whether people who are adopted into families where there are visible 'racial/ethnic' differences have similar or different experiences to the participants in my research study. Prior to exploring this question, I first considered my own understanding of terminology.

What is 'race'? Historically, two conceptions of 'race' have existed: one that focused solely on biogenetic variation and the other that 'fused' physical features with psychological/ behavioural characteristics (Smedley & Smedley, 2005). The scientific validity of 'race' has

come to be rejected by modern biologists, anthropologists and those from other disciplines on the basis of there being no consistency across racial categories and greater difference within racial individual categories than between them (Nei & Roychoudhury, 1974; Sheldon & Parker, 1992; Zukerman, 1990). For instance, with increasingly diverse gene pools and 'racial subgroups', fewer physical features can be viewed as being distinct to any one group (Yzaguirre, & Perez, 1995, as cited in Beutler, Brown, Crothers, Booker, & Seabrook, 1996). Moreover, psychological characteristics, such as temperament, attributed to racial groups have been found to be inconsistent and non-specific to a given group (Beutler et al., 1996; Zuckerman, 1990). Reflecting this development in understanding, the United Nations Educational Scientific and Cultural Organisation recommended a shift in focus from physical to sociocultural characteristics (Yee, 1983), resultingin a move from the term 'race' to 'ethnicity' (Beutler et al., 1996; Quintana, 2007).

'Ethnicity' is typically used to reflect "psychological characteristics, attitudes and cultural processes that are assumed to be related to cultural identification" (Beutler et al., 1996, p. 896). Despite this move towards a more sociocultural understanding, the term 'ethnicity' now also tends to be used to categorise people, often according to racial categories as is seen in UK census data (e.g. 'White'; 'Black'; 'Mixed/Multiple' [white and black Caribbean] or 'Asian') (e.g. Office for National Statistics, 2015; White, 2012). Therefore, although the concept of 'race' as biological is considered 'illusory', 'race' as a psychological or social construct is real (Beutler et al., 1996). Consequently, 'race' continues to exist as an ideology or worldview with explicit components represented in social policy (e.g. racial hierarchies; physical features and behaviour as innate and inherited), contributing to social, economic and political inequality (Smedley, 1998; Smedley & Smedley, 2005).

Accordingly, I view concepts of 'race' and 'ethnicity' as socially constructed as they are often ascribed based on physical (e.g. skin colour) or cultural (e.g. language)

characteristics through everyday interactions and ideological views of ‘race’ as discussed above. However, it cannot be ignored that these terms and their associated beliefs and assumptions continue to exist within society, professional institutions, practice and research. This created a dilemma, as I was unsure of the appropriate terminology to use to adequately engage the intended audience, understanding the need for nomenclature, yet I did not want to deliver the message that I ascribe to the idea of ‘race’ or ‘ethnicity’ as valid constructs (Lago, 2006). Therefore, I needed to find a way to convey my position whilst endeavouring to reach the right audience. As there was no available guidance from clinical psychology’s governing bodies, e.g. the British Psychological Society, I made judgements on how to approach this based on my own epistemological stance. Although I recognise the limitations of continuing to use the terms ‘race’ and ‘ethnicity’, by means of negotiation I used quotation marks to represent them as social and contested constructs. Moreover, I used the combined term of ‘racial/ethnic’ identity, to indicate the inability to separate these terms (Lee, 2003).

Can I ask questions about ‘race’? I conceived it necessary to then consider whether it was appropriate for me to make research decisions based on ‘race’. Given my view that ‘race’ is a relational construct situated within “historicised power relations and structures” (Tigervall & Hübinette, 2010, p. 493), I recognised the power I hold due to my White identity. I therefore questioned whether including and excluding participants on the basis of ‘race’ had the propensity to mirror everyday marginalisation of ‘racial/ethnic’ minority groups and perpetuate unhelpful racial stereotypes. At the same time, I acknowledged the reality of racial oppression, and the unique challenges individuals may face when they not only are in a ‘racial/ethnic’ minority, but when they are ‘racially/ethnically’ different to their parents – and accordingly considered it an important area to research.

Making this decision reminded me of a discussion I had early in clinical psychology training where I argued that I would, for instance, ask a Black client what it was like to be

'Black'– acknowledging I would have no experience of this as a White person. The response I received was that this may be perceived as 'racist' as I should not assume there are differences between White and Black people and I should wait for a client to offer their own experiences.

I experienced this response as part of a wider "pluralistic epistemology" (McAteer, 2010, p.6, as cited in O'Driscoll, 2013) within psychology. That is, a genuine wish to accommodate difference (Gordon, 1996). This is evident in professional standards for applied psychologists mandating an awareness of the impact of 'difference' and practice adaptations to meet the needs of different groups/individuals (Health Care and Professions Council [HCPC], 2012a). Moreover, psychologists are required to practise in a non-discriminatory manner by not allowing their views about 'race' to affect their work with service users or impact on the advice they provide (HCPC, 2012b, p. 8). This respect for difference is also central to ethical considerations for psychological research (BPS, 2010).

However, the total focus on accepting difference and promotion of equality could lead to the negation of difference and to 'colour-blindness' (O'Driscoll, 2013) – the belief that 'race' does not and should not matter (Neville, Lilly, Duran, Lee & Brown, 2000) resulting in the omission of raising these issues with clients (Cardemil & Battle, 2003). Moreover, to be colour-blind and disregard 'race' could be conceived as a 'racial microinvalidation' as it denies the real experiences of racism, allowing White people to assert they are not prejudiced (Neville et al., 2000; Sue et al., 2007). This "comfort zone", won by dominant groups as a result of denying the realities of 'racial/ethnic' minority groups, overlooks racial inequalities and power, creating a "rose tinted" view of people's experiences (Chantler, 2005, p.244) invalidating clients' experiences and potentially alienating them from services (Cardemil & Battle, 2003). Therefore, just as embracing difference is "everyone's business", so is recognising difference and our own prejudices within psychology (Daiches, 2005, p.18). I

considered that this approach should not only apply to clinical practice, but also to research – solidifying the rationale for the meta-synthesis.

The salience of 'race/ethnicity'. In contrast to the participants' narratives in the research study, a central finding in the meta-synthesis was the salience of 'race/ethnicity'. For Romanian adoptees, comparative to domestic adoptees (e.g. Kranstuber & Kellas, 2011; Rosenberg & Horner, 199), the experience of being 'othered' was triggered by negativity towards their 'adoptee' identity. However, 'transracial' adoptees' experiences were prompted by acts of 'racial/ethnic' othering, underpinned by culturally held views. One conceivable difference between the studies is the presence of visible versus invisible 'racial/ethnic' differences to the majority White group.

The meta-synthesis highlighted both racialisation: the ascription of racial/ethnic identity based on phenotypical characteristics, and racism: overt acts of discrimination based on racial prejudice as methods of othering. Due to the meta-ethnographic approach, it was considered important to maintain the language and conceptual distinctions between these concepts used in the papers (Britten et al., 2002). However, it could be argued that racialisation is, albeit more subtle, a form of racism as it was experienced by TRAs as a way of 'othering' from the majority group (Wilkinson & Kitzinger, 1996). These subtle, everyday interactions are conceived as racial 'microagressions' and can have detrimental effects on psychological well-being (Sue et al., 2007). This finding has implications for clinical psychologists working with 'racial/ethnic' minority groups, who experience poorer mental health compared to White majority groups (Kirkbride et al., 2012; National Institute for Mental Health in England, 2003) yet are, paradoxically, underrepresented in mental health services as well as the profession of clinical psychology (Patel & Fatimilehin, 2005).

Additionally, as was evident in the meta-synthesis, those engaging in racial microaggressions are often unaware of their occurrence and impact (Constantine, 2007),

therefore it is possible that the ‘Whiteness’ of clinical psychology could inadvertently lead to racial othering. This reaffirms the need for cultural competence within helping professions (Sue et al., 2007), which is mandated as a core skill in clinical psychology training (BPS, 2014). One way to become more culturally competent is to become aware of your ‘Whiteness’ and associated biases, assumptions and stereotypes (Lago, 2006; Sue et al., 2007). Throughout the research process I have been faced with my own ‘whiteness’. As described above, I examined the associated power I held in the process of including and excluding participants and reflected how I had been afforded many privileges associated with being White, such as not being obliged to examine my own ‘racial/ethnic’ identity. I believe this research has enhanced my own cultural competence, however I recognise the need for continued learning (Cardemil & Battle, 2003).

Chapter 4: Using a Reflective Journal

My research journal served a number of functions throughout the research. Firstly, it acted as an aide memoire for post-interview reflections and comments on literature and decisions I made. I was able to return to my journal at all stages to recall these reflections which shaped the analysis. For example, I revisited my journal and grouped the post-interview, transcription and supervision reflections which provided a foundation for framing the findings around identity.

Secondly, I used the journal to shape my own position on concepts covered in the thesis such as ‘race/ethnicity’ and epistemology. This was useful as my stance evolved across the process and the use of a journal made this process tangible.

Finally, the research journal served as a reflexive tool which enabled me to separate and make sense of my own beliefs and assumptions from the analysis. Particularly regarding my role as a researcher and ideas about truth. Capturing the influence of my clinical role

enabled its explicit separation from the analysis and presentation of participants' narratives. Moreover, I reflected on my position on truth during the research process and accordingly consider research findings as one way of making meaning which does not indicate an objective truth. With this position in mind, my reflective journal enabled me to reflexively own and challenge my own assumptions about participants' versions of truth. For instance, some of my reflections following interviews questioned whether or not the events participants told me were 'true', i.e. factual. Following one interview, I reflected upon difficult feelings of not believing some aspects of the story. By making this assumption explicit I was able to revisit it from my own stance that stories are versions of truths. Combining my own stance with reflections I had made when reading literature about narratives and truth, I reached the position that all narratives are neither wholly fact nor fiction but somewhere in-between (Patel, 2005). Thus, it was not for me to decide how 'true' or not the participants' narratives were, but to take them as their version of truth at that point in time, allowing me to remain true to the data as opposed to my own assumptions.

Chapter 5 My Ongoing role as a Clinical Psychologist

Carrying out this research has implications for my identity as a clinical psychologist. Firstly, it has re-fuelled my commitment to diversifying the profession. Across training, I have revelled in opportunities to diversifying clinical psychology, however at times it has been easy to lose sight of its importance. Engaging in this research has encouraged me to consider the potential link between clinical psychology's 'Whiteness' and the marginalisation of those with whom we work. Moreover, I have reconnected with the central role that research plays in elucidating such issues in the profession.

Second, conducting this research has provided me with considerations for effecting change at different levels. Often the focus is in on the 'victims' of racism which, although essential, can negate the need to challenge the individuals and systems that perpetuate racism

(Sanchez- Hucles & Jones, 2005) and fails to promote the need for social policies to address 'causes of causes' of mental health difficulties (Harper, 2016). Therefore, I see the importance of facilitating greater consideration of cultural competence within helping professions . Given the experience of clinical psychology training, for some, as "lecture after lecture focused on white people's experience" (Adetimole, Afuape & Vara, 2005, p.12), and the implication that other professionals we work with may be less likely to reflect on their own biases and prejudice if the trainer themselves is unwilling (Silverstein, 2006), I perceive the doctoral programme as an important place for this to start.

Finally, clinical psychologists can effect change at a service level by providing an alternative narrative from one that places blame on clients of 'racial/ethnic' minorities for not accessing mental health services (Chantler, 2005; Patel & Fatimilehin 2005). If we collect data on 'race/ethnicity' and do nothing with it, it continues to be useless (Patel & Fatimilehin, 2005). Therefore, in order to have a wider influence on policy and practice, clinical psychologists can engage with their research role to evidence a need for systemic change to adequately meet clients' needs

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Table 1. Reflective Journal Extracts

Source/ Date	Extract
Chapter 1: Motivation for the study: Reservation and reconnection	
Reflective journal/ 18/8/2015	Recruitment: *"some websites sceptical about sharing the advert on my behalf. Wanted to know what my intentions were and why I wanted to do the research. This scepticism also reflected in queries from participants "why are you doing this study". Following justification people were happy to take part. Wondering if it's the topic area that makes people sceptical?*
Email received from adoption website	*"Before sharing it on our page, please, I would like to have more information on your search. How this research fits into your clinical psychology training? What is the purpose of this research?"*
Chapter 2: Disentangling 'race'; 'racism; and 'racialisation	
Reflective journal/ 19/11/2015	Post interview reflections: *"Concept of 'passing' when you're adopted by a white family? What about when you can't 'pass'?*
Reflective journal 4/12/2015	Decisions about inclusion/exclusion. *Uncomfortable making decisions about race, mainly because I am White? However, people are categorised in this way and that is a reality. Also, just as being 'Black' in a 'White' society, people are subject to oppression, stigma abuse etc. But, we still use these labels in research? Is there another way around it?*
Email to supervisor 07/12/2015	Defining a rationale for meta-synthesis topic: *"With regards to the 'race' conversations we had, I've been reading the papers and others, and thinking about the use of the terms 'race' 'ethnicity' etc. The more I read and the more I transcribe my own interviews, the more I'm convinced that 'transracial' adoptions are a worthwhile thing to look into, and I feel that the experience is somewhat a unique phenomenon. For instance, I've been considering this in terms of 'layers' of adoption, and I think intercountry, transracial adoptions are probably the most complex in terms of how people explore their identity.*

	Reading the papers got me thinking about it how I could frame all of this in my literature review. As we discussed, I certainly do not want to contribute or 'collude' with existing racial stereotypes, and I would probably position myself within a social constructionist perspective regarding these concepts. But at the same time, people are subject to discrimination and stigma because of racial categories. Therefore, I would imagine this, and other experiences that go along with being adopted internationally, impacts on one's identity formation. *I was also then thinking whether this is similar to issues around 'mental illness'. For instance, personally I don't agree with terms such as 'personality disorder' 'schizophrenia' etc. but people are definitely responded to in a certain way when they have these labels. So in research, to get closer to discovering shared experiences we would perhaps use those categories, but state our position on it. So, of course the historical context of 'race' is very different to 'mental illness', but both are used as labels or categories and because of these people have real (and often negative) experiences. While acknowledging the issues around 'race', perhaps I feel more comfortable about including/excluding papers based on 'race' to get closer to a share experience, i.e. of looking different to your adoptive parents and thus potentially having different 'subjective' and 'objective' racial identities"*
Reflective journal 27.04.2016	*Since when did 'ethnicity' become a term for anything other than White? E.g. 'ethnic identity' = 'other' identity? Do I not have an ethnic identity because I'm White? Or is because I've never had to consider it because other people don't question it?*
Chapter 3: Challenges of the narrative approach	
Reflective Journal/ 2/8/2016	<u>Flexibility – A blessing and a curse:</u> *Reflections on the interview question – participants asked "will there be prompts?" Perhaps some uncertainty about getting it right or giving me what I need. I reassured I would ask prompts – perhaps both of us a bit anxious about how the interview would go – me more thinking about narrative technique and follow up questions and participant about whether she would have anything to see.* *Found it hard to focus on the 'what next' questions rather than why. Participant made her own links and connections – that wasn't my job. Are 'why' questions in narrative interviewing always bad? Would like more ways to probe for further elaborations for next interview. Feels a bit constraining. Is this because of my clinician role, or is this because narrative interviewing is constraining?*

Reflective journal/ 15.8.2015	<u>Researcher versus clinician identity conflict</u> *Came away with a sad feeling for Hannah. I almost wanted to go into problem solving mode to help her find ways to find her family – or question more about it based on previous interviews.*
Reflective journal/ 19.11.2015	Listening to 'participant 5' *interview – Strayed from Narrative research approach. Perhaps with the view to build rapport but may have stepped too far into clinical mode. Noticed wanting to validate/reassure during the story telling. However, the person hasn't asked or consented for that.*
Reflective journal/ 19.11.2015	*I acknowledge wanting to cross over roles. The story is so sad. I want to engage in re-authoring as the person has survived and held up from such difficult experiences. Recognising the potential of writing this summary like a therapeutic document. Wanting to insert in comments about bravery or strength. Research in this capacity feels limiting. Is there a way for research in itself to re-author? Thicken stories/alternative plots? Important to re-engage with process of summary stories – reminded of their purpose for the research project.*

Section Four: Ethics

Rachel McKail

Doctorate in Clinical Psychology

Division of Health Research, Lancaster University

Word Count (excluding references, appendices, tables & figures): 4872

Ethics Application Form

Faculty of Health and Medicine Research Ethics Committee (FHMREC)

Lancaster University

Application for Ethical Approval for Research involving direct contact with human participants

Instructions

1. Apply to the committee by submitting:
    a. **The University's Stage 1 Self-Assessment (part A only) and the Project Questionnaire. These are available on the Research Support Office website:** LU Ethics
    b. **The completed application FHMREC form**
    c. **Your full research proposal (background, literature review, methodology/methods, ethical considerations)**
    d. **All accompanying research materials** such as, but not limited to,
        1) Advertising materials (posters, e-mails)
        2) Letters/emails of invitation to participate
        3) Participant information sheets
        4) Consent forms
        5) Questionnaires, surveys, demographic sheets
        6) Interview schedules, interview question guides, focus group scripts
        7) Debriefing sheets, resource lists

Please note that you DO NOT need to submit pre-existing handbooks or measures, which support your work, but which cannot be amended following ethical review. These should simply be referred to in your application form.

2. **Submit all the materials electronically** as a **SINGLE email attachment in PDF format** by the deadline date. **Before converting to PDF ensure all comments are hidden by going into 'Review' in the menu above then choosing *show markup>balloons>show all revisions in line.***
3. **Submit one collated and signed paper copy** of the full application materials in time for the FHMREC meeting. If the applicant is a student, the paper copy of the application form must be signed by the Academic Supervisor.
4. Committee meeting dates and application submission dates are listed on the FHMREC website. Applications must be submitted by the deadline date, to:

Dr Diane Hopkins
B14, Furness College
Lancaster University,
LA1 4YG
d.hopkins@lancaster.ac.uk

5. Prior to the FHMREC meeting you may be contacted by the lead reviewer for further clarification of your application.
6. Attend the committee meeting on the day that the application is considered, if required to do so.

1. **Title of Project**: Life Stories of Romanian Adoptees: A narrative study

2. **Name of applicant/researcher**: Rachel McKail

3. **Type of study**

X Includes *direct* involvement by human subjects.

☐ Involves existing documents/data only, or the evaluation of an existing project with no direct contact with human participants. Please complete the University Stage 1 Self Assessment part B. This is available on the Research Support Office website: LU Ethics. **Submit this, along with all project documentation, to Diane Hopkins.**

4. If this is a student project, please indicate what type of project by marking the relevant box: (please note that UG and taught PG projects should complete **FHMREC form UG-tPG**, following the procedures set out on the FHMREC website

PG Diploma ☐ Masters dissertation ☐ DClinPsy SRP ☐ PhD Thesis ☐ PhD Pall. Care ☐

PhD Pub. Health ☐ PhD Org. Health & Well Being ☐ PhD Mental Health ☐ MD ☐

DClinPsy Thesis [x]

Applicant Information

5. **Appointment/position held by applicant and Division within FHM** Trainee Clinical Psychologist

6. **Contact information for applicant**:

E-mail: r.mckail@lancaster.ac.uk **Telephone**: 07796458308 (please give a number on which you can be contacted at short notice)

Address: Faculty of Health and Medicine, Clinical Psychology-Division of Health & Research, Furness College, Lancaster University, LA1 4YG

7. **Project supervisor(s), if different from applicant**: (1) Dr. Suzanne Hodge; (2) Dr. Anna Daiches; (3) Dr. Gabriela Misca

8. **Appointment held by supervisor(s) and institution(s) where based (if applicable)**: (1) Lecturer in Health Research; (2) Clinical Director, Doctorate in Clinical Psychology; (3) Programme leader MSc Applied Psychology, University of Worcester.

9. **Names and appointments of all members of the research team (including degree where applicable)**

Rachel McKail, Researcher: Trainee Clinical Psychologist, Lancaster University

Dr. Suzanne Hodge, Academic Supervisor: Lecturer in Health Research, Lancaster University

Dr. Anna Daiches, Clinical Supervisor: Clinical Director Clinical Psychology doctorate programme, Lancaster University

Dr. Gabriela Misca, External Research Supervisor: Programme Leader MSc Applied Psychology, University of Worcester

The Project

NOTE: In addition to completing this form you must submit a detailed research protocol and all supporting materials.

10. **Summary of research protocol in lay terms (indicative maximum length 150 words**):

Following the fall of the communist regime in Romania in 1989 many children were adopted internationally. Research has examined the impact of institutionalisation and international adoption however it has only investigated the outcomes up to adolescence using questionnaires and numerical/statistical data. No research has been done with adults to understand their life experiences, which is the aim of the proposed study. Up to 12 adults will be recruited via social media. Participants will be given an information sheet and asked to give informed consent. Participants will take part in an interview in person or via Skype/telephone which will involve telling their life story. Interviews will be recorded and transcribed. Summaries of the interview will be sent to participants who can give additional information to include in the research if they

wish to. The data will be analysed to explore similarities and differences of the life stories told by participants.

11. **Anticipated project dates (month and year only**)

Start date: July 2015 End date: May 2016

12. **Please describe the sample of participants to be studied (including maximum & minimum number, age, gender**):

The study will aim to recruit up to 12 participants. Participants will be over the age of 16 and of any gender. The minimum number of participants will be 1. A single participant is deemed methodologically justifiable due to: (1) ability to focus on very specific and textured details within a unique context (Todres & Galvin, 2005); (2) providing the opportunity to elicit a rich narrative, explore in detail an individual's feelings, thoughts and actions and to give voice to a participant's perspective (Holloway & Freshwater, 2007) and; (3) allows a narrative to be explored through a variety of lenses, allowing for multiple factors of a given phenomenon to be understood (Baxter & Jack, 2008).

Inclusion criteria: (i) Over 16 years of age; (ii) Capacity to consent to the interview; (iii) Self-nominated spoken English competencies to participate in an interview (due to funding constraints for the research project).

Exclusion criterion: (i) Individuals internationally adopted from countries other than Romania; (ii) Adopted prior to the year 1989.

13. **How will participants be recruited and from where? Be as specific as possible**.

The study will use a purposive sampling strategy employing the use of social media and snowballing techniques. Participants will be recruited through social media groups: e.g. Facebook/Twitter/online support groups.

Groups will be invited to post an advert about the study which will outline the aims, participation information and contact details of the researcher. The advert will also ask prospective participants to share the advert with others that may be interested in taking part. On expressing interest in the study, participants will be provided with an information sheet about the study. On expressing interest in taking part in a research interview participants will be contacted via their preferred method of communication to check if they meet inclusion criteria. To further assess eligibility for participation, potential participants will also be assessed against the exclusion criteria.

If participants are eligible to participate, a time/location/method of interview will be arranged. In the event more than 12 participants express interest in taking part, participants will be recruited in the order in which they expressed interest.

14. **What procedure is proposed for obtaining consent**?

In accordance with guidance from the British Psychological Society (BPS), informed consent will be obtained from all participants prior to commencing the research interviews. The BPS states that individuals over the age of 16 can consent to participate in research.

The process of obtaining consent will be dependent on the type of interview the participant will be involved in:

Face-to-face interviews: Prior to commencing the interview, participants will be re-provided with the information sheets about the study, and given the opportunity to ask any further questions about their participation. Participants will be reminded about the voluntary nature of the study and their right to withdraw up to two weeks following the interview. Written consent will be requested by initialling agreement with a number of statements via a consent form.

Distance communication methods: verbal consent will be obtained by participants prior to commencing the interview. The researcher will read aloud the consent statements and ask the participant to state "I agree" to each. This process will be transcribed, printed and stored along with written consent forms.

15. **What discomfort (including psychological e.g. distressing or sensitive topics), inconvenience or danger could be caused by participation in the project? Please indicate plans to address these potential risks**.

No risk of psychological harm or danger to participants is anticipated for the study. However, it is possible that participants may experience some distress during or after the interview. If participants experience distress during the interview, they will be offered a break, or to terminate the interview. Participants will be offered the opportunity to rearrange the interview if they would like to. Following the interview participants will be provided with information of services they can contact for additional support should they require it.

Participants will be reminded of the voluntary nature of participating in the study and will be able to withdraw their data up to two weeks following the interview.

16. **What potential risks may exist for the researcher(s)? Please indicate plans to address such risks (for example, noting the support available to you; counselling considerations arising from the sensitive or distressing nature of the research/topic; details of the lone worker plan you will follow, and the steps you will take**).

Personal Contact with Participants: The researcher will not provide participants with personal contact details during the study. For research purposes the researcher will use a university email

account, a mobile phone provided by Lancaster University's doctorate programme in Clinical Psychology, and a professional Skype account Social media groups will be asked to share the advert on behalf of the researcher, ensuring no direct posts from a personal account will be made. Security measures will be taken within the recruitment strategy to ensure no links will be made to personal information about the researcher. It will be made clear that contact with the researcher can only be made via email/telephone rather than via social media sites. It will also be made clear that personal requests will not be accepted via social media sites.

Home visits: Where possible, face-to-face interviews will be arranged at a time and location suitable for the participant. In the event that participants live in the North West of England they will be invited to participate in the interview at Lancaster University. If participants live in a different location in the country, participants will be invited to participate in the research at a location convenient to their home address (e.g. GP practice, clinical psychology department, local university). In the event that participants express preference to be interviewed in their homes, the researcher will adhere to from Lancaster University lone worker guidance (see ethics section). The researcher will also have a research 'buddy', who will act as a named contact for the period that the interview will be carried out. The researcher will contact the named person before and after the interview has taken place. In the event that the researcher does not contact the named person by a specified time, they will make contact with the researcher. If the named person cannot be contacted within an agreed and reasonable timescale, they will follow the local escalation procedures for contacting the research supervisor or the police. The buddy will have the name and the address of the participant in a sealed envelope which will only be opened in the event the researcher cannot be contacted within an agreed timescale. In the event that the researcher is attending a research interview after it is expected to be dark, or in an unfamiliar location they will take someone with them to the home visit.

Emotional distress: It is possible that the stories told by participants may be distressing for the researcher to listen to. The researcher will receive supervision throughout the project which will include the space to talk about personal reactions to the research material where relevant.

17. **Whilst we do not generally expect direct benefits to participants as a result of this research, please state here any that result from completion of the study**.

There are no direct benefits for participation in the study. However, it is anticipated that the research will provide participants the opportunity to tell their story, which is hoped to be a positive experience. Furthermore, it is hoped that the research provides a platform for the participants' stories to be heard. Finally, it is hoped that the findings from the research will be beneficial for professionals who work with this population and will therefore have benefits for others who have shared similar experiences to participants.

18. **Details of any incentives/payments (including out-of-pocket expenses) made to participants**:

Participants will be reimbursed up to £20 for their travel expenses to the interview location if they are not interviewed in their homes or via distance communication methods. In order for reimbursement, participants will need to provide a receipt if they used public transport, or the mileage travelled if they attended by car.

19. **Briefly describe your data collection and analysis methods, and the rationale for their use. Please include details of how the confidentiality and anonymity of participants will be ensured, and the limits to confidentiality**.

Data collection*:* Data will be collected using qualitative interviews. Qualitative interviews will be used as they are suited for in depth explorations of people's life experiences. More specifically, the interview will take a life history approach which has been used previously in research exploring stories of adoptees. This is a narrative approach which allows participants to talk freely about their experiences and does not use a typical question-response interview to reduce the impact of the interviewer. Interviews will either be carried out in person (in participants' homes, or an alternative location e.g. GP practice, clinical psychology department, university) or via distance communication methods (skype/telephone). Participants will be alerted that the use of the internet cannot guarantee secure transmission of data at the beginning of the interview and will be given the option to withdraw from the study. This information is also included in the participant information sheet.

Data analysis: Interviews will be transcribed verbatim by the chief investigator. The data will be analysed using a narrative analysis life stories approach which explores how people view and understand their lives and takes into account contextual and circumstantial influences on a person's story. Each interview will be summarised to explore individual stories within a life history approach. Participants will be sent a summary of the conversations held during the interview to invite them to add any additional information to the story should they wish to. This will be sent via post or email depending on preference of the participant and their location. The summary will include no identifiable information about the participant. Along with the summary, a prepaid envelope will be provided for participants to provide any additional written information to their data. In addition, it is recognised that this may be an emotional experience for the participant and therefore information of helplines available for additional support will be re-sent to participants. This includes the contact details of the research team should they require further information about accessing support. Participants will be informed they have one month to reply, and after this it will be assumed that provision of additional information for the study is not desired. Narratives told across participants will be compared to understand similarities and differences in the stories told.

Confidentiality/anonymity*:* Participants will be assigned a unique code after giving consent to take part in the study. This will be stored separately from any identifiable information held about the participants. Confidentiality will be outlined to participants prior to commencing the interview. This will include limitations of confidentiality, that is, should the participant discuss anything that indicates risk of harm to themselves, or to another person, confidentiality may have to be breached and information passed on to relevant persons/services. In the first instance this will be typically be the research supervisors. If required, information will be passed on to relevant safeguarding organisations. In the event of concern regarding immediate and significant risk of harm information will be passed onto the police. Where appropriate, breaches of confidentiality will be discussed with the participant prior to any action being taken. This would not be considered appropriate where there was an anticipated elevation of risk by

discussing breaches of confidentiality with the participant. All issues relating to risk will be discussed with the project supervisors.

Participants will remain anonymous within the writing up of the study. This will be achieved by using pseudonyms selected by participants, and modifying identifiable information within quotations used to support the analysis.

20. **If relevant, describe the involvement of your target participant group in the *design and conduct* of your research**.

During the design phase of the study, two representatives from the target participant group have been involved. This has involved consultation on recruitment procedures and reviewing project materials (e.g. information sheet, recruitment advert and consent form).

21. **What plan is in place for the storage of data (electronic, digital, paper, etc.)? Please ensure that your plans comply with the Data Protection Act 1998**.

Data stored in paper form (e.g. consent forms) will be stored in a locked cabinet at the University of Lancaster for the duration of the project. All electronic data will also be stored on the researcher's personal network space on Lancaster University's server. Documents with identifiable information will be password protected as an additional security measure. Following completion of the study, all data will be saved electronically, including paper data which will be scanned for long term electronic storage. All data will be securely transferred to the University's research coordinator via Lancaster University's Box System and will be stored securely within a password protected file space on the university server for 10 years. Following this the data will be destroyed by the research coordinator. Contact details provided by the participants will be destroyed following their participation in the research study and submission of the thesis.

22. Will audio or video recording take place? ☐ no **X audio** ☐ video

If yes, what arrangements have been made for audio/video data storage? At what point in the research will tapes/digital recordings/files be destroyed?

A digital recording device will be used to record face-to-face, telephone and Skype interviews. The digital recording device will be stored securely in a locked bag during the time of transportation from the interview to a computer. All digital recordings will be transferred to the researcher's password protected personal network space (H drive) on Lancaster University's server as soon as possible. All digital recordings will be deleted from the recording device following transfer. Digital recordings will be securely transferred to the research supervisor via

via Lancaster University's Box System. All digital recordings of interviews will be destroyed by the chief investigator following examination of the research.

23. **What are the plans for dissemination of findings from the research? If you are a student, include here your thesis**.

Raw data from the research will only be accessible to research team members (researcher, academic supervisor, field supervisor).

Dissemination: (1) The research will be reported in the researcher's thesis. (2) Results from the research will be presented to peers, tutors, and stakeholders of Lancaster University's Doctorate in Clinical Psychology programme. (3) Results of the research may be presented at research conferences/special interest groups. (4) Results of the research may be submitted for publication in an academic/professional journal. (5) Results from the study may be used for teaching/training purposes.

24. **What particular ethical considerations, not previously noted on this application, do you think there are in the proposed study? Are there any matters about which you wish to seek guidance from the FHMREC**?

No other ethical issues in addition to those presented above (consent, confidentiality, discomfort, risk to researcher) are anticipated for the research.

Signatures: Applicant: ……

Date: ……

*Project Supervisor (if applicable): ……

Date: ……

*I have reviewed this application, and discussed it with the applicant. I confirm that the project methodology is appropriate. I am happy for this application to proceed to ethical review.

Lancaster University

November 2009

THE UNIVERSITY OF LANCASTER
PFACT project information and ethics questionnaire

(*To be completed by the student together with their supervisor in all cases*)

Name of student: Rachel McKail
Name of supervisor: Dr. Suzanne Hodge

Project Title: Life Stories of Romanian Adoptees: A narrative study

1. *General information*
1.1Have you, if relevant, discussed the project with

☐ the Data Protection Officer?

☐ the Freedom of Information Officer?

✓ N/A

(Please tick as appropriate.)
1.1 Does any of the intellectual property to be used in the research belong to a third party?

N

1.2Are you involved in any other activities that may result in a conflict of interest with this research?

N

1.3Will you be working with an NHS Trust?

N

1.4If yes to 1.3, what steps are you taking to obtain NHS approval?

_____

_____

1.5If yes to 1.3, who will be named as sponsor of the project?

_____

1.6What consideration has been given to the health and safety requirements of the research?

_____

_____

2. *Information for insurance or commercial purposes*

(*Please put N/A where relevant, and provide details where the answer is yes.*)

2.1Will the research involve making a prototype?

N

2.2Will the research involve an aircraft or the aircraft industry?

N

2.3Will the research involve the nuclear industry?

N

2.4Will the research involve the specialist disposal of waste material?

N

2.5 Do you intend to file a patent application on an invention that may relate in some way to the area of research in this proposal? If YES, contact Gavin Smith, Research and Enterprise Services Division. (ext. 93298)

N

3. *Ethical information*

(*Please confirm this research grant will be managed by you, the student and supervisor, in an ethically appropriate manner according to:*

(a) the subject matter involved;
(b) the code of practice of the relevant funding body; and
(c) the code of ethics and procedures of the university.)

(*Please put N/A where relevant*)

3.1Please tick to confirm that you are prepared to accept responsibility on behalf of the institution for your project in relation to the avoidance of plagiarism and fabrication of results.

✓

3.2Please tick to confirm that you are prepared to accept responsibility on behalf of the institution for your project in relation to the observance of the rules for the exploitation of intellectual property.

✓

3.3 Please tick to confirm that you are prepared to accept responsibility on behalf of the institution for your project in relation to adherence to the university code of ethics.

✓

3.4 Will you give all staff and students involved in the project guidance on the ethical standards expected in the project in accordance with the university code of ethics?

N/A

3.5 Will you take steps to ensure that all students and staff involved in the project will not be exposed to inappropriate situations when carrying out fieldwork?

Y

3.6 Is the establishment of a research ethics committee required as part of your collaboration? (This is a requirement for some large-scale European Commission funded projects, for example.)

N/A

3.7 Does your research project involve human participants i.e. including all types of interviews, questionnaires, focus groups, records relating to humans, human tissue etc.?

Y

3.7.1 Will you take all necessary steps to obtain the voluntary and informed consent of the prospective participant(s) or, in the case of individual(s) not capable of giving informed consent, the permission of a legally authorised representative in accordance with applicable law?

Y

3.7.2 Will you take the necessary steps to find out the applicable law?

Y

3.7.3 Will you take the necessary steps to assure the anonymity of subjects, including in subsequent publications?

Y

3.7.4 Will you take appropriate action to ensure that the position under 3.7.1 – 3.7.3 are fully understood and acted on by staff or students connected with the project in accordance with the university ethics code of practice?

Y

3.13 Does your work involve animals? If yes you should specifically detail this in a submission to the Research Ethics Committee. The term animals shall be taken to include any vertebrate other than man.

N/A

3.13.1 Have you carefully considered alternatives to the use of animals in this project? If yes, give details.

N/A

_____

_____

3.13.2 Will you use techniques that involve any of the following: any experimental or scientific procedure applied to an animal which may have the effect of causing that animal pain, suffering, distress, or lasting harm? If yes, these must be separately identified.

N/A

Signature (student): _____
Date: _____

Signature (student): _____
Date: _____

N.B. Do not submit this form without completing and attaching the Stage 1 self-assessment form.

Provisional Research Ethics Committee Approval Letter

Faculty of Health and Medicine Research Ethics Committee

Our ref: FHMREC14090

18 June 2015

Rachel McKail
Division of Health Research
Faculty of Health and Medicine
Lancaster University

Dear Rachel,
Re: FHM Research Ethics Committee application for project titled: *'Life Stories of Romanian Adoptees: A narrative study'.*

Thank you for sending in the paperwork for your application. We appreciated reading about the project. We have a few minor concerns, and ask that you address the following in revising your application materials:

- **Application section 12**
  - Explain the value of the research if there is only one participant.
  - Since the legal definition of adult is 18+, please remove reference to 'adult' and simply state 'over 16'.
- **Application section 13**
  - Clarify how you will check that potential participants meet the inclusion criteria.
- **Application section 15**
  - The minimum of 1 seems too low for gathering data towards a doctoral thesis. Please justify your methodological reasoning for this, or amend your minimum.
  - We advise that you do not offer yourself out as a follow up source of support, since in this context you are a researcher, not a therapist, and given that you will have provided information on other sources of support.
- **Application section 16**
  - Please consider alternative venues for the interviews, since you have no gatekeeper in place, and have not met participants previously. If you carry out home visits, we suggest that you consider additional safety strategies as you will essentially be visiting strangers in their own home. Please discuss this further with your supervisors.
- **Application section 19**
  - Confidentiality/anonymity. Clarify who the '[…] *relevant persons/services'* are.
  - Clarify here who will be carrying out the transcription.
- **Application section 21**
  - We understand that 'Zendto' may not be functioning. You may wish to use the LU 'box' system instead.
  - Amend the final phrase [dissemination of findings] to read 'submission of thesis'.

- **Application section 22**
  - Please indicate in this section who will be responsible for the storage and deletion of data once you have completed your course.
- **Consent form**
  - Add an item noting that you will share and discuss data with your supervisor.
  - Item 8 – amend to remove reference to information remaining strictly confidential (since you will be using the results in your thesis, and may publish)

In addition to the above a number of minor changes and typos are noted on your application form, attached with this letter. Please address these, as well as the matters above.

Ensure consistency between the application form, the Research Protocol and the supporting materials in line with the changes requested above.
Please use Lancaster University letter-headed paper for all participant materials
We ask that you attend to these in writing by (re)submitting to the FHMREC via Diane Hopkins (d.hopkins@lancaster.ac.uk) the application document and materials with any changes highlighted. If your responses to the above are satisfactory then approval will be recommended on Chair's action.
If you have questions, please feel free to contact me.

Yours sincerely,

Prof Roger Pickup
Chair of the Faculty of Health and Medicine Research Ethics Committee
Lancaster University

Final Research Ethics Committee Approval Letter

Research and Enterprise Services Division | Lancaster University

Applicant: Rachel McKail
Supervisor: Suzanne Hodge
Department: DHR
UREC Ref: RS2014/130

09 July 2015

Dear Rachel and Suzanne,

Re: Lifestories of Romanian Adoptees: A narrative study

Thank you for submitting your research ethics application for the above project for review by the Faculty of Health and Medicine Research Ethics Committee (FHMREC). The application was recommended for approval by FHMREC, and on behalf of the Chair of the University Research Ethics Committee (UREC), I can confirm that approval has been granted for this research project.

As principal investigator your responsibilities include:

- ensuring that (where applicable) all the necessary legal and regulatory requirements in order to conduct the research are met, and the necessary licenses and approvals have been obtained;
- reporting any ethics-related issues that occur during the course of the research or arising from the research to the Research Ethics Officer (e.g. unforeseen ethical issues, complaints about the conduct of the research, adverse reactions such as extreme distress);
- submitting details of proposed substantive amendments to the protocol to the Research Ethics Officer for approval.

Please contact the Research Ethics Officer, Debbie Knight (01542 592605 ethics@lancaster.ac.uk) if you have any queries or require further information.

Yours sincerely,

S. C. Taylor

Sarah Taylor
Secretary, University Research Ethics Committee

Cc Fiona Aiken, University Secretary, Professor Roger Pickup (Chair, FHMREC); Prof Stephen Decent (Chair, UREC).

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Appendix 4-A

Research Study Protocol

Title: Life Stories of Romanian Adoptees: A Narrative Study

Background

International adoption is considered a relatively new and expanding practice (Bimmel, Juffer, van Ijzendoorn & Bakermans-Kranenburg, 2003). Accordingly, the mental health and adjustment of internationally adopted children as adolescents and adults has become an important issue (Hjern, Lindblad & Vinnerljung, 2002). Research into international adoption has focused primarily on outcomes of institutional care, inter-country and transracial/ethnic adoption (Feast, Grant, Rushton & Simmonds, 2013).

Institutional Care

A substantial amount of evidence obtained from quantitative studies has explored the outcomes of institutional care upon children adopted from institutions. Initial studies evidenced physical health concerns amongst children adopted internationally from Romanian institutions, deeming this population as an exceptionally 'high risk' paediatric group (e.g. Johnson et al., 1992). Despite initial concerns, research began to document an improvement in physical health (e.g. weight/height increase and reduction of disease) as well as developmental difficulties following adoption into a family environment (Benoit, Jocelyn, Moddemann, & Embree, 1996, Morrison, Ames & Chisholm, 1995).

However, studies also evidenced that for some children, difficulties persisted and this was linked to the length of time spent within institutions (e.g. Gunnar, Bruce & Grotevant, 2001; Groze & Ileana, 1996; Morrison et al., 1995). The English and Romanian Adoptee (ERA) Study (Rutter et al., 2010) and the Bucharest Early Intervention Project (BEIP) (Zeanah et al., 2003) have conducted longitudinal studies focusing on the development of children following institutional care in Romania.

The ERA study has focused on the development of 144 children who resided in Romanian institutions and were subsequently adopted into the United Kingdom. The ERA study has provided research evidence spanning over 15 years which has shown that despite a significant physical, developmental and psychological 'catch up' following adoption for many of the participants, a small proportion continue to display deprivation-specific psychological patterns (DSPs) into adolescence. These patterns have been identified as: quasi-autistic patterns; disinhibited attachment; inattention/ overactivity and cognitive

impairment (Rutter et al., 2010). A positive relationship between the length of stay in the institution and presence of DSPs was also established (Rutter et al., 2007).

Similar findings come from the BEIP, a longitudinal randomised control trial of foster care placement as an alternative to institutional care in Romania (Zeanah et al., 2003). Comparative to the ERA study, the BEIP have demonstrated a significant resolution of institutional 'stereotypies' (attachment disturbances, indiscriminate behaviour and autistic features) in children who have been fostered, compared to those who remained in institutions (Bos, Zeneah, Smyke, Fox & Nelson, 2010). However, as was found in the UK sample from the ERA study, such difficulties persisted for some children despite exposure to a family environment.

Inter-country Adoption

Research evidence has demonstrated mixed findings with regards to psychological outcomes for international adoptees. For instance, a meta-analysis found that adopted adolescents demonstrated higher problem behaviours than their non- adopted peers (Bimmel et al., 2003). More specifically, such differences were found for externalising but not internalising problems. A further meta-analysis found that international adoptees experienced both externalising and internalising behaviour problems and were referred to mental health services more frequently compared to their non-adopted peers (Juffer & van Ijzendoorn, 2005). However, this difference was modest suggesting that the majority of children adopted internationally adjust well. Furthermore, these difficulties were less frequent compared to domestically adopted participants.

Further research has demonstrated that adolescents adopted internationally are more likely to experience mental health difficulties into adulthood. For instance, Tieman, van der Ende and Verhulst (2005) found that adoptees were one and a half times more likely to experience mental health difficulties, in particular anxiety and mood disorders, and substance abuse. Hjern et al. (2002) explored the prevalence of psychological outcomes in a sample of intercountry adoptees compared to the general population in Sweden. The study found that adoptees were three to four times more likely to experience mental health difficulties, suicide attempts, suicide and psychiatric admissions; five times more likely to have drug addictions; and two to three times more likely to commit crimes or have alcohol dependency issues.

Conversely, Juffer and van Ijzendoorn (2007) found positive outcomes for international adoptees. The meta-analysis found no difference in self-esteem for international adoptees compared to non-adopted peers. The authors proposed that despite risk of low school attainment, behaviour problems and mental health difficulties, adoptees may receive

adequate compensation from their social environment and therefore resilience is promoted through interaction with their adoptive family.

Transracial/ethnic Adoption

An adoption is considered 'transracial' within socially constructed definitions of race, where the adoptee has a different skin colour to their parents and 'cross-ethnic' where parents and adoptive children are from different ethnicities (Boivin & Hassan, 2015). Lee (2003) proposes the transracial/ethnic phenomenon as paradoxical, as individuals experience incongruence between being racial/ethnic minorities of their society, yet are simultaneously considered as part of the majority culture of their adoptive family. Howe and Feast (2003) found that within a sample of adult adoptees, most participants described having positive relationships with their adoptive families, however those who were transracially adopted reported feeling different to their adoptive parents compared to other adoptees. Freundlich and Lieberthal (2000) found that adoptees from Korea living in the USA reported a range in responses about how they perceived themselves ethnically as they were growing up. Participants expressed that developing a sense of their ethnic identity was difficult, with some reporting that they considered themselves to be the ethnicity of their adoptive family, some felt neither Asian nor Caucasian, and others reported feeling either Asian or Caucasian until they were reminded otherwise (e.g. by looking in the mirror). Participants described different experiences relating to their identity with some celebrating the differences and others wanting to 'fit in' with the majority culture. All participants described experiencing some form of discrimination when they were growing up, in particular with regards to their racial/ethnic identity. This was experienced from the communities in which they lived, but also from within their own adoptive family. Participants described difficult feelings relating to this discrimination, such as anger, pain and sadness.

Research shows evidence of mixed findings in relation to the importance of ethnic identity in promoting psychological adjustment for international adoptees. For instance a systematic review reported that within some studies ethnic identity promoted adjustment and self-esteem, whilst others found less significant associations (Castle, Knight & Watters, 2011). For instance, one study within the review (Yoon, 2004) found that a negative sense of ethnic identity was associated with poor psychological well-being. However, the review found that the strength of the relationship with adoptive parents and cultural socialisation facilitated positive psychological outcomes for adoptees (Castle et al., 2011). This view has been reported elsewhere (Scherman, 2010).

This finding has also been reported in a more recent review from Boivin and Hassan (2015), where the authors concluded that the evidence that racial/ethnic socialisation facilitates psychological adjustment is inconclusive. This was due to several studies included in the review reporting strong ethnic identity as being inessential for promoting psychological well-being, however other studies reported a heritage ethnic identity as being facilitative of a number of positive psychological outcomes.

Rationale for the Proposed Study

Under the communist regime of Nicolae Ceausescu in Romania, a policy was introduced into expand the workforce of the country through increased birth rate. This was enforced in 1966 by placing a ban on abortion and contraception, and women were encouraged to have a minimum of four to five children, and if this was not adhered to, financial punishment was a consequence (Zeanah et al., 2003). Following the downfall of the Ceausescu regime in 1989, the political repression and challenging living conditions for children in Romania attracted international attention (Hord, David, Donnay & Wolf, 1991). In particular was a focus on the impoverished conditions of the orphanages in Romania. However , outside of these institutions the economic situation became progressively worse (Dickens & Groza, 2004) and it is estimated that by the year 1994 approximately 40% of all children in Romania were living in poverty (UNICEF, 1997).

As a result of substantial media coverage highlighting the impoverished living conditions for children in Romania there was international response to rescue children from these living conditions which resulted in a surge of international adoption (Castle et al., 1999; Wilson, 2003). It is estimated that between 1990 and 1991 over 10,000 children were internationally adopted from Romania, initially from the institutions, however by 1991 children were being adopted directly from their biological parents in exchange for money or consumer goods (UNICEF, 1997).

This unique situation with international adoption from Romania led to a “natural experiment” for researchers which allowed longitudinal exploration of the impact of early adversity (Rutter, Kumsta, Schlotz & Sonuga-Barke, 2012). A remarkable amount of research has been carried out regarding the outcomes of those adopted internationally from Romania following the fall of communism. However, limitations of existing research evidence pose the rationale for conducting further research in the area.

Firstly, the majority of research within the area of international adoption has relied on psychological testing of adoptees and information from parents and teachers. Therefore, the voices of adoptees themselves have typically been heard when they have had negative

experiences, or not at all (Feast et al., 2013; Patel, 2007). This is due to the dominance of quantitative research evidence which has not allowed for a detailed exploration of the experience of Romanian adoptees who have been internationally adopted. This limitation calls for a qualitative study which would enable in depth explorations of individual's life experiences. Furthermore, a qualitative approach allows for similarities and differences in the stories told by Romanian adoptees to be explored.

In addition, the increase in international adoption after 1989 following the fall of the communist regime marks a distinct and unique period in history which has political, social, ethical and cultural implications for adoptees. Therefore, an approach which uses a broadened framework to consider these factors alongside individual narratives in the analysis of life experiences is warranted. The proposed study will therefore draw on methods from Narrative analysis which is concerned with understanding the narratives told by individuals within a contextual framework that acknowledges the influence of cultural and socio-political factors.

Secondly, research including those adopted internationally from Romania following the fall of communism has focused only on the outcomes of children and adolescents, and currently no research has evidenced outcomes in adulthood for this group. Research exploring the life stories of those internationally from countries other than Romania has evidenced experiences relevant to adulthood. For instance, as described above, exploring racial and ethnic identity in adulthood has been linked to adults who have been internationally adopted. Furthermore (in addition to discussing childhood experiences) a sample of women adopted internationally from Hong Kong described life chapters relevant to adulthood, such as leaving home, marriage, careers and having children (Feast et al., 2013). However, it is unknown what factors relevant to adulthood, are described in the life stories of Romanian adoptees. Furthermore, it is unknown whether initial patterns of behaviours identified in this group are maintained into adulthood, or the impact of international adoption following the fall of communism presents differently in adulthood compared to childhood and adolescence Therefore, the proposed study will include participants who have been adopted from Romania following the fall of communism in 1989.

Research Question

What are the life stories told by Romanian adoptees who have been internationally adopted following the fall of communism in 1989?

Method

Design

The thesis will use a qualitative design. This will use a purposive sampling strategy employing the use of social media and snowballing techniques. Participants will be contacted through existing social media groups, who will be invited to share an advert about the study. Qualitative interviews will be carried out following a life stories framework to elicit life stories of participants who have been internationally adopted from Romania following the fall of the communist regime in 1989. Data will be analysed using narrative analysis to explore stories told by participants with an understanding that such narratives are influenced by contextual factors and the circumstances in which they are told.

Participants

The study will aim to recruit up to 12 participants. Inclusion criteria are: (i) age 16 and over; (iii) capacity to consent to the interview; (iii) self-nominated spoken English competencies to participate in an interview. Exclusion criteria: (i) individuals internationally adopted from countries other than Romania; (ii) individuals adopted prior to the year 1989. The minimum number of participants to be recruited will be 1. A single participant is justified within narrative analysis methodology due to: (1) the ability to focus on very specific and textured details within a unique context (Todres & Galvin, 2005); (2) provision of opportunity to elicit a rich narrative, exploring in detail an individual's feelings, thoughts and actions and to gives voice to a participant's perspective (Holloway & Freshwater, 2007) and; (3) the ability for a narrative to be explored through a variety of lenses, allowing for multiple factors of a given phenomenon to be understood (Baxter & Jack, 2008).

Recruitment

Participants will be recruited through social media sites: e.g. through forums or support groups that have been set up for international adoptees/families to share their experiences. Social media forums/support groups will be approached and invited to share an advert for the study (Appendix B). The advert will briefly outline the research aims, participation information and contact details for the chief investigator to enquire further and express interest in participation. The advert will also request for prospective participants to share the advert with others that may be interested in taking part in the study.

On expressing interest in the study, participants will be provided with an information sheet, either by post or email depending on their preferred method of communication (Appendix C). On expressing interest in taking part in a research interview participants will

be contacted via their preferred method of communication to check if they meet inclusion criteria. To further assess eligibility for participation, potential participants will also be assessed against the exclusion criteria.

Participants will be given the opportunity to ask questions about the study and where they meet inclusion criteria, a time and location will be arranged to carry out the interview if expression of interest in participation is given. In the event that too many participants express interest in participating in the study, they will be selected in the order in which they expressed interest.

Materials used for recruitment have been developed in conjunction with the research team (academic supervisor, clinical supervisor, external research supervisor) and reviewed by two representative members from the population of research interest.

Data Collection

Where possible, face-to-face interviews will be arranged at a time and location suitable for the participant. In the event that participants live in the North West of England they will be invited to participate in the interview at Lancaster University. If participants live in a different location in the country, participants will be invited to participate in the research at a location convenient to their home address (e.g. GP practice, clinical psychology department, local university). In the event that participants express preference to be interviewed in their homes, the researcher will adhere to from Lancaster University lone worker guidance (see ethics section). Where participants cannot participate in a face-to-face interview, distance communication methods will be used (e.g. telephone/video calling).

Prior to commencing the interview, the chief investigator will go through the information sheet with the participant and provide the opportunity to ask any questions. Participants will give consent to take part in the study (see ethics section). Demographic details will also be collected from participants (Appendix G). This will include: (i) age; (ii) gender; (iii) current city/country of residence; (iv) age at adoption.

Participants will then be asked to participate in an interview. The interview will be guided by a narrative life history approach to elicit participants' life stories (Peacock & Holland, 1993). This approach has been used in previous qualitative studies to explore the subjective life stories of international/ transracial adoptees (e.g. Patel, 2007; Howe & Feast, 2003). Narrative interviews encourage and stimulate participants to tell a story in a way that moves beyond the question-response style of typical interviews by avoiding pre-structured questions to minimise the influence of the interviewer (Jovchelovitch & Bauer, 2000).

Accordingly, the interview will comprise of a single question (Appendix E). Following this, rather than being pre-structured, questions using the language of the participants and those that are related to events mentioned within the interview will be asked to guide the interview to allow the interviewee to elaborate on their personal narrative (Jovchelovitch & Bauer, 2000).

The interviews are expected to last between 60 and 90 minutes. Participants will be thanked and provided with a debrief sheet following the interview (Appendix H). Interviews will be audio recorded using a digital recorder and transcribed verbatim by the chief investigator following their completion.

Participants will be sent a summary of the conversations held during the interview to invite them to add any additional information should they wish to. This will be sent via post or email depending on preference of the participant and their location. Along with the summary, a prepaid envelope will be sent for participants to provide any additional written information to their data. In addition, it is recognised that this may be an emotional experience for the participant and therefore information of helplines available for additional support will be re-sent to participants. This includes the contact details of the research team should they require further information about accessing support. Participants will be informed they have one month to reply, and after this it will be assumed that provision of additional information for the study is not desired.

Data Analysis

Given the focus on eliciting life stories from the qualitative interviews, narrative analysis will be used to analyse the data. Various methods of narrative analysis exist however, in general narrative analysis uses detailed stories from participants to explore how people view and understand their lives, within a contextual understanding of how stories are influenced by the circumstances in which they were given, the intended audience and the possible purpose one has for developing a narrative in a particular way (Josselson, 2011).

Using a narrative life history approach aims to understand adoptees' subjective understanding and lived experiences, thus moving away from a perspective that advocates the simple collection of observation and facts (Patel, 2007). Each individual story will be analysed and summarised within a life history approach. Narratives across participants will be compared to make sense of similarities and differences in the stories told. In line with narrative analysis, contextual influences on stories told by participants will be considered throughout the study.

Practical Issues

Interview location. For participants completing face-to-face interviews they may be carried out in a variety of locations. Participants will firstly be invited to attend a research interview in a convienient location to where they live. The researcher will ask local GP surgeries/clinical psychology departments/ Universities if they have space to conduct research interviews.

Where participants express preference of being interviewed in their home, the researcher will follow the Lone Worker Guidance from Lancaster University (Appendix D). The chief investigator will have a research 'buddy', who will act as a named contact for the period that the interview will be carried out. The researcher will contact the named person before and after the interview has taken place. In the event that the researcher does not contact the named person by a specified time, the nominated person will make contact with the researcher. If the named person cannot be contacted within an agreed and reasonable timescale, they will follow the local escalation procedures for contacting the research supervisor or the police. The buddy will have the name and the address of the participant in a sealed envelope which will only be opened in the event the researcher cannot be contacted within an agreed timescale. In the event that the researcher is attending a research interview after it is expected to be dark, or in an unfamiliar location they will take someone with them to the home visit.

For those who are unable to participate in face-to-face interviews, distance communication methods will be used. The above procedure will be applied when carrying out interviews over Skype/telephone methods.

Distance to travel for UK interviews. It is unknown where participants are based within the UK, however it is anticipated they will be spread across the country. No restriction will be placed on the location to interview participants. To reduce travel costs, interviews in similar locations will be grouped and carried out consecutively.

Costs. Printing, postal and telephone costs will be covered by Lancaster University Doctorate in Clinical Psychology programme. In concordance with current employment arrangements within Lancashire Care, the chief investigator will be reimbursed for travel costs where the distance travelled exceeds home to base (Lancaster University). Participants will be reimbursed up to £20 for their travel expenses to the interview location if they are not interviewed in their homes. In order for reimbursement, participants will need to provide a receipt if they used public transport, or the mileage travelled if they attended by car.

Data storage: A digital recording device will be used to record face-to-face,

telephone and Skype interviews. The digital recording device will be stored securely in a locked bag during the time of transportation from the interview to a computer. All digital recordings will be transferred to the chief investigator's password protected personal network space (H drive) on Lancaster University's server as soon as possible. All digital recordings will be deleted from the recording device following transfer. Digital recordings will be securely transferred to the research supervisor as necessary for the purpose of providing guidance around data collection via Lancaster University's Box System. All digital recordings of interviews will be destroyed by the chief investigator following examination of the research. All other electronic data will also be stored on the chief investigator's personal network space. Documents with identifiable information will be password protected as an additional security measure.

Data stored in paper form (e.g. consent forms) will be stored in a locked cabinet at the University of Lancaster for the duration of the project. Following completion of the study, all data will be saved electronically, including paper data which will be scanned for long term electronic storage. All data will be securely transferred to the University's research coordinator via Lancaster University's Box System and will be stored securely within a password protected file space on the university server for 10 years. Following this the data will be destroyed by the research coordinator. Contact details provided by the participants will be destroyed following dissemination of findings.

Use of social media for recruitment: Relevant social media sites will be used for recruitment. Groups will be invited to share the advert for the study on behalf of the researcher. The advert invites potential participants to contact the researcher via email or telephone if they are interested in taking part. Therefore, the personal account of the researcher will not be used to post directly to groups.

Security measures will be taken within the recruitment strategy to ensure no links will be made to personal information about the researcher. It will be made clear that contact with the researcher can only be made via email/telephone rather than via social media sites. It will also be made clear that personal requests will not be accepted via social media sites.

Use of Skype: For interviews carried out using video calling, Skype software will be used. All Skype calls are encrypted. The researcher will use a professional Skype account which will be used for no other purpose than the research study. Participants will be alerted that the use of the internet cannot guarantee secure transmission of data at the beginning of the interview and will be given the option to withdraw from the study. This information is also included in the participant information sheet.

Ethical Issues

Consent. In line with guidelines from the British Psychological Society (BPS, 2010) informed consent will be required for each participant. The BPS states that individuals over the age of 16 are able to consent to participate in research (BPS, 2010, p. 16). Prior to commencing the interview, participants will be provided with information sheets about the study, and given the opportunity to ask any further questions about their participation. Participants will be reminded about the voluntary nature of the study and their right to withdraw up to two weeks following the interview. For participants taking part in a face to face interview, written consent will be provided by initialling agreement with a number of statements via a consent form (Appendix F). For those participating via distance communication methods, verbal consent will be obtained by participants prior to commencing the interview. The researcher will read aloud the consent statements and ask the participant to state "I agree" to each. This process will be transcribed, printed and stored along with written consent forms.

Confidentiality and anonymity. Participants will be assigned a unique code after giving consent to take part in the study. This will be stored separately from any identifiable information held about the participants (see above for details of data storage arrangements).

Confidentiality will be outlined to participants prior to commencing the interview. This will include limitations of confidentiality, that is, should the participant discuss anything that indicates risk of harm to themselves, or to another person, confidentiality may have to be breached and information passed on to relevant persons/services. In the first instance this will be typically be the research supervisors. If required, information will be passed on to relevant safeguarding organisations. In the event of concern regarding immediate and significant risk of harm information will be passed onto the police.

Where appropriate, breaches of confidentiality will be discussed with the participant prior to any action being taken. This would not be considered appropriate where there was an anticipated elevation of risk by discussing breaches of confidentiality with the participant.

All issues relating to risk will be discussed with the project supervisors. Appropriate procedures from Lancashire Care and Lancaster University will be followed.

Participants will remain anonymous within the writing up of the study. This will be achieved by using pseudonyms selected by participants, and changing any identifiable information within quotations used to support the analysis.

Risk of psychological distress: No risk of psychological harm to participants is anticipated for the study. However it is possible that talking about life stories may evoke an

emotional response and therefore participants may experience some distress during the interview. If participants become distressed during the interview, they will be offered the opportunity to have a break. Participants will also be offered the opportunity to terminate the interview and reschedule the interview if they wish to. Participants will also be provided with information of services which they can access for additional support (Appendix H).

Time Scale

December 2014: submit thesis proposal form and gain feedback

January 2015: review proposal form and address feedback

January – March 2015: Finalise method

May – June 2015: Agree timetable/ Contract with supervisory team

May: Prepare protocol

May-June: Ethical review

August 2015 – February 2016: Data collection/ Literature Review

December 2015: 1st draft literature review

December 2015 – March 2016: Data analysis

February 2016: Literature review 2nd draft

March 2016: Research paper 1st draft

April 2016: Research paper 2nd draft

April 2016: Critical Appraisal 1st draft

May 2016: Critical appraisal 2nd draft

May 2016: Thesis hand in

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Appendix 4-B

Recruitment advert

Life Stories of Romanian Adoptees

Were you adopted internationally from Romania after 1989?

Are you over16?

Are you willing to share your life-story so far?

I am doing some research to find out about the life stories of people who have been adopted from Romania. The research is part of my Clinical Psychology training.

If you think you would like to take part, or you would like some more information please contact me. If you know other people who might be interested in taking part, please share this advert with them.

Rachel McKail
Email: r.mckail@lancaster.ac.uk
Telephone: +44 (0)7508 375 668

Health & Medicine | Lancaster University

Appendix 4-C

Information Sheet

Participant Information Sheet
Life Stories of Romanian Adoptees: A narrative study

My name is Rachel McKail and I am conducting a research study as part of my doctorate training in Clinical Psychology at Lancaster University in the UK.

What is the study about?
The purpose of this study is to explore the life stories of people who have been internationally adopted from Romania. It is hoped that this will help us understand the journeys people have been on, and to explore the challenges and successes people have experienced.

Why have I been approached?
You have been approached because the study requires information from people over 16 who have been adopted internationally from Romania since the year 1989.

Do I have to take part?
No. It's completely up to you to decide whether or not you want take part. If you choose not to take part, this will not affect your rights in any way.

What will I be asked to do if I take part?

If you decide you would like to take part, you will need to contact me to let me know you are interested. I will then check to see if you are eligible to take part in the research. I would like 12 people to take part in my research. If more than 12 people contact me who are eligible to take part, I will select people in the order they expressed their interest.

If you are eligible, you will be asked to meet with me, the researcher. If you live in the UK, this will be in a location convenient to you. Where this is not possible, this could take place on the telephone, or using video software such as Skype. At this meeting I will ask you to take part in an interview where I will ask you to tell me your life story. This can be in as much or as little detail as you chose. I will also ask you to fill out a short questionnaire to provide some information about yourself (such as your age, where you live). The interview is expected to last between 60 and 90 minute. This may be longer or shorter depending on how much you say. With your permission I would like to record the interview. After the interview I will type this up into a written transcript, which I will then analyse along with other participants' transcripts. I will send you a summary of your story to see if you would like to add anything to it. If you would like to add anything to your story you can reply up to a month after receiving it so it can be included in the analysis.

Will my information be confidential?
The information collected for this study will be stored securely and only the researchers involved in the study will be able to see it. The following steps will be taken to make sure your information is confidential and that you remain anonymous:

- Recordings of your interview will be destroyed once the project has been examined.
- Paper copies of personal information will be kept in a locked cabinet during the study and destroyed when it has finished except consent forms which will be stored electronically along with data from the study. Electronic files on the computer will be encrypted (that means no-one other than the researcher will be able to access them) and the computer will be password protected. This will be kept for 10 years and then destroyed.
- The typed version of your interview will be made anonymous by removing any identifying information including your name. I might use some quotes from your interview in the reports or publications from the study, but your name will not be attached to them. I will ask you to make up a name for use in the research study.
- All your personal data will be confidential and will be kept separately from your interview responses.

There are some limits to confidentiality: if what is said in the interview makes me think that you, or someone else, is at significant risk of harm, I will have to break confidentiality and speak to my supervisor. If possible, I will tell you if I have to do this. Participants using Skype should be aware that the internet cannot be guaranteed to be a completely secure means of communication.

What will happen to the results?
The results will be summarised and reported in a thesis. The study will also be submitted for publication in an academic or professional journal and may be presented at research conferences. It is also possible that the results from the study will be used for training and teaching purposes.

What if I change my mind?
You can change your mind about taking part in the research any time before the interview. If you take part in the interview and then decide you do not want your information to be used in the study it can be taken out and destroyed up to two weeks after you have done the interview.

Are there any risks?
There are no risks anticipated with taking part in this study. However, there is a chance that emotional topics may come up in the interview which could be upsetting for you. If you become upset during the interview you can have a break, or we can stop the interview at any point. If you continue to feel affected following the interview you are encouraged to inform me and contact the available support services I will give you at the end of the interview.

Are there any benefits to taking part?
Although you may find participating interesting, there are no direct benefits in taking part. It is hoped that taking part in the study will give you the opportunity to share your story. It is also hoped that the research will be helpful for other people who have similar experiences to you who have not taken part in the study and for professionals that may work with people who have been adopted from Romania.

Who has reviewed the project?
This study has been reviewed by the Faculty of Health and Medicine Research Ethics Committee, and approved by the University Research Ethics Committee at Lancaster University. This study is being supervised by Dr Suzanne Hodge (Lancaster University, s.hodge@lancaster.ac.uk, +44 (0)1524 592712) and Dr Anna Daiches (Lancaster University, a.daiches@lancaster.ac.uk, +44 (0)1524 594406).

Where can I get more information about the study?
If you have any questions about the study, please contact me:
Rachel McKail, Trainee Clinical Psychologist
Faculty of Health & Medicine

Clinical Psychology - Division of Health Research,
Furness College
Lancaster University
LA1 4YG
Email: r.mckail@lancaster.ac.uk
Tel: INSERT RESEARCH NUMBER

If you would like to make a complaint about any aspect of the research, you can contact Dr Jane Simpson (Research Director, Lancaster Clinical Psychology programme) by telephone: +44 (0)1524 592858, by email j.simpson2@lancaster.ac.uk, or by postal address: Doctorate in Clinical Psychology, Furness College, Lancaster University, LA1 4YG.

If you wish to speak to someone outside of the Clinical Psychology Doctorate Programme, you may also contact Professor Roger Pickup by Telephone: +44 (0)1524 593746, by email r.pickup@lancaster.ac.uk or by postal address: Associate Dean for Research, Faculty of Health and Medicine, (Division of Biomedical and Life Sciences), Lancaster University, Lancaster, LA1 4YG.

Appendix 4-D

Lone Worker Guidance

Guidance on Safety in Fieldwork (2005)

3.5 Lone Working

Working alone by employees and students is to be discouraged as far as possible but it is recognised that in some situations it is not reasonably practicable to avoid it. Lone working should only be sanctioned after a thorough assessment of the risks has been carried out taking into account the nature of the work, the hostility and location of the site and the experience of the worker. A safe system of work should then be devised in order, as far as is reasonably practicable, to safeguard the health and safety of the worker as required by Section 2 of the HSW Act and reduce risks from foreseeable hazards to an acceptable level.

There are specific situations in which lone working is highly inadvisable or contrary to legal requirements (e.g. work in confined spaces, fumigation, work on or near to bodies of water, or diving operations). In many cases the lone worker will be a postgraduate or final-year undergraduate undertaking project work. The worker should be involved in the risk assessment process and must be made aware that he or she is still under the supervision of the Academic Supervisor back on campus, who must take immediate responsibility for their safety.

The worker must not leave campus without informing the Supervisor (or School) of his/her destination, nature of the work (hence hazard involved) and estimated time of return. He/she must then advise the School upon return. If the worker departs for the field directly from home, the supervisor or School must be given the relevant information by telephone and appropriate emergency plans should be in place should the lone worker fail to check in at the arranged time.

Schools must formulate clear guidelines on the scope of activities which may be undertaken alone, the types of terrain where these may take place, the supervisory arrangements (checking-in, emergency plans, etc.) and the training and experience required on the part of the student. Because the lone worker may be at greater risk than a group member, it is important that an effective means of communication is established. Any safe system of work should include arrangements to determine the whereabouts of a lone worker and contingency plans in case of failure to make contact. As well as the danger of personal injury, the possibility of exhaustion or hypothermia should be considered, although any such risk should have come to light during the risk assessment and would strongly mitigate against lone working. Checks on lone workers must be made on a regular and planned basis. The frequency should be dependent on the nature of the activities and the perceived hazards. Checks might take the form of periodic visits by the supervisor or regular communication by telephone or radio. If contact is made through intermediaries, Schools must ensure that these are reliable. It may be useful to arrange for messages to be relayed through University control centres especially when these provide 24 hour cover.

Appendix 4-E

Narrative Interview Question

"I would like you to tell me your life story. Start from wherever you would like and you can include any events or experiences that have been important to you. Please take your time. I will listen and not interrupt you. When you have finished I may ask you some questions about some of the things you have said".

Appendix 4-F

Consent Form

Study Title: Life Stories of Romanian Adoptees: A narrative study

Before you consent to take part in the study please read the information sheet (V2 23/06/2015) and mark each box below with your initials if you agree. If you have any questions or queries before signing the consent form please speak to the chief investigator, Rachel McKail.

	Please initial each statement
1. I confirm that I have read the information sheet (v/ref) and fully understand what is expected of me within this study	☐
2. I confirm that I have had the opportunity to ask any questions and to have them answered	☐
3. I understand that my interview will be recorded and then made into an anonymised written transcript	☐
4. I understand that my interview data will shared and discussed with the research project supervisor	☐
5. I understand that recordings will be kept until the research project has been examined	☐
6. I understand that my participation is voluntary and that I am free to withdraw at any time up to two weeks after the interview, without my rights being affected	☐
7. I understand that the information from my interview will be pooled with other people's responses, anonymised and may be published	☐
8. I consent to information and quotations from my interview being used in reports, conferences and training events	☐
9. I understand that any information I give will remain anonymous unless it is thought that there is a risk of harm to myself or others, in which case I may need to share this information	☐
10. I consent to Lancaster University keeping written transcriptions of the interview for 10 years after the study has finished	☐
11. I consent to take part in the above study	☐

Name of Participant_____ **Name of Researcher** _____

Signature_____ **Signature** _____

Date _____ **Date** _____

Appendix 4-G

Demographics Questionnaire

ID Number: _____

Age: _____

Gender: _____

Current City/ Country of residence: _____

Age at adoption: _____

Appendix 4-H

Debrief Sheet

Helplines

During the interview you may have chosen to talk about some things that might have brought up some difficult feelings for you. These may go away by themselves after the interview. However, if you continue to feel upset following the interview and feel you would like some extra support there are a range of helplines below that you can contact. You could also make an appointment to see your doctor who could help to refer you for support.

If you would like any further information about accessing support, please ask me before I leave after the interview.

UK Based Support

- **Post Adoption Centre: Support for anyone affected by adoption**
  Tel: 020 7284 5879 (London); 0113 264 6837 (Leeds); Website: www.pac-uk.org/
- **Samaritans – Emotional support: 24 hour service, 7 days a week.**
  Tel: 0845 790 9090; Website: http://www.samaritans.org/
- **MIND – Mental Health support, Monday-Friday 9am-6pm**
  Tel: 0300 123 3393; Website: http://www.mind.org.uk/
- **SANE – Emotional support: Helpline 6pm-11pm, 365 days a year**
  Tel: 0300 304 7000; Website: http://www.sane.org.uk/

International Support

- **Befrienders Worldwide – Emotional support**
  Website: http://www.befrienders.org/
- **SANE: Mental Health Support Forum**
  http://www.sane.org.uk/what_we_do/support/supportforum/support_room