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"If we don't talk about it, they'll never go away" : an examination of the experiences of and reactions to stigma by a diverse population of adoptive parents in the United States.

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<https://doi.org/10.18297/etd/2340>

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“IF WE DON’T TALK ABOUT IT, THEY’LL NEVER GO AWAY”: AN
EXAMINATION OF THE EXPERIENCES OF AND REACTIONS TO STIGMA BY A
DIVERSE POPULATION OF ADOPTIVE PARENTS IN THE UNITED STATES

By

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B.A., Bellarmine University 2010

A Thesis Submitted to the Faculty of the College of Arts and Sciences of the University
of Louisville in Partial Fulfillment of the Requirements for the Degree of

Master of Arts in Sociology

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University of Louisville
Louisville, Kentucky

December 2015

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A Thesis Approved on

August 25th, 2015

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ABSTRACT

“IF WE DON’T TALK ABOUT IT, THEY’LL NEVER GO AWAY”: AN EXAMINATION OF THE EXPERIENCES OF AND REACTIONS TO STIGMA BY A DIVERSE POPULATION OF ADOPTIVE PARENTS IN THE UNITED STATES

Jessica Rae Newton

August 25th, 2015

Adoption challenges the traditional Western notions of kinship and family formation. Because of this, adoption has become a stigmatized status in American culture. Utilizing a grounded theoretical approach, this study examines the experiences of stigma by adoptive parents in the United States and the ways adoptive parents react to and manage this stigmatization. Qualitative interviews were conducted with a diverse sample of 17 adoptive parents living across the country. It was found that adoptive parents experienced stigma through comments made during their interactions with others, which fell into four categories: hesitation toward the birth parents, suspicion of the costs, assumptions concerning adoptive parents’ motives, and reservations questioning the validity of adoption. In reaction, adoptive parents engaged in stigma management strategies to resist and redefine cultural beliefs about adoptive families. They should to educate society on the realities of adoption by being open with their stories while challenging the assumptions and language of these experiences in hopes of normalizing adoption in America.

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INTRODUCTION

Adoption is a significant public and private issue across the world. It is a process that enables people to recreate the definition of the family. Adoption allows people to create a family that, in culturally important ways, differs from the traditional, biologically-related nuclear family (Wegar, 2006). Adoptive families are created by choice rather than by blood. Adoption is an institutionalized means of forming a non-traditional mode of the family (Pertman, 2011). This process of creating a family in a non-traditional way has important cultural and social implications for society. It challenges the dominant American cultural belief that families based on blood kinship are the strongest and most desirable family form.

Adoption is a complex and multidimensional transition to parenthood, one that differs significantly from the experiences of biological parents (Do Amaral Costa & Rossetti-Ferreira, 2009). With adoption, kinship is created rather than imposed by blood ties. It results in new definitions of motherhood and fatherhood, as well as diverse ways of developing emotional bonds among all people involved. These diverse families created by adoption come in many forms, including bi-racial and international adoptive families, gay and lesbian adoptive families, and single-parent adoptive families.

In 21st century America, it seems adoptive families are now more easily noticed in schools, at the grocery, in books, and on television. This is because their diversity renders them highly visible (Melosh, 2002). However, because their existence and their

difference is much more apparent now compared to the past, adoptive families may be experiencing stigmatization from society at a greater rate than ever before.

Adoptive children and parents alike experience stigma that is ingrained in American values and beliefs. Adoptive parents carry this burden and suffer in silence from the overwhelming pressure felt of the stereotypes that permeate American culture. These stigmas haunt them silently, are difficult to articulate, and are still more difficult to fight and transform (Smith, 1997). Adoption is a phenomenon that is provocative and challenging in respect to American ideals and realities of being parents and being a family (Latchford, 2012). The diversified family form of adoption affects the Western definition of what is considered family. Because it challenges the traditional idea of kinship, members of the adoptive family are likely to experience negative social stereotypes because of their deviance from the norm.

There exists a preferential dichotomy between the two family types, indicating there is a difference between adoptive and biological families, resulting in a hierarchal separation between the two. For society to fully accept and embrace adoption as a legitimate route to family formation there would need to be a new perception of what constitutes a “normal family.” The way Americans think about kinship and family would need to undergo a significant restructuring in order for the many diverse forms of adoptive families to be accepted as legitimate and as a viable means of creating a family without an attached stigma. For this type of change to occur, there must first be a greater body of knowledge available to society concerning the realities of adoption. Society must understand where adoption came from, why it began, and how adoptive families

live in society in order for it to be recognized as beneficial and seen in a more positive light.

Adoption, because of its secretive past and the belief that adoptive families are scarce in number, is a topic that has not been well researched until fairly recently. A majority of the research thus far has taken a psychoanalytically-oriented approach by focusing on the development and well-being of the adoptive individual rather than on the social factors that affect the experiences of adoptive families (Smith, 1997; Wegar, 2000). More research is needed that focuses on the interactions of adoptive parents with others in society that shape their experiences of adoption.

Previous research on the stigma of adoptive families has been limited. The research that has examined adoptive parents' stigmatized identity in society has applied its findings to all adoptive parents as one population with no recognition of how these stereotypes and stigmas may differ based on the individual characteristics of the family. There has been little to no mention of the diversity within the group of people labeled as adoptive parents, nor has there been an effort made to specifically sample these populations within the adoptive parents group. Because of this, this research attempts to sample those families who are underrepresented in the literature including bi-racial adoptive families, international adoptive families, gay and lesbian adoptive families, and single-parent adoptive families. In addition, this research will also investigate how adoptive families manage and cope with their stigmatization, something majorly unaddressed in the literature.

HISTORY OF ADOPTION IN THE UNITED STATES

Most Western Nations, including the United States, decided many years ago that a family setting was preferred to institutionalization for children separated from their biological parents (Pertman, 2011). Adoption, in a much different form than commonly thought of today, was originally an initiative developed to combat the population of children who lacked biological parents to care for them. The early 20th century in the United States after the First World War saw a dramatic increase in the number of illegitimate children needing care (Sales, 2012). Illegitimacy was considered a major social problem of the time, one that was continuing to grow at a rapid pace and therefore needed to be addressed in some way. Adoption became the response to this perceived problem. It emerged as a solution for both the unmarried mother with a child born in less than ideal moral conditions, and the infertile parents unable to produce their own biological child (Sales, 2012).

Over time, both the image of adoption and the actions surrounding its practice have evolved. Laws were enacted to regulate adoption practices early on, and as it became more common, the laws spread from state to state. The first modern adoption legislation was passed in Massachusetts in 1851; every other state followed suit and adopted its own legislation by 1929. It was decided that adoption was to fall under the jurisdiction of state rather than federal law (Pertman, 2011). Allowing this meant that laws created to monitor adoption differed state by state, often in dramatic ways. Doing

this left adoption “under-regulated, unconsciously expensive, and unnecessarily difficult emotionally and logistically for everyone involved” (Pertman, 2011).

Early adoption practices promoted secrecy because of the shame felt stemming from illegitimacy and infertility. There were two goals in mind: to make the adoptive family as much like a biological family as possible through secrecy and confidential record-keeping, and to protect this image by concealing any differences that may give away the family’s secret. “Matching” practices were used to hide the lack of blood kinship within the family. It was a technique used to simulate naturalness and realness for a family typically stigmatized as artificial and less than the real thing (Herman, 2012). “Matching refers to the process of selecting potential parental matches for adoptive children who share very similar characteristics in order for the adopted child to blend seamlessly into the family without any outwardly noticeable differences,” with families being matched by physical resemblance, intellectual similarity, race, and religious affiliations (Herman, 2012). However, as adoption continued to grow, adoptive families began to reject these matching practices.

The history of its practice shows that adoption has moved from being a closed to a more open institution. In the late 1960’s, the United States experienced an adoption reform movement that was critical of the technique of matching as well as the practice of confidentiality and the keeping of sealed records from the adopted individuals. This movement sought to “abolish the practice of sealed records and to allow adoption records to be opened to any adopted individual over the age of 18” (Herman, 2012). With this movement, adoptive families worked toward openness in adoption practices and normalization in society. Because of the work of this movement, their difference was no

longer concealed by confidential records and rules. Adoptive families became more open and more positive about how their families differ from traditional biological families.

The growing percentage of children born outside of marriage paired with the social stigma of single-motherhood and the increased demand for children by couples unable to give birth to children created an environment that legitimated adoption, allowing it to become both relevant and necessary (Riley & Van Vleet, 2012). However, the form of family life that adoption provided began the process of redefining what is considered family in the United States. This led to the questioning of traditional family ideals and values, and the creation of an environment where the biological paradigm was challenged. Individuals who choose adoption make the rational and deliberate choice to become a parent (Smith, 1997). The impact of adoptive families on social and cultural definitions of both the ideas of kinship and the creation of family challenge the traditional family form.

In a seminal study done by Charlene Miall in 1987, it was found that a majority of society, in general, differentiates between adoptive parenthood and biological parenthood (Miall, 1987). This indicated that the process through which a child joined a family created a difference in the minds of many Americans. At the beginning of the 21st century in the United States, adoptions are not as shrouded in secrecy as they were even 50 years ago (Riley & Van Vleet, 2012). However, despite their growing visibility, many negative opinions and stereotypes surrounding adoption remain. Many North Americans still hold the belief that biological parents, over all other options, should raise their children (Riley & Van Vleet, 2012). Others believe it is not possible for a person to love an adopted child as much as they would their own biological child (Wegar, 2006). While

some progress is being made in American society and some of these opinions are beginning to change as adoption practices evolve, there is still an even larger majority who think of adoptive families as different and second-best.

ADOPTION IN AMERICA

Adoption directly and profoundly affects the lives of millions of Americans each year. It has been accepted and more widely practiced by the United States than any other industrialized country in the world (Melosh, 2002). One in five people living in North America are linked to adoption in some way, meaning they have a family member who was adopted or associate with someone who is part of an adoptive family (Miall, 1987). Though people may not be aware of it, adoption is always around them. The National Adoption Attitudes Survey conducted in the United States in 2002 found that 64 percent of respondents had a personal experience with adoption, meaning they themselves were a part of an adoptive family, or they had an extended family member, friend or co-worker that was a part of an adoptive family (Fisher, 2003). Many still believe that adoption seems rare but just the opposite is true; and as more transracial and international adoptions take place, adoption will no longer be invisible.

The United States has emerged as the world's leader in the practice of adoption. The latest available statistics on adoption show there were 136,000 adoptions that took place in the United States from 2007-2008 (Child Welfare Information Gateway, 2011). Each year, between two to three percent of American families are formed through adoption (Riley & Van Vleet, 2012; Koh & Reuter, 2011). The remaining 98 percent of families living in the United States are formed biologically. Though this number is small, it is not insignificant. For the first time in U.S. history, the Census included "adoptive

son/daughter” as a kinship category in 2000 (Herman, 2012). Including this category in the Census represents recognition of adoptive families in the United States. This acknowledgement is indicative of the changing attitudes and viewpoints toward the legitimacy of adoption in America as it represents a cultural acknowledgement that adoptive families have a presence in society and are beginning to gain recognition as a method of family formation.

Adoption has grown so rapidly in the United States that there are now more American parents who desire to adopt than there are infants placed for adoption each year. This decrease in the number of infants available for adoption can be explained by a combination of increased availability of safe contraceptives, legal abortion, the rising trend for single mothers to parent their children, and the decreased number of teenage pregnancies in the United States (Hartman & Laird, 1990; Goldberg, 2009; Zhang & Lee, 2010). Today, there are approximately six potential parents for every one infant placed for adoption (Pertman, 2011). Some individuals and couples have turned to other countries in order to adopt a child. Many foreign countries in Asia, Latin America, Eastern Europe, and Africa provide possible sources of children (Zhang & Lee, 2010). International adoption accounted for 13 percent of the 136,000 adoptions that took place from 2007-2008 (Child Welfare Information Gateway, 2011). Because “matching” children to adoptive parents is no longer the norm, international and transracial adoptions, especially among the diverse population of adoptive families, are being seen more and more, making adoption difficult to ignore.

An inconsistency exists between the “overwhelming support” for adoption in the United States demonstrated consistently in research, and the willingness of individuals to

choose the route of adoption for their own family (Fisher, 2003). If a child cannot be conceived biologically, adoption is seen as a second-best option. This is apparent when looking at the ratio between the number of fertility treatments and the number of adoptions that take place annually. More than one million patients seek fertility treatments in the United States compared to the 136,000 adoptions that take place each year (Fisher, 2003). Married women with fertility issues are the most likely population to take steps to adopt after all routes to becoming a parent biologically have been exhausted (Zhang & Lee, 2010). This indicates that adoption is viewed as an option for family formation only after the primary route through biological means is unlikely or impossible. Many Americans report having positive opinions of adoption and a high regard for it as an institution, yet it is also something a majority of Americans not only do not choose for their family, but go to great lengths to avoid.

Adoptive parents are often praised by others for their decision to adopt yet a very small number of people in America actually choose adoption for themselves. The rooting of identity in a biological heritage is essential to the idea of Western kinship and the American outlook on identity development (Sales, 2012). Adoption challenges these traditional views on how families should be created and this assumption that knowledge of one's biological origins is a necessary component to develop a healthy self-identity (Latchford, 2012). Adoption is therefore perceived as a threat to society and is subsequently stigmatized because of this.

STIGMA OF ADOPTION

The difference within the adoptive family is often difficult or impossible to conceal. Even if the difference in the family is not easily discernable, there are situations where it must be revealed, such as with paperwork from schools or medical facilities. Adoption is also generally not well understood among a majority of Americans. Because of this, uninformed and incorrect perceptions of adoption permeate cultural beliefs, resulting in the stigmatization of the adoptive family. Stigma is defined as “a mark of disgrace associated with a particular circumstance, quality, or person” (Merriam-Webster, 2015). Both of these factors mentioned: lack of concealment and lack of greater knowledge and awareness of the adoption process, are main characteristics of a stigmatized identity (Yang, Kleinman, Link, Phelan, Lee & Good, 2007).

Adoption is often thought of as delicate, inauthentic, high-risk, and even dangerous at times. Adoptive kinship, not regarded as “natural,” is considered to be fragile and problematic because it lacks the genetic infrastructure of its biological counterpart (Latchford, 2012). “It is often perceived as a risky venture, one that is likely to both frustrate the expectations of the idealistic parents and to produce deeply troubled children” (Fisher, 2003). There are three main themes of stigmatization that have been identified that affect the adoptive family in U.S. culture:

- (1) Because a biological tie is assumed to be important for bonding and love, adoptive families are considered second-best;
- (2) Because of their unknown genetic past, adoptive children are viewed as second rate or

suspect; this is based on the assumption that adoptive children generally come from less optimal hereditary backgrounds; (3) Because they are not biologically related to their children, adoptive parents are not considered to be real parents; and (4) Adoptive families violate Western fertility norms because married couples should biologically reproduce (Wegar, 2000; Wegar, 2006; Kline, Karel & Chatterjee, 2006).

These stereotypes were identified by adoptive parents as beliefs held by the wider community they felt were stigmatizing (Wegar, 2000; Kline, Karel & Chatterjee, 2006). They reflect extremely negative perceptions of adoption by Americans; perceptions of which adoptive parents are all too aware. The stereotypical images of adoptive children and parents created by these perceptions have a significant and negative impact on the well-being of every member of the adoption triad (Koh & Reuter, 2011).

The heightened social and cultural value of biological parenthood seeps into discussions, interactions, and beliefs about adoption comparing it to natural kinship, which results in an understanding that adoptive parenthood as second-rate (Latchford, 2012). In a study done by the Evan B. Donaldson Adoption Institute, half of respondents said adoption is “not quite as good as having your own,” and that “adoptive families are disadvantaged, not quite whole, and unlucky” compared to the rest of society (Pertman, 2011). These opinions are indicative of a culture that perceives adoption as a devalued social identity. These beliefs also have a broader negative impact. Even if individuals who hold these opinions express them through their words alone, harmful stereotypes are continuing to be perpetuated (Pertman, 2011).

In addition to the devaluation of the adoptive family form as a whole as second-best, both the birth parents and the adoptive children experience their own unique perceptions of their identities. Of the members of the adoption triad, birth parents typically experience the highest level of stigma. The adoption of a child may be the

result of a voluntary relinquishment of the child by the birth parents or an involuntary relinquishment through formal termination of parental rights (Cortes, 2012). The situation surrounding the relinquishment of a child by their birth parents differs for each individual. There are four main reasons why birth parents relinquish their child: societal or family pressures, low socioeconomic status leading to a lack of resources, personal goals or ambitions, or court action stemming from the birth parents' inability to care for the child (Hartman & Laird, 1990; Child Welfare Information Gateway, 2013).

A stigma exists for parents who place their children for adoption or have children removed from their care. In U.S. society, becoming a mother is something praised, but if a mother is living apart from their child, they experience social stigmatization (Evan B. Donaldson Adoption Institute, 2007). Birth parents experience feelings of shame and difference due to this social stigma that portrays the relinquishment of a child as unnatural, improper, and even contemptible (Evan B. Donaldson Adoption Institute, 2007). Just as adoptive families desired to keep their adoptive status a secret in the past, birth parents were advised to do so as well to avoid discrimination and marginalization. These feelings of stigmatization, shame, and difference tend to be felt at a higher rate by birth parents who attempt to keep their situation a secret, which is typical behavior for birth parents (Cortes, 2012). Because the perspectives of birth parents remained secret for so long, their feelings and needs went unacknowledged for many decades (Evan B. Donaldson Adoption Institute, 2007).

Although Americans generally consider the loss of a child to be one of the most tragic and traumatic experiences one can have, the loss of a child through voluntary or involuntary relinquishment is not viewed in the same way because it is seen solely as a

direct result of the actions of the birth parents (Child Welfare Information Gateway, 2013). Because of this, birth parents do not receive sympathy nor do they receive the necessary ongoing emotional support to cope with their experience because people do not recognize the lifelong nature of their loss or they view the loss as a “choice” (Evan B. Donaldson Adoption Institute, 2007; Child Welfare Information Gateway, 2013). The support the birth parents do receive encourages them to not think or talk about their loss and to put it behind them so they can move on with their lives (Evan B. Donaldson Adoption Institute, 2007). This advice acknowledges the negative assumptions associated with being a birth parent and encourages birth parents to suppress their stigmatized status because of the societal view of their actions.

Adoptive parents are also aware of the negative beliefs of birth parents held by Americans, and may even engage in their stigmatization through the beliefs they hold about birth parents. Adoptive families may experience a range of emotions toward the birth parents that include empathy, pity, anger, or guilt, and in order to deal with these feelings, they may characterized the birth parents as unworthy or as the child being better off without them in order to separate themselves from these feelings (Hartman & Laird, 1990). However, some may also come to identify with the birth parent and see them as victims of their overwhelming circumstances (Hartman & Laird, 1990).

Adoptive children suffer from specific stigmatized beliefs concerning their development, growth, and future potential. In a national survey done in 2002 of attitudes toward adoption, more than one-third of the respondents believed that adoptive children are more likely to have problems at school and with drugs or alcohol in their lifetime. They were also thought to be less likely to be well-adjusted, happy, and self-confident

compared to their non-adoptive peers (Fisher, 2003). Five years before in 1997, a study found one-third of those surveyed believed “adoptive parents and their children did not love each other as much as if they had come together through biology” (Wegar, 2006). These results are just a few examples of a cultural apprehension toward adoption within the United States that continues to be prevalent today.

Adoptive families cannot be separated from the cultural and social contexts in which they are embedded (Wegar, 2006). No adoptive family is exempt from the pressure of these stigmatizing beliefs held by society. These social stigmas may be felt less by adoptive families who were physically or biologically “matched,” which makes the fact that the family was formed through adoption rather than biologically less apparent to the outside world (Wegar, 2000). However, this adoption practice further perpetuates the importance placed on a genetic connection between family members and the idea that an “unmatched” adoptive kinship is second-rate. Adoptive families are thought of as different, therefore reducing them to a discounted status within society.

These stereotypes have become part of American culture and because of this, families who choose adoption in America all have to deal with stigma on some level in their lifetime. These cultural ideologies place a set of burdensome thoughts, responsibilities, and feelings on adoptive parents; emotions all adoptive children and parents have to address (Wegar, 2006; Pertman, 2011). For example, adoptive parents often feel obliged to account for their adoptive child’s cultural or geographical origins by society; something no biological family ever has to do (Latchford, 2012). Adoptive parents who are unprepared to deal with impact of the biologically-determined chauvinistic bias of these stereotypes have a difficult time managing their hurt feelings

that arise from negative experiences or public remarks made about their family (Smith, 1997).

These findings are evident of how the dominant American beliefs about the primacy of blood kinship and traditional patriarchal views on family formation have created a legacy throughout history of stigmatization of adoptive families. The nation's laws, regulations, language, and attitudes have not quite caught up with the quickly evolving reality of diversifying families across the world (Pertman, 2011). The language used in society to differentiate between biological and adoptive kinship can be stigmatizing and harmful to the members of adoptive families. Language sometimes connotes second-best status in the use of phrases such as "natural parents," "their own children," and "real parents" to describe birth parents (Melosh, 2002). As a society, Americans feel they have the right to ask very personal questions of adoptive families, and they do this without thinking of the impact of the questions they ask or the language they use on the family. People who could not imagine asking certain questions of biological parents (e.g., How many tries did it take? Aren't you afraid of the risks? How many miscarriages did you have before this child?), think nothing of probing adoptive parents for the details of a child's adoption (Pertman, 2011). Though they may only be curious, their ill-informed prejudices and preconceptions of adoption are always apparent and can be harmful to the members of the adoptive family.

The vocabulary used to describe adoption remains a battleground (Herman, 2008). Though it is not always deliberate, the language itself used to describe adoption perpetuates negative stereotypes and labels adoptive families as deviants from the norm. In the many nuances of language and also in informal social exchange, adoption has

become synonymous with difference (Melosh, 2002). The phrase “you’re adopted” is sometimes even used as a taunt or insult in America (Pertman, 2011). This defines being an adoptive individual as something negative, deviant, and undesirable.

The language used to describe families has historically left out the existence of adoptive individuals and families altogether. The language used when discussing the development and eligibility for parental leave laws was often exclusionary of adoptive parents before the Family Medical Leave Act (FMLA) was enacted in 1992 (Garrett, Wenk & Lubeck, 1990). National data on adoption was not collected by the Census until 2000 (Herman, 2012). These stigmas create an atmosphere of separation, difference, and lack of recognition for adoptive individuals. New language may also help to rid adoption of its discrediting characteristics evident in phrases like “real parents” or “natural child” (Herman, 2008). Until then, adoptive families must develop ways to manage and cope with these societal beliefs and cultural images that define adoption as a deviant, second-best family form (Wegar, 2006). If these things are ever to change, they must be brought to the attention of the public. These stereotypes concerning adoption are still around today because there is a lack of information presenting accurate portrayals of adoptive families with which Americans can form a realistic picture of an adoptive family.

ADOPTION BY A DIVERSE POPULATION

All American adults are exposed to cultural values that outline who should have children and how those children should come to be. These values have important implications for prospective adoptive parents because their decision to adopt does not fit perfectly with these cultural ideals. More so, individuals considering bi-racial adoption are faced with additional beliefs about race that are a part of American culture.

Opposition has come historically from the National Association of Black Social Workers (NABSW) toward White parents adopting Black children (Zhang & Lee, 2010). Though the NABSW has since changed their stance on this issue, this position may have affected the willingness of White individuals to adopt outside of their race for fear of backlash from the community.

Another factor influencing this is the values of the families of prospective adoptive parents. Family nonsupport, parents' prejudices, and racist attitudes toward minorities are other major challenges faced by families considering bi-racial adoption (Goldberg, 2009; Zhang & Lee, 2010). Kinship and physical similarity are deeply ingrained in the American collective understanding of the meaning of family. Individuals considering adoption may wish to minimize the visibility of their child's adoption and limit their exposure to social stigma and questioning (Wegar, 2000). Because of this, there is a higher demand for White, healthy infants to adopt over all other options. White children tend to be adopted at two times the rate as non-White children (Goldberg,

2009). However, since there are lower numbers of White infants available for adoption, families interested in adoption must look elsewhere to create their family.

The lower numbers of healthy, White infants for adoption coupled with the social backlash against inner-city poor for creating many social problems, like drug addicted babies, has influenced the recent increase in international adoption (Zhang & Lee, 2010). Another reason international adoption may have become so much more popular is the growing trend of openness in domestic adoption. There is a lesser perception of fear that birth parents can or will change their minds when adopting internationally. This makes international adoption more appealing, giving the adoptive parents a greater sense of security and permanency (Zhang & Lee, 2010).

There is an inseparable link between international adoption and bi-racial adoption, with 85 percent of bi-racial adoptions being due to international adoptions (Zhang & Lee, 2010). Asian children from other countries are adopted at much higher rates than African American children. This is a result from the rigid social boundaries between Blacks and Whites; the boundaries between Hispanics or Asians and Whites are much more fluid (Zhang & Lee, 2010). When parents talk about their adoptive children, parents of international children are more likely to speak of cultural differences rather than racial differences between themselves and their children (Zhang & Lee, 2010). By doing this, the parents are mitigating racial differences with cultural ones because there is a stigma attached to bi-racial adoptive families. Because of this stigma, there are lower numbers of bi-racial adoptions, especially adoptions of African American children in the United States.

Research suggests that gay and lesbian individuals may be more open to adopting

bi-racially and internationally. Specifically, lesbians are significantly more likely to have adopted internationally than heterosexual couples (Goldberg, 2009). There has been a sharp rise in the number of gay and lesbian individuals and couples using alternative means, such as adoption, to create families (Matthews & Cramer, 2006; Mallon, 2000). Because gay and lesbian individuals have a marginalized status in society, their membership in a marginalized community may expose them to certain ideals and values that facilitate openness, such as expansive notions of the family (Goldberg, 2009).

The right to adopt is not a fundamental legal right for anyone in the United States, but it is even less so for gay and lesbian couples (Erich, Leung, Kindle & Carter, 2008). Current adoption practices allow for discrimination against gays and lesbians in some jurisdictions. In Florida, a law was put in place making it illegal for gay or lesbian individuals to become foster or adoptive parents in 1977 (Mallon, 2000). This law was just recently found to be unconstitutional and was repealed in early 2015 (Florida State Senate Website). Many judges have suggested in the past that children raised by gay and lesbian parents are more likely to suffer from a plethora of problems or issues, such as social stigmatization (Erich, Leung, Kindle & Carter, 2008). There is also the stereotype that labels gay men as child molesters making them unfit to become parents, or that they will cause their children to become homosexual as well (Mallon, 2000). Gay and lesbian individuals and couples considering adoption may experience stigmatization during the process of adoption, and then once the adoption taken place, they may still experience stigmatization because of their apparent difference and lack of biological ties to their children.

There are higher numbers of older African American children in foster care than

any other population of children available for adoption (Fusco, Rauktis, McCrae, Cunningham & Bradley-King, 2010). Although there is a preference for infants in adoption practice because many prospective adopters desire to experience all of the stages of childhood, some prospective adopters are motivated to adopt bi-racially or adopt older children because they perceive the children as potentially disadvantaged and sincerely want to improve their lives (Zhang & Lee, 2010; Mallon, 2000). However, there is a stigma of older children available for adoption as damaged or challenging because of their previous experiences. Most assume older children are in foster care because they have suffered something traumatic and therefore would be difficult to parent or problematic in the home or for the family (Zhang & Lee, 2010). The majority of the older-child population in foster care have been physically or sexually abused and/or have had basic needs neglected (Clark, Thigpen & Moeller-Yates, 2006). While this is not true of every child in foster care, this perception makes it less likely that older children in the foster-care system will be adopted. Adoptive parents of older children may experience different stereotypes or stigmas because of these beliefs about the desirability of the children in addition to the desirability of the adoptive family.

Every year, a growing number of adoptive families are choosing to adopt children with disabilities or special needs, often from the foster care system (Clark, Thigpen & Yates, 2006). Children with special needs refer to older children, children with physical or mental disabilities, children with psychology or emotional problems, or children part of a sibling group (Enrich & Leung, 1998). When adoptive parents choose to adopt a child with special needs, there are other factors they must consider in addition to the changes that come with bringing a new child into the home. Adoptive parents go through

an adjustment period as they learn to accommodate their child's patterns of behavior and needs (Egbert & Lamont, 2004). In addition to these adjustments, adoptive parents must also learn ways to deal with societal views of their family. "Adoptive parents must work to cope with the stigmatization of adoption while also working to cope with the adoptive child's issues" (Forbes & Dzieglewski, 2003). Special needs adoptive families are generally recognized as stressful and challenging for the parents (McGlore, Santos, Kazama, Fong & Mueller, 2002; Egbert & Lamont, 2004). Society assumes that these families will need outside help after the adoption takes place, and they also view the special needs adoption to be disruptive to the parents' way of life. "Because of the new demands and changes to the parents' lifestyle and to the family system, the family may be in crisis after placement of a child with special needs" (McGlore, et. al, 2002). Special needs adoptive children are often viewed as requiring special, intensive parenting, causing the adoptive parents to report feeling a strong social pressure to be perfect parents (Forbes & Dzieglewski, 2003). In a study conducted in 2003 on adoptive mothers of special needs children, over 70 percent of the mothers felt they unnecessarily had to deal with comments from others they felt to be inappropriate and hurtful regarding their children (Forbes & Dzieglewski, 2003). People also assumed adoptive parents of special needs children experience difficulties as a result of the medical or behavioral issues of the child (Forbes & Dzieglewski, 2003). These instances of stigmatization and stereotyping can add stress to the already stigmatized adoptive parents.

As the United States becomes more diverse and many different family forms such as interracial families, single-parent families, and families that cohabitate are becoming more apparent and accepted, research is needed to see if this increase in both visibility

and acceptance applies to adoptive families. Utilizing a sociological perspective, this research examines the experiences of stigma by adoptive parents living in the United States in hopes of addressing this question. This research seeks to understand how a diverse population of adoptive parents experiences stigma and how they manage these stigmas during their interactions with others. In order to address the gap in the literature, the current research focuses whether adoptive parents are stigmatized, how they are stigmatized, and how they respond to the stigmatization. By addressing this void in the literature, this research will contribute the body of knowledge on adoptive parents in American in order to educate others on adoption.

THEORETICAL FRAMEWORK

Though there have been significant changes that have occurred concerning the adoption process, there still remains the potential for the adoptive family to be considered a stigmatized status. This research seeks to identify the types of stereotypes and stigmas surrounding adoption still prominent in America today as well as the ways in which they are managed by adoptive parents. In order to do this, this research applies Goffman's definition of stigma and stigma management strategies to Collins's intersectionality theory and concept of "acts of everyday resistance" for adoptive parents living in the United States in order to examine the intersectional ways in which the diverse populations of adoptive parents experience and combat stigma. This research also utilizes Berger and Luckmann's ideas on the social construction of society to understand how the actions of adoptive parents have the potential to alter the cultural perception of adoption in society and how the language used during interactions with adoptive parents perpetuates the stigmatized status associated with adoption.

Erving Goffman defined stigma as processes of social discrimination that occur when an individual's social identity deviates from norms in ways that cause others discomfort (1963). It is the construction of a "relationship between an attribute and a stereotype" (Goffman, 1963). The process of stigmatization reduces the stigmatized individual from a "whole person" to a discounted one. Stigmatization involves the linkage of difference with negative attributes that convey a sense of separation, a loss of

status within society, and a devalued identity compared to the norm or majority (Kline, Karel & Chatterjee, 2006). This process transforms a given trait into a negatively considered stigma carrying the potential for undesirable social consequences both at the macro level in American culture and institutions, and at the micro level through interactions with members of society (Goffman, 1963; Roschelle & Kaufman, 2004; Herek, 2009).

Stigma is manifested in two key ways for individuals with deviant identities. “Felt stigma” refers to an individual’s assessment of others’ attitudes or shame associated with their identity as well as their expectations for how these attitudes may be expressed in their actions, or “enacted stigma” (Scrambler & Hopkins, 1986; Cockerill & Nack, 2013). “Enacted stigmas” refer to clear or subtle instances of discrimination against the individual that reveals prejudice against those stigmatized on the grounds of their perceived deviance from the norm (Scrambler & Hopkins, 1986; Cockerill & Nack, 2013). Examples of enacted stigma include discrimination, verbal judgment or negative assumptions, or displays of discomfort or anxiety during interactions (Cockerill & Nack, 2013). Felt stigma and the anticipation of enacted stigma may motivate the individual to engage in a variety of proactive behaviors identified as stigma management strategies with the goal of protecting themselves from stigmatization (Herek, 2009).

Stigma management is the attempt to approach interactions where stigma is presented in ways that are aimed at minimizing the social costs of having the stigmatized status (O’Brien, 2011). Stigma management strategies serve as guides for behavior and responses in reaction to stigmatizing interactions (Scrambler & Hopkins, 1986). The

demands of conformity to norms by society are met with these techniques by individuals for whom society makes assumptions about their identities (Sykes & Matza, 1957).

There are several common strategies associated with stigma management. These are concealment or “passing,” disclosure, deflection, and normalization (Scambler & Hopkins, 1986; O’Brien, 2011; Taub, McLorg & Fanflik, 2004). Concealment, also known as “passing,” refers to actively choosing not to reveal the stigmatized identity in order to appear to be a member of the dominant group. Goffman described an individual’s effort to manage their stigmatized identity by controlling the number of people with whom their status is shared “division of the social world” (1963). Individuals passing as the norm by not revealing their status to others engage in this concept. During disclosure, the individual reveals their stigmatized status in order to manage the perception of their identity with others. Disclosure may sometimes happen as a result of stigma cues, which are noticed manifestations of peoples’ status that ultimately “give them away” (Scambler & Hopkins 1986). The depth and emotional content of the information can affect the reaction to their disclosure (O’Brien, 2011). Deflection occurs when the individual attempts to reduce the impact of their stigmatizing status by focusing on or accentuating other aspects of themselves or the interaction (Taub, McLorg & Fanflik, 2004). Finally, through normalization, the individual attempts to lessen the undesirable characteristics of the stigmatizing identity by re-educating others, redefining their identity as just like everyone else (Taub, McLorg & Fanflik, 2004; Cockrill & Nack, 2013). In both deflection and normalization, effort may be made to divert attention from the stigmatizing aspects of their identity to reduce stigmatization (Scambler & Hopkins, 1986). It is important to note that there may be negative consequences of these strategies.

Efforts to conceal the stigmatized identity through passing can also restrict those individuals from having normal social interactions and from receiving social support from others (Cockrill & Nack, 2013). Disclosure, deflection, and normalization all include an aspect of revelation of their stigmatized identity, therefore making them vulnerable to experiences of enacted stigma (Scambler & Hopkins, 1986). These stigma management strategies are essential for individuals who have devalued identities in lessening the effect of social stigmatization.

Intersectionality theory claims that “systems of race, social class, gender, sexuality, age, and ethnicity form mutually constructing features of social organization” that shape the experiences of individuals, and in turn, are shaped by those individuals (Collins, 2000). These characteristics are each examples of master statuses for individuals that define their identities. Intersectionality theory is the idea that these different statuses intersect with one another, and the ways in which they intersect create different methods of discrimination and stigmatization that need to be considered for each individual. The assumptions and stereotypes held by society are not representative of all individuals of a given identity because they do not take into consideration the variability due to the different characteristics of all members of the identity. A person obtains a stigmatized status when a particular characteristic they possess differs from the norm, or “controlling image” in society. Controlling image refers to the dominant or ideal image of a subject held by society to which others make comparisons (Collins, 2000). Controlling images permeate all structures in society, are designed to be used to justify oppression and discrimination, and acts as ways to make social stigmatization appear to be natural, normal, and inevitable (Collins, 2000).

Individuals may create self-definitions for their identity in order to reject the comparison to the controlling image and to deconstruct the assumptions of the dominant group. By creating their own definition of an identity, individuals challenge the hegemonic discourse on who they are, how they experience reality, and how they should be treated. Their reactions to stigmatizing interactions are means of stigma management that represent “everyday acts of resistance” that challenge dominant cultural beliefs. Everyday acts of resistance can be understood as actions by individuals being compared to the controlling image that resist the oppression that is a product of the comparison (Collins, 2000). They can be seen as challenges to the established status quo in society and the idea that their identity and their reality is defined by others who do not know their perspective (Collins, 2000). Individuals with oppressed or stigmatized identities take action to resist characteristics associated with their statuses. Through their actions, they challenge that their identity is defined by others’ interpretations and they confront the cultural assumption that they are incapable of defining their own standpoint (Collins, 1989). Acts of resistance serve as a tool for individuals that are marginalized and stigmatized in society to reject these views and assumptions.

The social construction theory of reality states that humans create society through the language they use, actions they perform, and assumptions they hold that construct realities (Berger & Luckmann, 1966). Through the efforts of stigma management and acts of resistance, individuals are redefining the way they are viewed by others. According to this theory, language acts as a way to communicate shared meaning of something (Berger & Luckmann, 1966). Through their interactions with others, individuals learn of the beliefs associated with their identity based on the language that is

used and the meaning the chosen language implies. They then may choose to reject that language and those meanings by recreating their image and in hopes of negating the negative assumptions associated with their violation of the controlling image, and redefining the realities associated with their socially stigmatized identity.

This research will examine adoptive parents' interactions with others during which they experience stereotyping, discrimination, and stigmatization based on their adoptive status. The theories mentioned above will allow for an understanding of the ways in which stigmas are conveyed through interactions with adoptive parents, and how adoptive parents react to and manage the stigma they experience in different ways. The research focuses on a diverse group of adoptive parents including bi-racial and international adoptive parents, gay and lesbian adoptive parents, single-parent adopters, and parents who adopted older children. Because this research specifically targets diverse populations underrepresented in the literature, intersectionality theory will assist in understanding the stigmas these different populations experience as a result of the different statuses that are a part of their identities. This knowledge will better prepare future families for the potential social and cultural responses to adoptive kinship (Wegar, 2006). The overall success and well-being of adoptive families depends heavily on their ability to cope with the stigma surrounding adoption found in U.S. culture and to resist the devaluing social attitudes of adoptive families (Miall, 1987).

METHODS

The current research examined the experiences of and responses to stigma by adoptive parents in America by interviewing adoptive parents living in the United States. The data was analyzed using a grounded theoretical approach. “Qualitative interviewing provides an open-ended, in-depth exploration of an aspect of life about which the interviewee has substantial experience, often combined with considerable insight” (Charmaz, 2000). It allows for a comprehensive understanding of the complex phenomenon targeted, giving the researcher a detailed picture of the experiences, circumstances, interpretations, and processes at work using the participants own words. The flexibility of qualitative semi-structured interviews allows for the researcher to address gaps found during the interview process and to follow new leads that emerge during the process (Charmaz, 2000). The goal of the current research was learn more about the experiences of adoptive parents, giving a voice to them in order to share their perspectives with other sociologists and with the world.

Instruments

A semi-structured interview guide was utilized for each of the in-depth interviews that took place. The use of semi-structured in-depth interviews was appropriate for this research because it allowed for the interviews to have a consistent, structured focus making an analysis of the data in terms of commonalities between interviews possible.

There are three main weaknesses to the use of qualitative interviews. First, the interview process relies heavily on the communication skills of the researcher and their ability to develop a rapport with the participant. There is also no true way to know if the participants are being truthful in their statements or if their statements are complete. Finally, both the interview process and the data analysis can be time consuming.

The questions used were open-ended and acted as probes to facilitate an element of discovery to uncover information from the families concerning their adoption that other families may have also experienced (Gillham, 2000). The interview guide (See Appendix A) includes 46 questions organized into four categories: I. General questions about adoption, II. Questions related to stigma, III. Sensitive questions, and IV. Questions concerning adoption in the media. The questions designed for this research were developed from concepts found in the literature on adoption. The interview questions ask the participants to describe and reflect upon their experiences in an attempt to understand their unique perspectives.

The interview guide evolved and was adapted throughout the process. Questions were re-arranged for better flow and connection between topics during the interview. The question, "When you introduce your family, do you differentiate between adoptive and biological children?" was altered to, "How do you talk about the adoption with other people and do you differentiate between adoptive and biological children." The question, "What are some of the lessons you've learned through your interactions with people about how you talk about your family?" had the follow up question, "Do you share more or less information about the adoption than you used to?" was added. The question, "Do you feel like your view of parenthood is different from a biological parent?" was altered

to, “How do you think your definition of parenthood differs from a biological parent?” and the question, “Are there things you have to consider that a biological parent may not have to?” was added as a follow-up question. The questions, “How did you feel the first time you learned about your child?” and “Some people believe having an adoptive child is *not quite as good as having your own*; how would you respond?” were removed because they were redundant and did not provide information useful for this research. Interviews length ranged from 61 minutes to 139 minutes. At the end of the interview, participants were asked if they had any questions and if it would be okay for the researcher to contact them in the future if any additional information was needed. No participants were contacted after their initial interview for follow-up questions.

Sampling

A convenience sample of participants was recruited from online adoption forums, through social media, and through snowball sampling. Inclusion criteria included the following: Participants must be between the ages of 18 and 64, living in the U.S. at the time of the interview, and have been living in the U.S. for at least six months prior to the interview. Their adoption must be finalized and the adoptive child must permanently be in the home of the adoptive parents. The participant must still be the legal parent of the adoptive child. The adoptive child could not be related to the participant before they were adopted (e.g., a niece, cousin, or grandchild), and could not be the biological child of their spouse from another marriage. It is important to note that setting the inclusion criteria to only include the legal adoption of non-biologically related children may have inadvertently excluded minority adoptive families where informal adoptions or kinship

arrangements are common. Participants were not excluded for marital status or sexual orientation.

Approval from the Internal Review Board (IRB) to conduct this research was obtained. Initial contact with the participants was made through email. The following recruitment prompt was sent by email to each of the individuals:

My name is Jessica Newton and I am a graduate student studying sociology at the University of Louisville. I am conducting a research study concerning the experiences of adoptive parents in the United States for my Master's Thesis project. Families are becoming more and more diversified and because adoptive families vary from the traditional, biological form, they have different experiences in society. This study will measure if adoptive parents experience difference in their own personal lives and if so, how they cope with it. My purpose is not to invade the personal lives of adoptive parents and their families; rather, it is to learn more about the experiences of adoptive parents, giving a voice to adoptive families in order to share their perspectives with other sociologists and with the world.

I will be conducting interviews with adoptive parents to discuss your experiences as an adoptive parent living in the United States. These interviews can take place in person or over the phone, if you prefer. If you are interested in participating in this study, please contact me by email at jessica.newton@louisville.edu or by phone at (502) 554-8262. Thank you for your time!

If the researcher was contacted by a potential participant, they were emailed the informed consent document (See Appendix B) and given the opportunity to ask any questions they may have about this study. Once all questions were addressed, an interview time and place, if in person, was set. Interviews took place from December 2014 to March 2015. The participants were interviewed by phone or in person, when possible. A reminder of the interview was sent to each participant the morning of the interview. No compensation was offered to participants. With the permission of the participants, interviews were recorded and transcribed verbatim for analysis. Informed consent was obtained before the beginning of each interview. In-person interviewees signed a paper

version of the consent form; phone interviewees gave verbal consent that was recorded at the beginning of the phone call. Informed consent forms were kept in a locked file cabinet in the researcher's office. The recorded verbal consent was kept on a password-protected device until it could be downloaded to a secure computer.

A total of 24 individuals were contacted by the researcher; 17 individuals were interviewed as participants in this study. Five of the 24 individuals stopped contact before the interview took place. Two of the 24 individuals contacted were deemed ineligible to participate in the research because their adoption was not finalized or they were not currently living in the United States. Interviews that took place in-person were arranged for a location suggested by the participant. The five in-person interviews took place at a coffee shop for two participants, at their workplace in their office for two participants, and in the home of one participant. All other interviews were conducted by phone. In-person interviews were recorded using a voice recorder on the cell phone of the researcher. Phone interviews were recorded using a call recording app called TapeACall Pro. Recordings of interviews were stored on the researcher's password protected cell phone until they could be downloaded to a secure computer and stored.

Participants

This study examined the experiences of American adoptive parents who have adopted domestically or internationally, and are currently living in the United States. The focus of the interviews was on the experiences of adopting a child once the child comes into the home permanently. This research sought to explore the experiences of adoptive parents with diverse experiences of adoption including gay or lesbian adoptive parents,

single adoptive parents, and parents who adopted a child of a different race or ethnicity than themselves. Because of this, during the data collection process, efforts were made to contact and sample those groups specifically. A diverse sample of 17 adoptive families from across the United States was included in this study. Nine participants adopted children while living in Kentucky, four participants adopted children while living in Texas, two adopted children while living in Indiana, one adopted children while living in North Carolina, and one adopted children while living in Washington. Fifteen women and two men were interviewed as part of this study. All 17 participants identified as being White. Eleven participants identified as being heterosexual, five participants identified as being lesbian, and one participant identified as gay. Three participants identified as single-parent adoptive parents; the remaining 14 participants adopted children with their spouse or partner.

Of the 17 participants, seven adopted from the foster care system, six adopted domestically from the United States, and four adopted internationally. Two families adopted from Guatemala, one adopted from Kazakhstan, and one adopted from the Ukraine. Five individuals indicated they adopted children with special needs. Three individuals indicated they adopted older children (children over two years of age). Ten of the 17 participants indicated their adoptive child was biracial or an ethnicity other than White. Five of the participants believed their lack of biological ties were apparent and that others would be able to tell they are an adoptive family by looking at them. Table 1.1 depicts the races or ethnicities of the children adopted by the participants in this study.

Table 1.1

Ethnicity of Children	# Adoptive Families
White	7
African American	1
Hispanic	2
Asian	1
Biracial Ethnicity	
White/African American	2
White/Hispanic	3
White/Arabic	1
Total # of families	17

Of the 17 participants, 10 indicated they experienced infertility issues, miscarriage, or trouble getting pregnant naturally before beginning the adoption process. Eight participants indicated they had some relationship with the birth parent(s) of their adoptive child, specifically the birth mother; nine participants had no relationship or contact with the birth parents.

Analysis

The unit of analysis for this research was the adoptive family as a unit. Data was collected using the information gathered from their interviews. Recordings of the interviews were transcribed and used for data analysis. The names of the participants were changed to pseudonyms in order to protect their privacy. Once collected, the data was sorted and analyzed through open coding (Charmaz, 2000). The information was categorized and coded through analytic induction into related themes that developed through the use of specific phrases or similar experiences of the participants. These

categories were used to make comparisons with other data and as reference points for exploration during subsequent interviews. The data collection and analysis for this study followed a cyclical process of constant comparison (Charmaz, 2006). These comparisons were made throughout the process between the interviews as they were transcribed. Through these constant comparisons and analyses, analytic categories were formed that fit the data and a theoretical interpretation was developed (Charmaz, 2006). As similar experiences were discovered, they were further explored in subsequent data collection. Any gaps identified during data collection and analysis were addressed in the interviews that followed and through the literature. Data were collected until a point where common themes emerged.

Information related to stigma, stereotypes, and interactions with others was extracted from the transcribed interviews through the coding process. Initial coding took place by the researcher going line-by-line through the data creating in vivo codes from the participants own words, then creating focused codes through an analysis of several lines or paragraphs about one topic as a whole. Memo-writing took place throughout the coding process and initial analysis as records of links that began to develop between the different experiences of adoptive parents. Information from the interviews with similar experiences and meanings were grouped together under their respective analytic code using Microsoft OneNote. These codes and memos were used to adapt the interview guide shaping questions as needed for subsequent interviews (Charmaz, 2006).

Codes similar to each other were grouped into several abstract categories for further analysis: REOCCURRING QUESTIONS, RESPONSES, MYTH OF SAINTHOOD, COSTS AND CORRUPTION, RESPONSIBILITY TO BIRTH

PARENTS, CALCULATED RISK, and UNIQUE TO DIVERSE FAMILIES. The meaning of these codes formed into analytic categories, which were assessed to establish connectivity between these topics and develop a theoretical interpretation exploring the relationships between the experiences of adoptive parents living in the United States. A core category labeled CULTURAL MISUNDERSTANDING was developed from multiple comparisons between reappearing codes throughout the interviews. A grounded theory was fostered offering an explanation of what occurs during interactions with adoptive parents, how adoptive parents react in these interactions, and how adoptive parents feel about these interactions.

RESULTS

This study sought to understand the interactions adoptive parents have with others in society, to uncover ways in which adoptive parents are experiencing stigma by society, and to examine common reactions to these interactions by adoptive parents. Through this research, it has become clear that adoptive parents do experience some level of stigmatization but it is both expressed differently by society than in the past and felt differently by adoptive parents than it has been before. Whereas adoptive parents of the past have identified as being stigmatized and had experienced cases when they were treated differently, the adoptive parents of this study did not describe feeling stigmatized or being discriminated against in those same ways. While the adoptive parents of this study said that they for the most part did not experience instances of outright stigmatization or discrimination, they did acknowledge that there are stereotypes and stigmatizing beliefs held about adoption that still exist. They all attested to frequently receiving questions about their adoption from others including family, friends, coworkers, and strangers. The negative beliefs concerning adoption seem to be imposed upon adoptive parents indirectly through comments or questions made about their family or their adoption story.

Although the adoptive parents in this study received a fair amount of questions about their adoption, they did not always see these questions as being stigmatizing or

stereotyping. In general, the questions adoptive parents received, though indicative of a lack of knowledge about the realities of adoption, were not always necessarily seen as being negative. The adoptive parents saw these interactions as more bothersome or frustrating at times, but mostly they felt the comments made to them or questions asked of them stemmed from a place of curiosity about adoption. The adoptive parents interviewed attributed the many questions to people just being curious and a lack of anyone close who has adopted who could help them learn about it.

When adoptive families had conversations with others where their adoption was brought up, there were four main themes that arose in their interactions, as follows:

- I. Details concerning the birth parents desired,
- II. Questions regarding the financial aspects of adoption and foster care,
- III. Comments made describing the adoptive parent as a saint, and
- IV. Reservations expressed about the validity of the adoptive relationship

These four main topics are indicative of hesitation toward the birth parents and the situation surrounding the child being placed for adoption, suspicion of the financial aspects associated with adoption and potential corruption in the process, misgivings about the motives behind adoption, and apprehension toward the strength of the relationship between adoptive parent and adoptive child.

In response to these four main themes, the first reaction by adoptive parents was to attempt to educate others whenever possible. It was important for the adoptive parents to be conscious of their children in these interactions, answering any questions they received in a way that corresponded with how they talked about the adoption with their

children. They were mindful of children's listening ears and managed their responses based on what they wanted their children to hear. The adoptive parents made what the children were hearing about their adoption the priority in the scenario.

I. Details Concerning the Birth Parents Desired

Adoptive parents were frequently asked about their adoptive child's story and the situation surrounding the child being placed for adoption or in foster care. Questions specifically centered on the details of the birth mother. They also wanted to know what the circumstances were that led up to the child being placed for adoption. A majority of the adoptive parents in this study, when prompted to speak about the birth parents, worked to describe them in a positive light. Chelsea is a mother of one son she and her husband adopted from the United States. Chelsea said, "I don't want people thinking of [the birth mother] as just some person who didn't care about [her child] and gave him up, and they have a tendency to assume that." Hannah, a mother of one son and one daughter with Down syndrome she and her husband had biologically and a son with Down syndrome they adopted from the United States, shared how she felt about some of the comments she has gotten about her son's birth mother: "I think sometimes the way people ask about the birth mom is not always a positive thing - like did she have to or did she want to give him away? I don't think those are very positive." Kelsey, a mother of one daughter she and her husband adopted from the United States, also talked about how she perceived some of the language people used to ask questions about her daughter's birth mother to be problematic. "They want to know why [the birth mother] gave her up, which drives me absolutely nuts! That phrasing and language, it's like she donated her

shoes to goodwill. I can't stand that and so I will usually try to gently correct people and explain." There was a tendency for others to use language with a negative connotation when asking about the birth parents, especially the birth mother.

Many of the adoptive parents felt like the birth parents were generally misunderstood by people not intimately familiar with adoption. They thought others often made assumptions about the birth parents' situations, made judgments of the birth parents' choices, and though the birth parents did not care about their children. Of the adoption triad, it appears the birth parents receive the least amount of respect by the outside world. Because of this, many adoptive parents took it upon themselves to defend the birth parents to others when negative things were said about them. Linda, a mother of two sons she and her partner adopted from Guatemala, felt very strongly about some of the negative assumptions people tended to make about birth mothers and how people have no right to judge the actions of others:

"Some of the statements I've heard – I was like wow, that's really arrogant for us to sit in our privilege and assume we know what was going through a birth mom's mind and to take that power away from her; she made a very difficult decision and we're going to sit back and judge that? I don't think that's okay."

Hannah talked about instances where people have assumed their birth mother placed her child for adoption because of his disability. "I think that's one of the most inappropriate questions – 'Did she give him up for adoption because he had Down syndrome?' That's the judgment most people want to make on her." Kelsey said, "People assume that it's easy for the birth mother to have someone else raise their child and that is just beyond comprehension for me, that you could ever think that could be easy." These ways of thinking about the birth mother were common responses heard from others by the adoptive parents.

It was important for the adoptive parents that others show respect for the birth parents and develop an understanding of what they might have gone through. Adoptive parents felt a responsibility to the birth mother to portray her positively and realistically to others in order to help people understand them and to be less fearful and judgmental of them. A few adoptive mothers even mentioned being more offended when people made judgments about the birth mother than when a comment was made about them.

According to Kelsey, the worst comment she could receive from others was that their birth mother did not care about her child. She said that type of comment bothered her even more so than comments about the birth mother being her daughter's "real mother." Linda said she also found herself defending the birth mother more than herself. "I get defensive for a woman I don't even know. It's like – You don't know her and that's really offensive to say!" Chelsea recalled a time when someone asked her if she had to deal with the birth mom a lot. Her response to them was, "We're not dealing with the birth mother. She's a wonderful person and she's given us the best gift and she's nobody to be dealt with; she's a great person and we're so thankful to have her." A defense of the birth mothers was common among a significant portion of the parents in this study, especially among adoptive mothers. By standing up to these negative stereotypes, the adoptive parents are resisting these stigmas and correcting assumptions society tends to make concerning the birth parents. Such efforts are made in hopes of changing people's views and educating others on how they would like birth parents to be seen.

While others tended to assume birth parents were bad people, adoptive parents generally described birth parents as people who have made some bad choices, were not ready to be parents, or were not able to provide everything for their children. They

refrained from speaking in a negative way about the birth parents, especially in front of their children, and typically spoke of them from an empathetic position, both to others and to their own children. Sally, a mother of one son and one daughter she and her partner adopted from foster care, started telling her kids from a young age, “Your birth mom loved you and that’s why she gave you to us; she wanted you to have two parents and she wanted you to have stability and all the things she wasn’t able to give you because she was very sick.” When his sons asked about their birth mother, Matthew, a father of two sons he and his partner adopted from foster care, told them, “Your mom couldn’t take care of you so we promised the judge that we would take care of you for the rest of your lives.” Despite any mistakes the birth mother had made and the adoptive parent’s opinion of these choices, they always chose to frame the birth mother in a positive and understanding way when speaking to or in front of their children. By discussing the birth parents with their children positively, adoptive parents may be attempting to manage the stigma surrounding adoption for them.

Tammy, a mother of one daughter she and her husband adopted from the United States and a son they had biologically, recalled making a promise to their birth mother the only time they met with her. She told her, “Regardless of your life choices, we would never speak poorly of you because you chose life for your baby and you could have aborted her; you are the one who made us parents and regardless of anything, we would never talk poorly of you.” When Tammy spoke about the birth mother to their daughter, she did so in a positive manner for her child. When talking about the birth mother, adoptive parents expressed that they were grateful for the birth parents because they were the reason they became parents. Annie, a single-mother of a daughter adopted from

Kazakhstan, said, “Every time we speak about them, I always reassure [my daughter] how grateful I am.” Kelsey, who has an open adoption and sees their birth mother several times a year, described their birth mother as being a good person who made the most impossible choice ever. Kelsey expressed that she and her family felt very fortunate to have the birth mother in their lives. Despite the type of relationship the adoptive parents established with the birth mother, there was a clear trend of representing her in a positive way to others in order to help others understand their situation and to their children.

Sometimes people’s comments or questions about the birth parents were perceived as degrading or ignorant, which triggered an immediate defense from some of the adoptive parents in the study. The adoptive parents felt the need to correct people when others spoke of the birth parents in a negative manner and they felt like they should speak up for the birth parents that were not able to defend themselves in the interaction. Kelsey said, “I actually do not allow any disparaging comments about [the birth mother] and have cut people off in mid-conversation because of them.” Regardless of their own opinions of the birth mother’s actions that led up to the adoption or where the relationship with the birth parents stood, the adoptive parents majorly tried to frame the birth parents in the most positive and realistic way they could. By doing this, adoptive parents are engaging in normalization stigma management, speaking of the birth parents positively and explaining to others that they are normal people, not the villains they are made out to be by society.

It is clear that the adoptive parents went to great effort to speak positively of the birth parents, especially the birth mothers, in their interactions with others. While this was true

for a majority of the participants, it is important to acknowledge this was not true for all in this study. A few had little to no interaction with the birth parents and some, because of the birth parents' actions while parenting the child, did not put in the same effort as other adoptive parents to defend the birth mother to others or speak of her in such an unwaveringly positive manner. This was mostly seen with adoptive parents of children adopted from foster care who had experienced trauma prior to their adoption as a result of their birth parents. For these parents, it was not the placement of the child for adoption that caused adoptive parents to view the birth parents in a more negative way, but the abuse or neglect the child experienced which led to the state terminating parental rights that contributed to the stigmatized status.

Still, it is worth noting that none of the adoptive parents of this study shared solely negative opinions about the birth parents. Those who were not wholly positive or defensive of the birth parents were typically those adoptive parents who had a troublesome relationship with the birth parents or had birth parents with a history of abuse, drug use, or criminal behavior. In those cases, adoptive parents would mostly acknowledge the birth parents were not ready to be parents or had issues of their own that prevented them from being good parents, and would continue to speak of the birth parents in a positive manner to the children.

Adoptive parents acknowledged that a strong stigma does exist against birth mothers and in an effort to resist that stigma, chose to speak up for them. They fought against the assumptions people make about birth parents not caring or loving the children with details of their own experiences in hopes of eradicating the many negative stereotypes associated with that status. The first reaction by many of the adoptive mothers in this

study was to defend the birth mother in some way when a negative comment was made about them, combating the deviance that has come to be associated with placing or losing a child to adoption. Adoptive parents in this study also raised an issue with the language used by people to talk about the birth parents. They sought to redefine the cultural view of being a birth parent by helping others to understand that birth parents should not always be thought of in a negative way or as bad people. Often, adoptive parents framed the birth parents as good people who had made some bad decisions or experienced difficulties that contributed to the surrender of their child. For those who did not have a firmly positive view of the birth parents of their child, less effort was made to jump to the defense of the birth parent. This may be because although they do not view placing a child for adoption negatively, they still view the actions of the birth parents that resulted in trauma for the child in a negative way.

II. Questions Regarding the Financial Aspects of Adoption

Another common topic amongst interactions with adoptive parents that emerged from the data were conversations about the financial aspects associated with foster care and adoption. These types of interactions focused on cost had two different interpretations. The first were questions that developed from pure curiosity or a wish to learn more about adoption as an option for their family. The second type were interpreted to be more offensive according to the adoptive parents, with comments about buying children or the money being received from foster care that insinuated corruption. Linda said the most offensive thing someone has said to her was, “How much did they cost?” in front of her children. Helen, a mother to one son she and her husband had

biologically and a daughter they adopted from Guatemala, talked about also being offended by a similar comment made to her. “They said something to me about going down there, that I had the right idea...instead of having a baby, I just went down there and bought a baby.” These comments represent a lack of understanding on the language appropriate to use to discuss adoption and may also be indicative of a negative stance on the validity of adoption. These comments were perceived as negative by adoptive parents because they indicated the child was purchased rather than adopted, equating their adoption process to the trafficking of children.

Matthew talked a great deal about interactions he had with a co-worker who constantly made comments about the finances associated with foster care Matthew found offensive. “[The coworker] would say things like...because we had bought a new car shortly after adopting the boys, and he said, ‘Oh, you’ll use that foster care money to pay for that new car,’ or ‘You don’t have to pay a mortgage because the state pays it for you.’” Another parent, Cate, a mother of two sons and one daughter she and her partner adopted from foster care, spoke about a similar experience to Matthew about comments made to them about foster care money. Cate said:

“I’ve had people say – Well, you get money for them. It’s like, you know what, when [my son] was acting out, all the money in the world would not have made a difference...actually my good friend who is a therapist said – You get money for them, you know. It’s like – and?”

These types of comments reduce adoption to something more like a business transaction rather than a viable route to create a family. Comments on foster care money make it seem like these adoptive parents are awarded financial compensation for dealing with any family issue they may be going through and imply that it is unfair they receive money to aide in caring for their children. They reduce adoption to a simple exchange of money

for children, and then label children as having a monetary value. A reduction in identity and a subsequent devaluation of that entity are indicative of stigmatization at work.

It is also important to note that these perceptions of foster care stipends received by parents after the adoption takes place are unrealistic and inaccurate. When comparing basic foster care rates for children adopted from foster care to the estimated cost of caring for a child each year, many states fall short of providing a stipend that covers even half the equivalent of caring for a child each year. The amount received differs by state and the medical or therapeutic needs of the child. Nebraska, Missouri, and Ohio have the lowest daily basic rates in the country at \$8.09, \$9.07, and \$10.00 per day respectively (DeVooght, Child Trends & Blazey, 2013). This means at the very minimum, foster parents are receiving around \$3,000 per year to pay for the care of their child. Foster parents of children requiring the highest level of care received a daily rate of \$115.00 in Kansas, \$67.32 in Indiana, and \$53.53 in New Jersey; the three highest states in the country (DeVooght, Child Trends & Blazey, 2013). Estimated costs for caring for a child including housing, food, clothing, and transportation, ranged from \$21.44 to \$30.41 per day depending on the age of the child and the geographic region (DeVooght, Child Trend & Blazey, 2013). This means for just the basic necessities, it was estimated that it would cost \$9,000 to \$10,000 to care for a child each year. The foster care stipends for the lowest rates in the U.S. provide just one-third of the cost of caring for a child. From this, it is apparent that no significant financial benefit exists from foster care, despite the belief many have that foster parents are doing it for the money.

When people made comments about the money received from foster care, Matthew explained to them why they received that assistance and how it helped the child:

“I tell them that we’re not profiting from this by any means. Does it give us an advantage in dealing with some issues? Yes. In some cases, foster kids have dealt with a whole lot of crap that they had to have assistance getting over and that sometimes costs lots of money in terms of counseling and additional medical expenses. It’s not about the money at all. I would have still adopted the kids with getting no money. It’s not about the money whatsoever.”

Neal also was open when it came to the process and finances associated with foster care:

“If someone ever does question whether or not the type of adoption that we’ve been a part of...I’m not going to say it’s an easy process. They give the families so many opportunities to work their case plan and so many opportunities to make things right so by the time it actually gets to the point of adoption, [...] either the family doesn’t want the kid or they just never are going to be capable of taking care of the child. And I think it’s very easy to communicate that to somebody, especially with the experiences that we’ve been through.

Sometimes Brittany received comments from other people about their adoption from foster care expressing that they thought it was unaffordable:

“They’ll say, ‘Oh, I could never afford that.’ And I’ll say – well, through the state, it’s mostly free. They home study is free. There is money to care for the child’s daily needs while they’re in care and if they’re over two, they get Medicaid until they’re 18, and then you get a stipend to help cover your adoption expenses. And any year, if there is something that comes up, you can renegotiate a rate through the state to try and get them the care that they need.”

Explaining the realities of the finances of foster care help to dispel myths about adoption being too expensive for a family to consider and also helps people understand what the foster money provides. Cate said she also liked to talk with people about the finances associated with adoption and foster care to inspire others to think about it as an option for their family:

“I share because I want people to know there is financial help. Part of my mission is to get more kids out of foster care so I have said – they get college tuition paid for, you get medical care for them until they’re 18, and you get a subsidy. I try to present it in a positive way so it would encourage more people to do it.”

Janice said she did not get questions about the costs or money associated with foster care often, but when she did, she was open about it and encouraged people to look into it:

“I’m more than happy to tell them. In Washington state, if you adopt from foster care, it costs you nothing. The state will pay for everything. They will continue to pitch in where they can, whether it’s medical insurance or a stipend or college education, whatever. Obviously there are stipulations to it. It’s not life on easy street. [...] But I’m more than happy to tell people – it doesn’t cost you anything so go do it!”

Many of the parents that adopted from foster care talked about using these types of interactions not only to educate people on the realities of foster care and to dispel myths of making a living off foster care, but also to recruit others to consider foster care adoption for themselves.

People also have the opinion that the finances associated with international adoption are corrupt and exploitative. When parents who adopted internationally get questions about their process, the questions often focus on the cost, presumed to be outrageous, and the validity of the process. When Annie talked with others about the finances associated with her international adoption from Kazakhstan, she explained that the costs were both reasonable and explained well to her:

“It costs less than a car. This is a kid and it’s less than a car. Even with my extra added expenses of getting stuck [...] it was less than a car. They were really clear in Kazakhstan where your money was going. They even showed you. When we gave our money to the orphanage, we went with them and bought washing machines. I thought Kazakhstan was a beautiful experience.”

When June adopted from the Ukraine, they fundraised to help pay for the costs. When people asked her about how they could afford to do international adoption, she was honest with them about how her family paid for it:

“People ask about it and about how we did it. We tell them that we raised money. We did a laptop giveaway. Trolls did get on there and they did say things on there, nasty things like – we’re just buying kids and ‘If you’re going to buy a kid, use your own money. Don’t beg for money to buy your kid.’ That kind of stuff behind the keyboard.”

Helen acknowledged that corruption does exist within international adoption but explained to people that was not their intent and that they felt like there was no corruption with their adoption from Guatemala. Helen said:

“I’m not going to deny that there’s corruption in it because there is. Being an adoptive parent with international adoption, I’m even more aware of it than most people but my intentions were not that. We went into it wanting to welcome somebody who needed a family into ours and there was nothing sinister in our intentions. I hope there was no corruption in her adoption. There didn’t appear to be. We do have a picture of her with her birth mother that they take when they do DNA testing in Guatemala.”

Linda also talked about the possibility of corruption with international adoption that people asked questions about. She said:

“I was in a store one day and somebody was going on and on about how there are corrupt things going on in the world and you can point to any tragedy and find corruption. [...] At least in our own story, we chose an agency that seemed ethical and seemed to be doing it for the right reasons, not for profit. We are in touch with both birth moms so we know...it’s such a gift to be able to tell my children in the words of their birth mother why she made an adoption plan. I don’t have to make that up.”

Explaining to people that not every international adoption is corrupt and that there are ways to verify the situation with the agency helps others to understand that not all international adoptions have a negative intent.

The finances behind adoption and foster care are realities of the processes. However, adoptive parents generally did not like to talk about those aspects unless it was going to educate people, dispel any myths of the costs, or help someone who was considering adoption for themselves. When talking with her about the finances

associated with adoption, Chelsea said, “I don’t think it’s nice to characterize adoption as buying and selling children. I did not buy my son but I had to spend a lot of money to have him join our family...I don’t like to talk about that though, right?” Answering questions about the costs associated with adoption does offer the adoptive parent a way to educate others on the facts of adoption and possibly convince others to consider adoption. However, these questions about how much the process costs and having comments constantly made about how unfair the money can be creates difference in the minds of adoptive parents, devaluing their method of family formation and making it seem unnatural or dirty. Adoptive parents deflect these comments about corruption by redirecting the interaction towards education and explanations of the finances. When adoptive parents take the time to explain the costs to others and give examples of how foster care money is used or international adoption corruption is addressed, they are managing these stigmas through normalization. They are resisting these stereotypes of the finances associated with adoption by educating others and re-defining the money associated with adoption costs.

III. Comments Made Describing the Adoptive Parent as a Saint

Another common theme in the comments made to adoptive parents in this study are statements that described them as being saints for adopting children seen as being in need. Though these statements had no negative connotation, they also did not represent the motives of all adoptive parents, which indicates that a general misunderstanding of adoption exists in American culture. Some of the adoptive parents in this study described feeling a calling to adopt and others decided to foster and adopt because of their

awareness of the need in their community and throughout the world. Still, a majority of the participants said statements such as these made them uncomfortable. For many, being seen as a saint or “saving a child” did not play a role in their decision to adopt.

Several of the adoptive mothers shared similar experiences of others making them out to be martyrs for creating a family through adoption. Chelsea said:

“I’ve had people extol the virtues of [my husband] and I for choosing to adopt and how amazing we are because of that. Well, I don’t really know that I’m that amazing! I’m not out to save the world by adopting babies; I’m out to start a family and have a child to love, so I don’t really like that exactly because that’s not what I see us as having done and I think that’s sometimes how people think about adoption, which is not a very realistic perspective.”

When asked about these types of comments made, Sally said:

“They say things like, ‘I think that’s awesome that you did that,’ and I’m like – did what, got the state to give me a couple of kids? That wasn’t a big deal! They had lots of them [...] I really just saw it as another way of becoming a parent and starting a family. I was totally selfish about it. I’m not trying to be noble and give these kids a home or anything. I was just trying to have children. That’s kind of how people perceive it though – that I’m this big, noble character. No, not really.”

This can be a difficult concept for some adoptive parents to talk about because while others see them as being noble or as saints, they see themselves as just people who wanted children and not at all like saviors. Kelsey said, “I understand that they’re trying to connect but they still perceive it as an altruistic act and ultimately, adding a child to your home is never altruistic [...] I wanted to be a mom and was not looking to save a child.”

This element of martyrdom was exceptionally strong in the case of parents who adopted children with special needs. According to Hannah, “Everyone wants to figure out how we got two kids with Down syndrome. They’re almost trying to decide if they feel sorry for me or if they want to make me into a saint, so I hate it because those are

really my only two options.” June is a mother of one biological daughter and two biological sons, one of which has Down syndrome, and a son with Down syndrome she and her husband adopted from the Ukraine. June talked about how these types of comments made her feel as a parent and how difficult it was to help people realize their perception is not accurate. “We feel uncomfortable when they start saying things like – ‘It’s such a wonderful thing, you have a seat in heaven,’ and it’s like –that’s not why we did it. We didn’t go over there to save a kid. That’s hard to convey to people and it makes us feel uncomfortable.” In these cases, the parents’ adoptive status intersected with their status of being a special needs family, increasing the cultural perception of them being saints for choosing have a special needs child. Whereas being an adoptive parent is generally a negatively stigmatized identity in the United States, being an adoptive parent of a child with special needs is elevated to the level of martyrdom by society.

When these comments are made in front of the children, they can be even more problematic. Jennifer, a mother of two sons she and her husband adopted from the United States, talked about how these types of statements, though they typically do not intend to offend, can send a message to her children that she does not want to influence them:

“It drives me crazy when people say, sort of ‘The adoptive parent as the savior’ or ‘Those boys are so lucky.’ I don’t think that they’re trying to be hurtful but it’s just like – these kids need saving. That makes me very uncomfortable and it’s not a message I want the boys to hear at all!”

Here, it can be seen that adoptive parents thought about how these comments may be interpreted if heard by their children. This is another effort made by the adoptive parents

to manage or protect their children from the cultural assumptions and stigmas associated with adoption.

It is true that some adoptive parents sought out adoption because they were aware of a need or felt called to do so. In those cases, these types of comments were less jarring, but still seemed to be an uncomfortable situation in which to be. These types of comments actually place a higher status on adoptive parents, but are unrealistic and inaccurate perceptions of the motives of individuals choosing to adopt, therefore showing that many people are still not adequately informed about the realities of adoption. In reaction to these types of comments, adoptive parents were often left unsure how to respond. Adoptive parents tried to dispel these perceptions by describing their actions as more selfless than they were selfish, explaining that they adoptive because they desired to have children. There was no clear outward resistance to these assumptions made by adoptive parents despite them feeling uncomfortable when these comments were made. Because this assumption people made was more positive in reference to them instead of negative like a majority of the other comments adoptive parents received, adoptive parents may have chosen not to address these statements with the same vigor to educate, despite their unrealistic notions.

IV. Reservations Expressed about the Validity of the Adoptive Relationship

If they are not asking about the birth parents or the cost, some people expressed the reservations they had about adoption or made uninformed comments about adoption to the adoptive parents. The most common reservations expressed were about the ability to love or bond with the child, people being fearful the child was damaged in some way,

that the process was risky for the parents, or if the adoptive parents were also going to try to have “their own” biological child. These comments were perceived as negative by the adoptive parents because they classified their adoptive family as being questionable, weak, and as second best. Some adoptive parents in this study had comments made to them or overheard comments made concerning the ability of a non-biological mother to love and bond with a child as much as a biological mother could. Sally said, “I’ve talked to a lot of people and they’re like ‘Oh, I don’t know if I could love a child as much as I love my own.’ How do you know?” Annie talked about a time she was at a baby shower and overheard a woman talking about the potential inability to bond with a child. “I heard her telling [someone at the party] ‘I just don’t know how they’ll bond; how do you bond with someone who’s already six months old?’” This comment implies that bonding can only take place from birth or before.

Chelsea talked about a comment made while in a group of people that concerned love and care for a child that was not biologically related to them, but was not directed toward her adoptive family. “She made some comment about it being absolutely impossible for that person to care for the child as deeply as the natural mom would.” The woman making the comment, upon realizing what she had said could be offensive to Chelsea, later apologized. However, her way of thinking – that a non-biological mother could never care for a child as much as the biological mother, is applicable to adoption and represents how she would feel about an adoptive mother’s ability to love and care for a child. These types of negative comments indicate that society views adoptive motherhood and the relationship between adoptive mother and child to be lacking or less authentic compared to a biological relationship.

Adoptive parents also received comments about adoptive children being problematic or damaged, which represented suspicion toward adoptive children due to their unsavory or unknown backgrounds. Matthew said, “People would make a passing comment like ‘don’t get crazy kids’ or something like that, and I’ve had a few friends who were like ‘Are you going to get white kids or are you going to get, you know, whatever,’ kind of that sort of thing.” Now that her children are older, Janice, a single-mother of a son and a daughter she adopted from foster care, said she gets questioned about how their past before the adoption affected them. “I think they’re kind of now, because [the kids] are older, they’re now moving into getting to the part where people ask ‘Okay, what’s their problem, what’s their damage because of this?’” Others made negative assumptions that children who have been placed for adoption or were coming from foster care have problems or were unwanted labeling them as less desirable. In response to these comments in an effort to deflect these assumptions, the adoptive parents in this study talked about how a person can never be sure how a child will turn out or if they will have an issue arise, no matter if they joined the family through a pregnancy or through an adoption. According to Katherine, a mother of one son with Down syndrome she and her partner adopted from the United States, “Everyone is like, ‘You don’t know what kind of medical history is there.’ But what I say to that is – You never know how your own children are going to be. You’re not guaranteed anything. They think they’re going to have their own child and that’s going to be a perfect kid.”

Because adoptive children are seen to be more of a risk due to the unknowns, people assume a biological child is still preferred by families. This mindset paves the way for people to ask adoptive parents about their desires to enlarge their family or have

biological children. Neal, a father of one son and three daughters he and his wife adopted from foster care and two daughters they are fostering to adopt, said, “We get asked all the time, ‘Are you all ever going to have any of your own?’” Tammy believed these types of questions or comments stemmed from an ignorance or lack of knowledge of adoption. “It’s just I think out of ignorance, like ‘Oh, are you ever going to have a baby of your own or do you want a baby of your own?’ And I’m like – Well, she is my own!” The language used to ask these types of questions labeling adoptive children as something other than “their own” shows that people are hesitant to refer to an adoptive family as an actual family that is bonded and permanent. According to Berger and Luckmann, language used in during interactions conveys shared meaning and affects the experiences of the people involved. The language being used here conveys that children that are adopted are not “your own,” and that you can only have “your own” children if you did so biologically. Adoptive parents challenge these assumptions when they respond correcting the language people use. Responding with saying “My adoptive daughter is my own child” is an attempt to refine the meaning of “your own child,” which reshapes reality. Though adoptive parents seemed to know that the person meant by their question, they still chose to correct the language people used in hopes of educating them not only on the proper language to use when talking about adoptive families but also how adoptive families view their children. This is a subtle way of managing the stigma that is conveyed in the question, “Are you ever going to have your own child,” and an everyday act of resistance that resists the negative assumption presented.

People also expressed reservations about keeping the adoptive children when the parents had a biological child or the child became a lot to handle. Brittany, a mother of

two daughters and two sons she and her husband had biologically, a daughter they adopted from foster care, and a daughter they are fostering to adopt, said:

“When I was pregnant with the twins, we were asked by several people, ‘Since you’re having your own, are you going to keep [their foster-adoptive daughter]? I’m like – well [she] is my own too, so yes, I’m going to keep her for as long as she needs us.”

Again, in her response, the adoptive parent is challenging the language used and the assumption behind the language that her foster-adoptive child is not her own. Cate, who also has a biological daughter significantly older than her adoptive children, often has conversations where her daughter has reservations about the children because of the stress they place on Cate:

“I was so incredibly stressed out and she saw that and worried for me. She’ll say ‘Why don’t you just leave them, mom?’ And I’ll say – they’re my children! She just does not get that at all. To her, she’s my child and they are just two orphans we took in that we should give back now.”

A suspicion of the validity of the parent-child relationship exists within these comments, as if it is a temporary relationship until it gets to be too much or something presumed to be better comes along.

These kinds of interactions can also be problematic and hurtful for adoptive parents who have dealt with different levels of infertility or did not desire to become pregnant. People make the assumption that to become a parent, everyone tries and prefers the biological route first. They feel free to ask people if they are trying to get pregnant or if they experienced infertility, which are two intimately personal topics. Brittany said she has been asked on more than one occasion when she is out with her six children if she is going to have any more. She said, “I was taken aback when people started asking me if I was going to have anymore. ‘So are you going to have anymore now?’ It just seemed like

a kind of personal question. I just say – I’m not planning on it but what about you, are you done?” She said once she does that, people realize how personal the question they just asked was for her. By deflecting this question by turning it around on the individual, Brittany engaged in an act of resistance showing them how personal their question was and how it felt to be asked about their plans for reproduction. Chelsea thought these questions were not only personal, but could also be hurtful because they brought up a subject that is very emotionally charged:

“[Their comments] were hurtful because I don’t want to talk about how I can’t get pregnant with you! Particularly hurtful are the ‘When are you going to have a child, you need to get going because you’re not any younger’ comments. Thank you very much, I’m well aware. Shut up!”

Deflection typically occurs when an individual refocuses the interaction to another subject in order to avoid the stigmatization from the current topic. Because she did not want to talk about her personal experiences with infertility with others, Chelsea did not choose to explain her situation in response to these comments. Instead, Chelsea managed the stigma attached to this statement about her running out of time to have a biological child by deflecting the comment and quickly shutting down the line of questioning.

Even family members close to the adoptive parents showed their reservations toward adoption when suggesting the adoptive parents continue to try to get pregnant, despite knowing the individuals have struggled with infertility. Kelsey recounted telling her mom that she and her husband had decided to adopt. Thinking of this interaction years later still caused her pain. “My mom was like, ‘Are you sure you don’t want to try another round of IVF?’ Even after I called her after I had just miscarried [...] and I’m at the lowest point in my life, she wants me to go back and do it again?” These types of interactions seem so innocent and matter-of-fact for the person asking the question, but

for the adoptive parent, they can be uncomfortable and even painful to talk about. Annie, who did not attempt to get pregnant, had also been asked about her ability to have biological children. “I’ve had older women say ‘Could you not have children?’ And I’m like – I don’t know. It wasn’t important to me. I know it’s important to a lot of people but it just wasn’t to me.” When answering these types of questions, people must expose a lot of personal information about their family and if they are not trying to get pregnant, give a justification as to why they have chosen not to do this.

Many people do not consider adoption as desirable option of family formation because of the risks attributed to it. When talking about those risks with others, adoptive parents in this study drew on parallels between the risks one may face with adoption and the risks one may experience with pregnancy. Sally believed that there was no greater risk with adoption than there was with a pregnancy. “I don’t think the risk is any greater when you have adopted children than it is when you have birth children. You just have more control over prenatal stuff and over the legal stuff of your birth kid.” Matthew agreed with Sally. “I think people assume there’s risk in adoption but I don’t think it’s any more or less risk than having your own kids.”

Several of the adoptive parents also talked about how risk was a factor in all decisions a person makes and that risks were a necessary part of life. This is also representative of normalizing their status, teaching people that their adoptive family is just like a biological family. Adoptive families engaged in normalization to manage these stigmas by redefining the risks associated with adoption as comparable to the risks of a pregnancy. Hannah referred to adoption as a calculated risk, just as having a biological child would have been. Jennifer said, “I think people don’t remember or don’t

think about...there's risk in everything.” While one can assume a biological mother may consider risks during pregnancy and childbirth, most people are of the idea that those things are rare or would never happen to them. Adoptive parents looked at the risks in a much different way because of the stereotypical images society has of the adoption process and how the risks are shown in the media. Many of the adoptive parents in this study experienced failed matches, complications in the process, or illnesses for the children. However, as discouraging as these instances might have been, all agreed that the end result, adopting a child, was worth the risk. According to Janice, adopting was risky but the fact that there are no guarantees on anything was a part of life:

“So it is a risk. But at the same time, you have to take risks because otherwise, you end up with nothing. Even if you ended up pregnant, there's still a risk. Just because you're pregnant doesn't mean you're coming home with a baby. That's harsh but it's the truth. You have to go out there and risk it because if you can't take the risk, you should really re-evaluate whether you want to have a kid at all. There are no guarantees on anything.”

Being willing to take a risk is part of becoming a parent, no matter if it is biologically or through adoption. While biological parents are not often faced with comments about the things that could go astray with their pregnancy, adoptive parents often get comments about the risks involved with adoption. Both Hannah and Katherine talked about comments they received from family and friends about the birth mother potentially changing her mind. Katherine said, “Even our friends said – you hear all these stories about [the birth mother] not giving them like they're supposed to and then they keep the baby.” Hannah experienced similar comments to Katherine and wanted to respond with how unfair it is for comments like that to be made to adoptive parents when they would never be suggested to biological parents:

“The whole time our family is saying – ‘Every time she sees him, it’s more likely that she’s not going to sign those papers so don’t get your heart broken.’ And I’m just like – you don’t say that to people when you’re pregnant! You don’t say – guess what, you might have a miscarriage tomorrow! You don’t say – you’re pregnant, you might have a miscarriage!”

When people make comments like this to adoptive parents, it is as if they do not see those losses in the same way. For many adoptive parents, experiencing a failed match feels like a loss of child and they often need time after those experiences to grieve and heal. Jennifer and her husband suffered a failed adoption in which the birth mother changed her mind after five days with the child. She described what they were feeling at that time in the same way a biological mother might describe experiencing a miscarriage. “We sort of just holed up like you would if you had a child who died. We just absolutely grieved.” As with other comments made toward adoptive parents or questions asked of them, people do not often consider the implications of their interactions for the adoptive parents.

When people express reservations about adoption or even make snide comments, adoptive parents still try to educate and act as sources of knowledge in hopes of righting these wrong beliefs and helping people look at adoption in a different way. If negativity persists during an interaction, adoptive parents assess the value of the relationship. Linda talked about how her response to people’s comments about adoption varied based on her relationship with that person. “It depends on how much I’m invested in the relationship with the person who’s saying it or thinks that way.” Relationships where more value is placed receive more effort to educate or receive a “pass” from the adoptive parents.

Relationships that are deemed less important or, in the case of strangers, unimportant, may be met with a more abrasive tone out of frustration or a comment made to deflect

them. Some of the adoptive parents spoke of being amused by making comments or intentionally being vague in order to leave the person confused as the adoptive parent leaves the conversation. Brittany felt like she gets questions often related to the size of her family and how it was possible for her to have six children so close in age: “People will ask, ‘Are they all yours?’ ‘Yes’ ‘Do you have two sets of twins?’ ‘Nope, just one.’ And then they’ll say, ‘Well how far apart are the two girls?’ ‘Six months.’ Then we walk off and we peek back to look at their faces.” Neal, who is fairly young himself and has a son in his teenage years, talked about how he gets questioned all the time about his family and often left them wondering. “I’ve had people who start prying, you know, the ‘Well you look awfully young, are they all *yours* yours?’ and I just say, ‘Yes, they’re all *mine* mine.” Adoptive parents, because they get questioned so often about their family, have to decide which questions are worth answering and explaining, and how much information people outside the family need to know. When adoptive parents are intentionally vague in their response to a question, they are engaging in stigma management by deflecting the question or withholding information. Many adoptive parents are open with the details of their adoption and will share the details of their experiences with others in hopes of educating others and clarifying the many misunderstandings society holds about adoption. The adoptive parents open to answering the questions engage in disclosure, a type of stigma management that involves providing information about the identity of the adoptive parent and disclosing details of their individual experiences. When the adoptive parents share personal details of their adoption stories, they are hoping to normalize adoption so people view their family just like they would any other family.

Education as a Universal Reaction

The adoptive parents in this study took the opportunity to educate others about all aspects of adoption when asked questions or when people expressed their beliefs or reservations about it in an effort to resist the negative stereotypes associated with adoption. When judging how to react to the statement, adoptive parents first operated from the position that the person did not have a malicious intent. Linda said:

“I try to think the best in people and I also don’t know what that person is walking around with, what they’re really asking. So what I usually come back with is, ‘What I think you’re asking is this’ or ‘Oh, are you interested in adoption, I can tell you more’ [...] because maybe they just said it wrong and I mess up, so maybe. Maybe they didn’t say it right and they’ve also not been taught how. [...] I really try to look at intent.”

The adoptive parents talked about allowing for people to make mistakes when asking questions or mis-speaking. They sought to be understanding if people did not use the right language to discuss adoption or were uninformed. In these interactions, adoptive parents both answered their questions to the best of their ability and tried to help them use the correct terms or language for future interactions. Chelsea said, “I choose to enter those conversations with offering some grace to the people who misspeak or are ill-informed. Usually they don’t mean it.” Hannah adopted a similar stance on the language people used to talk about her family incorrectly. “If somebody says it the wrong way, I just help them have the right words, assuming that they didn’t mean to say it the wrong way.” Helping others navigate the correct language to use to think about adoption and discuss it is a way for adoptive parents to redefine and renegotiate cultural definitions of adoption and the norms associated with family.

Educating people on adoption is a way to break down the divide that exists between adoptive families and society, and pull back the veil on something that has historically been so secretive and misunderstood. According to Brittany, “Adoption used to be so secret. I think when you make things secret and hidden, it kind of puts a negative slant on it. When you’re open about it and the positives of it and even the hardships, it becomes a more normal thing.” Jennifer thought the best route to make adoption seem more normal was to talk to others about it and be a resource for them to ask questions. “I think until more people have people they actually know and talk to, there’s still going to be barriers.” Kelsey said:

“People are always asking questions that are too personal but I’m always happy to answer them because part of what makes people so wary about adoption is that they don’t have a face to put to it [...] We actually feel quite strongly about talking about adoption and being very truthful about it; both the wonderful things and the really really awful things.”

Kelsey engaged in disclosure, offering personal details of her adoption story, and in normalization, by offering this information and making adoption relatable for others. Adoptive parents in this study strived to make adoption more personalized for others because a lot of people do not know an adoptive family to which they can ask questions. They also tried to portray adoption in the most accurate light, being open to talking about the good and the bad things that come along with adoption in order for people to develop an informed and in-depth understanding of what adoption really looks like. Part of normalization as stigma management for the stigmatized status of adoptive parent is acknowledging their difference but also showing how they are just like any other family.

The adoptive parents also worked to make adoption more relatable by drawing parallels to blended families or step-families, which are often more easy to understand

because they are more common than adoptive parents in American society. Being open and realistic about the realities of adoption and talking about the good and the bad makes adoption more normal, increases understanding of it, and gives it much needed validity. This effort on the part of the adoptive parents encourages others to learn more about adoption, change the way they think to be more accepting of it, or even consider it for themselves.

Though sometimes these questions can be perceived as incredibly personal or seem to be too frequent, most said it did not bother them to answer these questions and they were actually happy to talk about the adoption and disclose information about their family in order to educate and advocate for adoption. Tammy said, “They don’t understand the culture so I try to educate instead of, you know, getting mad or offended or irritated.” June thought it was great when people were asking questions about adoption because it was helping spread awareness of adoption. “They ask questions about the boys and I think that’s a great thing. They just see how happy we all are. That’s what we want to portray.” Jo, a single mother of a son adopted from foster care and a daughter she is fostering to adopt, felt very strongly about talking about adoption and spent her time trying to convince other people to adopt from foster care. “I’m very passionate about it. It’s pretty exciting stuff so I like to recruit people and make people understand it a little bit more.” Jennifer agreed with Jo. Jennifer said, “I’m always looking for ways to educate people about how great adoption is.” The goal of education is to help others develop a better picture of adoption in order to alleviate some of the negatives associated with it and make it a more viable option to create a family for more Americans. Hannah felt like education was the way to accomplish this. “Maybe that’ll convince them that

this is a valid option so I share in a way that they can personalize it.” Through education, these adoptive parents in this study are working toward reshaping reality and redefining society’s s of symbolic meaning of the family, which is an important step in the process of social change. In these interactions, adoptive parents are challenging the status quo and negotiating new realities constructed from the education they provide.

Answering Questions for the Children

The way adoptive parents react to these comments or questions about adoption was dependent upon the presence of their children. If children were around when the adoptive parents were asked questions, the adoptive parent made what the child was hearing their main priority. It was important to them that their child was hearing the right language for adoption being used and was getting the right message about their adoption and their family. This management of what children heard about their adoption may be a way adoptive parents attempted to mitigate the stigma for their children. According to Chelsea, “The language is really, really important. Obviously in our household it’s going to be really important so [our son] is hearing the right things.” Linda said that she always answered questions she received for her kids’ ears. “I don’t answer for the person because they’re not my priority; we’re going to part ways. My kids live with me; it’s important what they hear.”

Adoptive parents in this study talked about never wanting their children to hear that they are not “real siblings” or hear that they are adopted over and over again. Linda said, “I don’t ever want my children to hear the word brother and no in the same sentence!” Brittany shared a similar stance on this. “I don’t want to constantly point out that I have

certain children who are foster-adopted.” Tammy, like many of the adoptive parents, talked about her daughter’s adoption as part of her story but not her defining feature. “We don’t want her to hear that she’s adopted. We look at the adoption as a one-time thing. She was adopted. It was an action that we went through to bring her home and it makes her no different than [our biological son].” For families with both biological and adoptive children, parents did not want to point out any difference or differentiate between their children; to adoptive parents, they are all just “their children.” It is in situations like this where adoptive parents took the opportunity to help people find the right language to ask the question they are intending to ask and to also educate people on how adoptive families see themselves, especially when the children were present.

Most adoptive parents here talked about not wanting to discuss the adoption as much when the children are around because they did not want them to hear the wrong thing or feel like they were being talked about. Sally said she preferred to answer questions about the adoption when the kids were not around because she did not want them to feel like they were being singled out.

“I don’t want them to feel like they’re being talked about like an object or something [...] If they ask me those really personal questions and the kids are not around, I feel like it’s appropriate for me to go ahead and answer because maybe I’ll teach them something and they’ll have a better understanding that will make them more accepting.”

When giving out any information about the adoption, their family, or the birth parents to others, the adoptive parent had to be mindful of who that person was that was asking the question and if any of that information could get back to their child in a way deemed inappropriate by the adoptive parents. Janice talked about how she needed to consider who was asking the question before she could answer it the proper way, especially for

questions about her children's birth parents. "These are moms of kids that they're going to be playing with so I don't necessarily want to be dishing out information they don't really need to know and then have it come back to the kids in a way that's not appropriate." The adoptive parents of this study, just as others parents would do, chose to put their children and the information they were going to be receiving above everything else in the interaction. Adoptive parents are essentially acting as guardians of information pertaining to the adoption for their children managing what they hear about themselves, their family, and their birth parents, and from whom they receive this information.

A Diverse Population of Adoptive Parents

The diverse types of adoptive families within the population of adoptive parents in the United States have been marginalized in adoption research because so much of it has focused on adoptive families as one group instead of a group made up of many diverse subgroups. It is important to understand the experiences of these different subgroups of adoptive parents – bi-racial adoptive parents, gay and lesbian adoptive parents, single-parent adoptive parents, and adoptive parents of older children, because each group experiences stigmatization differently in their interactions. Intersectionality theory states that where the different statuses of the individual intersect is what must be considered in order to accurately understand the experiences of stigmatization felt by adoptive parents (Collins, 2000). Looking at how the master statuses of race, sexuality, age, and marital status of the parents intersect with their adoptive status shows how

complex and multidimensional the experiences of stigma are for adoptive parents in America.

When an adoption is apparent or visible within the family, it becomes easier for others to identify and label them as different. This visible difference, especially in the case of these diverse populations, opens the family up more immediately to interactions leading to questions from others about the adoption and mandating different methods of stigma management by the adoptive parents. Being a bi-racial adoptive family makes the lack of blood ties more apparent when around others. There are many things families must consider when deciding which route of adoption they will choose. When the adoptive parents in this study were considering adopting outside their race, they all talked about their thought process that went into their decision. Ten of the participants in this study identified as having adopted a child that was biracial or an ethnicity other than white. Of these ten families, a majority of them believed their family could pass as biological or their difference was not obvious. All adoptive parents in the study reported being open and honest about their adoptive status. In these cases where adoptive families believed they could conceal their adoptive status, they had to actively choose whether to reveal their difference, and that revelation differed depending on the situation.

Kelsey's daughter is part White and part Palestinian, and their difference in ethnicity is not obvious to others. Kelsey said, "We did a lot of research about interracial adoption and we had some...I don't want to say reservations because that wasn't it. We had some anxiety on if we could handle that challenge." Adoptive parents needed to take into account their ability to raise a child other than their race and if they could provide all the necessities for the child. Linda, who's race is visibly different from her Guatemalan

sons, said, “There is definitely the consideration of how my kids are going to be perceived in the world and am I able to either coach them through that or connect them with someone that can.” Jennifer, who’s racially different from her Black sons, also talked about finding good role models for her children with whom they could identify:

“I have plenty of strong White men who they love and respect but making sure that I...it’s always sort of a weird situation because it feels wrong but I’m basically saying, ‘You’re Black, can I be your friend?’ But that’s what I’m doing. You seem like a really good guy. I need you to hang out with my sons. That’s exactly what happens. I’m constantly cognizant of making sure that they are surrounded by people that are good role models for them.”

It was important for adoptive parents of children of other races in this study that they provide an environment where their children could fit in and flourish. These adoptive parents had to consider where their adoptive status intersected with their family’s racial difference in order to consider how they were going to provide a healthy and nourishing environment for their children to grow.

According to Jennifer, it was necessary not to jump to conclusions when people asked questions or made comments about the difference in their family. “Yes, your family looks different but don’t assume someone is looking or questioning or even if they ask something that takes you back, don’t assume it’s coming from a place of malice.” Some of the comments adoptive parents in this study got focused on race or the adoptive parents’ ability to adequately care for the child. Comments made toward White adoptive parents of Black children seemed to center on hair and skin care. Jennifer said:

“The daycare had a lot of predominantly African American women as their caregivers and they were very assertive to make sure that we knew how to take care of their hair and of their skin. I’m like – my kid’s hair looks great and there’s this kid over here who does not have their hair taken care of but because their parents are also Black, you’re not going to say anything to them.”

Chelsea's son is part White and part Black, and because her husband is Italian, their son passes as biological for now. Like Jennifer, she also talked about her concern for taking care of his hair properly without turning it into a big ordeal making their son feel different. "I don't want to be the White mom to a bi-racial boy who's obsessed with hair and makes it out to be this huge issue that it's not. And I don't want to be the white mom to a bi-racial boy who is totally nonchalant about the proper hair care for him." She also talked about the lack of biracial or Black people she had in her family she could use as a resource for information. "If [my husband] were Black then I would probably be thinking about these things but I'd have people to ask, including my husband, who had the experience of that ethnic group." It is apparent from this that if a person were to consider adopting a child with a different race than their own, it is necessary for them to think about the environment in which they will grow up and the accessibility of people of that same race to help the child grow.

In interactions with others, these adoptive parents often got questions about their child's race. Tammy, whose daughter is part White and part Black, talked about how Black people notice that she was biracial but White people typically did not. Tammy said, "They ask if we know what her race is [...] or they'll say 'She's mixed, isn't she?'" Annie, whose daughter was adopted from Kazakhstan and looks Asian, also talked about people asking her about the race of her child. "People at Target would stop me and want to know [her race]. 'She's so pretty, is your husband Asian?' All the Asians fight over what she is. The Pilipino's say she's Pilipino. So the Asians fight over her, they all claim her." Linda talked about how sometimes people asked questions about her son without even thinking. "One of the funniest is when somebody asked me if they spoke Spanish.

And I'm like – well, he's a baby so..." These comments do not necessarily convey a negative tone and are more representative of curiosity. Helen, whose daughter is Guatemalan, said that her husband and her daughter could pass for a biological kinship but with her, the difference was very apparent. "When she's with him, she could conceivably be his biological child. I mean she doesn't look like him but they don't always question it. But when we're together, we do get stared at a lot." Helen said her daughter started picking up on the questions she would get about her race. "When we're out in public, even when she was little, she'll make a point of calling me mom over and over again just so everyone around knows that I'm her mom. She intuitively might know that people are wondering what that relationship is." When the racial difference is apparent, these adoptive families experience comments and questions that stem from the intersection of their racially different status and their adoptive status. Being a bi-racial adoptive family makes the adoption more visible, opening the family up to more questions about their relation.

None of the adoptive parents' family or friends in this study expressed too strong of displeasure toward them adopting a child of another race. They also could not remember a time when a comment was made toward them concerning their racial difference in their family that intended on being insulting or hurtful. This may be due to the decrease in practice of "matching" children to their adoptive families. Because of the change in policy, more visibility different adoptive families are being created in America. The experiences of the adoptive parents in this study that were bi-racial may indicate that the stigma against adopting outside of one's race is lessening as adoptive families become more visible in society and more open with others.

Gay and lesbian individuals experience stereotyping, discrimination, and stigmatization as well as unfair laws and lack of legal protections as part of everyday life in America (Mallon, 2000; Human Rights Campaign, 2012). While society does seem to be becoming more open, understanding, and inclusive, cultural beliefs are slow to change. This is evident from the experiences and interactions discussed with the six adoptive parents in this study who identified as being gay or lesbian. When gay and lesbian individuals desire to start a family, there are many issues they must consider in order to become a parent. The traditional biological route of family formation is not the first option these individuals and couples consider. Because of this, there has been an increase in the number of gay and lesbian individuals adopting in America (Matthews & Cramer, 2006). However, when adoption is considered, the individual must also examine the laws their state has enacted concerning the rights of gay and lesbian individuals to adopt as well as the varying policies of different adoption agencies with which they individual may work. The adoptive parents in this study that identified as gay or lesbian adopted their children in Kentucky, Texas, Indiana, and Tennessee, some of which have legal barriers prohibiting same-sex couples to adopt. Neither Kentucky nor Texas law allows second-parent adoption for same-sex couples (the adoption of a partner's biological or adoptive child) or joint adoption for same-sex couples (the adoption of a child by two people) (Human Rights Campaign, 2015). Both Indiana and Tennessee allow joint adoption of a child by same-sex couples and have no explicit prohibition of second-parent adoption of a child by same-sex couples (Human Rights Campaign, 2015).

Linda said:

“When it was time to do adoption stuff, we had to really do research because we live in Kentucky and some places flat out would not work

with us [...] At the same time, the state was trying to pass a law saying we could not adopt in Kentucky so I was like – I don't think I can handle this with the worry of adopting a child and worrying about what might happen in the process.”

According to Matthew, who also adopted in Kentucky:

“We had to be very careful about how we worded our home-study and how we worded all the things because the judge could deny the adoption request with us being a gay family because it's illegal for two gay parents to adopt kids. I couldn't say parent number two. The forms always said mother and father, and then other people in the residence so I was always another person in the residence.”

Some of the same-sex couples had un-ideal experiences with agencies going through the process. Katherine said the agency she and her partner chose warned her from the beginning of the potential long road ahead of them. “We were told we could be waiting for years and years because some birth mothers, since they choose who the baby goes to...there's a lot of birth mothers who may not give to a same-sex family.” Sally and her partner had the same thought themselves as they were living in a Southern conservative area. “We were a gay couple living in East Tennessee. There was no way we thought anybody would ever choose us to do a private adoption.” Even though adoption was not prohibited for same-sex couples in Tennessee during the period they were looking to adopt, they did not believe they would be chosen by a birth mother as an adoptive family because of their sexuality. For this reason, they chose to adopt through the foster care system. Linda had a very negative experience with an adoption agency with whom they interviewed:

“We were told that we probably would not be paired with White kids; that we'd probably get matched with children of color or special needs. Basically she was saying we weren't desirable and neither were children of color so that's who we'd be matched with. I was like – wow! [...] It felt like the island of misfit toys. It's like *nobody wants you and nobody wants them* so, yay.”

Gay and lesbian individuals must take into account the potential barriers and hardships that may attempt to block them from creating a family both in the judicial system and in society. They must consider how their adoptive status will intersect in society with their status based on their sexual orientation and how their sexual orientation status can affect their ability to become adoptive parents.

Once gay and lesbian individuals become adoptive parents, there are additional things to be considered to guarantee their family is protected and secure in the case of an emergency. Matthew said:

“[My partner] adopted them so he is technically on the birth certificate as their father. I, however, cannot be on the birth certificate with them. [...] But we had a significant amount of legal paperwork done so I would have some of the same, well sort of the same rights as [my partner] in terms of signing permission slips at school, taking them to the doctor, or consenting to medical care; those types of things you never think about having permission to do.”

In Matthew’s case, the judge who signed off on their adoption actually was the one who suggested the legal paperwork to them:

“She invited me up and said, ‘Do you all have any parenting documents that you want me to go ahead and issue to the two of you for taking the kids together?’ And we hadn’t even thought of it until she said that [...] so she talked to us after court about getting some documentation together to get some of the paperwork to have equal-ish rights to the kids.”

At this suggestion, Matthew and his partner had paperwork created that gives Matthew power of attorney in the case of his partner’s passing. He and his partner both carry electronic copies of these documents in case something happens:

“I have copies of all of the documents just in case we’re out of town and we need to show something but I also carry those between him and I for medical reasons or whatever [...] We carry all of that with us because you never know what’s going to happen. That’s something biological parents

don't have to think about, right? [...] I'm not even considered legally a parent or guardian of them in Kentucky.”

Katherine also talked about what her and her partner arranged since joint adoption is not legal where they live in Texas:

“With it being Texas, I'm the legal mother. [My partner] is not. With that, we've had to get wills done in case something happens to me. We had to do that. [...] If something happens to me, [my partner] keeps him. She gets to keep him. He actually has her last name. Since I was the legal adoptive parent, we gave him her last name.”

She mentioned how the difference in last names has raised questions from others. “The only confusion is – I deal with him for everything and my last name is different from his and they're like, ‘Are you the mom?’ And I'm like – yeah, I'm the legal mom but he has her last name. So sometimes – not all the time, but sometimes I have to explain that.”

Sally and her partner adopted one of their children while living in Tennessee then moved to Indiana where their second foster child's adoption was finalized. Although both Indiana and Tennessee do not have laws prohibiting same-sex couples to adopt, that does not mean the process was without its flaws. Sally said:

“We were legally able to adopt [our son] in the state of Indiana and Indiana allows for co-adoption for same-sex couples. We had to go through Indiana and Tennessee fighting the fight about what was going to be and whose name was going to appear where on the Tennessee birth certificate. So I'm ‘the dad.’”

Issues can also arise once the children start school. Cate said one of the schools her children attended had more trouble dealing with the fact that the children had two moms than them being adopted. “At the school when we enrolled them, we probably had the bigger issue that we were lesbians; we had to deal with that issue first. Who cares that they're adopted? They have two moms in that school for the first time.” In this case, the school showed more concern over dealing with the sexual orientation and relationship of

the adoptive parents than the fact that they are an adoptive family. When another stigmatizing status like sexual orientation is a factor intersecting with the adoptive statuses, the sexual orientation status appears to take precedence.

For some, the apparent difference of their family was problematic, causing frustrating interactions and experiences with others. Her family's apparent difference has caused issues for Cate's family. "There were a lot of people who would not let their kids play with our kids. [...] That family would not let their kids play with our kids because of the two-mom thing. They said it – 'We just don't feel comfortable.'" She thought it was people who did not know gay and lesbian families who made judgments or assumptions. Sally's own mother thought it was crazy that she and her partner were attempting to adopt their foster daughter. "I said to my mom – 'We're hoping to be able to adopt [her],' and she said – 'That's crazy!'" Matthew said, "People will always wonder how we have two kids. And though they may not say anything, I'm sure they're curious." Annie thought adopting a child with different physical features from her would make their difference more apparent and lessen the amount of questions they received. "I thought it was important because I'm gay. When people see us out, she's either going to be with one woman or two. I thought it was important that we looked different enough to get that hurdle jumped right off the bat. For Annie, when she was deciding from where to adopt and how she wanted her family to be perceived by society, she did not want to be able to pass for a biological family. Her desire to have their difference apparent is an act of immediate disclosure. However, Annie still receives comments from others asking if her husband is Asian.

Matthew spoke of comments his family received when out in public that made incorrect assumptions about his family. Matthew said:

“Sometimes we’ll go out to eat and people will say...everything’s very heteronormative of course, but they’ll say things like, ‘Oh, left the gals at home for a boys night out, huh?’ They’ll say things like that just assuming that we’re not a family but we’ve left the wives at home to go out.”

Annie had almost an almost identical interaction as well:

“One time we all went to Siesta Key together. It was my best friend, my girlfriend, my daughter, and me. We’re all sitting there and this [man] comes walking up saying, ‘Y’all waiting on the husbands to get back? We’re just like – yeah, we’re just out shopping like the girls do. If we were smart, we’d call the gay dads and all go at the same time!’”

There is a tendency for others to make the assumption that these individuals are a part of a traditional heterosexual family if their status is not obvious or spelled out for them. When people made comments like these to the gay or lesbian parents in this study, it was typical for them not to challenge the statements. Unlike with the other interactions these adoptive parents had, the gay and lesbian adoptive parents did not take these comments as opportunities to educate others on what adoption looks like in America. Instead, they would let it go and respond as the person instigating the interaction would expect – by smiling or laughing. In these cases, it may be easier to pass as a biological family and end the interaction than it would be to explain to the person what the real situation is. It is also important to note that during these interactions, the children are present. The adoptive parents’ passive reaction or lack of challenge to the incorrect assumption may be a way to avoid talking about their difference in front of the children.

The least common type of adoptive family is the single-parent adoptive family. Of the participants in this study, three individuals indicated they adopted as single-parents. In general, their experiences as adoptive parents did not differ significantly from

the experiences of adoptive parents as a whole. The most common type of interaction single adoptive parents had with others were questions about if they were sure they wanted to do this, which was followed with comments about how busy and overwhelmed they must be. Janice's friends and family expressed reservations about her adopting as a single parent:

“People either reacted either really excited, like ‘Let me find a baby for you,’ or they were kind of like – ‘Really? You really want to do that?’ Kind of shocked that I would tie myself down that much and not just be the single, free person who runs around and does whatever. [...] ‘Why would you want to do that? Why would you sign up for sleepless nights and having to do everything yourself?’ It was kind of like – ‘Hasn't your ship sailed, aren't you beyond that?’”

Jo said she felt like she received some judgment from society because she appears to be a single mom with two kids who looked like she has a lot on her plate. “I feel like most people nowadays, especially because they see me running around...they're usually trying to help me out. They feel like I look overwhelmed all the time.” Single adoptive parents did not seem to experience any different types of stigmatization than the other adoptive parents interviewed for this study, nor did they experience any significant added levels of suspicion or apprehension toward them family as a direct result of their relationship status. It appears that single adoptive parents responded to questions or comments made about their adoption in the same way as adoptive parents who adopted with their partner or spouse. They all described themselves as being open to talking about their adoption and would educate others whenever possible about the positive aspects of adoption. The way they spoke made it seem as if the fact that they adopted as single parents never came up during their interactions with others and that it only came up when talking about their family at home with their children. Jo said she and her son talk about how their family

was different from other families all the time and she used cartoons he liked to watch to help him understand his family:

“We actually talk about it more than we don’t – in the sense that he doesn’t have a dad and we’ll talk a like about not having a dad. For him, I think that’s the biggest struggle in being different from what he sees as normal so we actually talk a lot about it. He likes Ninja Turtles so we’ll relate that back and say the Ninja Turtles aren’t with a mom and a dad – they’re being raised by Splinter, who’s a rat who obviously doesn’t even look like them and that’s their father. He loves Spiderman so we use Peter Parker. He lives with his aunt and uncle. He doesn’t have a mom and a dad and he lost his uncle so he only has his aunt now. Family is about what you make family.”

Jo used the stories of characters from children’s media to help her son understand their adoptive family and its difference from the cultural definition of a normal family. The use of media as a tool to help children understand their adoption is another example of how adoptive parents manage what the child learns about their family and their story.

The experiences of the diverse populations of adoptive parents examined in this study show how different, intersectional aspects of a person’s identity can influence their interactions with society, especially when their difference is easily discernable. Families where their difference is visible are often faced with more questions or comments made by others. It is clear that these parents have different experiences living as adoptive parents in the United States when compared to adoptive families that physically match or can pass as biological.

DISCUSSION

This study intended to uncover the ways in which adoptive parents living in the United States experienced stigma during their interactions with other people. It included an investigation into how adoptive parents managed these experiences of stigmatization and discrimination, and how the language used in these interactions to describe adoption played an important role in the meaning of family in America. In addition to this, a diverse population of adoptive parents was targeted in order to understand how stereotypes and stigmas may differ based on the individual characteristics of the family.

Culture of Misunderstanding

Adoption remains a stigmatized status in the United States. The adoptive family deviates from the standard form of biological kinship between parent and child. Because of this, adoptive families challenge the norm and necessity of a genetic component, and therefore cause society a feeling of uneasiness toward the legitimacy of adoption. This results in the stigmatization of the adoptive parent status. Society discounts the adoptive family to a second-best identity because of its lack of blood ties, and makes assumptions about adoptive parents and their stories as a whole. The stigmatization of the adoptive status is manifested in the interactions with others that represent a general ignorance of the realities of being an adoptive family.

Adoption in America is still plagued with misunderstandings and inaccurate perceptions (cultural misunderstandings) of the realities of adoption. From these misunderstandings, questions or comments develop that indicate people are still generally uninformed when it comes to the process of adoption and the day-to-day life of adoptive families, which are then expressed to adoptive families as enacted stigmas. From this lack of proper knowledge, four main themes stemmed from people's questions or comments (reoccurring questions) about adoption: details concerning the birth parents are desired (responsibility to the birth parents), questions regarding the financial aspects of adoption and foster care (costs and corruption), comments made describing the adoptive parent as a saint (myth of sainthood), and reservations expressed about the validity of the adoptive relationship (calculated risk).

When an adoptive parent experiences these interactions, there are several different processes that are at work in their minds to judge how they should react and how they can manage the stigma being expressed to them. When a comment or question is presented to the adoptive parent, they must decipher if the action intends to be offensive or comes from pure curiosity. Once intent has been established, the goal for adoptive parents is to educate the other person in the interaction in order to encourage people to be more accepting of adoption as a viable route to creating a family and make it more normal in society so adoptive parents are not always experiencing these interactions. The adoptive parents must also think about how they can answer the question to satisfy the person asking while also protecting the privacy of those involved in the adoption triad. While considering how to answer the question or respond to the comment, adoptive parents must check to see if their child is close by or can understand what is being talked about in

order to control the type of information they child is hearing about their adoption. Then, if the questions or comments persist or take a turn from neutral curiosity to a negative connotation, an evaluation of the worth of the relationship must take place for the person with which the interaction is occurring.

Reaction to and Management of Stigma

In addition to this process at work in their minds, adoptive parents must also consider how they are going to react to, resist, or manage the stigma being presented in the interaction. The main reaction of adoptive parents to these interactions is to educate others, whenever possible, about adoption. This education represents an act of resistance by the adoptive parents as they resist the cultural misunderstandings being expressed to them during these interactions. Adoptive parents believe that it is important for others in society to see adoptive families in a more accurate light compared to the past, which is why they are open to sharing their experiences and their adoption stories. This openness seeks to eradicate the myths and misconceptions concerning adoption held by society with a goal to educate and normalize adoption. Adoptive parents engaged in several stigma management strategies unique to adoptive parents that can be categorized into four main reactions: passing, deflection, disclosure, and normalization.

Passing

The act of passing as a biological family serves as a method of stigma management for the parents so they avoid stigmatizing interactions, but more importantly, it is a strategy used by the adoptive parents to manage the experience of

stigma by the children. As with most parents, the needs of the adoptive parents' children are made to be the priority in the scenario. If children are present during the interaction, parents' responses will be catered to the child's ears instead of the person asking the question. With these actions, parents control what the child learns about their adoption story. Adoptive parents will also seek to minimize the discussion of their adoption during the interaction if children can hear what is being talked about so that the children are not singled-out or made to feel different. This is especially true when adoptive parents have more than one child. Adoptive parents do not want their children hearing that they are not "real" siblings or that they are adopted, not because it is a secret, but because it labels them and can create difference in the minds of the children, just as these interactions do for the adoptive parents.

When adoptive families who can pass as a biological family do not reveal their adoptive status during an interaction, it is not because their status is a secret within the family, nor is it because they are ashamed of their status. Adoptive parents engage in passing for the sake of the children. When the children are present, adoptive parents who can pass as biological may do so because they are unsure what will be said in front of the children or how the others participating in the interaction will react. This is especially true for adoptive parents whose children are old enough to understand the interaction that is occurring. Adoptive parents let their children decide who gets to know about their adoption story and what information others receive about their adoption during these interactions. When adoptive children become old enough, the responsibility of managing these interactions and the stigma coming from them extends to them. Though passing was a possibility for a majority of the adoptive parents in this study, it was not commonly

utilized. More often, the adoptive parents engaged in some other form of stigma management in their reactions.

Deflection

Another method of stigma management used by adoptive parents in response to their interactions with others is deflection. Deflection can take many forms when being utilized by adoptive parents, and can be either passive or assertive. The passive forms of deflection are to withhold information in the interaction or to be intentionally vague when responding to a question. Adoptive parents deflect stigmatizing interactions by providing just enough information to pacify the individual asking the question, or by answering the question in a vague way to leave the individual curious about their family. Deflection most often occurs during interactions with little worth, like with strangers at the grocery store or rarely seen acquaintances. These means of deflecting are ways to avoid disclosing vast amounts of personal details about their family and their adoption.

The more assertive form of deflection takes place when the adoptive parent is frustrated with the interaction or the questions asked are viewed as too personal. Adoptive parents may shut down the line of questioning occurring or reverse the question onto the other person in the interaction. Stopping the conversation or changing the focus of the conversation can occur in response to questions about emotionally tough subjects to think about like infertility, miscarrying, or failed matches. Adoptive parents may also respond in a way meant to deflect by turning the question around to the person who asked it. By doing this, the adoptive parent is flipping the roles in the interaction in hopes of the individual realizing just how personal or out of line their question was. This

deflection helps the other person realize the discrimination and stigmatization they initiated and also does not require the adoptive parent to reveal a significant amount of personal information about their adoption.

Disclosure

Disclosure played a role in almost all interactions adoptive parents have concerning their adoption. The adoptive parents in this study identified as being open people with thick skin who are happy to talk about their stories. When conversations start about their adoption or people express comments or reservations about adoption, the adoptive parents use those interactions as opportunities to educate. In order to do this, adoptive parents must be willing to give details of their own experiences. To manage the stigma presented during these interactions, adoptive parents must offer details about their personal lives to correct assumptions and combat stereotypes surrounding adoption.

Adoptive parents act as educators using their experiences with adoption in hopes of clarifying the misunderstandings of adoption ingrained in American culture, becoming sources of knowledge for people who are unfamiliar with or ill-informed about adoption. The disclosure of the adoptive status was common with all adoptive parents in this study, despite their ability to pass for a biological family. This has important implications for social change because their willingness to be open with the details of their adoption during interactions in society leads to a normalization of adoption and a lessening of the misunderstandings and stigmatization of adoption in U.S. culture.

Normalization

The disclosure of information concerning their adoption by adoptive parents often is utilized in conjunction with the stigma management strategy of normalization. The use of these two methods of managing stigma leads to a greater acceptance of the adoptive family in society. Normalization occurs when adoptive parents talk about their family with others in ways that make them sound like every other family. Adoptive parents acknowledge their adoptive status and are open to discussing the details surrounding their adoption, but they also engage in conversations and explanations that relate their family to the norm of society negating the stigmatizing assumptions associated with the adoptive status. People assume that just because adoptive families are different, they have negative qualities. This is evident in the comments and reservations expressed in their interactions with adoptive parents previously discussed. Adoptive parents seek to normalize their adoptive status in society by providing details about their family that combat these comments and reservations, and to which biological families can relate.

Adoptive parents also seek to normalize adoption in these interactions by remaining positive and realistic in their responses. Often, the comments or reservations made to adoptive parents have a negative connotation, implying difference, invalidity, and ignorance, which are all negative assumptions. Adoptive parents countered these with positive attitudes toward being open and honest in response to the interactions, and with positive stories from their experiences. It is important for adoptive parents to convey that they were happy with their decision to adopt and would do it all over again, if given the choice. This positive outlook shows others that adoption is a valid method of family formation and dispels myths that adoptive families are problematic or struggle to bond.

When parents educate others in these interactions with their experiences and challenge the negative assumptions and stereotypical images of adoption presented, they are resisting their stigma. Educating people and providing them with realistic information about adoption from their own experiences is a powerful method of stigma management that adoptive parents use. Being both open and positive, and lifting the veil of secrecy from the adoption process through these strategies has brought about change in society concerning how it is perceived.

Challenging and Redefining Norms

Through their interactions with others, adoptive parents learn the beliefs Americans hold concerning adoption based on the language that is used and the meaning the chosen language implies. The adoptive parents in this study rejected adoption stereotypes and stigmatization communicated through the use of language. Adoption itself is a process through which ideas parenthood and kinship are re-imagined and re-invented. The reactions of adoptive parents to the cultural beliefs and assumptions as well as their challenge to the language used by others to discuss adoption are also means of re-inventing and re-defining these ideas. Through their interactions with others, adoptive parents endeavor to reconstruct the ways Americans define and view adoption.

Because of the historically unregulated and secretive past of adoption, society established patterns of thoughts and assumptions concerning adoption that perceived it to be negative and lacking. Over time, these beliefs became accepted as part of American culture. Adoption took on the role of being less valid or second-best compared to the

biological family. The language people use to describe adoption communicates cultural opinions of it, establishing a hierarchy of family formation with biological kinship at the top. Adoptive parents work against these shared assumptions about adoption by challenging their meaning and meeting them with personal experiences that counteract those beliefs.

According to Berger and Luckmann, humans construct the reality that surrounds them and attribute socially constructed meanings to objects and interactions (1966). These meanings are then communicated through the language used by individuals of that reality. In the United States, cultural opinions of the adoptive family are conveyed through language people use when talking about adoption. The phrase adoptive family has become synonymous with difference or a reaction to a failed attempt for a biological family. People often refrain from describing adoptive children as the parent's "own children" or they use the phrase "giving up the child" instead of "placing the child" for adoption when talking about the birth parents. They also question the adoptive families' validity and permanency through the comments made and reservations expressed about adoption.

The adoptive parents in this study resisted the stigmatizing language used by Americans and the way their families are categorized and stereotyped by society. Their efforts to educate as responses to stigmatizing interactions work to break down these typifications and rebuild cultural assumptions to include a more positive and realistic view of adoption. These responses can have an enduring impact on people's perceptions about adoption because their stories linger beyond the current interaction with the other person. According to Berger and Luckmann, "efforts to educate can have a lasting

impact enduring beyond the immediate interaction and affecting subsequent interactions and events” (1966). Interactions that occur on a day-to-day basis are constantly affected by individuals’ common participation in the available “stock of knowledge” used in the interaction (Berger & Luckmann, 1966). Through these interactions with other people in which they challenge the language people use and the messages the language conveys, adoptive parents are contributing to and reforming the available “stock of knowledge” possessed by society. By challenging the language people use and the assumptions they hold concerning adoption, adoptive parents are attempting to reshape reality and the dominant belief system that controls society.

Intersectional Experiences of Stigma

In addition to the typical interactions all adoptive parents experience with questions about the birth parents, finances, and validity of adoption, diverse populations may experience other stigmatizing interactions as a result of the different aspects that make up their identity. For the diverse populations of adoptive parents included in this study, their adoptive status did not serve as their only source of stigmatization from society. Their master statuses of race, sexual orientation, and marital status all played a role in their subjective experience of stigma. Intersectionality theory states that the many different statuses individuals possess intersect with one another, and it is at the intersection of those statuses that the individual’s unique experience of discrimination, or in this case stigmatization, begins. Their difference may result in additional comments or reservations expressed to them through their interactions with others.

The adoptive parents in this study experienced stigmatization directly as a result of their adoptive status. When the adoptive parent possessed another stigmatizing status within society, their experience of stigma differed from the other populations. For bi-racial adoptive families, their racial difference, especially when it was visible, intersected with their adoptive status to dictate their interactions with others. For gay and lesbian adoptive families, their adoptive status was intersected with their status based on their sexual orientation. Finally, single-adoptive parents experienced stigmatization from the intersection of their marital status and adoptive status. These individuals who experience intersectional discrimination and stigmatization do so because of their difference from the socially desired norm. In order to understand their experiences of stigma and the adoptive parents' position in society, these different stigmatized statuses must be understood together as an interlocking structure of oppression (Collins, 2000).

Bi-racial Adoptive Families

Adoptive parents who were racially different from their children experienced stigmatization at the interaction of their racial difference and adoptive status. Bi-racial adoptive families experienced additional interactions that focused on their racial difference as opposed to their adoptive status, and this may be because of the historical importance placed on race in the United States. Intersectionality theory suggests that race is a master status for individuals, which is a status that acts as a primary identifying characteristic for individuals. It was clear from their interactions with others that their bi-racial status took precedence over their adoptive status when people made comments about their difference.

Bi-racial adoptive parents often received questions asking the race of their child. Though these questions may seem harmless, they are not questions people typically ask of strangers unless they feel they have the ability or right to ask. Since Americans seem to feel comfortable asking personal questions of adoptive parents, it may be that when others see these bi-racial adoptive families, they are presuming their racial difference is a result of an adoption and therefore they have the right to ask questions about their family.

Adoptive parents of bi-racial children also received comments from others concerning their ability to properly care for children due to their cultural differences. In these interactions, people assumed that because the adoptive parents are a different ethnicity than their child, they may not know how or are not able to meet the needs of their children. In these interactions, it does not appear that their adoptive status factors into these stigmatizing comments. The ability to adequately care for and provide for a child of another race or ethnicity is something that adoptive parents consider before beginning the process.

Besides these two experiences of stigmatizing comments made in relation to their race, the experiences of the bi-racial adoptive families in this study did not differ significantly from the adoptive parents' stories as a whole. Overall, none of these families recalled experiencing any negative or hurtful comments about their adoption outside of their race. This may mean that as adoptive families are becoming more visible and their diversity is becoming more apparent, society may be becoming more accepting of their difference.

Gay and Lesbian Adoptive Families

For gay and lesbian adoptive families, their adoptive status was intersected with their status based on their sexual orientation. Their identity as a sexual minority in society intersects with their identity as a member of a minority family style in America. Like race or ethnicity, sexual orientation is also considered a master status. Because of this, the sexuality of the adoptive parents in this study was often more salient than their adoptive status in interactions with others. In addition to the normal stigmatizing interactions adoptive parents receive, gay and lesbian parents experience many different instances of discrimination and stigmatization at both an institutional and an individual level.

In some ways, the status of being gay or lesbian can affect an individual's ability to become an adoptive parent. While it is now possible for gay or lesbian individuals to adopt in every state, same-sex couples wishing to adopt together do not have that same ability (Human Rights Campaign, 2015). In states where joint adoption is prohibited by same-sex couples, parents must be careful how they word their paperwork and application for adoption as not to reveal their status. This is because legally, a judge can deny their application due to the couple's sexual orientation. This is evident of the existence of institutionalized homophobia, which are ways in which institutions and organizations in society discriminate against people on the basis of their sexual orientation. This form of oppression is unique to the experiences of gay and lesbian adoptive parents compared to all other diverse populations sampled in this study.

During the adoption process, same-sex couples pursuing the route of adoption may face discrimination or stigmatization from the adoption agencies. One of the adoptive parents of this study were told they could be waiting a long time to get chosen

for a match by a birth mother because of their sexual orientation. Another was told flat out by an adoption agency that they would be viewed as undesirable parents by birth mothers because they were a same-sex couple, and if they were to be matched with a child, it likely that the child would be with one that was considered equally undesirable by society. Once gay and lesbian couples become adoptive parents, they must also file additional legal paperwork in order to protect their family and guarantee both parents have rights to the children. In states where joint adoption is not allowed, only one of the parents can adopt the child, making them the legal parent. The other parent in the family can take steps to have some rights to the child, but they cannot be listed on the child's birth certificate as a parent. This restriction placed on gay and lesbian adoptive parents is another example of institutionalized homophobia intersecting with the adoptive status. Gay and lesbian individuals may face discrimination and oppression from the government and/or from adoption agencies during their pursuit of adoption, then after as they must take the necessary legal precautions to give both adoptive parents pseudo-equal rights to the child.

Same-sex adoptive couples may also experience stigma at the individual level. Like with adoptive parents with a racial difference status, the status based on sexual orientation took precedence over the adoptive status of the family. One of the parents in this study said the school her children attended had a bigger issue dealing with the children having two mothers than with the fact that they were adopted. Another parent talked about how children in their neighborhood were not allowed to play with their children because their parents were a same-sex couple. In these instances, these parents face strong stigmatization because of their master status based on their sexual orientation,

and their adoptive status is left as an afterthought. These adoptive parents received the same common questions and comments from people during their interactions as other adoptive in this study. However, they experienced stronger stigmatizing comments and interactions based on sexual minority status while trying to become or living as adoptive parents.

Single-Adoptive Parents

The single adoptive parents in this study experienced stereotyping and stigmatization stemming from the intersection of their marital status and their adoptive status. Compared to the experiences of the other diverse populations of adoptive parents investigated in this study, single adoptive parents seemed to face the least amount of stigma from their unique identity. One of the adoptive parents believed others in society viewed her as appearing to be overwhelmed. In the case of this perception, it was not apparent that she was an adoptive parent. The image of being overwhelmed stemmed from cultural understandings of stereotypically what it must be like to be a single-parent. Another single parent in the study said that she was asked if she was sure she wanted to become a single parent because of the significant impact it would have on her lifestyle. Again, an assumption is made from cultural beliefs about single-parenthood assuming that they have no time for themselves. Looking at these two experiences, it is apparent that how single parents are viewed in society is based stereotypical images and the fact that they came to be a single-parent through adoption was irrelevant to the stigmatization.

CONCLUSION AND LIMITATIONS

Many of the adoptive parents in this study talked about being tough-skinned or people that do not offend easily. This may be why adoptive parents do not see these interactions as being stigmatizing or hurtful. Instead, they are seen as instances where people are generally curious about adoption, and these instances are therefore opportunities for the adoptive parents to educate society on adoption in hopes of normalizing this family form. Though they did not feel like they were being discriminated against or identified in a negative way, the adoptive parents in this study did experience stigmatizing interactions laced with judgments, hesitation, and suspicion that labeled them as being different from the norm. Because of these types of interactions indicating adoption is risky and undesirable, an undervaluation of adoption is placed upon it as a method of family formation.

This study sought to understand the interactions adoptive parents experience in order to develop a better understanding of the stigma surround adoption in the United States and how it is imposed upon adoptive parents. The individual experiences of 17 adoptive parents living across the United States became linked forming a more accurate picture of adoptive families in 21st century America. This offered an explanation of what occurs during interactions with adoptive parents, how adoptive parents are likely to respond in these interactions, how the adoptive parents perceive these experiences, and how diverse populations of adoptive parents experience stigmatization at the intersection

of the different statuses that comprise their identities. It is important to study adoption in order to understand it better as it grows in popularity and becomes more normalized.

Like the actions of adoptive parents during these interactions, this research seeks to educate others on the existence of stigmatizing cultural beliefs concerning adoption and the realities of being an adoptive family in the United States.

As with any research, there are limitations to this study. Though the size of the sample of participants is not always as important when utilizing grounded theory for qualitative interviews, a larger sample including more visibly different bi-racial families may increase the understanding of how those adoptive parents experience different levels of stigmatization and labeling compared to adoptive families that can pass for biological kinship. A larger sample of single-parent adopters, although more rare, would increase understanding of how interactions differ for these families. It would have also been beneficial to have with both parents in the two-parent households in order to gain better insight into how that family exists on a day-to-day basis and if the reactions to these interactions differ by parent. Future research should consider sampling a larger, population with emphasis on even greater diversity and should make an effort to talk to the adoptive parents together, if possible. Focus groups consisting of small groups of adoptive parents would also be a beneficial method of obtaining data because it would allow for the adoptive parents to talk with one another and relate to each other's experiences. Many of the adoptive parents during the interviews stated that they had trouble accurately remembering all of the interactions where they received questions or comments about their adoption from over the years. The presence of other adoptive

parents who may have experienced similar interactions may help others remember more accurately.

It is also important to acknowledge that one cannot say with certainty the adoptive parents in this study represent all adoptive parents living in the United States. The parents in this study described themselves as being open, thick-skinned individuals happy to talk about their adoption with anyone who was curious and had good intent. These individuals may also be more open to participating in research conducted concerning adoption and therefore, perhaps this openness is not the reaction of all adoptive parents.

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APPENDIX A

Subject Informed Consent Document

An Examination of the Experiences of Adoptive Parents in the United States

Investigator(s) name & address:

Patricia Gagne, Ph.D.
Department of Sociology
103 Lutz Hall
University of Louisville
Louisville, KY 40292
Phone: 502.852.8014

Jessica Newton, B.A.
Department of Sociology
103 Lutz Hall
University of Louisville
Louisville KY 40292
Phone: 502.852.8140 or 502.554.8262

Site(s) where study is to be conducted: University of Louisville, Belknap Campus, 347 Strickler Hall, and locations chosen by respondents or by telephone interview.

Phone number for subjects to call for questions: (502) 852-8014 – Patricia Gagne or (502) 554-8262 – Jessica Newton

Introduction and Background Information

You are invited to participate in a research study. The study is being conducted by Patricia Gagne, PhD and Jessica Newton, MA graduate student. The study is sponsored by the University of Louisville, Department of Sociology. The study will take place by phone on the Belknap Campus of the University of Louisville or at a mutually convenient location. Approximately 30 subjects will be invited to participate.

Purpose

The purpose of this study is to examine the experiences of adoptive parents who have adopted domestically or internationally and are currently living in the United States. This study will examine experiences of adoptive parents after adoption. The goal of this research is to develop a better understanding of the experiences of being an adoptive parent in the United States and to give a voice to adoptive parents in order to share their perspectives.

Procedures

In this study, you will be interviewed by the investigator concerning your experiences as an adoptive parent living in the United States. You will be asked a series of questions from a semi-structured interview guide and you will be given the opportunity to respond to each question presented. The focus of this interview will be on the experience of adoptive a child once the child comes into the home permanently. If any question is unclear to you, you may ask to have the question rephrased so you that better understand what is being asked. At the end of the interview, you will have the opportunity to ask any questions that you may have. It will take approximately 45-60 minutes to complete the interview. The interview will be recorded using a digital recorder and transcribed by the investigator. If you are interviewed by phone, you will be asked to give your verbal consent to participate by phone before the interview begins.

If you choose to participate in this study, your responses will remain anonymous. You may decline to answer any questions that make you uncomfortable. If at any point during the interview you wish to stop, you may do so, and your responses will not be used for this research. At the end of the interview, you will be asked if you would like to receive information regarding the results of this study or information regarding any possible publications that research from this research.

Potential Risks

There are no foreseeable risks other than possible discomfort in answering personal questions. **There may also be unforeseen risks.**

Benefits

The possible benefits of this study include contribution to the knowledge of the experiences of adoptive parents in order to raise awareness of stigmatization and to lessen the stigma placed on the adoptive family form. The information collected may not benefit you directly. The information learned in this study may be helpful to others.

Compensation

You will not be compensated for your time, inconvenience, or expenses while you are in this study.

Confidentiality

Total privacy cannot be guaranteed. Your privacy will be protected to the extent permitted by law. If the results from this study are published, your name will not be made public. While unlikely, the following may look at the study records:

The University of Louisville Institutional Review Board, and Human Subjects Protection Program Office
Office for Human Research Protections (OHRP),

Office of Civil Rights

To ensure that the data collected are secured, the information you provide will be kept in a locked file cabinet in a secure area until it is logged into a password protected computer.

Voluntary Participation

Taking part in this study is voluntary. You may choose not to take part at all. If you decide to be in this study you may stop taking part at any time. If you decide not to be in this study or if you stop taking part at any time, your information will not be used for this research.

You will be told about any changes that may affect your decision to continue in the study.

Research Subject's Rights, Questions, Concerns, and Complaints

If you have any concerns or complaints about the study or the study staff, you have three options.

You may contact the principal investigator at (502) 852-8014.

If you have any questions about your rights as a study subject, questions, concerns or complaints, you may call the Human Subjects Protection Program Office (HSPPO) (502) 852-5188. You may discuss any questions about your rights as a subject, in secret, with a member of the Institutional Review Board (IRB) or the HSPPO staff. The IRB is an independent committee composed of members of the University community, staff of the institutions, as well as lay members of the community not connected with these institutions. The IRB has reviewed this study.

If you want to speak to a person outside the University, you may call 1-877-852-1167. You will be given the chance to talk about any questions, concerns or complaints in secret. This is a 24 hour hot line answered by people who do not work at the University of Louisville.

This document tells you what will happen during the study if you choose to take part. Your signature means that this study has been discussed with you, that your questions have been answered, and that you will voluntarily take part in the study. This informed consent document is not a contract. You are not giving up any legal rights by signing this informed consent document. If, at any point, you have questions concerning the details of this study, your participation in this study, or the results of this study, please contact the investigators of this study listed below. You will be given a signed copy of this paper to keep for your records.

Signature of Subject/Legal Representative

Date Signed

Signature of Person Explaining the Consent Form
(if other than the investigator)

Date Signed

Signature of Investigator

Date Signed

Investigators:

Patricia Gagne, Ph.D.
Department of Sociology
103 Lutz Hall
University of Louisville
Louisville, KY 40292
Phone: 502.852.8014

Jessica Newton, B.A.
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APPENDIX B

Interview Guide

I. GENERAL QUESTIONS

How did you and your family decide to adopt?

Can you tell me how many children you have / a little about your family?

Tell me about the process that led up to you bringing them home.

What was your view of adoption before beginning the process?

How has it changed since then?

Where you working when you began the adoption process?

How did you talk to your co-workers about the adoption?

What kind of information were you given about the background of your child?

What is your relationship like with the birth parent(s) / family?

Did your family pursue any fertility treatments before deciding to adopt?

Describe your adopted child(ren) in comparison with the rest of your family. Would a stranger be able to tell you are not biologically related?

When you began thinking about adoption, did you initially look for a child that might look for the rest of your family?

How do you talk about adoption within your family (with your kids)?

How do you talk about the adoption with other people – your friends or even strangers?

Is it something you let people know at first? Do you differentiate between adopted and biological children?

Are you friends with other adoptive families?
How did you all meet?

II. STIGMA QUESTIONS

How did you tell your family and friends about your decision to adopt?
Were they supportive? Was anyone negative about it?

How often do you get questioned about your child's background or birth parents?

Have you had any interactions with others that made you feel uncomfortable or felt like you were treated differently because you're an adoptive parent?

Tell me about a time when you have been offended or hurt by a comment made by someone about adoption or your family?

When a person finds out you have adopted, do you feel like you get asked too personal of questions or they questions they ask cross boundaries?

What are the main kinds of questions people ask you about your adoption?

Is it common for people to ask you why you didn't have biological children?

Sometimes people can use incorrect language to talk about adoptive families. Has anyone ever used the term "real parent" to talk about their birth parents?

How do you talk about their birth parents with people who ask about them?
What is important to you for them (the person asking the question) to know about the birth parent?

How do you think your definition of motherhood/fatherhood differs from a biological parent?

What are some of the main ways you think being an adoptive parent is different from being a biological parent?

Are there things you have to consider that biological parents might not have to?

What are some of the lessons you've learned through your interactions with people about how you talk about your family?

Has it changed over time? So do you share more or less information?

III. SENSITIVE QUESTIONS

Some people believe adoption is the 2nd best route or 2nd choice route to forming a family compared to the biological route.

How do you feel about this idea?

Some people criticize adoption by saying it's a corrupt process where children are bought and sold.

Do people often bring up the finances associated with adoption?

Some people believe adoption is too risky for them to consider it for themselves.

Did you consider it to be risky before you started?

Do people talk to you about the risks?

Where do you think these opinions of adoptive come from?

IV. MEDIA QUESTIONS

The last few questions I have are about how you've seen adoption represented in the media.

Tell me how you've seen adoption on TV, in the news, in books, etc.

Do you see it often?

Are they typically positive or negative examples of adoption?

Do you screen TV shows or movies for themes about adoption before you let your children see them?

What are you looking for when you do this?

Do you think how adoption is shown on TV impacts the way others see adoption?

Do people compare your family to stories they've seen on the news?

CLOSING QUESTIONS

After having these experiences, what advice would you give to someone considering adoption?

Is there anything you can think of that I should know or understand better about your family?

Is there anything you would like to ask me?

CURRICULUM VITA

Jessica Newton

3001 Boaires Lane
Louisville, Kentucky, 40220
jessica.newton@louisville.edu
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Education

University of Louisville, Louisville KY
Doctorate of Philosophy, Applied Sociology
Accepted; to begin August 2015

University of Louisville, Louisville KY
Master of Arts, Sociology, GPA 3.85
2011-Present; projected graduation date Summer 2015

Bellarmine University, Louisville, KY
Bachelor of Arts, Psychology and Sociology, GPA 3.66
Degree Earned December 2010, cum laude

Teaching Experience

- Spring 2015: *Graduate Assistant* for Resources for Academic Achievement (REACH), University of Louisville
GEN-105-02: Special Topics in Supplemented College Reading, Psychology
- Fall 2014: *Graduate Assistant* for Resources for Academic Achievement (REACH), University of Louisville
GEN 105-03: Special Topics in Supplemented College Reading, Psychology
GEN 105-04: Special Topics in Supplemented College Reading, Psychology
- Spring 2014: *Graduate Assistant* for Resources for Academic Achievement (REACH), University of Louisville
GEN-105-02: Special Topics in Supplemented College Reading, Psychology
- Fall 2013: *Graduate Assistant* for Resources for Academic Achievement

(REACH), University of Louisville

GEN 105-03: Special Topics in Supplemented College Reading,
Psychology

GEN 105-04: Special Topics in Supplemented College Reading,
Psychology

- Spring 2013: *Graduate Teaching Assistant* for Dr. Mark Austin, Department of Sociology, University of Louisville
SOC 201-03: Introduction to Sociology, University of Louisville
SOC 201-04: Introduction to Sociology, University of Louisville
SOC 550: Voluntarism, University of Louisville
- Fall 2010: Undergraduate Teaching Assistant for Dr. Christy Wolfe, Department of Psychology, Bellarmine University
PSYC 310: Research Methods in the Social and Behavioral Sciences, Part I

Tutoring Experience

- Spring 2014: *Graduate Assistant* for the Learning Resource Center, Resources for Academic Achievement (REACH), University of Louisville
Courses: PSYC-201: Introduction to Psychology
SOC-201: Introduction to Sociology

Research Experience

Research Assistant

- Summer 2013: *Field Research Assistant* for The National Institute of Health (NIH) under Dr. Deborah Potter, Department of Sociology at the University of Louisville: “Exploring Culture, Community, Communication, and Fruit and Vegetable Intake in Black Kentuckians”
- Spring 2013: *Graduate Research Assistant* for Dr. Mark Austin, Department of Sociology at the University of Louisville
- Fall 2010: *Undergraduate Research Practicum* for Dr. Christy Wolfe, Department of Psychology at Bellarmine University: “Working Memory and Temperament in Early Childhood”

Conference Presentations

- **Newton, J.** (Spring 2013). *Parents’ Child Rearing Practices: Balancing Responsibilities and Expectations*. Paper presented at the Anthropologists and Sociologists of Kentucky Meeting – Bellarmine University.
- **Newton, J.** (Fall 2010). *An Investigation of the Situations Surrounding a Secret*. Paper presented at the Anthropologists and Sociologists of Kentucky Meeting – Lindsey Wilson College.
- **Newton, J.** (Spring 2010). *An Investigation of the Situations Surrounding*

a Secret. Poster presented at the Kentucky Psychological Association Conference - University of Louisville.

- **Newton, J., & Livers, M.** (Spring 2010). *Sexual Orientation and the Developmental Timing of First Romantic Experience*. Poster presented at the Kentucky Psychological Association Conference - University of Louisville.
- **Newton, J.** (Spring 2010). *An Investigation of the Situations Surrounding a Secret*. Poster presented at the Bellarmine University Undergraduate Research Exposition.
- **Newton, J., & Livers, M.** (Spring 2010). *Sexual Orientation and the Developmental Timing of First Romantic Experience*. Poster presented at the Bellarmine University Undergraduate Research Exposition.

Training and Certification

- University of Louisville, Delphi Center - Graduate Teaching Assistant Academy (GTA Academy), 2013-2014

Honors and Awards

- Monsignor Horrigan Scholar Scholarship – Bellarmine University
- Koster Scholarship Fund Scholarship – Bellarmine University
- KEES Scholarship
- Dean's List (2007 – 2013; for students with a cumulative GPA above 3.5 for a semester)

Service and Memberships

- University of Louisville Sociology Graduate Student Association, President (2012 – 2015)
- University of Louisville Student Government Association President's Council (2013-2014)
- University of Louisville Graduate Student Union Representative (2013-2014)
 - Graduate Student Union Research Committee Representative for the Social Sciences (2013)
- University of Louisville Graduate Student Council Representative (2013)
- Golden Key International Honour Society, (2012 – present)
- Psi Chi (2010 – present)
- Kentucky Psychological Association (2010 – present)
- Anthropologists and Sociologists of Kentucky (2010 – present)
- Bellarmine University Gay Lesbian and Straight Society (GLASS) Club (2008 – 2010)
- Bellarmine University Criminal Justice and Sociology Club (2008 – 2010)