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Understanding Identities of Internationally Adopted Adolescents Through the Use of Art Therapy: A Literature Review

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Abstract

As international adoption becomes more popular and widely used in the United States, there is more evidence of the impact that adoption and the process of adaptation can have on an individual in both the long and short term, especially in the development of their identity. While adolescence tends to be a time when the individual is focused on creating and understanding their uniqueness, being an adoptee adds even more complexity to this task. Adopted children often struggle with issues of self-esteem, sense of belonging, identity formation, and safety (Harris, 2012). Art therapy has been successfully used with adolescents as a way of expression and as a tool for self-exploration. Through the use of art therapy, adolescents are able to communicate their feelings, develop coping strategies, and access the necessary open and safe space for self-exploration and self-reflection (Beaumont, 2012). Although there are many techniques that can be used within the art therapy profession, Beaumont (2012) explained that narrative, existential, and expressive techniques are the most useful with this population, as they allow adolescents to obtain a greater understanding of self and their identity.

Keywords: International adoption, identity, adolescence, art therapy, attachment, trauma.

Introduction

There is a growing trend in households of families in the United States to seek international adoption as an option to expand their families. Numerous Americans have focused their interest on adopting children that come from orphanages or institutions. This has sparked a great amount of research from people around the world to examine
the lasting social, emotional, developmental, and psychological effects that both institutionalization and adoption might have on children that have been adopted (Hawk & McCall, 2011). Studies have also focused on the creation and development of identities as adoptees grow up with their adoptive families (Hawk & McCall, 2011).

Eastern European countries have been experiencing a rise in the institutionalization of orphan children due to issues with poverty, lack of employment, and death (Darewych, 2013). Research has found that prolonged social-emotional deprivation and lack of sensorimotor stimulation can have a long-term impact in the well-being of the child, their behavior, and future outlook (Darewych, 2013). With the rapidly growing numbers of children that have been adopted, it is important that further research is conducted to bring light into the depriving conditions that these children experience, as well as to better understand how clinicians, parents, and/or other professionals can help when these issues present themselves.

Adolescence is a demanding time, when individuals are faced with the developmental task of exploring and creating their unique identities (Parisian, 2015). Furthermore, this task can become tremendously difficult for those individuals that have been adopted. This includes the exploration of their personal beliefs, their life goals, values, among others (Marcia, 1980). Still, the adolescent period has been considered to be an optimal time for the use of art therapy since adolescents tend to be more receptive creatively (Beaumont, 2012). With the rise of the number of adopted children in the United States and the lack of current arts-based interventions that focus on adolescent adoptee literature, reviewing the connection between adoption and the development of identity will provide a valuable perspective to the art therapy profession.
Literature Review

Adoption

According to Farlex (2005) the concept of adoption can be understood as a two-step judicial process where the biological parents no longer have any legal rights or obligations over their biological children. Instead, these privileges and responsibilities are acquired by the new adoptive parents. Once this process has been completed, the child officially becomes the legal offspring of the adoptive parents. Adoption is a highly involved, complex, and lifelong process for both the adopted child and the adoptive parents that has gained prevalence as the years go by. Thousands of children from a vast variety of countries are adopted every year to join American families in the United States (Linville & Lyness, 2007). It has been projected that around one million children in the United States currently live with adoptive families (Stolley, 1993). There are millions of orphans that are waiting to be adopted by a family, and more than 118,000 children that are part of the foster care system in the United States (Adoption & Beyond, n.d).

It has been recorded that children are staying longer in institutionalized care. This leads to emotional, developmental, psychological, and behavioral problems (Julian, 2013). In the case of adoptions coming from Eastern European countries, specifically Russia, it is common to find children dealing with attachment issues, problems with self-esteem, identity, growth delays, cognitive, social, and affective difficulties, as well as physical and sexual trauma at the time of adoption, throughout the process of adaptation, and, in some cases, during their whole lives (Linville & Lyness, 2007).
From the end of the 1980’s to the year 2004, the rate of international adoptions for American families had escalated from 8,000 to 23,000 adoptions per year (Selman, 2012). This increase was attributed to various factors, including a surge in the number of available children that were infants and/or toddlers, the lower cost and faster processing associated with international adoptions, the decreased likelihood that adopted children would interact with their birth families, and the large amount of media attention that institutionalized children had received over the years (O'Dell, McCall & Groark, 2015). In 1997, it was estimated that six out of ten Americans had a personal or a close experience with adoption, which means that either them, their families, or a close friend had adopted or had placed a child for adoption. (Evan B. Donaldson Institute, 1997).

According to the National Adoption Center (2018) there are various types of adoption paths that families can choose to take. Adoptive parents can decide to adopt within the United States or internationally. If they choose to follow the domestic adoption route, individuals can select between adopting children that have been placed in the foster care system, doing a fast-adoption, an infant adoption, or an independent adoption. A fast adoption happens when a child is placed in the prospective adoptive home as a foster child and is later adopted once the child’s legal issues have been resolved. The option known as infant adoption is usually sought after by families that desire to adopt a baby during their infancy stage, which is usually done with the use of an intermediary such as a lawyer, physician, or through a licensed adoption agency. When the adoptive parents decide to complete this process through an intermediary, the process becomes an independent adoption. This can be a lengthy option that is
currently not legal in all states in the United States. While the word adoption is usually associated with adding a family member with no biological ties, it is also possible for individuals to adopt an already existing member of the family, such as a grandchild.

An international adoption, also known as intercountry adoption, is completed when the adoptive family wants a child from a different country than the one they are residing in (National Adoption Center, 2018). Children are generally placed for adoption when they are orphaned, abandoned, or are given up by their birth parents due to low economic resources (Younes & Klein, 2014). The decision to adopt internationally might be driven by personal, humanitarian, or religious reasons. This type of adoption has become fairly popular in the United States since the end of World War I, with a total of 224,615 international adoptions recorded between the years 1999 and 2010. From this number, 56.1% were girls and 43.9% were boys (U.S. Department of State, Bureau of Consular Affairs, 2010). It has been documented that the most popular countries for international adoptions are China with 30.8%, Ethiopia with 22.7%, Russia with 9.8%, South Korea with 7.8%, and Ukraine with 4% (U.S. Department of State, Bureau of Consular Affairs, 2010). It is essential for caregivers to be aware that international adoptees are at a higher risk of experiencing tuberculosis, parasites, and hepatitis B, and that around half of these children are in need of medical attention during the first month of arrival to the United States (Smit, 2010). The laws for international adoption differ in each country, which impacts the process and outcome of the adoption, which could become costly and complex.

Once the prospective parents have chosen the option that best suits their families, they will be faced with the decision of selecting the openness of their adoption.
Individuals are usually presented with two options and can proceed with either a closed or an open adoption (National Adoption Center, 2018). A closed adoption is one where the information of the birth and/or adoptive families is not disclosed. The information provided about the birth family and the child are non-identifying in nature, and there is no or little contact between the parties involved. The specific details of this type of adoption are subject to change dependent on the local laws. On the other hand, an open adoption is one where biographical information of the birth parents, as well as the child, is shared. Visitations, phone calls, and other types of contact between the birth parents, the child, and the adoptive family is also possible. Although the degree at which this happens will vary from family to family, it has been recorded that adoptive parents that opted for an open adoption and maintained a relationship with the birth families were more content with the communication arrangements than those that selected to have no contact. Furthermore, biological parents who engaged in frequent communication with the adoptive families described having less guilt, regret, and grief than those that did not maintain contact (Grotevant, McRoy, Wrobel & Ayers-Lopez, 2013).

**Adoption and Attachment**

Research suggests that a deep connection between a mother and her child exists since the child is in the womb (Cairns, 2013). It was previously believed that babies were born without any former knowledge of the outside world. However, with the advances in technology and ongoing studies, scholars have gained insight into what babies understand while they are in utero and their memories once they are born (Cairns, 2013). As adopted children grow and develop, they can be confronted with the
realization of what it means to be an adopted child. Questions that most adopted children face at some point in their lives are about their biological parents, the reasons behind their placement for adoption, and even concerns about abandonment. Mehta (1992) explained that while the process of adoption can be greatly beneficial for both the child and the new parents, there are extensive and profound emotional, psychological, and social consequences that this procedure might carry for both. Cairns (2013) explained that being adopted should be taken as a traumatic experience for the child, since it highlights the loss of the birth parents which generates feelings of grief and rejection. Consequently, even children that are adopted at birth occasionally experience the loss of the early bond with their birth mother.

Humans have an innate desire for attachment as soon as they are born (Cairns, 2013). Attachment is described by Bowlby (1969) as a lasting, profound, emotional bond that links two people throughout time and space. In order for children to be able to develop a secure attachment style, it is vital that their primary caregivers are able to meet their infant’s emotional and physical demands. The type of relationships that infants achieve with their primary caregiver will dictate the strength and trust of the infant’s relationships in their future (Bowlby, 1980). Schofield and Beek (2013) believed that there is a clear link between the mental health of an individual and the quality of the early relationships that they had while they were a child. Walker (2008) explained that an adoptive child that has been securely attached will be able to better manage and regulate strong feelings. This happens because, during infancy and through early childhood, the adoptive parent will help the child to find balance and stability when he is distressed. On the other hand, a child that has experienced an insecure or disorganized
attachment will be unable to manage strong emotions which can cause great trauma during childhood (Walker, 2008).

Román, Palacios, Moreno, and López (2012) conducted a study in order to measure the attachment representations (ARs) of children that had been adopted internationally. This study consisted of 40 children (N = 40) of Russian origin between the ages of four and eight years-old who had been adopted by families of Spanish origin in Spain. From this sample, 72.5% were boys and 27.5% were girls. Comparative data was established from a group of 50 children (N = 50) that were living in Spanish institutions after having endured profound abuse and neglect, and a control group which was comprised by 58 children (N = 58) that had been born and raised with their biological families and did not endure any form of family maltreatments. When comparing the scores obtained for the security AR’s, the institutionalized group scored 3.20, the adopted group 3.25, and the control group 3.94. The scores for insecurity showed 1.67 for the institutionalized group, 1.26 for the adopted group, and 0.74 for the control group. The results collected for avoidance were 1.40 for the institutionalized group, 1.20 for the adopted group, and 0.52 for the control group. Finally, for the disorganized attachment category, the institutionalized group scored 1.37, the adopted group 1.24, and the control group 0.52. As these results reflect there was a lasting effect of early adversity in both the children who were adopted and the ones who were institutionalized, as well as a great similarity in their type of attachment representations, which were in the insecure scale. However, it showed a marked difference in the AR’s of the children that had been internationally adopted compared to the ones in the control group. The AR’s of the children that had been adopted displayed high scores for
insecurity, disorganization, and avoidance, which supported the hypothesis that the background and upbringing of the children would significantly impact the results of the study (Román et al., 2012).

**Adoption and Culture**

There are a vast variety of things that can have an impact, in one way or another, on the development of identity during adolescence. Gender, sexuality, ethnicity, media, traumatic experiences, positive or negative situations related to a family member or a peer, and mental health can all influence an individual’s identity (Parisian, 2015). It is the understanding of this intersectionality that has allowed for a deeper and diverse awareness about identity formation (Crenshaw, 1989). During the period of middle childhood, ages eight to eleven, adopted children begin to have a deeper understanding of the implications of their adoption. At this time, they enter a period called concrete operations (Piaget, 1954). At this point in life, children begin to recognize the world in a logical manner. When children that have been adopted reach this stage, they are faced with thoughts and feelings associated with having gained a new family through adoption but losing their birth family (Brodzinsky, Singer & Braff, 1984), (Brodzinsky, Schechter & Henig, 1992).

In many occasions, children are adopted by families which are of different ethnicities than their own, which is the case of most international adoptions. This is known as transracial adoptions (Younes & Klein, 2014). Ethnicity can be described as one’s sense of belonging to a group and one’s beliefs or attitudes concerning a group membership (Broderick & Blewitt, 2010). In the majority of transracial adoptions, the adopted children look visibly different and have a distinctive cultural heritage from their
adoptive parents. These marked characteristics allow them to cultivate different ethnic/racial perspectives than their culture of origin (Lee & Quintana, 2005). Along with these feelings, they may also experience thoughts and emotions of loss from the culture of their birth parents, even if they did not get the chance to meet them, and also a marked awareness about discrimination as they grow and develop in society (Meier, 1999), (Powell & Affi, 2005).

Children that are adopted over the age of one have a higher risk of suffering from lower self-esteem, lack of trust in others, and distorted self-image (Younes & Klein, 2014). Adoptees often express a desire to get immersed in their birth family’s culture, language, and traditions, since this helps them understand more about where they come from as well as improve their self-esteem (Younes & Klein, 2014). In the past, it was believed that children that were adopted internationally had more behavioral and adjustment issues than those that were adopted domestically. However, studies have shown that many different factors can contribute to the behavioral problems and adaptation process that the child might have. Among them are the age of the child when he/she was adopted and the amount of time that he/she spent in the orphanage/institution (Hawk & McCall, 2011). Just the fact that the child was adopted from a different country does not necessarily mean that he/she would have a more challenging adaptation or greater behavioral problems. Furthermore, no significant differences have been found in the attachment level or self-esteem of those children that had the same race as their adopted parents and those that had a different race (Juffer & Van IJzendoorn, 2007). It is of vital importance for the mental health and well-being of transracial adopted children that their parents take the time to address in an
appropriate manner the ethnic, racial, and cultural differences that exist between themselves and their children (Lee, 2003), as well as how they will incorporate the culture of their birth family into their lives (Friedlander, 1999), (Thomas & Tessler, 2007), (Scherman, 2010). It is important to recognize that children who are adopted internationally are able to make more cognitive, emotional, and physical advances than those children who are left in the native countries without a chance of adoption (Rotabi & Gibbons, 2009).

Hawk and McCall (2011) examined the severity of behavioral problems of formally institutionalized Russian children who had suffered a lack of socio-emotional support. Comparative data considered the age of adoption of the children, the age when they were assessed, and their gender. The adoptive parents recoded the data through the child behavior checklist. The study counted with 316 adoptive parents (N = 316) from the United States and 316 children (N = 316) ages six to eighteen (Hawk & McCall, 2011). Data was collected at three different points throughout the span of six years. The results established that the age of the adoption and the age at the time of assessment were significantly linked (r = .37, p< .05) (Hawk & McCall, 2011). Furthermore, data established that children that were adopted after the 18-month mark had a greater problem score (39%), (z = 3.80, p < .05), especially when they were evaluated between the ages of 12 and 18. On the other hand, those who were adopted prior to 18 months of age did not show a higher risk for behavioral problems (Hawk & McCall, 2011). The factor analysis of the individual items, which address a wide selection of antisocial behaviors, social issues, and withdrawal, determined 13 items for children that were six to 11 years old and 41 items for 12 to 18 years old (Hawk & McCall, 2011). Even though
the study revealed that children adopted before the age of 18 months yielded results similar to those children without institutionalization, and found that a lack of social and emotional support can have a lasting effect on those children that have been institutionalized and were adopted after they were 18 months old. These results establish the vulnerability that can exist for institutionalized Russian adoptees.

Identity and Adolescence.

From the time that adopted children join pre-school through the rest of their lives, they are confronted with situations and questions about their identities. Humans have an innate need to know where they come from, since this provides a strong sense of belonging, self-esteem, and identity (Mahmood & Visser, 2015). Kirk and Rey-Okazawa (2006) defined identity as a number of complex and at times contradictory psychological, physical, cultural, political, and spiritual factors that individuals experience. It is the gathering, creation, and organization of an individual's abilities, beliefs, goals, and history to create an image of self (Kasinath, 2013). According to Kasinath (2013), when adolescents are not able to successfully integrate the combination of these aspects, or are simply unable to choose, they are threatened with a role confusion.

Erik Erikson, a well-known developmental psychologist, believed that the concept of identity relies in the union of self and communality (Parisian, 2015). According to Erikson (1968), ego identity serves as the basis for many of the choices that are made throughout an individual's life. This includes a career path, relationships, political views, religious beliefs, among others. To develop an identity is a taxing task that involves the reflection and examination of the meaning and importance of the individual's life and
their role with others in society (Erikson, 1968). Furthermore, Erikson highlighted that a strong sense of identity is optimal for psychological functioning.

Erikson believed that every individual goes through eight life stages that involve a central crisis. The resolution of each crisis provides them with a better personal and social competence, and a greater ability to solve future crises (Kasinath, 2013). The first two crises happen during infancy when the child needs to develop a sense of trust and autonomy instead of mistrust, shame, or doubt. The third stage happens during the middle childhood years, when the child must cultivate initiative and prevent feelings of guilt. The fourth stage occurs during elementary years, when the child needs to have a sense of industry and avoid feeling inferior. During adolescence, individuals are confronted with the fifth stage, identity versus role confusion. This is a time where both their minds and bodies are in constant evolution, where conscious effort is continuously made to understand who they are and solidify their identity. By doing this, adolescents work towards establishing strong basis for the adulthood period (Kasinath, 2013). This stage can be greatly difficult for some, especially in today’s technological age where adolescents can create and portray multiple personas through the internet (Kasinath, 2013). Although the concept of self-awareness exists since infancy, it is not until the individual reaches adolescence when they are faced with the difficult task of understanding their true self.

Parisian (2015) identified the struggles that teenagers endure to fit in and find their niche. This task develops to be exponentially more complex when the adolescent has been adopted. At the start of middle childhood and throughout the stage of adolescence, children start thinking about who they are and the person that they want to
become in the future. Identity issues frequently occur at the start of puberty. This is especially true for adopted children who often experience difficulties with feelings of safety, security, self-esteem, and identity formation during this stage (Harris, 2012). It can be challenging for adolescents to maintain a good sense of self and self-esteem in high school, since they tend to be subject to criticism from peer groups and experience a possible fear of not being able to fit in (Schofield & Beek, 2013).

For adopted children, common struggles that many young individuals endure during the stage of adolescence are heightened, making the formation of their identity more challenging. Frequent questions about their biological families, possible physical resemblance to their birth parents, and worries about their sense of belonging due to racial, cultural, social, and educational origins are usual struggles that are present for many adolescent’s adoptees (Child Welfare Information Gateway, 2018). Combining these frequent questions with already existing issues with self-esteem and identity formation can greatly impact the way that adopted children feel and manage diverse situations about themselves and others. Although adopted children are similar in many ways to non-adopted ones, it has been recorded that adoptees frequently score lower when self-esteem and self-confidence are being measured (Sharma, McGue & Benson, 1996), (Borders, Penny & Portnoy, 2000). It is of vital importance that adopted children are given the chance to develop in a home where love, support, and a secure foundation are provided, since this can allow them the freedom to make choices for themselves and help in the development of their identity.

Adolescence, Self-exploration, and Art Therapy

According to the American Art Therapy Association (2017), art therapy is a
mental health profession that is widely practiced in a variety of different locations such as schools, hospitals, rehabilitation centers, psychiatric institutions, private practices, among other. Through the use of art making, the creative process, and the guidance of a trained art therapist, a client is able to communicate, explore his feelings, increase his self-esteem, reduce his anxiety, develop social skills, among others (American Art Therapy Association, 2017). An art therapist has knowledge in diverse areas of art such as drawing, painting, and sculpting, as well as psychology, psychopathology, human development, and counseling theories and techniques. Art therapy can be used with people of different ages, needs, and backgrounds. It can be used in different formats; individually, in groups, with families, and couples.

Art therapy is an effective treatment for those that have endured trauma, abuse, depression, autism, and other mental health disorders. (American Art Therapy Association, 2017). Art therapy is an optimal treatment for individuals that are experiencing issues with identity crisis, as it happens during the adolescence stage. It uplifts and pushes this population towards the creation of a healthy identity formation, a greater self-exploration, and self-reflection. It is also a great way of communication, as well as providing the necessary tools for emotional coping and the promotion of self-education, which is necessary for the coherent formation of identity (Beaumont, 2012).

With their strong therapeutic and artistic background, art therapists are able to develop interventions that are applicable, creative, sensitive, and appropriate for clients from a variety of multicultural backgrounds. Through the use of art as a therapeutic tool, clients are able to represent their experiences, emotional and psychological concerns, and views regarding their culture, their self, and their world (Parisian, 2015). Emerging
in the process of art making is not only healing, but also provides the individual with the necessary space to notice and process their thoughts and emotions in a safe way. This is an essential part for the psychological integration needed to have a strong sense of identity (Rubin, 2010). The combination of art making with the therapeutic and reflective aspect of art therapy allows the client to gain insight about himself, along with building an adaptable self-identity (Carpendale, 2009). The use of expressive arts therapy includes the expression of diverse parts of the self that have not been identified yet, which might lead to a greater self-insight (Malchiodi, 2003).

When Adolescents are allowed to have an opportunity to create, “they make marks, erase, arrange, smear, and brush as the intricacies of being real, of being different, of being human are rendered in their works of art. Their creations reveal the internal and external forces at play, illustrating the angst and challenges of adolescence” (Parisian, 2015, p. 130). Individuals are continuously working towards creating and expressing their unique self (Moon, 1998). Literature has found that “making art is first and foremost a natural way to experience self-exploration, self-expression, and self-revelation” (Moon, 1998, p. 14). In order create a logical and healthy identity, it is essential that the individual uses social-cognitive processing (Schwartz, 2001). The process of art making gives the client the chance to depict, explore, and even discard parts of himself. It allows for self-awareness and acceptance, and gives the client the chance to find his individuality (Moon, 1998), (Riley, 1999) it also provides the individual with the necessary skills to form a strong, adaptable self-identity.

While there are many approaches and techniques within the art therapy
profession that are used to serve the needs and desires of each client, Beaumont (2012) believes that there are specific approaches that function best when working with adolescents that have issues with the formation of their identity. The most suitable to use with this population help to increase the aspects of self-exploration and self-expression through expressive, existential, and narrative techniques, allowing for greater understanding of the self. Furthermore, an essential part of the therapeutic process is the empathic connection formed between the client and the therapist, which is why it is important to also incorporate practices that strengthen this relationship (Moon, 1999). Responsive artmaking is a useful technique that has been used with adolescents since it helps foster a strong empathic relationship between the therapist and the adolescent and furthers the creative dialogue between the two (Moon, 1999). After incorporating this technique into his practice, Moon (1999) concluded that, by using responsive artmaking, empathy is intensified and the therapist is able to gain a profound understanding of the adolescent and its life. Through the use of this technique, the clinician also opens a visual way of communication with interpretative dialogue that could be difficult to obtain otherwise.

Different studies have been conducted with adolescent adoptees where art therapy has been used. Among them, Darewych (2013) conducted a pilot study with the intention of measuring the ability that institutionalized Ukrainian orphan children in the United States and Canada possess to imagine and draw their future. The participants of the study had a lack of secure parental attachment, and had been previously isolated from society. The method utilized to do this evaluation was an arts-based assessment called the Art Therapy Bridge Drawing (Darewych, 2013). The directive used for this
assessment was: “Draw a bridge from someplace to someplace. The bridge connects to a path. Draw the path and write where the path leads you to” (Darewych, 2013, p.87). The duration of the drawing process was 10 minutes, with subsequent discussion. The drawings completed by the orphan children were later compared to a series of bridge drawings that had been performed by American adolescents and adults. To better understand and examine the assessment, the author used several image characteristic guidelines that were used in a previous study performed by Hays and Lyons (1981).

The assessment was provided by a group of 4 psychologists that spoke both English and Ukrainian and reviewed by 3 of these professionals. There was a total of 258 ($N = 258$) participants ages 8 through 20 years old. The assessment was completed at a life skills summer camp, where children from a variety of orphanages attended (Darewych, 2013). After reviewing the drawings and talking to the participants, it was found that the majority preferred to use the paper in a horizontal position, they included both past and future directional movement, integrated water under the bridge, and drew bottom arched bridges. The most prevalent comment received was about making a path leading home.

Taking into consideration the result of the drawings and the conversations that were held during the assessment, the author was able to confirm her initial hypothesis that institutionalized Ukrainian orphan children that have been isolated from society and have not had a secure parental attachment are still able to find value in life, demonstrate to be goal oriented, and are able to draw and visualize their future (Darewych, 2013).

McGann (2006) also shared her experience working with adolescent women of color using art therapy as a way to explore the impact that societal racism and intra-
family prejudice had on the development of their identity. Throughout her time working with these women in a day treatment program, and after reading other literature in this subject, the author realized how common it was for women of color that had been abused to portray themselves as blonde, faired skin, blue-eyed girls. Through their art, McGann was able to visualize and understand the vast disconnection that existed in the way they perceived themselves or their desired selves and the way they actually looked. With the use of diverse art therapy activities such as clay modeling, painting, and self-reflection, the author was able to engage and educate these women about cultural differences, encouraging exploration and the acceptance of their ethnicity. As an example, McGann talked about Kayla and Tanya, two adolescents who struggled with the acceptance of self and integration of their identity. At the beginning of therapy, they had great difficulty depicting, understanding, and acknowledging their heritage and skin color. However, through prolonged and consistent work, both women showed signs of acceptance and willingness to continue to work on negative identification that were based on family and societal prejudice, which ultimately hurt their identity formation.

**Discussion**

Through the research and analysis of the available literature, this paper aimed to bring awareness to the topic of international adoption and how it might affect individuals that have been adopted as they grow and develop a sense of identity, a particularly great undertaking during the period of adolescence when individuals are continuously working on understanding who they are. In addition, this paper is meant to bring attention to the mental health profession of art therapy, an approach that influences the creation of a healthy identity and helps during the exploratory process of self-discovery.
and self-reflection. As it was discussed in the paper, art therapy is especially helpful during the period of adolescence since adolescents have shown to be highly receptive creatively (Beaumont, 2012).

There are many reasons that may influence the choice of Americans to select adoption as way to expand their families. Regardless of the motivations behind their decisions to adopt, the reality is that the number of international adoptions in the United States has escalated with time. This means that there is a continuous need for more research in order to educate families, schools, clinicians, and any other providers that may interact and work with this population. As it was discussed in this paper, adoption is a choice that comes with great responsibility and many complexities not only for the adoptive parents, but also for the adoptees. Before being adopted, many children are forced to spend time in institutionalized care, which can impact their physical, psychological, social, and developmental well-being throughout their whole lives. Adoption is an experience that will impact the life of the adoptee and the formation of their identity. Coming to the realization of what it means to be adopted can be a traumatic task for many individuals, since it emphasizes the loss of the birth parents and severs the connection that is believed to exist between the birth mother and its child since they are in the womb. This loss can bring feelings of confusion, grief, and denial. As it was shown throughout this paper, many things can have an effect in the identity formation of an adoptee. Things such as gender, sexuality, ethnicity, traumatic experiences prior and post adoption, media, and mental health can all help or hinder the creation of a strong identity. Furthermore, art therapy has proven to be an effective treatment since it can aid adolescents through their identity issues, as it encourages
self-awareness, acceptance, and promotes the discovery of individuality. Although some literature exists pertaining to the topic of international adolescent adoptees, identity formation, and the use of art therapy as separate topics, there is a clear gap in the research that combines all of these areas. In particular, there appears to be a lack of arts-based research concerning adolescent adoptees.

While there is available research that cover the topics explored in this paper, there are many limitations behind the studies used. One of the limitations found while examining the existing literature pertaining to the impact of adoption in identity formation was the lack of use of longitudinal studies. Longitudinal studies might be exceptionally helpful since they could assist in the illustration of the impact of adoption throughout time since, in many cases, several years must pass in order to observe the complete consequences of a situation. With more longitudinal studies, different patterns, variables, and connections might be observed over a period of time, which could influence and add a better understanding about this topic. Another drawback of some of the research used in this paper was the way the information was obtained. Hawk and McCall (2011) talked about the possible issues with the reliability of the Child Behavior Checklist since it is a measure completed based on the parents’ report. Self-reports can be a problematic method to use since many rely on memory and could lack objectivity. Additionally, many of the studies used about the pertaining topics of this paper had limited samples sizes, which could have impacted the validity and reliability of the findings of the articles.

The studies presented in this paper by Roman, Palacios, Moreno & Lopez (2012) as well as Hawk and McCall (2011) focused on adoptive families of either Spanish or
American origins, a limitation that could have potentially impacted the outcome of the studies. Further research should aim to have families with more diverse backgrounds so that the information acquired is not limited to a specific culture. The socioeconomic status of the families used in some of the articles could have also influenced the results yielded, since the majority of the families were from a middle to upper socioeconomic status.

Although a decent amount of research supported the use of art therapy with adolescent's as a useful tool to help with issues pertaining to identity formation, it is clear that there is a need for more arts-based research, especially with individuals that have been adopted. This will help expand the body of work and further complement the information that already exists about such an important topic. As the field of art therapy expands to more places in the world, the demand for more arts-based research and the interest in the field will hopefully grow as well, helping fill the aforementioned research gap.
References


Hawk, B. N., & McCall, R. B. (2011). Specific extreme behaviors of post-institutionalized


