Article

How Policies Can Address Multiracial Stigma

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Abstract

Twenty years ago, Multiracial Americans completed the U.S Census with the option to indicate more than one race for the first time. As we embark on the second anniversary of this shift in Multiracial recognition, this article reviews the research related to known sources and systems that perpetuate Multiracial-specific stigma. Policy recommendations address the needs and the continued acknowledgment of this growing racial/ethnic minority population.

Keywords

multiracial, stigma, identity, public policy

Tweet

On the second anniversary of the first U.S. Census that allowed Americans to indicate more than one race, public policies and interventions should consider addressing Multiracial-specific forms of stigma.

Key Points

- Multiracial individuals represent a growing majority in the racial/ethnic minority population
- Multiracial people encounter specific forms of stigma
- Multiracial-specific stigma uniquely impacts the psychological and physical health of Multiracial individuals
- Policies can address Multiracial-specific stigma (e.g., more detailed assessments of race/ethnicity, revisiting Multiracial language, Multiracial-specific health interventions)
- Recommended policy changes will make better use of human capital for everyone by increasing accuracy in population estimates used to distribute educational and health care resources, as well as improving health care delivery (e.g., transplant matching).

Introduction

The U.S. Census 2020 marks the third assessment that allows residents to indicate belonging to more than one racial group. The decision of the Office of Management and Budget to revise the Standards for Classification of Federal Data on Race and Ethnicity to allow people to select more than one race set a new standard for racial demography assessments and nationally recognized Multiracial populations, for the first time in modern history. On this anniversary, the present

article consolidates the scientific research on the distinctive stigma experienced by the Multiracial population in the United States. Potential public policy changes could further benefit the Multiracial community, and indirectly, the rest of society.

Multiracial Population Growth

The 2010 U.S. Census data revealed that Multiracial individuals represent one of the fastest growing minority groups in the United States, representing, at the time, roughly 9 million Americans. Census data led to projections that 20% of American residents will identify as Multiracial by the year 2050, though even this may underestimate the trajectory of Multiracial population growth (e.g., Humes et al., 2011). More recent data from the Pew Research Center corroborate these projections. For example, approximately 46% of Multiracial people are below 18 years old (Parker et al., 2015), and recent birth data suggests that one in seven U.S. infants born in 2015 were of a Multiracial background (i.e., had parents who were either of two different races, at least one Multiracial parent, or had one parent of Latinx/Hispanic descent and one parent who was not of Latinx/Hispanic descent; Livingston, 2017). While not all of these children will grow up to identify specifically as Multiracial (Townsend et al., 2012), youth today are even more likely to adopt a Multiracial identity than adults of mixed-race backgrounds

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(Morning & Saperstein, 2018). Thus, the United States has experienced rapid Multiracial population growth and this growth is likely to continue in the decades to come, highlighting the need for policies to reflect this new demographic norm.

Correspondingly, the scientific community has seen an increase in research on Multiracial populations (Chen, 2019; Young et al., in press). Through this work, Multiracial identities emerge simultaneously to be a source of strength and resilience, as well as stigma (Gaither, 2015; Shih et al., 2019). This article summarizes the research to date on Multiracial stigma to identify the next steps in improving Multiracial health and well-being. Public policies address Multiracial populations, with psychological consequences of existing and potential alternate policies (e.g., demographic assessments, affirmative action policies). Based on this evidence, recommendations address how to integrate Multiracial perspectives in future public policies and interventions. While we do not intend further stereotyping of Multiracial groups or pathologizing Multiracial identities, recognizing the unique architecture of Multiracial stigma reveals pathways to resilience among these populations.

Multiracial-Specific Stigma

Social stigma refers to the experience of being devalued for possessing a particular identity (Crocker & Major, 1989; Major & O'Brien, 2005). Stigma-related devaluation can include being subjected to negative stereotypes, discrimination, objectification, and microaggressions. Several racial identity dimensions can stigmatize Multiracial individuals because of the many ways other people categorize them. Thus, understand how others categorize Multiracial people informs the architecture of Multiracial-specific stigma.

As accumulating social psychological evidence suggests, others perceive Multiracial individuals in a dynamic manner, shaped by the social context and perceiver characteristics (see Chen, 2019; Pauker, Meyers, et al., 2018 for reviews). For example, a Black and White Multiracial woman may be viewed as Black when she is around her Black friends, and Multiracial when she is surrounded by her Multiracial friends. She may simultaneously be viewed as White by her White mother, and Multiracial by her Multiracial sister, and Black by her Black father. She may simultaneously racially identify in ways that are incongruent with those perceptions as a child and congruent with them as an adult. Thus, Multiracial identity and perception depend on the historical time point, one's social context, and one's immediate relationships (Pauker, Meyers, et al., 2018).

Multiracial stereotypes. Multiracial Americans (e.g., Black/ White individuals) are subjected to stereotypes associated with their constituent racial groups (White stereotypes and Black stereotypes), as well as stereotypes specific to their Multiracial background (White and Black biracial stereotypes). While some Multiracial stereotypes are specific to different combinations of ancestry, cross-cutting Multiracial stereotypes include beliefs that Multiracial people are confused, ostracized, and have difficulty fitting in (Nicolas et al., 2018; Sanchez & Bonam, 2009; Skinner et al., 2019). The confused stereotype leads to negative evaluations of Multiracial people, including the perception that they are untrustworthy and lack social skills (Albuja et al., 2018). In addition, the belief that Multiracial individuals are social castaways risks negative evaluations in job settings. Black/White Biracial people rejected for employment, regardless of the stated cause (e.g., discrimination), were viewed as lacking social skills generally and interview skills specifically, compared with monoracial Black applicants (Remedios et al., 2012). Indeed, arguments against legalizing interracial marriage cited beliefs that Multiracial people would be confused and socially isolated, a pathologizing view of Multiracial children (Greig, 2015).

Even the more seemingly positive stereotypes of Multiracial people, such as the belief that they are physically attractive, has potentially problematic repercussions, such as fetishizing and objectifying Multiracial groups (Museus et al., 2016). Multiracial people refer to the negative effects of this positive stereotype when describing interpersonal events that made them feel objectified as a result of their Multiracial identity (Johnston & Nadal, 2010).

Because the social context guides perceiving and stereotyping Multiracial individuals, the same Black/White Multiracial person may be subjected to White stereotypes when they are with other White people and minority-monoracial stereotypes when they are in the presence of Black people (Cooley, Brown-Iannuzzi, Agboh, et al., 2018; Cooley, Brown-Iannuzzi, Brown, et al., 2018). As indicated by occupational status or apparel, apparently low socioeconomic status (SES) cues correspond to Black–White Multiracial individuals seeming more similar to Black individuals (Freeman et al., 2011; Sanchez & Garcia, 2012). Given the role of context, Multiracial people may have difficulty anticipating which stereotypes they will encounter and how they can compensate, a strategy many stigmatized individuals employ to manage impression formation (Neel et al., 2013).

Multiracial microaggressions and discrimination. Beyond the stereotype content that contributes to Multiracial stigma, Multiracial individuals also experience discrimination and microaggressions that stem specifically from their Multiracial identity. These Multiracial-specific microaggressions include being told that they cannot identify with certain racial identities or that they are not full members of their racial communities (i.e., identity denial; Albuja et al., 2019b; Tran et al., 2016). Multiracial individuals who are denied one of their racial identities interpret these experiences as signals that they do not belong and that their Multiracial identity is

devalued, which impairs psychological health (Albuja et al., 2019a). Moreover, Multiracial people who report frequent racial identity denial also indicate more depressive symptoms, more stress, impaired motivation, and lower self-esteem—compared with those who experience denial less frequently (Albuja et al., 2019a, in press; Albuja, Gaither, et al., 2019; Sanchez, 2010; Straka et al., 2019; Townsend et al., 2009).

Certain organizational practices may also evoke identity denial, such as methods of assessing racial demographics that force people to choose one racial group, or those that render Multiracial communities invisible or otherwise communicate a lack of legitimacy to Multiracial populations. Forced-choice dilemmas may also reinforce the belief that race is fixed, singular, and biologically determinant (commonly termed, "essentializing race") despite evidence that essentialism is inaccurate because there is known greater genetic variation among individuals with shared phenotypic traits than between individuals without shared phenotypic traits (Bamshad et al., 2004).

Essentializing measures also have psychological consequences. For example, after being primed with a race-ethnicity question in a choose-one-only format, monoracial Asian participants were less interested in celebrating their Asian culture, while White participants who were predisposed to essentialist thinking expressed less interest in interracial interactions (Lee et al., 2014). Multiracial populations also react negatively to choose-only-one race questions (Townsend et al., 2009), citing these forced-choice dilemmas as a significant source of stress (Nadal et al., 2011).

Yet these forced-choice dilemmas still exist. As of this writing, the Educational Testing Service that works with educational institutions and governments to make and administer standardized education assessments (e.g., GRE, TOEFL) does not allow test takers to indicate more than one race. Some voter registration forms still have forced-choice race formats (e.g., Florida) with no multiracial category (e.g., Alabama). Forced-choice race reporting yields more missing demographic data compared with more inclusive options, suggesting mismatches between respondents' self-identification and available options (Eisenhower et al., 2014). Lifetime reports of forced-choice dilemmas are associated with greater depressive symptoms, beliefs in Multiracial stigma, and low racial identity autonomy (Sanchez, 2010), a key component of Multiracial health (Sanchez et al., 2014).

Moreover, singular race questions lead to unstable racial demographic estimates (Panter et al., 2009). Limiting respondents' ability to detail their racial history impairs bone marrow matching, suggesting that the implications go beyond fostering acceptance to saving lives and increasing health care efficiency (Hollenbach et al., 2015). Choose-one-only formats may limit demographic assessments beyond race, as people increasingly identify with transgressive pluralistic identities (Tate et al., 2013; Westbrook & Saperstein, 2015).

For example, respondents may identify with more than one existing social category, fluidly identify with different categories, possess uncertain identities, or no social category at all; none of which are typically recognized in traditional demographic assessments (Clair et al., 2019).

In addition to identity denial experiences, Multiracial people commonly experience interpersonal interactions involving identity questioning (e.g., being asked, "What are you?") wherein their identities are scrutinized or debated. Identity questioning represents more ambiguous threats than identity denial. For example, when Multiracial people are questioned about their dual identities, they may interpret questioning as benign curiosity to foster social connections or exclusionary behaviors to determine intergroup boundaries (Albuja et al., 2019b). Racially ambiguous events can have psychological consequences for racial minorities, such as cognitive functioning impairments, because stigmatized group members must expend cognitive resources to determine whether such events are racially motivated (Murphy et al., 2013). Beyond the ambiguity surrounding identity questioning attributions, Multiracial people can interpret questioning as an unnecessary focus on their physical appearance that contributes to feelings of exotification (Museus et al., 2016).

Sources of discrimination may matter to understanding the landscape of Multiracial stigma and Multiracial people uniquely encounter discrimination from their monoracial minority peers at relatively high rates (Renn, 2004). In fact, discrimination perpetrated by racial minority ingroup members has been linked to poorer psychological and physiological outcomes for Multiracial individuals than when they face discrimination from other racial groups (Franco & Franco, 2016; Hoggard et al., 2015).

Familiarity with the perpetrator of Multiracial microaggressions and discrimination may also play an important role. For example, Multiracial individuals report experiencing microaggressions and discrimination from family members (Childs, 2002; Greig, 2015). These experiences include having their identity challenged or denied; feeling isolated, uneducated about the Multiracial identity, or otherwise devalued in their family (Nadal et al., 2013). Family discrimination challenges the assumption that family members provide unconditional acceptance, and has been linked to cardiovascular reactivity, and increased anxiety, depression and substance use in Multiracial populations (Franco & Carter, 2019; Franco & O'Brien, 2020).

Altogether, Multiracial discrimination research highlights another unique feature of Multiracial stigma. Multiracial people may experience dual/multifaceted discrimination—discrimination based on their Multiracial identity and other minority identities, from monoracial ingroup members, and from family. Thus, Multiracial stigmatization reflects multiple aspects of their racial identity (e.g., being Multiracial, being hard to categorize, being minority, being White) and

multiple kinds of perpetrators (i.e., family, friends, racial minorities, White people).

Multiracial isolation. Given the multi-sourced and multi-motivated nature of Multiracial discrimination, many Multiracial people indicate experiencing racial homelessness or isolation. Multiracial isolation may worsen, given the rarity of proximal Multiracial role models and communities. While the Multiracial population is poised to grow exponentially, Multiracial people may make up less than 3% of the American population (Humes et al., 2011). Despite the increasing prominence of Multiracial celebrities and leaders (e.g., Meghan Markle, Barack Obama, Bruno Mars, Keanu Reeves), modeling diverse approaches to self-identification (e.g., Black identification or Multiracial identification), many Multiracial individuals are physically isolated from Multiracial peers. Moreover, low racial diversity neighborhoods may be particularly difficult contexts to navigate as a Multiracial person because low diversity neighborhoods harbor higher distrust about Multiracial individuals (Freeman et al., 2016).

While most monoracial minority youth can look to their family members as racial guides who share their racial experience, many Multiracial children grow up with no Multiracial family members and struggle to find Multiracial role models (Brunsma, 2005; Shih & Sanchez, 2005). Yet, racial socialization (e.g., being told by parents how to contend with discrimination) buffers the negative effects of discrimination on self-esteem and minority health (e.g., Harris-Britt et al., 2007; Neblett et al., 2008). Multiracial children may experience little racial socialization involving pro-active strategies to contend with race and instead, live in households that de-emphasize race (e.g., Rollins & Hunter, 2013; Shih et al., 2007). Given the potential for Multiracial people to lack Multiracial peers as alternative sources of racial socialization, policies and interventions must address Multiracial stigma and foster positive Multiracial socialization.

How Public Policies and Interventions Can Address Multiracial Stigma

Although policy-relevant research remains scarce regarding the Multiracial demographic, existing research suggests several policy implications.

Multiracial Inclusive Reporting

Check-all-that-apply racial measures have psychological benefits for Multiracial individuals by recognizing and validating Multiracial identities. Such measures can improve accuracy in racial demographic assessments and facilitate life-saving donor matching. Thus, employers, practitioners, and policy makers should consider adopting multiracial-inclusive race assessments. Moreover, the practice of

recording Multiracial identity should accompany reporting procedures that recognize Multiracial identities as legitimate social groups. For example, assessing Multiracial identity and then using data only on minority-monoracial populations—either excluding Multiracial respondents as they cannot be easily categorized or recategorizing them as monoracial—disregards Multiracial experiences. Thus, policy makers should consider fully integrating Multiracial perspectives: starting with standardizing assessments to allow respondents to indicate more than one race, followed by reporting procedures that describe how Multiracial respondents were treated in the data analysis. Organizations should additionally consider treating Multiracial respondents as a group, with the level of specificity deemed appropriate by the available data (e.g., all Multiracial respondents, broken down by type of Multiracial background).

Commonly, policy makers and organizations disseminate guidelines for treating race/ethnicity. The American Psychological Association (2020) Publication Manual provides guidelines regarding how to discuss race, including the proper terminology and capitalization of racial groups; however, these guidelines treat references to people of multiple racial groups as common nouns (e.g., multiracial populations rather than Multiracial populations) while referring to specific racial groups as proper nouns (e.g., Black, Latinx). Multiracial people often consider themselves to be a specific racial group as well, so we have intentionally bucked this norm throughout the present article to underscore this point. While this may seem trivial, language is a powerful communicator of legitimacy, reflects implicit biases, and reinforces power differentials (Bailey et al., 2019). In fact, the Associated Press recently changed their style guide to now formally capitalize "Black" in response to their history of not properly recognizing that racial group (Craven, 2020). Similarly, public policymakers should also consider challenging the norm of treating the term "Multiracial" differently than the term, "Black" and "Latinx" through differences in capitalization, especially in communications that seek to legitimize the treatment of Multiracial individuals as members of a culturally meaningful, unique group.

Greater Multiracial Transparency

The *Grutter v. Bollinger* (2003) landmark Supreme Court decision on affirmative action allows universities to consider race in admission decisions because of the educational benefits associated with diversity. When applicants indicate their race on applications considering minority status a plus factor or determining eligibility for loans (e.g., minority business loans) and fellowships (e.g., The Ford Foundation fellowship), there is a lack of transparency regarding how claiming a Multiracial identity will affect eligibility. In particular, Multiracial people occupy a unique position in the legal system. Some scholars have argued that Multiracial individuals

are not afforded equal protection under antidiscrimination policies because no U.S. laws protect Multiracial populations, an exclusion that many Americans support (Campbell & Herman, 2010; Williams, 2006).

White and Minority Multiracial people may seem less eligible for broadening participation programs, such as minority scholarships and affirmative action efforts, compared with their monoracial minority peers. For example, Black/White Multiracial individuals were perceived as less appropriate recipients of affirmative action than Black monoracial or Black/Native American individuals (Good et al., 2013). Minority/White Multiracial people seem eligible if they otherwise document characteristics associated with their constituent minority identity. For example, Latinx/White Biracial targets appeared more eligible for minority scholarships if they spoke Spanish or were described as lower SES, compared with Latinx/White Biracial students who were not fluent or higher SES (Wilton et al., 2013; Young et al., 2016). This is in line with beliefs about whether multiracial people have actually experienced discrimination (e.g., "lived the Black experience"). For instance, Black/White Multiracial people described as having greater minority (than White) ancestry were perceived to be more likely to experience discrimination, which explained why they were also perceived as more eligible for affirmative action policies (Sanchez et al., 2011). Given the accumulating research documenting their stigmatization, Multiracial people may harbor concerns about indicating their Multiracial background during high-stakes applications when policies about their treatment are not transparent.

Multiracial-Specific Health Interventions

While many Multiracial individuals gain strength from their Multiracial background (Gaither, 2015; Gaither et al., 2015), Multiracial people also show greater risk of substance abuse, mental health disorders, and certain behavioral problems than their monoracial peers (Chavez & Sanchez, 2010; Cooney & Radina, 2000; Fisher et al., 2014; Straka et al., 2019). Yet, to our knowledge, no interventions specifically target the Multiracial experience, despite growing evidence of Multiracial stigma and the potential downstream health care savings of early action.

To address Multiracial stigma related to health disparities, diversity-related education and prejudice-reduction programs should include efforts to mitigate Multiracial microaggressions and discrimination (e.g., identity denial, questioning, familial discrimination, singular category assessments). In addition, minority programs tailored to building community and facilitating positive racial socialization should integrate education tailored to Multiracial-specific racial socialization (e.g., how to respond to questions such as: "What are you?," "Are you sure your dad is really your dad?"). School-based efforts could include access to Multiracial-specific cultural groups and spaces on campus,

and transparent rules about membership in multiple racial/cultural groups. Given the importance of access to similar others with shared experiences as a means of lifting feelings of isolation for minority group members, peer mentoring programs should develop creative solutions to provide access to Multiracial role models for Multiracial students in high school and college.

Moreover, practitioners who work with Multiracial individuals could receive more training on Multiracial-specific stigma and health correlates (e.g., Greig, 2015). In addition, parents of Multiracial children should have access to resources that provide Multiracial-specific guidance on racial socialization, addressing familial discrimination, and other evidence-based strategies supporting positive racial identity development across the lifespan (Atkin & Yoo, 2019).

Developing early interventions may temper downstream health care spending by preventing mental and physical health problems. In addition, promoting Multiracial belonging could reduce the risk of substance use and problem behaviors, allowing youth to thrive and contribute meaningful social capital. Moreover, such interventions would address the needs of Multiracial individuals and their families as well as make health care practices more representative and inclusive.

Conclusion

Arguably, a new era of racial conceptions might seem a result of the growing Multiracial population, but the data are mixed. On the contrary, after experimental exposure to Multiracial populations, participants later conceptualize race as less fixed and less based on biology (Gaither et al., 2018; Sanchez et al., 2015; Wilton et al., 2014; Young et al., 2013). These less essentializing views of race over time, increase egalitarian racial attitudes, foster cognitive flexibility among monoracial populations (Pauker, Carpinella, et al., 2018), and benefit Multiracial health (Sanchez & Garcia, 2009). On the contrary, Multiracial people report identity denial (Albuja et al., 2019b), exposure to stereotypes and marginalization (e.g., Skinner et al., 2019), and experience perceivers applying hypodescent or one-drop rules in their categorization (Chen, 2019). Thus, on the second anniversary of the first U.S. Census to allow check-all-that-apply race options, it is opportune to consider how future policies and reporting practices can better address Multiracial stigma.

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