

Governors State University

OPUS Open Portal to University Scholarship

All Capstone Projects

Student Capstone Projects

Fall 2018

Using Genograms to Explore Transgenerational Trauma and Racism in African American Couples

Hollie F. Campbell

Governors State University

Follow this and additional works at: <https://opus.govst.edu/capstones>



Part of the [Counselor Education Commons](#)

Recommended Citation

Campbell, Hollie F., "Using Genograms to Explore Transgenerational Trauma and Racism in African American Couples" (2018). *All Capstone Projects*. 362.

<https://opus.govst.edu/capstones/362>

For more information about the academic degree, extended learning, and certificate programs of Governors State University, go to http://www.govst.edu/Academics/Degree_Programs_and_Certifications/

Visit the [Governors State Education Department](#)

This Dissertation is brought to you for free and open access by the Student Capstone Projects at OPUS Open Portal to University Scholarship. It has been accepted for inclusion in All Capstone Projects by an authorized administrator of OPUS Open Portal to University Scholarship. For more information, please contact opus@govst.edu.

USING GENOGRAMS TO EXPLORE TRANSGENERATIONAL TRAUMA
AND RACISM IN AFRICAN AMERICAN COUPLES

A Dissertation

Presented to

The Graduate Faculty at Governors State University

In Partial Fulfillment

Of the Requirements for the Degree

Doctor of Education

Hollie F. Campbell

December 2018

© 2018

Hollie F. Campbell

ALL RIGHTS RESERVED

Abstract

Despite a significant amount of literature on genograms in the ERIC, PsycINFO, and SocINDEX with full-text databases, only a handful of articles and book chapters address using genograms with African Americans. Of the articles that were found on the clinical application of the genogram as a counseling technique with African American couples, three provided a specific set of interview questions for the construction of a genogram, but did not explore the effects of transgenerational trauma and racism on these couples. Using a modified Delphi technique, the researcher solicited input from a panel of experts who developed and then assessed a set of questions that the experts thought were appropriate for the construction of a genogram to explore racism and microaggressions among African American couples. The Delphi method was selected because it is known to be effective when consensus is sought in an area where none previously existed. In the first phase of the Modified Delphi the panel experts generated 120 questions. 81 questions remained following the researcher's analysis and 35 questions were found to be appropriate to ask clients to create a genogram that explored transgenerational trauma and racism.

Acknowledgments

There are far too many people to acknowledge and I would be remiss if I were to name but a few and not all who supported me along this long and difficult journey. I will limit my acknowledgement to three. First I give honor to God who is the Lord of my life. Secondly I acknowledge my dissertation committee, Dr. Shannon Dermer (chair), Dr. Vickii Coffey, Dr. Shea Dunham, and Dr. Patricia Robey. Finally I sincerely thank my husband Willie without whose strength support hard work and love this accomplishment would not have been possible.

Table of Contents

Abstract.....	iii
Acknowledgments.....	iv
List of Tables	viii
CHAPTER I: INTRODUCTION.....	1
Background of the Problem	2
Statement of the Problem.....	4
Purpose of the Study	6
Research Questions.....	7
Assumptions, Limitations, and Delimitations.....	8
Conclusion	8
Definition of Terms.....	9
CHAPTER II: REVIEW OF THE LITERATURE	12
Genograms	13
Couples Genograms	15
Focused Genograms.....	16
Attachment Genogram.....	16
Emotions Genogram	17
Anger Genogram.....	18
Gender, Sexuality, and Romantic Love Genograms.....	19
Multicultural Counseling	20
Critical Theory	21
Critical Race Theory.....	22

Helping Clients to Understand the Impact of Racism on Their Relationships	28
Meyer’s Minority Stress Model	28
Epigenetics	30
Transgenerational/Intergenerational Trauma	32
Addressing Intergenerational Trauma via the Genogram	39
Cultural Genogram	43
Specialized Genograms for African Americans	45
African American Genogram	46
Family Integrated Genogram	47
Cultural Genogram with African American Families	49
Spirituality-Focused Genogram in Practice with African Americans	50
Critical Genogram (CritG)	51
Transgenerational Trauma and Resilience Genogram (TTRG)	52
The Gap in Genogram Literature	53
CHAPTER III: METHODS	59
Participants	59
Phase 1: Delphi Questionnaire I and Analysis	64
Phase 2: Delphi Questionnaire II and Analysis	66
CHAPTER IV: RESULTS	67
Delphi Questionnaire I	67
Delphi Questionnaire II	74
Summary	85
CHAPTER V: DISCUSSION	92

Prompt 1	92
Prompt 2.....	95
Prompt 3.....	97
Prompt 4.....	98
Prompt 5.....	99
Implications.....	102
Limitations of the Study.....	104
Suggestions for Future Studies	106
References.....	107
Appendix A – Letter to Participants	116
Appendix B – Demographic and Professional Background Questionnaire.....	117
Appendix C – Consent Form	119
Appendix D – Delphi Questionnaire I	121

List of Tables

Table 1. Specialized African American Genogram Features Comparison	58
Table 2. Participant Demographics, Experience, and Publications	63
Table 3. Prompt 1.....	69
Table 4. Prompt 2.....	70
Table 5. Prompt 3.....	71
Table 6. Prompt 4.....	72
Table 7. Prompt 5.....	73
Table 8. Interquartile Range Calculations: Prompt 1.....	75
Table 9. Interquartile Range Calculations: Prompt 2.....	76
Table 10. Interquartile Range Calculations: Prompt 3.....	77
Table 11. Interquartile Range Calculations: Prompt 4.....	78
Table 12. Interquartile Range Calculations: Prompt 5.....	79
Table 13. SPSS Consensus: Prompt 1.....	81
Table 14. SPSS Consensus: Prompt 2.....	82
Table 15. SPSS Consensus: Prompt 3.....	83
Table 16. SPSS Consensus: Prompt 4.....	84
Table 17. SPSS Consensus: Prompt 5.....	85
Table 18 Consensus Questions Prompt 1.....	86
Table 19 Consensus Questions Prompt 2.....	87
Table 20 Consensus Questions Prompt 3.....	88
Table 21 Consensus Questions Prompt 4.....	89
Table 22 Consensus Questions Prompt 5.....	90

CHAPTER I: INTRODUCTION

Genograms are useful for assessment and therapeutic intervention in the counseling profession and are adaptable to a variety of settings. A widely used tool in the counseling field, the family genogram is used in assessment, intervention, and information-gathering across professional settings (McGoldrick, Gerson, & Petry, 2008; Shellenberger, 2007). Counselors use genograms to enable clients to explore patterns in their family systems and gain insights that can lead to changes in client attitudes and beliefs (DeMaria, Weeks, & Hof, 1999; DeMaria, Weeks, & Twist, 2017). Many types of genograms have been adapted for varied purposes and different types of clients. DeMaria et al. (1999) and DeMaria et al. (2017) offered examples of different kinds of genograms, including the attachment genogram; emotions genogram; anger genogram; gender, sexuality, and romantic love genograms; and culture genogram. Beyond the genograms offered by DeMaria et al. (1999) and DeMaria et al. (2017), a few genograms have been designed to assess African American families specifically. However, none has been designed to explore the current impact of generations of discrimination and violence against African Americans. While a cultural genogram can be used with African Americans, it has not been explicitly applied with African Americans to address the systemic problem of racism. To discuss the topic of genogram use with African American clients, an exploration of the historical context and present-day social environment of the African American is necessary. The present-day social environment of African Americans has its roots in slavery.

Kambon (as cited in Boyd-Franklin, 2003) referred to slavery as *Maafa*, the “great disaster,” and estimated those who died during slavery, including those lost in crossing the ocean, ranged from 25 million to over 100 million (Boyd-Franklin, 2003). Slavery set the tone for people of African descent to be treated as inferiors by hegemonic Caucasian individuals,

systems, and forces. The effects of forced immigration on African Americans as an enslaved people, multigenerational experiences within a system of racism and oppression, and the unique aspects of the African American racial and cultural heritage combined to produce the Black experience, different from that of any other group in U.S. history (Boyd-Franklin, 2003). Although genograms can be used with any family, counselors may need guidance on how to use them to specifically explore the intergenerational impact of slavery as well as current violence and discrimination against African Americans. No such genogram currently exists in the literature. To this end, using a standard genogram that does not address the uniqueness of the African American experience and omits an influence as pervasive as racism is a disservice to the client.

Background of the Problem

Racism is the longstanding system of dominance power, privilege, inequity, and oppression based on racial hierarchies. The system of racism was created and is sustained through the transformation of race prejudice through the exercise of power against a racial group defined as inferior (Miller et al., 2018). Racism and discrimination have an insidious, pervasive, and constant impact on the lives of African Americans and can negatively affect many areas. Stressors such as racism, discrimination, and unrelenting conditions related to race and poverty negatively affect African American individuals, couples, and families (Alexander, 2013; Boyd-Franklin, 2003; Goodman, 2013; Graff, 2011; Gump, 2010; Laszloffy & Hardy, 2000; Stefancic & Delgado, 2013; Sullivan, 2017). Among the many forms whereby racism and microaggressions are expressed is mass incarceration. Michelle Alexander (2013) asserted that the mass incarceration of African American males negatively impacts the number of African American males available for marriage, resulting in such a reduction in the marriage rate among

African American couples that marriage has been referred to as a “minority lifestyle” for African Americans (McAdoo, 2007, p. 145). African American marriages are typically less successful than the marriages of other couples in America. The divorce rate among all heterosexual Americans is 50%. In comparison, the divorce rate among heterosexual African American couples is 67% (Dixon, 2008). Beyond the emotional effects of racism and discrimination are negative physiological effects. Recent work in the field of epigenetics has provided evidence that trauma produced by racism is transmitted among African Americans intergenerationally. Birth weights and survival rates for African American infants are significantly lower than those of White infants, hypertension and cardiac disease are prominent among African American men, and African Americans have a lower life expectancy; all these are being linked to the effects of systemic racism (Graff, 201; Gump, 2010; Sullivan, 2013, 2017).

Racial discrimination is evident at all levels of society and does not lessen with advances by Blacks in economic status, education, geography, and career or job level. For African Americans of all levels, a markedly virulent strain of racism and discrimination has persisted in a variety of forms for multiple generations over a period of 400 years. Regardless of the debate and comparisons made to other groups, most African Americans in the United States hold this view of racism as a pervasive condition in America that permeates their experiences (Boyd-Franklin, 2006; Miller et al., 2018). The literature reflects the work that is being done to address racism in the fields of psychology, counseling, and social work.

In an article in the *Journal of Counseling Psychology*, Miller et al. (2018) summarized and evaluated practice recommendations for addressing racism found in 73 peer-reviewed articles in counseling psychology literature. Their work provided mental health professionals with 51 strategies for addressing individual, group, and systemic racism. However, the articles

did not include the use of genograms to treat trauma as a result of racism, nor did they provide a protocol for questioning clients about their experience with racism. Despite all the evidence that work is needed in this area, little work is being done. A few experts (Boyd-Franklin, 2003; Coleman, 2016; Goodman, 2013; Graff, 2011; Gump, 2010; Helms, Nicolas, & Green, 2012) have written on the impact of racism, transgenerational trauma, and shame in the treatment of African American couples and families. However, none of these scholars addressed racism using a genogram in counseling African Americans.

Statement of the Problem

Critical race theorists posit that racism is causal in the perpetual sub-class status of African Americans (Stefancic & Delgado, 2013). While African Americans do not typically seek or persist in mental health services (Boyd-Franklin, 2006), for those who do seek such services, the genogram could be a more useful tool if it incorporated the effects of racism when used by helping professionals. McCullough-Chavis and Waites (2004) posited that cultural heritage and influences as well as intergenerational family values, patterns, transactions, and strengths can be examined within five core areas in the lives of African Americans. The authors further noted that role flexibility, extended family networks, caregiving, special care for children and elders as well as impaired family members and giving back to the community, spirituality and religious beliefs and practice, family history, beliefs, values, rituals, and traditions are readily examined through genograms. McCullough-Chavis (2004) offered 27 interview questions over seven categories for use with African American families when constructing a genogram. However, none of the categories or individual questions address intergenerational racism or microaggressions. On a related note, Watts-Jones (1997) asserted that the genogram is typically employed to address the

biological family and is not used with the extended family networks of African American families.

The problem is that while racism and microaggressions are destructive influences in the day-to-day lives of African Americans (Trahan et al., 2014), these oppressive sources of stress for blacks persist and are not being addressed through the genogram. Shame and rage are critical issues that result from experiences with racism and manifest in the African American individual couple or family. The power differential in racist society may cause African Americans to react in ways that are an attempt to exert the power that they lack in an oppressive society in areas where they do have power. For example, Boyd-Franklin and Franklin (1998) posited that in a couple, when a man feels dehumanized, he may assert his authority in sexist ways in his marital relationship to compensate. Therapists must challenge sexist behavior but also consider how racism may have contributed to the experience of a power imbalance in the home. African American women may experience oppression and sexism from both White society and in their relationships with black men. Boyd-Franklin (1998) asserted that while Black men and women have been and continue to be victimized in America, they are also victimizing each other.

Boyd-Franklin (1998) noted that in the early stages of treatment with African American couples, an emphasis on engagement and problem-solving techniques provided couples with concrete solutions to pressing problems and helped to establish the credibility of the therapist. Once trust has been established and the therapist has gained credibility, the Bowenian approach using genograms can be useful in clarifying the family projection processes and the multigenerational transmission process.

An extensive search of the literature did not yield any research on the use of the genogram to address racism in the lives of African Americans. For example, DeMaria et al.

(1999) offered the cultural genogram, and Watts-Jones (1997) provided the African American genogram to counsel African American couples and families. DeMaria et al. (2017) integrated attachment theory as an intergenerational relational experience that affects individuals, couples, and families. However, DeMaria et al. (2017) offered no specialized genogram for work with African Americans and asserted that “the most notable, important, and exciting contribution in this second edition of *Focused Genograms*” (p. 4) was attachment.

The literature on genograms provided no reference to the use of genograms to address racism specifically. This study aimed to fill the gap in the research by gathering consensus from experts in the field about the most critical questions to ask African American couples to raise critical consciousness regarding the effects of racism and the trauma that it has inflicted on couples and their family. The ultimate future goal of this study is the development of a genogram interview protocol for exploring the effects of racism on these couples.

A modified Delphi study was conducted to focus on the use of the genogram by counselors to assess the impacts of racism on African American couples. Through this technique, participants having expertise in counseling African Americans and skill with genograms were engaged to serve as an expert panel to discuss the usefulness of the genogram to address racial trauma experienced by African American couples and their families intergenerationally.

Purpose of the Study

The purpose of this study was to develop of a list of important questions that should be asked of African American couples when constructing genograms to explore the effects of racism. In this study, experts in the field were asked to generate and rate a list of questions. Through five teaser questions, the experts were asked to develop a list of questions that they felt would assist therapists in gathering client information for the construction of a genogram that

would address the experiences of racism among African American couples. The proposed research questions for the expert panel are listed in Appendix D, and a discussion of the methodology is included below.

Research Questions

The panel participants were asked to consider how therapists working with African American couples should gather information from their clients related to the impact of racism on their families intergenerationally. The questions should stimulate clients to explore their current individual experience with racism and consider how racism has impacted their relationship as a couple. The panelists were asked to develop the list of questions through the following five prompt questions:

- What questions should a counselor ask African American couples to explore the intergenerational impact of racism on African American couples?
- What questions would you ask to explore an individual's current experience with racism?
- What questions would you ask to explore how microaggressions impact them as individuals and as a couple?
- What questions would you ask to explore how has racism impacted a couple's relationship?
- What other question would you ask on this topic?

The ultimate goal of the study was the development of a series of questions that will equip therapists to elicit a couple's narrative regarding their experiences with racism and its impact on their relationship.

Assumptions, Limitations, and Delimitations

The Delphi method is based on the philosophical assumption that “n heads are better than one.” This procedure is designed to sample a group of knowledgeable persons in order to gain a consensus of opinion on a particular topic (Fish & Busby, 2014). Two of the limitations of using a modified Delphi are sample size and response rate. If the sample size is too small, the subjects may not be considered as having provided a representative pool. A slow response rate may lengthen the time between iterations of data collection and potentially lead to participant attrition. Automated tools such as an online survey and email provided the opportunity for the researchers to implement the Delphi process more efficiently. The study was conducted using the storage, processing, and speed of transmission of computers; maintaining respondent anonymity; and offering the potential for rapid feedback (Hsu & Sanford, 2007). A delimitation of this study was the number of iterations of data collection used in the modified Delphi method. This study was limited to two rounds of data collection and two rounds of data analysis.

Conclusion

African American couples often experience relationship stress due to the added burden of racism and discrimination (Boyd-Franklin, 1998). Boyd-Franklin and Franklin (1998) have indicated that struggles with racism and the stress it creates can exist even among African American couples in higher socioeconomic strata and among those who have achieved high vocational and educational levels. African American couples may present with problems that are really caused by the rage they feel because of the inequities and oppression resulting from the system of racism that they live under. The couple’s relationship problem thus involves anger misdirected toward family members or a spouse. It is imperative that helping professionals be aware of the ever-present impacts of racism on the lives of African Americans. This study will

add to the research available for working with African American couples. The outcome of this study will provide a method for constructing a genogram that focuses on the impact of racism on African American couples seeking therapy.

Definition of Terms

Allostasis/Allostatic Load: Allostasis is a physiological regulation in which the internal stability of an organism is maintained while the organism deals with a challenge or crisis. When the body undergoes a physical or social challenge, it temporarily produces extra hormones, such as adrenaline, that help the organism meet the challenge and then ceases producing them when the challenge has passed. In the case of ongoing stress, however, the body does not stop its excess hormone production, resulting in a high allostatic load (Sullivan, 2017).

Chattel Slavery: Chattel slavery is a civil relationship (best known during slavery in the United States) in which one person has absolute power over the life, fortune, and liberty of another. Total ownership included children of chattel slaves who were born the property of their parent's master (Sontero, 2006).

Critical Theory: Critical Theory is a philosophical approach to culture and literature that confronts the social, historical, and ideological forces and structures that produce and constrain society.

Critical Race Theory: Critical race theory is a more specific application of Critical Theory for understanding race, racism, and power.

Convict Leasing: Following the Civil War, former slaves and their descendants were routinely arrested for minor violations, slapped with hefty fines, and then imprisoned until they could pay their debts. The only means to pay was through labor on plantations and farms in a

practice known as convict leasing or in prisons that had been converted to work farms (Alexander, 2012).

Delphi Technique: A widely used method of gathering data from respondents within their domain of expertise. The technique is designed as a group communication process that aims to achieve a convergence of opinion on a specific real-world issue (Hsu & Sanford, 2007).

Epigenetics: Epigenetics refers to somatically heritable states of gene expression without alterations in the deoxyribonucleic acid (DNA) sequence (Choi & Friso, 2010). It is the study of heritable changes in gene expression (active versus inactive genes) that does not involve changes in the underlying DNA sequence. A change in phenotype without a change in genotype.

Focused Genogram: This diagnostic and therapeutic process is organized through a set of questions that explore salient aspects of the client(s) family system and processes, such as attachments, emotions, or gender, that are graphically depicted (DeMaria et al., 1999, p. 25).

Historical Trauma Theory: Historical trauma theory is based on the premise that populations historically subjected to long-term mass trauma, colonialism, slavery, war, and genocide have a higher prevalence of disease several generations after the original trauma occurred (Sontero, 2006).

Modified Delphi Technique: The modified Delphi differs from the standard Delphi method because it reduces the number of iterative rounds of participants' feedback from as many as four down to two.

Post Traumatic Slave Syndrome: Post Traumatic Slave Syndrome is a condition that exists when a population has experienced multigenerational trauma resulting from centuries of slavery and continues to experience oppression and institutionalized racism today. This involves

multigenerational trauma together with continued oppression and absence of opportunity (real or imagined) to access the benefits available in the society (DeGruy, 2017).

Racism: Racism is “a system of dominance, power, and privilege based on racial-group designations; rooted in the historical oppression of a group defined or perceived by the dominant-group members as inferior deviant, or undesirable” (Harrell, 2000, p. 43).

Racial Microaggressions: Racial microaggressions are commonplace exchanges that convey insulting or demeaning messages to people of color (Constantine, 2007; Franklin, 1999; Sue et al., 2008). Categories of microaggressions include colorblindness, over-identification, and denial of personal or individual racism as well as minimization of racial-cultural issues.

Transgenerational Transmission Process: Sometimes referred to as the multigenerational transmission process. According to family systems theory, individual differences in functioning and multigenerational trends in functioning reflect an orderly and predictable relationship process that connects the functioning of family members across generations (Kerr & Bowen, 1998).

Transgenerational Trauma: Transgenerational trauma is the transmission of trauma within families or communities across generations (Goodman, 2013).

CHAPTER II: REVIEW OF THE LITERATURE

In a content analysis of peer-reviewed counseling psychology literature, Miller et al. (2018) provided a summary and critique of practices and recommendations aimed at addressing racism through practice. Based on their review of the literature, the authors identified eight general categories of recommendations for addressing racism: psychoeducation, validation, self-awareness and critical consciousness, critical examination of privilege and racial attitudes, culturally responsive social support, developing a positive identity, externalize minimize self-blame, and outreach and advocacy. These eight categories netted 51 strategies for practice to address racism. None of the strategies included the use of a genogram or provided a list of questions that therapists may use to help clients explore the experience of racism.

Extensive literature exists on couple counseling and therapy models and interventions, but few have been researched explicitly for application to and effectiveness with African American couples (Boyd-Franklin, 2006). For example, family and couple therapists/counselors have been using genograms, a pictorial representation of families and their relationships, since the 1950s as part of Bowen Family Systems Theory and as an auxiliary assessment and intervention to other models. Today, genograms are widely used in marital, couple and family counseling and therapy (McGoldrick & Gerson, 1985; McGoldrick, Gerson, & Shellenberger, 1999; Watson, 2016). Searching “genogram” in ERIC, PsycINFO, and SocINDEX with full-text databases yielded 718 books, book chapters, or articles. Despite a large amount of literature and the fact that genograms have been in use for almost 70 years, only a handful of articles and book chapters have been written about using genograms with African Americans. A search of the same databases revealed only nine book chapters or articles that addressed using genograms with African Americans as an intervention (as opposed to just collecting information for research;

Barthwell, 1995; Boyd-Franklin, 1984; Dunn, Dawes, & Johnson, 1999; Hardy & Lasloffy, 1992; Mahmoud, 1996; McCullough-Chavis, 2004; McCullough-Chavis & Waites, 2007; Mitchell & Schillingford, 2017; Watts-Jones, 1997). Although genograms can be used similarly with all clients, some more culturally sensitive ways genograms may need to be used with African American clients, specifically African American couples (DeMaria et al., 1999; McCullough-Chavis, 2004).

Genograms

Genograms are graphic representations of family members and their relationships over at least three generations. The genogram is used in counseling to explore an individual's family system, identify problematic patterns, and coach clients to engage in healthier patterns. The basic genogram is used to graphically depict the family information (e.g., parents and their children, marriage, deaths) and the nature of family relationships (e.g., close, distant, overly-involved) inter-generationally (DeMaria et al., 1999, 2017; McGoldrick et al., 2008; Mitchell & Shillingford, 2017). Genograms are most closely associated with Murray Bowen's Family Systems Theory, which used intergenerational patterns to help explain and explore individual functioning as it related to their family context. Bowen's theory is a systemic approach to resolving problems in the family unit.

Contrary to other theoretical counseling models that identify pathology within an individual, counselors who follow Bowen's family systems theory understand pathology to be the result of emotional anxiety that reverberates throughout family systems (Kerr & Bowen 1998; McGoldrick, 2008). The healthiness of an individual and family system is determined by their patterned ways of managing emotional anxiety in helpful or unhelpful ways. Those who manage emotional anxiety better are labeled as more differentiated. A genogram is a valuable

tool used by counselors who follow Bowen's methodology to track patterns of how families cope with emotional anxiety across generations and within generations.

Although the genogram is linked to Bowen's Family Systems Theory, genograms have been widely accepted among clinicians of varying theoretical orientations and other helping professions as a technique for assessment of individuals, couples, and families and other types of organizational systems (Watson, 2015). Genograms can be used for basic assessment of family information, as an integrated part of intergenerational models, and as a way to explore specific themes (DeMaria et al., 1999).

A genogram is used by counselors and other practitioners for mapping clients in context. Genogram contexts include ethnicity, race, religion, spirituality, migration, class, socioeconomic status, gender, sexual orientation, education, chronic illnesses, and geopolitical structure, all of which can influence family dynamics and processes (McGoldrick et al., 2008). While McGoldrick and Gerson (1985) compiled the most commonly used symbols for outlining family members, structure, and interaction, theorists use the genogram differently. For example, practitioners who follow the methodology of Minuchin (1974) focus on mapping family structure, boundaries, and transactional patterns. Hartman and Laird (1983) recommended the use of symbols to describe connections and energy flow in the system. Hardy and Laszloffy (1995) advocated representation of multiracial marriages (DeMaria et al., 1999).

The genogram is useful in systems thinking for mapping patterns and understanding client problems in a family context. This tool can be used to illustrate the emotional processes of a family through generations. Thereby, practitioners can assist clients in disclosing emotional interactions that reveal patterns and possibly dysfunction in their families of origin. The practitioner can use this information to understand the family life and individual development

over time. The genogram is also useful to depict significant cultural patterns, beliefs, values, traditions, and family strengths (McCullough-Chavis & Waites, 2004). In addition to the utility of the genogram, the tool also has limitations. For example, genograms can be hampered by the sheer volume of information gathered. The ability of the practitioner to develop working hypotheses is confused when too many multiple patterns and themes are present. Finally, family secrets, misinformation, and information gaps affect the development of the genogram (DeMaria et al., 1999).

Couples Genograms

Genograms are used with different types of systems (e.g., family, couple, and work), and the basic process is the same no matter what type of system is being examined. The literature presents specific examples of couples work with genograms. For example, genograms have been used to manage strong emotions and promote empathy (Cook & Poulsen, 2011), explore sexuality (Belous, Timm, Chee, & Whitehead, 2012; Hof & Berman, 1986), examine the social construction of marriage (Aniciete & Soloski, 2011), and discuss how occupational choices influence couple relationships (Kakiuchi & Weeks, 2009). The Basic Needs Genogram has also been used with couples to explore how people's basic needs for survival or self-preservation, love and belonging, power or self-worth, freedom or independence, and fun or enjoyment affect couple interactions (Duba, Graham, Britzman, & Minatrea, 2009). Duba et al. (2009) also explored how the Basic Needs Genogram could be used with inter-religious couples. Furthermore, the Intrarelationship Diversity Identifying Genogram (IDIG) can be used with couples to focus on differences in marital expectations related to culture (Aniciete & Soloski, 2011).

Focused Genograms

In addition to these genograms, DeMaria et al. (1999) compiled a book of *focused genograms*. These are topics-based genograms, focused on specific concepts that can be especially useful for work with couples and families. DeMaria et al.'s (1999) book of "focused genograms" includes the topics of attachment, emotions (i.e., emotional intelligence), anger, gender, sexuality, romantic love, and culture.

Attachment Genogram

DeMaria et al. (2017) posited that attachment theory is important in client assessment. The attachment genogram can help the counselor to understand attachment issues. Touching and holding infants and children is considered essential to their survival. The importance of holding was realized in the United States by physicians at Bellevue Hospital in New York who were searching for a cause of infant death in the early 1900s. They found that "mothering" (caressing, cuddling, and cooing) lowered the mortality rate (DeMaria et al., 1999). Bowlby's research and work on attachment furthered this early exploration. Attachment is experienced as a psychological bond and becomes organized in the second half of the first year of life. Attachment theory describes the expectations that people develop about how relationships are supported under stress (DeMaria et al., 1999; DeMaria et al., 2017). The similar processes that assist infants and children in developing a secure attachment are also important to romantic adult relationships (Gottman, 2011; Greenberg & Johnson, 1988).

The attachment genogram is based on Bowlby's (1977) attachment theory and provides a means for evaluating the quality of interpersonal relationships within the family (DeMaria et al., 1999). Bowlby's attachment theory described how strong affectional bonds are made to particular others and explained the type of emotional distress and personality disturbance,

including anxiety, anger, depression and emotional detachment, caused by loss and separation for both children and adults (DeMaria et al., 1999). Therapists working through the lens of Bowlby's attachment theory examined the presence of touch, bonding empathy, temperament, and attachment scripts to understand the interpersonal effectiveness and security that existed within the family. When paired with a timeline, the attachment genogram can illuminate a developmental framework for examining the attachment processes that took place during the early developmental years and continued later in life. The field of neuroscience reinforces attachment studies. The brain's opiates, endorphin peptides, provide the chemical foundation of attachment (Pert, 1997). Without bonding, brain development in children can be profoundly affected.

The attachment genogram is a focused genogram that examines touch, bonding, temperament and attachment styles and scripts across the lifespan and across relationships (DeMaria et al., 1999, DeMaria et al., 2017). Genograms are a snapshot of the family from the client's perspective in the present and have not been used to assess the early relationship experiences that are integral to parent-child relationships associated with the development of attachment styles. The use of timelines in conjunction with the genogram can add clarity to attachment relationships over time (DeMaria et al., 1999). For couples, exploring attachment can help them to understand their styles of giving and receiving reassurance to a partner as well as making a partner feel loved and safe, and it provides a pathway for healing ruptures to their intimate bond.

Emotions Genogram

The emotions genogram is a format for exploring the emotional intelligence of the family system (DeMaria et al., 1999). Through the emotions genogram, the therapist can illuminate the

emotional tone of the family process, structure, and dynamics. The purpose of the emotions genogram is to trace the emotional history of the individual, couple, and family system to help the client become more aware of patterns of emotional expression of pleasure and pain (DeMaria et al., 1999)

The emotions genogram includes exploring awareness of feeling states, identification of emotional patterns within the intergenerational family system, addressing feeling states and emotional scripts, and either an exploration of emotions within the family system or an exploration of specific feelings, such as sadness, loss, and grief as well as fear and pleasure. Emotions genograms are important for exploring the variety and range of distress expressed by the individual and the family. However, genograms are inappropriate if anger management and anger self-regulations are the focus of treatment (DeMaria et al., 1999). Anger is better treated through an anger genogram.

Anger Genogram

DeMaria et al. (1999) separated the topic of anger from other emotions “because it is a powerful, complex emotion that can be destructive in human relationships creating psychological and physical effects on the individual and family” (p. 125). The purpose of the anger genogram is to help the client system connect current attitudes and behaviors about anger to experiences in the family (DeMaria et al., 1999). The timing of anger genograms is essential. If a couple is in crisis, it is inappropriate to move to anger genograms. Like all other genograms, anger genograms seek historical information to make sense of the current attitudes, emotions, and patterns of behavior.

The first step in creating an anger genogram is to gain an understanding of anger in the here and now. DeMaria et al. (1999) posited that this understanding included helping clients to

discern the difference between thoughts and judgments and feelings. The next step in the process is to address the expressions of anger. Anger is a signal that a need is being unmet or that an injustice has taken place. The role of the therapist includes helping clients understand what his or her anger is telling him or her. Stimulation of anger may be related to the self, partner, the family system, or the social environment (DeMaria et al., 1999).

Anger expressed aggressively in a relationship frequently reveals an underlying need to dominate or control the relationship? Rage, hostility, and aggression left unchecked often lead to physical violence. The long-term impact of couple and family violence suggests an intergenerational transmission of abuse. The effects of early experiences with anger often lay the foundation for difficulties with expressing or containing anger in adult and family relationships. DeMaria et al. (1999) asserted that assessing anger with clients is a crucial part of therapy, and the anger genogram is an effective method for exploring anger.

Gender, Sexuality, and Romantic Love Genograms

DeMaria et al. (1999) included gender, sexuality, and romantic love in a single category in their discussion of genograms. The genogram provided a method to examine these issues with clients. Such issues must be explored through the individual and the family's patterns and beliefs and the cultural and spiritual aspects of what is acceptable. The gender genogram focuses on general beliefs about men and women, family patterns of closeness and dominance, work, money, sexuality, reproductive events, sexual orientation, and physical and psychological dysfunction (DeMaria et al., 1999).

The sexual genogram is usually not done before the client and therapist have developed trust in each other. It is helpful to know precisely the age of parents and the decade of the client's childhood because the historical time and culture will have affected sexual patterns. Also, if the

parents or child were immigrants, it is essential to compare the cultural attitudes on sex from the country of origin with American culture.

Multicultural Counseling

All genograms should include cultural variables such as race, ethnicity, religion, and sexual orientation as part of the information collection and the assessment process. Clinicians should consider how these cultural factors influence family and social functioning. Cultural genograms can provide more detailed examination of cultural dynamics (Aniciete & Soloski, 2011; Hardy & Laszloffy, 1995). However, African Americans, because of their unique history in the United States and their ongoing struggles with racism, may need a more nuanced genogram specifically meant to explore the intergenerational legacy of slavery, trauma, and racism. Beyond general multicultural competencies, counselors may require specific knowledge and skills for effectively working with African American couples (Bean et al., 2000).

Counselors who aid African American couples should be familiar with historical trauma (e.g., slavery, Jim Crow laws, segregation) and current manifestations of racism in interpersonal relationships and societal institutions (e.g., government, law, education) that permeate the African American psyche. In addition to the impact of past and current hardships, clinicians should also know about African American resilience, coping styles, beliefs, traditions, and communication styles. For example, despite being removed from West African roots for generations, African American communities tended to embrace agricultural coping strategies (Utsey, Adams, & Bolden, 2000). An African-centered philosophical framework recognizes spirituality, harmony, balance, a collective group orientation, an emphasis on rituals, and a holistic worldview that envisions everything as having purpose or meaning (Utsey et al., 2000). Before discussing genograms that already exist for working specifically with African Americans,

a review of issues and theory related to African Americans and social injustices will be addressed.

Critical Theory

African Americans have a history of enduring racism, discrimination, violence, segregation, and devaluation that have led to a number of negative consequences such as higher rates of poverty, criminality, lower education, and higher drug use than European Americans (Alexander, 2011; Boyd-Franklin, 2006; Crenshaw, Gotanda, Peller, & Thomas, 1995; Stefancic & Delgado, 2013). Rather than taking the oversimplified and inaccurate route of blaming a marginalized group for their marginalization and the resulting adverse outcomes, social analysis theories such as Critical Theory remind clinicians to look to the responsibility of society in creating social ills.

Critical Theory is a school of thought emphasizing historical and ideological critiques as a way of changing society (Baum, 2015; Bronner, 2013; Horkheimer, 1972). The aim is to explain and transform all aspects of society that dominate and enslave people—it is a form of social inquiry meant to increase people’s freedom (Baum, 2015; Bronner, 2013; Horkheimer, 1972). Tyson (2015) explained that critical theory in general is a philosophical approach to culture and literature that confronts the social, historical, and ideological forces and structures that produce and constrain society. Examples of critical theories that endeavor to change the world include feminism, Marxism, African American criticism, lesbian/gay/queer criticism, and postcolonial criticism (Tyson, 2015). The term Critical Theory, when capitalized, is applied mainly to the work of the Frankfurt School. Brookfield (2001) maintained that Critical Theory revealed how an unjust society convinced people that an unfair situation is normal through

sharing a set of ideas that privileged some groups while disadvantaging others. Critical Theory provided a way of reading a situation so as to both understand and change it (Bronner, 2013).

Critical Race Theory

Critical Race Theory (CRT) is a more specific application of Critical Theory for understanding race, racism, and power (Stefancic & Delgado, 2001). It is a theory of knowledge, critique, and action. CRT has four core themes (Bell, 1995; Delgado et al., 2013; McDowell & Jeris, 2004). First, racism is relentless, a daily fact of life in American society, in which the ideology of racism and white supremacy are so deeply ingrained in the political and legal structures as to be unrecognizable or invisible (Bell, 1995; Delgado et al., 2013). Second, CRT challenged the experience of the White European Americans as the normative standard (Bell, 1995; Delgado et al., 2013). Third, critical race theorists posited that White elites tolerated or encouraged racial advance for Blacks only when such advances also promote White self-interest (interest convergence; Bell, 1995; Delgado et al., 2013). Critical race theorists blamed interest convergence for the lack of forward mobility and a leveling of the playing field that should have occurred among racial/ethnic minorities, particularly African Americans, since the 1960s (Bell, 1995; Delgado et al., 2013). Fourth, CRT rejected the notion of a color-blind view of everyday social relations and racism as a matter of individuals not systems as well as the ideology that racism can be fought without paying attention to sexism, homophobia, and economic dominion (Delgado et al., 2013, p. 108). CRT and the history of race relations between Blacks and Whites in America inform this study.

Americans share a common historical and cultural heritage in which racism is pervasive and largely unconscious (Delgado et al., 2013; Trahan et al., 2014). Wildman and Davis (2013) stressed that using terms like “racism” and “sexism” as a way to describe discriminatory

treatment obscured the pattern of domination and subordination. Labeling an individual as a racist lays the blame on the individual rather than on the forces that have shaped that individual and the society that the individual inhabits, concealing the fact that these “isms” can occur only where they are culturally, socially, and legally supported. The “ism” language perpetuates discrimination and oppression but hides the mechanism that makes oppression persist (Wildman & Davis, 2013). It also hides the existence of specific, identifiable beneficiaries of oppression.

Complex, stressful situations that are discrimination cannot be described using ordinary language because that language masks privilege (Wildman & Davis, 2013). Sexism and heterosexism are examples of power systems that create privilege in some and disadvantages for others (Wildman & Davis, 2013, p. 795). The beneficiaries or those who have privilege are not always the actual perpetrators of discrimination.

Privilege. Privilege is a particular advantage, immunity, permission, right, or benefits granted to or enjoyed by an individual, class, or caste. Additionally, the characteristics of the privileged define the societal norm (Wildman & Davis, 2013). This means that society is measured against attributes held by those who have privilege. Members of privileged groups gain many benefits through their affiliation with the dominant side of the power system and rarely see their privilege.

Seventy-five percent of African Americans believe they have fewer opportunities than Whites, while almost 60% of Whites think Blacks have the same opportunities (Altman, 2006). Whites also believe that the fault for Black failure lies with the victim, not in economic and social inequality (Graff, 2014). The idea that Blacks have the same opportunities as Whites, despite research to the contrary, fits with Wildman and Davis’s (2013) assertion that the White privileged does not recognize their privilege as association with the dominant group but as

individual merit. Even when members of the dominant group help to fight against oppression, their privilege lies in having the comfort of opting out of struggles against oppression if they choose (Wildman & Davis, 2013). Privilege based on race and class power may temper or alleviate gender bias or subordination based on gender. Within each power system, privilege operates in a manner shaped by the power relationship from which it stems. White privilege derives from the system of White supremacy, and male privilege and heterosexual privilege result from the gender hierarchy (Wildman & Davis, 2013).

Categorical thinking. This type of thinking obscures seeing the complexities of individuals. No individual fits into any one category, but instead, every person sits at the intersection of many groups. Wildman and Davis (2013) posited that the remedy for discrimination is to make the power systems and privileges that they create a part of the effort visible. In spite of the pervasiveness of privilege, antidiscrimination advocates focus on half of the power system dyad, the subordinated characteristic, rather than seeing the essential connection between domination that accompanies subordination and privilege that accompanies discrimination (Stefancic & Delgado, 2013). It is vital for counseling professionals to be aware of their opportunity and to understand how that privilege contributes to systemic oppression (Hardy & Laszloffy, 1995). Conversely, Hernández, Carranza, and Almeida (2010) explored adaptive responses that mental health professionals of color use to cope with racial microaggressions in their professional lives.

Microaggressions. Racism is “a system of dominance, power, and privilege based on racial-group designations; rooted in the historical oppression of a group defined or perceived by dominant-group members as inferior deviant, or undesirable” (Harrell, 2000). Blatantly aggressive expressions of racism such as lynching, cross burning, and segregation have been

replaced with subtler expressions known as microaggressions (Sue & Sue, 2007; Sue et al., 2008). Racial microaggressions are commonplace exchanges that convey insulting or demeaning messages to people of color (Constantine, 2007; Franklin, 1999; Sue et al., 2008).

Microaggressions are subtle discrimination that sends messages about group status and devaluation, and similar to overt discrimination, they can evoke powerful emotional reactions and may affect mental health (Huynh, 2012). Categories of microaggressions include *colorblindness*, over-identification, minimization of racial-cultural issues, and denial of personal or individual racism. Colorblindness is a denial that one “sees” race. Overidentification is the inappropriate classification of large numbers of people of color into certain groups; for example, in the school system, overidentification of black youth may be evident in the number of children who are placed in “special needs” classes compared to those who are placed in “gifted” classes. The denial of personal or individual racism is often sometimes accomplished with statements like “I have friends who are black” as a defense against the charge of being a racist. This includes minimization of racial-cultural issues; for example, the privileged do not recognize their privilege, nor do they acknowledge the struggles that African Americans face because of their lack of privilege.

Additional microaggressions may take the form of assigning unique/special status by race or ethnicity and stereotypical assumptions about members of a racial or ethnic group (Torres-Harding, Andrade, & Romero Diaz, 2012). *Accused hypersensitivity* is a form of microaggression that conveys to a person of color the message that his or her feelings of being marginalized are not warranted (Sue et al., 2008; DeGruy, 2017). The *Meritocracy Myth* is a form of microaggression that sanctions the fallacy that in America, individuals get ahead and earn rewards in direct proportion to their efforts and abilities (Delgado et al., 2013; McNamee &

Miller, 1950). Litwack (2009) posited that those who hold this view lack empathy for the plight of Black Americans.

As barriers to racial justice became subtler following the civil rights movement, there was a belief: that Blacks had made it; that a level playing field had been achieved. If Blacks continued to fail, the fault had to lie with the victim, not in deeply rooted economic and social inequality, and not in their exclusion from the economic life of the country (Litwack, 2009). Sullivan, Meschede, Dietrich, and Shapiro (2011) provided evidence of the fallacy of meritocracy in their examination of the racial wealth gap between African Americans and Whites.

Sullivan et al. (2011) asserted that the U.S. racial wealth gap is sustained and driven by public policy decisions. According to their analysis of a nationally representative Survey of Income and Program Participation (SIPP) collected in 2009, the median White household had \$111,146 in wealth holdings, compared to just \$7,113 for the median Black household. In their analysis, Shapiro et al. (2011) found little evidence to support common perceptions about what underlies the ability to build wealth, including the notion that personal attributes and behavioral choices are critical pieces of the equation. Shapiro, Meschede, and Osoro (2013) asserted that evidence points to policy and the formation of both opportunities and barriers in workplaces, schools, and communities that reinforce deeply entrenched racial dynamics in how wealth is accumulated and continues to permeate the most important spheres of everyday life. Shapiro et al. (2013) asserted that the biggest drivers of the growing racial wealth gap are years of homeownership, household income, unemployment (which is much more prominent among African American families), college education, inheritance, financial support by families or friends, and preexisting family wealth. Additionally, the findings revealed that equal

achievements, such as income gains, yield unequal wealth rewards for Whites and African Americans.

Other microaggressions include treating minorities based on the norms of the dominant group or other culturally insensitive treatment with no regard to the cultural norms that a minority group may have. People who engage in microaggressions are often unaware of their behaviors or the potential effects of those behaviors on people of color (Constantine, 2007). People who engage in microaggressions include counseling professionals.

Counselor conceptualizations of client concerns may vary depending on counselor awareness of race and racism (Neville, Spanierman, & Doan, 2006). For example, counselors and other mental health clinicians are required to learn about multiculturalism and cultural sensitivity. Nevertheless, counselors are not exempt from internalizing negative racial messages, and microaggressions surface within counseling (Owen et al., 2014). Clients may perceive micro-invalidations and micro-insults from their counselors in the form of dismissive or negating messages about their cultural heritage or culturally inappropriate interventions (Owen et al., 2014).

Most mental health professionals view themselves as unbiased and nonracist (Constantine, 2017; Crawford, 2011); therefore, it is difficult for them to recognize racial microaggressions that may be occurring in therapy. Well-meaning counselors often perpetrate unconscious and unintentional microaggressions (Constantine, 2017; Neville et al., 2006). Nevertheless, the inability or unwillingness to see racial microaggressions for what they are could present a barrier in therapy (Constantine, 2017; Crawford, 2011; Hook et al., 2016). As an example, in a study of cross-racial counseling relationships, Torres-Harding et al. (2012) found that greater perceived microaggressions by African American clients were predictive of a weaker

therapeutic alliance with Caucasian therapists as well as lower ratings of general and multicultural counseling competence in the counselors. Competent multicultural practice requires ongoing assessment and monitoring of one's own bias, attitudes, and beliefs.

Helping Clients to Understand the Impact of Racism on Their Relationships

It is important for counselors to recognize their own intentional or unintentional racism and to help their African American clients to understand the possible impact of racism on them as individuals and on their relationships. Counselors who work with couples should be cognizant that the couple relationship can be an important source of protection from the outside world, perhaps even more importantly for African American couples' physical and mental health.

Meyer's Minority Stress Model

Meyer's (2003) minority stress model, initially focused on sexual minorities, has since been extended to other minorities. According to the model, the stress generated by discrimination, microaggressions, social injustice, and violence can have a cumulative negative effect. Pascoe and Smart Richman (2009) conducted a meta-analysis of perceived discrimination and its impact on several types of health effects and found that perceived discrimination has a significant negative effect on both mental and physical health.

The minority stress model suggests that the cumulative effect of stressors leads to health impairment. Minorities can face at least six types of race-related stressors: race-related life events, vicarious racism experiences, daily racism micro-stressors, chronic-contextual stress collective experiences of racism, and transgenerational transmission of group traumas (Harrell, 2000). The transgenerational transmission of group trauma will be discussed in the section on transgenerational and intergenerational trauma.

Race-related life events are stressors, including significant life experiences that are relatively time-limited. The experience itself has a beginning and an end, even though its effects may be lasting. Examples of race-related life events include being rejected for a loan, being harassed by the police, or being discriminated against in housing solely based on racial prejudice. Vicarious racism experiences are those experienced through observation or report. These may be experiences of racial discrimination experienced by family members or reported in the news.

Daily racism micro-stressors are subtle, innocuous putdowns. This type of racism includes slights and exclusions. Examples of micro-stressors include being ignored or overlooked while waiting in line or being mistaken for someone who serves others. Chronic-contextual stress is a result of the social structure, political dynamics, and institutional racism in which people exist. Unequal distribution of resources and limitations on resources influence the living conditions and quality of life for people of color. Severe and chronic life stress can keep people so immersed in the process of day-to-day survival that chronic-contextual stress may or may not be perceived. Collective experiences of racism involve experiences of racism at the aggregate or group level. The economic conditions of members of one's racial/ethnic group, the lack of political representation, or stereotypic portrayals in the media are examples of stimuli for collective racism-related stress.

Transgenerational transmission is a reference to the transmission of trauma. The history of a racial/ethnic group affects the relationship between the group and wider American society. History also shapes the content of the race-related family and community stories that are passed down through generations. Aspects of oppression-related historical events are transmitted across generations through discussion, storytelling, and lessons taught to children as well as observation of their long-term effects.

According to Williams and Mohammed (2009), the African American minority stress model contends that African Americans are subject to higher levels of stress due to discrimination based on their minority racial status. Because of these higher levels of stress, African Americans are found to have significantly higher allosteric loads in comparison to Whites. Higher allosteric loading has significant physical effects, leading to dysregulation of the autonomic nervous system and affecting mental health (Williams & Mohammed, 2009). Moreover, the question of how the effects of trauma are transmitted through generations can be explored through the science of epigenetics.

Epigenetics

Racism can have physical and mental health effects in people in other ways than just via stress. It can affect gene expression. Epigenetics refers to somatically heritable states of gene expression without alterations in the DNA sequence (Choi & Friso, 2010). Environmental stressors have detrimental biological effects. Allostasis occurs when the body is under stress due to a physical or social challenge. The body temporarily produces extra hormones, such as adrenaline, that help the person to meet the challenge. After the challenge has passed, the body ceases producing the excess hormones. The ongoing struggle of African Americans against White domination and White privilege means that African Americans' allosteric systems seldom relax (Sullivan, 2013). The chemistry associated with the transmission is beyond the scope of this discussion; however, environmental factors contributing to the process include not only elements of the physical and chemical, such as the food one eats and the pollution one takes in, but also social exchanges and interactions (DeGruy, 2017; Sullivan, 2013).

Epigenetics can be used to show how White racism has had a long-lasting effect on the biological constitution of human beings, not limited to the person who is the target of White

racism but rather extending to the person's offspring (Sullivan, 2013). Psychological trauma and chronic stress can influence gene expression through an elevation of corticotropin-releasing hormones (CRH) that stimulate cortisol production. Epigenetic transgenerational inheritance has three forms. The most indirect form of epigenetic transgenerational inheritance occurs via the repetition of similar environments and social contexts in subsequent generations. Gene expression is influenced by the environment triggering the demethylation of a particular gene that is constructed anew for each generation, producing epigenetic effects for offspring similar to those of the parent. In the case of epigenetic inheritance, the extra cortisol that a woman produces when she is stressed can do more than trigger early labor; it changes some of the epigenetic markers on the fetus's DNA. When the mother's stress hormones are transmitted to the fetus through the placenta, they program the fetus's stress axis; the result is something like a fetal post-traumatic stress disorder (PTSD). The adult that the fetus becomes is more likely to experience psychological difficulties, including actual PTSD, when exposed to significant stress. Something like this occurred in the case of German children whose mothers were pregnant during the Holocaust (Sullivan, 2013). The German children were more prone to PTSD even though they had no direct experience of the Holocaust.

Based on epigenetic research, it is highly plausible that intergenerational transmission of trauma occurred because of slavery and oppression. The research provided evidence that people of color can biologically inherit the deleterious effects of White racism (DeGruy, 2017; Sullivan, 2013). Though some could take issue with the phrasing "white racism," it is used to make a distinction between the racism deployed by White society and that of other peoples. Blitstein (2009) used the concept of *weathering* to explain how the effects of white racism include physiological changes for the people who are confronted by it—changes that are very damaging

to their physical and psychological health. Weathering is a gradual wearing down of the body's systems by stressors that accumulate over time. As the body experiences more and more stress, it becomes increasingly weathered, making it more prone to disease and chronic health problems (Blitstein, 2009). As an example of how transgenerational transmission occurs, offspring with hypersensitive stress axes can become parents whose environments for their offspring will elevate their children's cortisol levels in turn. Thus, the past lives on—it is remembered in our epigenetic markers.

The trauma of slavery and Jim Crow continues to live even though Jim Crow laws were repealed in the 1960s. The health effects likely persist physiologically, not only in the biochemistry of African American people who were adolescents prior to the repeal of such laws but in the biochemistry of their children and grandchildren. Finally, ongoing racism after Jim Crow also can be blamed for contributing to the high rates of infant mortality and cardiovascular disease experienced by African Americans (Carpenter 2017; McCain, 2017). Through epigenetics, the effects of racism on parents is transmitted to their children, perpetuating inequalities across generations. Studies on race and health disparities are increasingly unmasking racism as a public health problem (Drexler, 2007). According to Sullivan (2013), “Existing health disparities between races, are not the result of any innate biological or genetic differences—in that sense, race does not exist, but rather is the result of being harassed, oppressed, and discriminated against because one is not white” (p. 193).

Transgenerational/Intergenerational Trauma

The terms transgenerational and intergenerational trauma are used interchangeably in this discussion. Transgenerational trauma was first documented in the 1960s to describe trauma symptoms experienced by descendants of Holocaust survivors. The term has been linked to

psychological and physiological transmission factors (Phipps & Degges-White, 2014). In recent years, researchers have recognized that the effects of trauma extend to other generations in the same family beyond the generation of the person experiencing the primary trauma. The phenomenon has been labeled transgenerational trauma or intergenerational trauma (Bender, 2004; Frazier, West-Olatunji, St. Juste, & Goodman, 2009; Goodman & West-Olatunji, 2008; Lev-Wiesel, 2007). Transgenerational trauma is absorbed into the cultural memory of the group and flows from generation to generation in the same way that other cultural components do.

Historical Trauma Theory. This theory is based on the premise that populations historically subjected to long-term mass trauma, colonialism, slavery, war, and genocide have a higher prevalence of disease several generations after the original trauma occurred (Sontero, 2006). The theory is based on four theoretical assumptions:

1. Mass trauma is deliberately and systematically inflicted upon the target population by the subjugating dominant population.
2. Trauma is not limited to a single catastrophic event but continues over an extended period.
3. Traumatic events reverberate throughout the population, creating a universal experience of trauma.
4. The magnitude of the trauma derails the population from its natural projected historical course, resulting in a legacy of physical, psychological, social, and economic disparities across generations (Danieli, 1998).

A key feature of historical trauma theory is that the psychological and emotional consequences of the trauma experience are transmitted to subsequent generations through physiological, environmental, and social pathways, resulting in an intergenerational cycle of

trauma (Abrams, 1999). The model posited that historical trauma originated with the subjugation of a population by a dominant group, brought about through overwhelming physical and psychological violence, segregation or displacement, economic deprivation, and cultural dispossession (Danieli, 1998). Though subjugation may be rescinded over time, its legacy remains in the form of racism, discrimination, and social and economic disadvantage (Williams, Neighbors, & Jackson, 2003).

Racism is our nation's most serious illness (DeGruy, 2017). According to DeGruy (2017),

America's and Americans' denial of their blatant racism and the attending atrocities committed throughout the nation's history has become pathological. Such denial has allowed this illness to fester for almost 400 years. It is what keeps this country sick with the issue of race. (p. 12)

Intergenerational impact of slavery. There is little in slavery that was not traumatic: the loss of culture, home, kin, and a sense of self; the destruction of families through the sale of fathers, mothers, and offspring; and physical abuse. It is notable that trauma literature gives attention to the Holocaust, floods, earthquakes, sexual abuse, rape, and other traumatic events, but not slavery. Refusal to remember, denial of events, or dissociation from those events does not ensure that the trauma of slavery is not passed on to future generations of victims and perpetrators (Graff, 2014). Institutional slavery in the United States lasted more than two hundred years. The impacts of slavery reached far beyond the plantation, affecting the entire culture, and did not end with the emancipation of slaves but endures to this day (Boyd-Franklin, 2006; DeGruy, 2017; Graff, 2014; Gump, 2010; Sullivan, 2013). As a result of centuries of slavery and oppression, most White Americans, in their thoughts and actions, believe themselves

superior to Blacks (DeGruy, 2017). Of greater importance is that too many African Americans unconsciously share this belief. Being told you are inferior for hundreds of years can have lasting psychic impacts, which are passed from parent to child to grandchild to great-grandchild. Residual effects of slavery include low self-esteem (shame), ever-present anger, and racist socialization (DeGruy, 2017).

Chattel slavery and genocide of the Native American population were so un-Christian that the only way they could make their actions acceptable and resolve the dissonance was to relegate their victims to a subhuman level (DeGruy, 2017). To justify the racist practices of slavery, Africans were labeled as chattel, subhuman, and inferior. The residual effects of this labeling the trauma of slavery and its aftermath has been transmitted from generation to generation of African Americans (Boyd-Franklin, 2006; Graff, 2014; Sullivan, 2013). Gump (2010) asserted that the most heinous aspect of slavery was its attempt at annihilation of the self. The need to justify slaves' economic exploitation required the destruction of their subjectivity, and that destruction echoes in the parenting practices of many African American families (Gump, 2000). The master-slave relationship served as a template for human relationships and resulted in poor parenting (Graff, 2014). The transmission of shame through the generations via un-empathic parenting is borne out by attachment research, which tells us that parental lack of empathy or affective attunement leads to insecure attachment (Graff, 2011).

Slavery meant a complete disruption from the African individual's land, people, language, and customs. Attachments, one's place in the world, continuity with the past, and an expectable future were all destroyed (Graff, 2011). The trauma and shame to which Blacks were subjected did not end with slavery. What followed was Jim Crow (a rigid pattern of racial segregation), lynching, disenfranchisement, an economic system of sharecropping and tenantry

that left little room for ambition or hope, and unequal educational resources or “enforced ignorance.” In the late 19th and 20th centuries, some two or three Black Southerners were hanged, burned at the stake, or quietly murdered every week (Graff, 2011). Leary (2005) attributed no small part of African American anger to what she termed sensitivity to disrespect. Her discussion of this sensitivity is a powerful and persuasive treatment of African American rage understood as a response to centuries of unbearable shaming (Gump, 2000).

In addition to the shame and trauma of being enslaved, Gump (2000) posited that to be a victim of human-induced trauma is the ultimate mortification because there is no shame as profound as that which destroys subjectivity. According to Gump (2000), “What you need, what you desire, and what you feel are of complete and utter insignificance” (p. 623). Slave owners and the culture at large lacked empathy: A slave’s feelings were meaningless, grief and anger were explicitly forbidden, and pain must be dissociated, disavowed. Disavowed affects are not available as a source of information about the world. Slaves and subsequent generations of African Americans were ill-equipped to be securely attached to their children because, as Gump (2000) stated, “A self thus diminished cannot modulate, soothe or contain dysphoric affects in a child. Rather it becomes necessary to prevent them” (p. 626). When parents believe themselves to have little or no value, it reflects in behaviors that can instill a similar belief in their children.

For hundreds of years, enslaved mothers and fathers belittled their children in an effort to protect them. However, what originally began as an appropriate adaptation to an oppressive and danger-filled environment continued to be transmitted down through subsequent generations in the form of long-established child-rearing practices (DeGruy, 2017). Additionally, Dunham Dermer, and Carlson (2011) suggested that discord within the African American couple relationship may also influence the couple’s ability to parent. Children “borrow” their parent’s

style, and so it goes from generation to generation. Dunham et al. (2011) asserted that while all families (parents) face stressors, race-based stressors such as racism and discrimination negatively impact parenting in the African American family. The style of parenting and the trauma inherent in it, what Dunham et al. (2011) termed “poisonous parenting,” is passed down from generation to generation. DeGruy (2017) asserted that children begin to internalize the demeaning criticisms. Furthermore, the criticism creates feelings of being disrespected by the very people whom they love and trust the most: their parents. Given the history of slavery, it should be no surprise that issues of abuse, ineffectual parenting, violence, and educational disillusionment continue to plague African Americans today. DeGruy (2017) asserted that these and other dysfunctional adaptations linked to slavery are evidence of *Post Traumatic Slave Syndrome*.

Post Traumatic Slave Syndrome (PTSS). The beliefs that evolved over hundreds of years of slavery and oppression are some of the most significant impacts of PTSS. Many patterns of behavior result from PTSS. DeGruy (2017) identified three behavior categories of PTSS: *vacant esteem*, *ever-present anger*, and *racist socialization*.

Vacant esteem is the belief that one has little or no worth. This belief results from societal, community, and family influence. Society exerts its influence through its institutions, laws, policies, and media. Communities have influence through norms that encourage conformity to society, and families influence people through the ways in which the latter are raised (DeGruy, 2017). When these influences promote a disparaging and limiting identity that individuals believe they are confined to, the result is vacant esteem. In addition to vacant esteem, DeGruy (2017) posited a wellspring of anger that lies just below the surface of many African Americans, especially Black men and youth. This ever-present anger is one of the most pronounced behavior

patterns associated with PTSS. DeGruy (2017) asserted that anger is the normal emotional response to a blocked goal. Over time, blocked goals and failure will give rise to fear, and when one is fearful, he or she may also lash out in anger. When faced with repeated failure despite great effort, working harder becomes less of an option, and the resulting intensified anger may escalate to hostility and sometimes even violence. DeGruy suggested that what lies at the core of angry feelings is disrespect.

Racist socialization, one of the most insidious and pervasive symptoms of PTSS, is the adoption of the slave master's value system. The foundation of this value system is the belief that White and all things associated with whiteness are superior and that Black and all things associated with blackness are inferior (DeGruy, 2017). Through centuries of slavery and the institutionalized oppression that followed, African Americans have been socialized to be racist. Many African Americans have adopted the attitudes and views of White, racist America, including standards of beauty and material success as well as violence and brutality, and like White America, they believe that slavery ended in 1865.

Despite the fact that Jim Crow and convict leasing were outlawed years ago, they still exist for African Americans today through the penal system. African American males comprise approximately 6% of the population but make up over 50% of the prison population (Dixon, 2009). No other country in the world imprisons as many of its racial and ethnic minorities. It is estimated that in Washington D.C., three out of four African American males can expect to spend time in prison (Alexander, 2014). Similar rates of incarceration can be found in Black communities across America. Mass incarceration of African American males today is a larger percentage of the Black population than South Africa had in the heart of apartheid (Alexander, 2014). Mass incarceration of African Americans has created a modern-day caste system

(Alexander, 2014). As would be expected, mass incarceration of African American males negatively impacts the African American family by dramatically diminishing the number of black males available for marriage (Alexander, 2014).

The African American population is locked solidly in an economic subclass. Most African American households are economically in the lower 50% of all American households (Alexander, 2014; Boyd-Franklin, 2006). Nearly one-third of young Black men in the United States are out of work, and unemployment among African Americans is twice that of Whites. Blacks earn approximately 75% of the wages of their White counterparts (DeGruy, 2017). Inheritance is almost nonexistent among African Americans, except for baby boomers.

In addition to economic inequities, mental trauma, and shame because of slavery and racism, African Americans endure health disparities. For example, African American babies have been found to be smaller and less likely to survive their first year compared to babies from other racial groups (Adler & Rehkopf, 2008; DeGruy, 2017). Non-Hispanic Blacks are more likely than Whites to be unemployed, have less education, work in high-risk jobs, be uninsured, and live below the poverty level (Centers for Disease Control and Prevention, 2013).

Addressing Intergenerational Trauma via the Genogram

Anecdotal evidence has suggested that African Americans generally do not seek professional counseling services, and those who do go to counseling typically do not persist (Boyd-Franklin, 2006). A search of the literature offered many scholarly articles on multicultural counseling and specifically on counseling African Americans. However, no articles addressed using a genogram to reveal the effects of oppression on African Americans.

Based on the literature on intergenerational transmission of trauma resulting from slavery and the aftermath of racism and microaggressions that followed, no examples were found of

counselors who use a genogram to examine critical consciousness associated with racism among African American couples seeking counseling services. This researcher employed a modified Delphi study to poll experts who counsel African American couples and families and experts on the genogram to determine if the experts would predict the need for a specific interview protocol used to examine racism and its impact on African American clients. The modified Delphi garnered a list of recommended questions to be used as an interview protocol for creating a genogram to assess the impact of oppression on African American clients. Researchers such as Bean, Perry, and Bedell (2000) and Hardy and Laszloffy (1995) have worked to address training for counselors that sensitizes students to cultural differences. However, more research is needed to determine if a correlation exists between the multicultural competency ratings of counselors who address the impacts of microaggressions and racism using the genogram and those who do not.

The genogram can serve as a tool to help practitioners explore not only the impact of family dynamics, individual and couple dynamics, and spirituality, but also social problems such as oppression experienced by African Americans. The genogram enables practitioners to focus on patterns that may be universal to all couples while also attending to issues that may arise because of the intersection of race, gender, and discrimination on African Americans.

As noted earlier, African Americans and their enslaved ancestors in the United States drew from the strength of their West African roots, which held a strong tradition of cooperation and collective responsibility. The practice of functional kinship in African American families was reinforced by kinship status being conferred by slave masters upon biologically unrelated adults during slavery (Watts-Jones, 1997). For example, members of the slave community

assumed functional roles caring for older slaves so that the elder slaves would not be alone. The practice of functional kinship roles continues in African American families today.

The trauma of slavery in the past and its aftereffect of oppression today impacts couples' views of themselves and others regarding roles, relationships, and beliefs about African American men and women in society. What African American men and women are taught about male/female roles, expectations, and more reflect how they were raised by their parents and how their grandparents raised their parents.

The genogram can facilitate a more profound grasp of the client's past and present experiences with oppression. Microaggressions as discussed earlier are lesser forms of racism than the obvious forms such as segregation: for example, an African American who enters a store and is tailed by a suspicious clerk because "they see a black person." When faced with racism including microaggressions, African Americans experience a surge of adrenaline and other stress hormones (Sullivan, 2013). Experiences like these are common for African Americans who suffer them at first hand. However, these experiences are not restricted to their immediate targets. The experience continues intergenerationally, not just by narration where parents talk about their confrontations with White racism nor by learning from their grandparents' strategies for surviving a White-dominated world. The next generation also undergoes their parents' experience more unconsciously in the bodily effects that racism exerts on their children's health while in the womb (Sullivan, 2013). This phenomenon was covered in the discussion of epigenetics.

Understanding dysfunctional patterns is essential to treatment, and a genogram is an effective tool for identifying those patterns. However, it should be noted that the genogram also discloses patterns and traditions that promote family resiliency and strength (Boyd-Franklin,

2006; Goodman, 2013; McCullough-Chavis, 2004). In the same way that trauma through racism is conveyed from parent to child, a variety of defense and survival mechanisms, coping strategies, and methods for overcoming traumatic stress and maintaining culture despite oppression are also passed down within the African American community (Duran, Firehammer, & Gonzalez, 2008; Goodman, 2013; Trahan & Lemberger, 2014). Boyd-Franklin (2006) reported that many of the African American parents they interviewed expressed fear, worry, and anxiety about the safety of their children; for example, African American males (in particular), are instructed by their parents or those fulfilling a parental role about safe ways to engage with the police if they are pulled over in a “routine” traffic stop. “The talk” involves specific instruction regarding how to communicate both verbally and nonverbally during an encounter with the police. If, for example, a black male is stopped by law enforcement for DWB (driving while black), several critical steps must be followed to reduce the risk of being killed or arrested. These steps include obeying all directions, keeping their hands on the steering wheel or the dashboard, asking for permission to remove their hands to retrieve license and registration, and speaking in a tone that cannot be perceived as aggressive; above all else, they are warned not to run (Harris, 1999). Counselors working with African American couples should be sensitive to the many instances of stress related to racism that their clients face.

The genogram can be used to treat African American couples by identifying patterns of how past generations coped with racism in good and not-so-helpful ways. How did micro-aggressions impact couples in previous generations, and how did the generations deal with micro-aggressions in ways that brought them together to form a “unified front” and “safe haven” for one another? Couples who understand the perils of being African American can provide

support for each other, becoming a haven where the trauma and stress of racist America cannot touch them.

As stated earlier, the history of African Americans is inseparable from the struggle and place of slavery and racism in American history (DeMaria et al., 1999; Trahan et al., 2014). As uncomfortable as the history of slavery and the resulting oppression of African Americans is, it cannot be ignored when working with African American clients. The genogram can be used to examine these experiences over generations. By looking across generations, the clinician can help the family to identify microaggressions and experiences of oppression. Through the genogram, the practitioners can assist clients to identify stress and coping mechanisms used in past generations of the family. Client responses to questions about experience with oppression and microaggressions on a day-to-day basis may contribute to designing more effective treatment strategies.

Multiculturally competent practitioners working from a strengths perspective should be aware of the cultural traditions and nuances of the familial structure of their African American clients. These can be revealed and built upon through the genogram to explore possible underlying unmet attachment needs in couples' relationships in the present as well as in past generations. Using a focused genogram (DeMaria et al., 1999; DeMaria et al., 2017), the practitioner can help the client to describe relationships including attachment between couples and among family members and how those attachments benefited the family.

Cultural Genogram

While McGoldrick (1985) and others have used ethnicity and culture synonymously, Hardy and Laszloffy (1995) made a distinction between culture and ethnicity. According to Hardy and Laszloffy (1995), the primary goal of the cultural genogram is to promote cultural

awareness and sensitivity in counselors by helping them to understand their own cultural identities before attempting to work cross-culturally. Hardy and Laszloffy (1995) further stated that “the cultural genogram helped the therapist become more conversant with their own cultural identities and highlights unresolved culturally linked issues that may impede effective treatment” (p. 235).

Cultural genograms focus on the cultural components of a client’s life (Halevy, 1998; McCullough-Chavis, 2004; Shellenberger et al., 2007). Practitioners can use the cultural genogram in a structured way as a psychoeducational tool to describe and diagram a clients’ cultural beliefs and practices in context (McCullough-Chavis, 2004; Shellenberger et al., 2007). The cultural genogram can be used to demonstrate interest and respect for clients during information gathering in the beginning phase of treatment. Care should be taken not to probe too deeply into sensitive areas too early in the counseling cycle, particularly when working with African American clients.

The preparation of a cultural genogram is a complicated process requiring a great deal of planning. The steps include defining the primary group from which an individual has descended who were the first generation to come to the United States (culture of origin) and the significant perceptions, beliefs, and behaviors of members in the group. A noteworthy part of the process involves identification of issues (pride/shame) for the group. Special symbols to denote the pride/shame issues are placed directly on the genogram to depict pride/shame issues graphically and to highlight their impact on family functioning. Though long considered a training tool for counseling trainees, Hardy and Laszloffy (1995) suggested that the cultural genogram may have some clinical applicability as well.

Counseling sessions that are far removed from the client's real world, lacking ideas that will lead to any useful outcome, and focused primarily at remediation are ineffective when the source of the problem resides in the environment (Sue, Arredondo, & McDavis, 1992).

Environment refers not only to the neighborhood, peer groups, church, school, and workplace that touch family members directly but the sociopolitical systems as well. Shellenberg et al. (2007) asserted that the cultural genogram is useful in training health-care professionals to address clients' and their families' cultural beliefs and practices.

Multicultural competence includes cultural awareness. Genograms, when used from a cultural perspective, provide the client and the counselor with insight and appreciation of the family dynamics (Kerr & Bowen, 1998). To enhance cultural awareness and sensitivity, Hardy and Laszloffy (1995) proposed the idea of the cultural genogram as a training tool. According to the authors, the construction of a cultural genogram facilitated understanding of one's cognitive and emotional dimensions.

Specialized Genograms for African Americans

While cultural genograms are useful with everyone, the focus of the literature review and the study in this dissertation explicitly emphasized the African American population. A search of the literature produced only four genograms that specifically targeted African Americans: the African American Genogram (Watts-Jones, 1997), the Family Integrated Genogram (FIG) (McCullough-Chavis, 2004), cultural genograms (CG) with African American families (McCullough-Chavis & Waites, 2004), and spirituality-focused genograms (Dunn & Dawes, 1999). The section that follows presents a discussion of these specialized genograms that scholars and experts in African American counseling and genograms have created.

African American Genogram

Practitioners who work with African American clients should have a contextual understanding of the client, including cognizance of the environment in which the client lives. The history of African Americans includes such evocative components as slavery, Jim Crow legislation, segregation, institutional racism, and massive incarceration of African Americans through the penal system (Alexander, 2012; Boyd-Franklin, 2006). Uncomfortable as these topics are, this history and continued oppression inform the worldview of African Americans. The genogram is not offered as a solution to racism; however, the genogram can equip counseling professionals to work with minority clients to assess the clients' experiences of oppression and its impact on their critical consciousness as it relates to those experiences. It is important to note that the responsibility for racism and other forms of oppression is not limited to individuals who are overtly and consciously racist but also extends to individuals who are unaware of the effects of their discriminatory behaviors (Boyd-Franklin, 2006; Constantine, 2001). Counselor conceptualizations of client concerns may vary depending on counselor awareness of race and racism. Neville et al. (2006) asserted that microaggressions are often unconscious and unintentional, and no therapist is immune to biases.

Counselors who are privileged because of the oppression of minorities may be uncomfortable working with African Americans, especially if they are aware of the benefits that they enjoy because of oppression. The systemic disparity between European American culture and African American culture and how that disparity informs the worldview of both is important. In this dissertation, recognizing that while the genogram is an effective method of working with African American clients, more attention to racism and oppression using the genogram is a missing component of use of the genogram by counseling and other helping practitioners.

Watts-Jones (1997) argued that despite the benefits of genogram construction, the genogram is inadequate for use with African American families, predominantly because of the underlying assumption of the genogram that “family” means biological relationships only. This definition is not true of the African American experience. Therapists working with African Americans must be willing to consider and sometimes work within an extended kinship system. Hines and Boyd-Franklin (2005) suggested that extended family orientation and role flexibility, attachment, and the subsequent emotional ties are not predictable solely by biological relationships.

The African American genogram represents an attempt to make the use of the genogram culturally useful for African Americans. Expanding the model of the family to include kinship and kinship roles is a more accurate reflection of how “family” is defined and functions in this population. The African American genogram (McCullough-Chavis & Waites, 2004) substantially expanded the conceptualization of clinical issues. While the African American genogram targets Black families, this genogram may be used with other families in which kinship relationships are significant (Watts-Jones, 1997). The African American genogram covers areas that are important to African Americans but does not call for specific integration of Critical Theory.

Family Integrated Genogram

The Family Integrated Genogram (FIG) considers family strengths and intergenerational family history, values, beliefs patterns, and communication in African American families (McCullough-Chavis, 2004). The FIG builds on three identified African American strengths, spirituality and spiritual beliefs, religion and religious beliefs and practices, and extended family kinship networks. The FIG highlights family patterns and traditions that are often a means of

promoting family resiliency and strength. McCullough-Chavis (2004) provided a series of questions that counselors ask clients to construct a FIG.

McCullough-Chavis (2004) listed 27 sub-questions under the following major questions:

1. What is the structure of your family?
2. How are elders and children viewed in your family?
3. How would you describe your family's and extended family's sense of unity?
4. What were significant transitions and critical life events in the history of your family, extended family?
5. How do you and family members seek help and support?
6. What is the meaning of spirituality and religion for each member of your family going back three or more generations?
7. What are some of your family strengths and resources?

These questions and the sub-questions make up the interview protocol for constructing the FIG.

As with all genograms, the first step in constructing the FIG is to introduce the genogram as a device for visually exploring family history and family patterns in a manner that is culturally sensitive (Chavis & Waites, 2004). The therapist draws the family structure, history, and relationships for at least three generations with input from the family. By participating in the construction of the genogram and focusing on the African American family strengths of spirituality, religion, and extended family kinship networks, the practitioner and the client can gain insight concerning family strengths and coping resources. Accentuating the positive aspects of African American families using family strengths has excellent potential to help solve issues and problems faced by these families (McCullough-Chavis, 2004). The Family Integrated Genogram was designed to focus on family strengths of the extended family network. When

used appropriately, it can help practitioners facilitate more appropriate assessment and treatment services for African American families.

Cultural Genogram with African American Families

According to the literature, using genograms that include a cultural focus incorporating family history and the broader cultural context can be helpful. Warde (2012) and McCullough-Chavis and Waites (2004) described a model for using cultural genograms (CG) with African American families to reveal family history cultural influences and the broader context. As previously mentioned, resources such as strong kinship bonds, role flexibility, strong religious orientation, strong education and work ethic, and extended family networks should be considered in constructing the CG with African American families.

Parenting is a shared responsibility in the African American family, and children may perform some parental functions for younger siblings. The extended kinship network provides emotional, social, and financial support such as advising, parenting, childcare, and informal adoptions (Boyd-Franklin, 2006; DeGruy, 2017; McCullough-Chavis & Waites, 2004). In the extended family network, the base household is usually the home of the family's recognized leader. Family leaders influence the affairs, traditions, and practices of the entire extended network. McCullough-Chavis and Waites (2004) proposed that these leaders are often the glue that binds the family together. Grandparents, particularly grandmothers, play a central role in African American extended families.

The cultural genogram reveals family traditions that promote family solidarity and strength as it considers cultural heritage and influences as well as intergenerational family values, patterns, transactions, and strengths (McCullough-Chavis & Waites, 2004). Building on African American strengths, McCullough-Chavis and Waites (2004) proposed five key areas and

27 questions to assist practitioners in gathering information for construction of the CG. These five areas include (a) role flexibility; (b) extended family networks; (c) caregiving—special care for children, elders, and impaired family members as well as giving back to the community; (d) spirituality and religious beliefs and practices; and (e) family history, beliefs, values, rituals, and traditions.

Spirituality-Focused Genogram in Practice with African Americans

Spirituality is a fundamental dimension that shapes the individual's perspective, particularly among African Americans. Spiritual genograms are used to provide a graphic representation of complex expressions of spirituality over three generations for assessment and intervention (Dunn & Dawes, 1999). Spirituality-focused genograms offer a means of tapping the spiritual resources of African American families in particular. However, for the most part, religious belief systems have been neglected or avoided in counseling (Dunn & Dawes, 1999). Boyd-Franklin (2006) urged therapists to be aware that some very religious African American clients may view therapy as “anti-spiritual” and that this may cause conflicts for some African American clients related to being in therapy.

Spirituality involves a relationship between human and metaphysical systems that provides faith explanations of past and present experiences and, for some, predicts the future and explains the ultimate meanings of life and existence (Prest & Keller, 1993). According to Boyd-Franklin (2006), remaining cognizant of the distinction between spirituality and religion is a critical factor when working with African American families. Although many African Americans were raised in the church, primarily in Baptist or African Methodist denominations, many do not attend church but continue to believe in God and maintain an internalized sense of spirituality.

For others, the church community plays a central role in the life of the individual and the family (Boyd-Franklin, 2006; Dunn & Dawes, 1999).

African Americans currently belong to many different religious denominations including Baptist, African Methodist, Jehovah's Witness, Church of God in Christ, Seventh Day Adventist, Pentecostal, various Islamic sects, Presbyterian, Lutheran, Episcopalian, Roman Catholic, and Jewish denominations (Hines & Boyd-Franklin, 1996). Even individuals who do not identify with or participate in organized religion may have been raised in a religious context and retain a sense of spirituality. Also, church communities provide support systems, social outlets, educational instruction, leadership opportunities, and assistance in times of crisis (Hines & Boyd-Franklin, 1996).

When using a spirituality-focused genogram with African Americans, the therapist must respect the clients' spiritual framework and suspend his or her own spiritual beliefs while challenging relevant issues in a manner that is consistent with the clients' belief systems (Stander, Piercy, MacKinnon, & Helmeke, 1994). The spirituality-focused genogram should be introduced to clients when it appears relevant to treatment. Clients or families should be given the opportunity to view and experience the genogram as it is being constructed. Discoveries regarding spirituality and religion that emerge should be connected back to the presenting problem or issue of concern to keep the treatment clinically relevant (Dunn & Dawes, 1999). Boyd-Franklin (2006) warned that mistiming and intrusiveness of interventions can evoke resistance to therapy.

Critical Genogram (CritG)

Like other focused genograms, the critical genogram (CritG) differs from the standard genogram. This genogram allows participants to explore the complexity of their social location

to gain a deeper understanding of the influence of power and privilege (Koustic et al., 2009). According to Koustic et al. (2009), the CritG is a tool for mapping the importance of social forces such as racism, sexism, and classism. Charting the impact of these and other social powers enables therapists to develop reflection, sensitivity, and action aimed at reshaping social and institutional politics. The process is directed toward therapists rather than clients. Koustic et al. (2009) stated that the goal of the CritG is to make practitioners aware of their own cultural identity to help them to be better able to question clients about culture and more empathetic with clients who share similar struggles. The authors went on to say that the CritG illustrates the power differentials between dominant and oppressed groups and raises the critical consciousness or ability to recognize the interlocking systems of oppression. The construction of the CritG is a three-part process that includes developing a basic genogram, drawing out systems of oppression, and using reflective questions to facilitate development and exploration of the genogram (Koustic et al., 2009). While reflective questioning is part of the process, no list of questions is available to facilitate the development of the CritG. Koustic et al. (2009) noted that a critical aspect of the CritG is the presentation of CritG to others, to inspire insight. The CritG offers a vehicle for exploring how interlocking systems of oppression shape individual and family dynamics. Once counselors have explored their CritG, they may provide the tool for clients. The CritG has the potential to be applied to African American issues; however, the literature provides no examples of the application of this genogram with African Americans.

Transgenerational Trauma and Resilience Genogram (TTRG)

Transgenerational trauma is the transmission of trauma within families and communities across generations. Goodman (2013) presented the Transgenerational Trauma and Resilience Genogram (TTRG) as a specialized genogram for trauma assessment and intervention from a

transgenerational trauma and resilience framework. The transgenerational frame includes the transmission of resilience across generations. While Bowen's theory of multigenerational transmission focused on dysfunction such as enmeshment, the TTRG focuses on the transfer of resilience across generations. The TTRG can be used to explore the intersection of historical trauma and oppressive societal factors that are relevant to current trauma and resilience.

Goodman (2013) posited that in families with a long history of trauma, persecution, or discrimination, resilience factors might include protective mechanisms such as becoming a cohesive and somewhat closed family system.

While trauma might be conveyed from parent to child, coping strategies and ways of overcoming traumatic stress as well as techniques for sustaining the individual's culture despite oppression may also be passed down (Goodman, 2013). Genograms that have originated from family systems counseling with additional revisions to the traditional genogram can elicit an understanding of the intersection of multiple dimensions of identity that may be missing from a conventional genogram.

The Gap in Genogram Literature

Over 700 books, chapters, and articles have addressed genograms, yet very few genograms specifically focus on working with African American clients. McGoldrick et al. (2008) and other authors have expanded genograms to capture diversity and multiple issues through genograms (Dun & Dawes, 1999; Goodman, 2013; Koustic et al., 2009; McCullough-Chavis, 2004; McCullough-Chavis & Waites, 2004; Watts-Jones, 1997). Several authors reported using genograms to focus on multicultural issues; however, they did not discuss the impact of race or ethnicity on individuals or families (Dun & Dawes, 1999; Goodman, 2013; Koustic et al., 2009; McCullough-Chavis, 2004; McCullough-Chavis & Waites, 2004; Warde,

2012; Watts-Jones, 1997). For example, cultural genograms have been used to examine different cultures and ethnic minorities (Bean, Perry, & Bedell, 2002; DeMaria et al., 1999; Halevy, 1998; Hardy & Laszloffy, 1995; McGoldrick, 1998; Shellenberger, Dent, Davis-Smith, & Wright, 2007; Warde, 2012), and while the cultural genogram has been suggested for use with African American couples and families, special issues related to transgenerational trauma and ongoing discrimination may arise that counselors may not easily capture without specific guidance on using genograms to explore the intergenerational impact of slavery, violence discrimination, and microaggressions on African American families and couples.

Watts-Jones wrote one of the first pieces about using genograms with African American families in 1997. The author suggested that the genogram would be a more meaningful and effective tool in the case of African American families if it was based on a more inclusive concept of kinship. Although Watts-Jones made this suggestion over twenty years ago, few articles, books, or book chapters have specifically addressed using genograms with African Americans. A thorough search of the literature produced very few genograms for use with African American couples and families specifically. Among those identified in this search, McCullough-Chavis (2004) created the Family Integrated Genogram (FIG) with African American families; McCullough-Chavis and Waites (2004) and Warde (2012) discussed the Cultural Genogram with African American families; Dun and Dawes (1999) addressed the importance of spirituality in the African American family through the Spirituality-Focused Genogram, Watts-Jones (1997) offered an African American Genogram, Koustic et al. (2009) illustrated how the CritG provides a deeper understanding of the influence of social and institutional systems on individual and familial dynamics, and Goodman (2013) contended that the TTRG promotes resilience and healing from trauma among marginalized groups. The

genogram has great potential for the exploration of cultural differences in ethnic groups, and while each of the aforementioned genograms adds to the literature on using genograms with African Americans, they are not sufficient for exploring the critical issue of intergenerational trauma related to race in the United States. The reasons why they are not sufficient will be explored further below.

McCullough-Chavis (2004) posited that practitioners should be culturally competent to avoid culturally oppressive practices. Effective practice with African American families requires understanding family strengths, resources dimensions of African American past and present family life. When employed with African American families, the Family Integrated Genogram (McCullough-Chavis, 2004) takes into account family strengths and intergenerational family history, values, beliefs, patterns, and communication. This genogram discloses family patterns and traditions that are a means to promote family resiliency and strengths, and the tool is useful in facilitating the helping process with clients (McCullough-Chavis, 2004). While making sure to integrate resiliency, strengths, and resources is important for African Americans, given the history of pathologizing their way of coping with trauma, poverty, and discrimination, the FIG does not specifically put the African American experience into the context of coping with intergenerational trauma and discrimination. Overall, although the protocol is effective in identifying sources of resiliency, in the case of African American couples and families, it does not address the impact of racism and microaggression in the lives of African Americans.

McCullough-Chavis and Waites (2004) and Warde (2012) offered an additional model for genograms with African American families, the CG, as a method of revealing family history and cultural influences in the broader context. This genogram is used to identify cultural influences in key areas of family functioning. The CG provides a culturally sensitive lens

through which to view African American family functioning. While McCullough-Chavis and Waites (2004) contended that consideration of social factors such as poverty, oppression, and social injustice, in the past and present, are considered when using the CG, they did not offer a set of questions for addressing the impacts of racism and microaggressions in the lives of African American couples and clients.

Another aspect of African American lives that has been integrated into genograms is the importance of spirituality (Boyd-Franklin, 2006; Dun & Dawes 1999; McAdoo & Crawford, 1991; McCullough-Chavis, 2004). Dun and Dawes (1999) addressed this important aspect in the African American culture in their spirituality-focused genogram. Spirituality and religion have historically played critical roles in the lives of African Americans (Boyd-Franklin, 2006), and the spirituality-focused genogram (Dun & Dawes, 1999) addresses the concepts of spirituality and religion in the African American family. Exploring spirituality is an important aspect of African American resiliency and a source for African Americans of coping against the detrimental effects of intergenerational trauma and racism; however, the spirituality-focused genogram does not tie spirituality to the exploration of discrimination. Thus, while this genogram is useful in working with African American couples and families, it does not offer a method for addressing the transgenerational trauma associated with racism and microaggression in the African American community.

The CritG has not been written about specifically for use with African Americans, but because Critical Theory is incorporated into the construction of the CritG, it may be modified for use with African American couples and families and for exploring intergenerational racism and trauma. Nevertheless, in its current state, the CritG does not provide a method for addressing racism and microaggression specifically for African Americans.

While the FIG, CG, CritG, cultural genogram, and spirituality-focused genograms have expanded the use of genograms with African American clients, the literature has shied away from using genograms as a tool to explore one of the most impactful issues for African Americans across generations: the lingering impact of the intergenerational trauma of slavery and the impact of ongoing discrimination and violence on African American couples and families. The TTRG was created as a dynamic tool to conduct compressive trauma assessment and intervention from a transgenerational trauma and resilience framework. However, it is not specific to African American couples and families, and it does not provide a list of questions that address the impact of racism for African Americans. In fact, none of these specialized genograms were used to address transgenerational trauma experienced by African Americans as a result of the aftermath of slavery or the systemic racism and microaggressions that exist today. A thorough search of the literature did not produce any examples of the use of genograms to address trauma experienced by African Americans related to microaggressions and racism. As discussed, the importance of the proposed study is validated by what DeGruy (2017) calls transgenerational slave trauma, and growing evidence shows that grave physiological consequences accompany the psychological impacts of trauma associated with racism (Graff, 2016; Sullivan, 2013). For example, the expanding field of epigenetics (Sullivan, 2013) is providing evidence that transgenerational transmission of stress among African Americans has dire health consequences for expectant mothers and their babies. The percentage of African American babies born at below-average birth weight is believed to be directly correlated to the allosteric load of their birth mothers (Sullivan, 2013), and trauma associated with racism and microaggressions contributes to that allosteric load (Graff, 2011, 2014, 2016; Gump, 2010). This study will net a set of questions for use in constructing a genogram that will enable counselors to

assist African American clients in creating room for the articulation of the shame associated with racism and microaggressions and will break the chain that transmits insecurity, shame, and trauma from one generation to the next. While racism and oppression are mentioned anecdotally in almost all of the specialized genograms, none of them have offered a method of addressing the racism and microaggression experienced by African Americans. Table 1 compares the features of the cultural genogram (CG) used with African American Families, the spirituality-focused genogram in practice with African Americans, the critical genogram (CritG), the African American (AA) genogram, the Family Integrated Genogram and the Transgenerational Trauma and Resilience genogram (TTRG).

Table 1

Specialized African American Genogram Features Comparison

Name of the Specialized Genogram	Genogram Addresses Racism	Genogram Considers the Cultural Context	Genogram Includes Questions	Genogram Explores Family History	Model Explores Socio-Political Context
CG	✓	✓	✓	✓	
Spirituality		✓		✓	
CritG		✓	✓	✓	✓
AA		✓		✓	
FIG		✓	✓	✓	
TTRG	✓	✓		✓	✓

Note: Genograms represented include CG (Cultural Genogram), Spirituality Genogram, CritG (Critical Genogram), AA (African American Genogram), FIG (Family Integrated Genogram), and TTRG (Transgenerational Trauma Resiliency Genogram).

CHAPTER III: METHODS

An extensive search of the literature produced few articles that explored the use of genograms with African Americans. Of the six specialized genograms found, three Genograms, the CG (Cultural Genogram), CritG (Critical Genogram), and the FIG (Family Integrated Genogram), included a series of questions to aid the therapist and client in the construction of the genogram, and none of the specialized genograms explored the impact of transgenerational trauma and racism on African American couples. In order to help fill this gap in the literature a Delphi study was utilized to find and elicit experts to develop a list of questions aimed at helping counselors to facilitate the development of a genogram explored transgenerational trauma and racism experienced by African American couples.

Participants

The selection of panel experts is critical in the modified Delphi method; sampling is not random (Fish & Busby, 2014). Panelists are selected for their expertise in a subject matter and can also be asked to nominate other experts to participate in the panel. For this study, the panelists were expected to have knowledge of Bowen Family Systems Theory or other intergenerational models, knowledge of clinical work with African American couples, and/or knowledge of the clinical impact of racism on African Americans. All participants were required to have a clinical graduate degree in the fields of marriage and family therapy, counseling, psychology, social work, or a related degree. Potential Panelists were asked to answer questions about their experience with: (a) working with African American couples or families, utilizing an intergenerational model in clinical work; (b) teaching graduate-level courses on working with African Americans, intergenerational models, and/or genograms; (c) their record of publishing and presenting on clinical work with African American couples or families, intergenerational

models/genograms, the effects of racism on African Americans (see Appendix C for full list of questions). It was hoped that an “elite” set of experts could be identified through requiring a certain level of academic knowledge, clinical experience, and professional activities. However, these criteria were too limiting. To increase the likelihood that a panel of experts could be found, the strenuous criterion set for experts was modified to limit the disqualifiers to level of education and field of expertise. Delphi subjects should be highly trained and competent within the specialized area of knowledge related to the target issue. The requirement of an advanced degree (master’s or doctorate) in the areas of psychology, counseling, or social work fulfilled this criterion. Potential participants who did not meet the graduate degree criterion were not permitted to participate in the study.

Qualitative data were collected from a sample of 13 expert participants in the fields of psychology, counseling, or social work and ranging in age from 34 to 65 years. Although the following criteria were not a requirement for participation the researcher asked participants to mark all of the statements that applied to them. Although there is no definition of what makes a person an expert, these questions were asked to get a sense of accomplishments and experiences that could be expected of someone who was considered an expert. The full Demographic and professional background questionnaire is listed in Appendix B.

- I have five or more years of clinical experience of working with a significant number (at least 30% of case load) of African American couples and/or families.

Nine participants reported five or more years of clinical experience working with a significant number (at least 30% of caseload) of African American couples ($n = 9$).

- I have five or more years of clinical experience with Bowen Family Systems or another intergenerational model as my primary model used for clinical work and use genograms in my clinical work.

Seven participants reported five or more years of clinical experience with Bowen Family Systems or another intergenerational model as their primary model used for clinical work and said that they used genograms in their clinical practice ($n = 7$).

- I have five or more years' experience teaching graduate-level coursework on how to work with African American couples and/or families.

Nine participants reported teaching experience of five or more years of graduate-level coursework on how to work with African American couples and families was nine ($n = 9$).

- I have five or more years' experience teaching graduate-level coursework in the use of intergenerational models and genograms.

Seven participants had five or more years of experience teaching graduate-level coursework in the use of intergenerational models and genograms ($n = 7$).

- I have published a minimum of one book or three peer-reviewed journal articles on clinical work with African American couples or families.

Two participants published a minimum of one book ($n=2$) and three participants had peer-reviewed journal articles on clinical work with African American couples or families ($n = 3$).

- I have published a minimum of one book or three peer-reviewed journal articles on helping African American clients explore the effects of racism.

No participants had published a minimum of one book or three peer-reviewed journal articles on helping African American clients explore the effects of racism ($n = 0$).

- I have presented a minimum of eight peer-reviewed presentations at national conferences on clinical work with African American couples or families.

Two participants presented a minimum of eight peer-reviewed presentations at national conferences on clinical work with African American couples or families ($n = 2$).

- I have presented a minimum of eight peer-reviewed presentations at national conferences on clinical work with intergenerational models and/or genograms.

No participants presented a minimum of eight peer-reviewed presentations at national conferences on clinical work with intergenerational models and/or genograms ($n = 0$).

- I have presented a minimum of eight peer-reviewed presentations at national conferences on helping African American clients explore the effects of racism.

No participants presented a minimum of eight peer-reviewed presentations at national conferences on helping African American clients explore the effects of racism ($n = 0$).

A summary of the demographics, clinical and teaching experience, and number of publications is listed in Table 2. Table 2 reflects the number of participants who reached the threshold in the statement, and does not take into account the experience, of those who did not meet the minimum threshold.

Table 2

Participant Demographics, Experience, and Publications

Race	African American	9
	Caucasian	4
Gender	Male	2
	Female	11
Experience 30% of caseload	Clinical experience	9
	Teaching experience	9
	Social work	5
Field	Counseling	5
	Psychology	3
Education Highest degree earned	Doctorate	7
	Master's	6
Publications		5
	Books	2
	Peer-reviewed articles	3
Presentations		2

Notes: Race: Race and gender with whom the participant identified. Experience: Clinical experience: Five + years' work with African American couples and/or families. Teaching experience: Five + years' experience in the use of intergenerational models and genograms. Field: Area of expertise. Education: Highest degree attained in a mental health or related field. Publications: Book, or peer-reviewed articles. Presentations: Bowen Family Systems or another intergenerational model.

Procedures

Potential participants were identified through a review of the literature, self-nomination, and nomination by others. An email was sent to potential participants identified as experts through a literature review. Those experts were also asked to nominate others that they thought fit the criteria for panelists, and those people were contacted via email. In addition, an announcement was sent through the counseling listserve, CESNET, for self- or other-nominations. The email and announcement (Appendix A) invited clinicians to participate in a modified Delphi study on exploring the intergenerational impact of racism on African American couples. A link was provided to Survey Monkey that included a brief explanation of the study, a consent form (Appendix B), demographics questionnaire (Appendix C), and Delphi Questionnaire I (DQI; Appendix D). Those who fulfilled the minimum requirements for an expert and DQI were invited to continue to Phase 2.

Phase 1: Delphi Questionnaire I and Analysis

Participant responses were reviewed to make sure they completed the consent and demographics forms and that they met the criteria for inclusion. Those who did not complete all of the information or who did not meet the criteria for inclusion were emailed and thanked for their interest in the study and notified that they would not be moving forward to later phases of the study. Those who completed everything and met the criteria became panelists. Their answers to DQI were included in a content analysis and become a part of Delphi Questionnaire II (DQII). The panelists selected in Phase 1 were contacted by email to let them know when Phase 2 commenced and asked to participate in Phase 2. They were contacted once a week for up to three weeks to be reminded to complete DQII.

In DQI, panelists were asked the following questions:

- What questions should be asked to look at the intergenerational impact of racism on African American couples?
- What questions would you ask to explore each individual's current experience with racism?
- How has racism impacted their relationship?
- What questions would you ask to explore how racism impacts a couple's relationship?
- What other questions would you ask about this topic?

Results (see Delphi Questionnaire p.66) were analyzed by the primary researcher who categorized answers by major headings: (a) intergenerational impact, (b) individual experience, and (c) relationship impact. A secondary researcher analyzed panelists' responses in the same manner to validate the creation of DQII. The analysis of the responses took place over two phases. In the initial phase, the primary researcher and the secondary reviewer evaluated participant responses independently. The items that the researcher and reviewer both identified as appropriate for elimination were removed from the list, for example, redundancy. After the primary researcher removed the redundant items identified in the independent analysis, the primary researcher and reviewer performed a joint analysis of the remaining items to ensure that the researcher and reviewer agreed on the appropriateness of the remaining items. Following the analysis, a total of 81 responses remained (see Table 3 through Table 7 in the Delphi Questionnaire II section). The results of the DQI analysis were used to create DQII and were presented in Phase 2.

Phase 2: Delphi Questionnaire II and Analysis

Phase 2 included the presentation of DQII to panelists and analysis of their responses. The second questionnaire included each of the unique questions created in Phase 1, along with a 7- point Likert scale. Panelists rated the importance of each question on the scale, with 1 being strongly disagree that the question is very important to ask clients to 7 being strongly agree that the question is very important to ask clients.

After the response period was completed, median and interquartile ranges (IQR) for the items from DQII were calculated to determine the degree to which the panelists agreed about whether each individual item was important to ask or not. The median provided information on the central tendency of responses, and the interquartile range provided information about consensus and variability of data without being affected by extreme scores (Fish & Busby, 1996). The DQII items that ranked in the 75% percentile represented the questions that the experts deemed important to ask when constructing a genogram with African Americans that would explore the effect of transgenerational trauma and racism.

CHAPTER IV: RESULTS

In this chapter the results from Delphi Questionnaire I and II are presented. The first part of the analysis includes experts' responses to the five prompts. This part also includes the content analysis of the expert answers. The second part of this analysis presents the rankings of each of the items by the experts and the interquartile range used to determine which final items reached consensus.

Delphi Questionnaire I

The participants were not limited in the number of responses they could give to each of the five prompts in DQI. A total of 120 responses were received from the participants. The primary researcher and secondary reviewer conducted an analysis of the list of responses generated by the participants in DQI, eliminating duplicates and responses that were not relevant to the topic. Participants sometimes offered responses that were relevant to counseling African Americans in general but were not specifically related to the topics of transgenerational trauma and racism. For example, some of the participants offered responses that were related to African American support systems such as extended family or spirituality and the church but did not specifically address racism, microaggressions, or transgenerational trauma. Those items were eliminated from the questions that were rated by the experts in Phase 2 of the study. The final number of responses per prompt following analysis was: Prompt 1, $n = 19$; Prompt 2, $n = 15$; Prompt 3, $n = 18$; Prompt 4, $n = 13$; and Prompt 5, $n=16$. These items together comprised DQII and were used in Phase 2 of the modified Delphi study.

The final number of responses for Prompt 1 following analysis was $n = 19$.

Table 3

Prompt 1. What questions should a counselor ask African American couples in order to explore the intergenerational impact of racism on African American couples?

Number	Question
1	Describe a traumatic experience that a family member experienced as a result of being African American.
2	Describe your earliest experiences of race.
3	How was race discussed in your family?
4	What messages did you receive from your family or interactions outside your family about being African American? What stories about racism have you heard from your family?
5	How has racism affected your relationship or the relationships of your parents/grandparents as an African American couple?
6	What are some differences between the issues you face with racism as a couple and those your grandparents might have experienced?
7	Explain how your approach to racism is different from/similar to that of your parents or grandparents.
8	Tell me how being African American has impacted your family system as a whole?
9	Based on the conversations your parents had with or around you as a child, how do you think being African American has impacted couples in your family?
10	How do you think being African American impacts the dynamics of your current and past couple relationships?
11	What conversations do you and your children have about being African American?
12	Looking back on your family of origin, how did your encounters with people who were racially different from you have an impact on the way you view other races today?
13	What contact do you have with any other races who married into the family?
14	Can you tell me about some ways your grandparents were disempowered or marginalized via dominant culture or laws?
15	Please share what experiences your family of origin has had about racism.
16	What is the role that race and racism play in your relationship?
17	How did racism, discrimination, oppression, skin color (lightness/darkness of complexion), and negative stereotypes impact your relationship and view of one another?
18	What do you know about your grandparents and great-grandparents' experiences with racism?

19

Explain your grandparents' or great-grandparents' experience with racism based on where they were from geographically?

The final number of responses for Prompt 2 following analysis was $n = 15$.

Table 4

Prompt 2. What questions would you ask to explore an individual's current experience with racism?

Number	Question
1	Describe an experience of racism, how your support system helped you, and how you coped with that experience.
2	How does being African American impact the dynamics between you and the people in your workplace/profession/industry, school system, community (physical and cultural), the legal system, the medical system, and any other institution/organization?
3	How has institutional racism affected your interpersonal relationship with co-workers who are different than you?
4	Tell me about a time when a member of your family experienced a racial comment.
5	Describe your comfort level when socializing with other couples of a different race.
6	What are some ways you have been disempowered/empowered in today's socio-political culture? How has racism influenced/impacted this?
7	As we look to explore racism, what are some of the ways you have felt empowered or disempowered with your ethnicity? Skin color?
8	What do you hope or think would be helpful to ask about racism?
10	Please describe incidents that you have had that would be defined as racist.
11	Give an example that illustrates how you speak freely with each other (as a couple) about your experiences of racism/microaggressions.
12	How do you protect yourself or your partner from racist experiences?
13	What attitudes/beliefs do you have about what your parents shared with you about their experiences as African American people in their communities?
14	What has been your reaction when you witnessed the racist experiences of others?
15	What are your feelings and beliefs about your community's role in amplifying or deactivating racism?

The final number of responses for Prompt 3 following analysis was $n = 18$.

Table 5

Prompt 3. What questions would you ask to explore how microaggressions impact them as individuals and as a couple?

Number	Question
1	How have you responded to microaggression as an individual or as a couple?
2	How have you supported one another during a microaggression as an individual or as a couple?
3	When do you turn to family and friends for support during the microaggression? How did they help support you?
4	Tell me about a situation where you felt subtle discrimination?
5	How do you react when people unintentionally say racist things to you?
6	How would you react if someone told you that you were too sensitive about race issues?
7	Tell me about a time when you have avoided talking about race because the other person would not understand you.
8	Tell me about a situation where you avoided talking about race because it might have jeopardized the relationship you had with an authority figure? Explain how it made you feel.
9	Tell me about how you would react to someone who minimized the importance of your racial identity?
10	How do you feel when someone minimizes the impact of race on your life experiences?
11	How would you confront someone about racist behavior? What do you think the outcomes of those confrontations might be?
12	How have microaggressions impacted your dynamics as a couple?
13	How would you be affected by co-workers who assert that you were hired because you are a minority and not because you are qualified for the job?
14	How would you be affected if you saw an African American person being mistreated for what seemed to be a small error?
15	Tell me how daily experiences with microaggressions impact your daily life, health, activities decisions, and or/relationships?
16	As a couple, describe how you discuss the impact of racism in your workplace.
17	Define microaggression in your own words.
18	Tell me how frequently you experience microaggressions (few, many, or constant). Why do you think this is so?

The final number of responses for Prompt 4 following analysis was $n = 13$

Table 6

Prompt 4. What questions would you ask to explore how racism has impacted a couple's relationship?

Number	Question
1	When racism impacted your relationship as a couple, to whom did you turn (family and friends), and how did they support you?
2	How do you think different races experience different kinds of racism?
3	What specific racial topics do you discuss as a couple, and what impact do you think those discussions about race have on your relationship?
4	Discuss a microaggression that you like to discuss or avoid discussing as a couple and how do you think those discussions impact your relationship?
5	What would have to change for the two of you to feel like the both of you are on the same page when it comes to racial identity?
6	What ideas or beliefs about racial identity do you have in common?
7	Where do you differ in your beliefs or understanding of racial identity?
8	Tell me about how you are similar and different in your beliefs about racial dynamics in our society?
9	In what ways have differences in the way you view racism impacted your interpersonal relationship?
10	How important is it for your spouse to be familiar with the racism that you face every day, and why?
11	Describe your partner's reaction when you speak freely with each other about your experiences of racism/microaggressions?
12	In what ways are your work environment, your faith community, or other affiliations supportive or 'hostile'?
13	How do you protect yourself or your partner from racist experiences?

The final number of responses for Prompt 5 following analysis was $n = 16$.

Table 7

Prompt 5. What other questions would you ask clients in this topic area?

Number	Question
1	Describe a way in which your career might have been influenced by racism.
2	If given the opportunity, how would you try to help other couples experiencing racism/microaggressions?
3	What do you think you can do as an individual, and as a couple, to help prevent or decrease racism and microaggressions?
4	Explain why you feel it is more comfortable or more useful to cope with racism and microaggression alone or within a group.
5	How do you think you might benefit from interacting in a group across racial and generational lines?
6	What do you think about the portrayal of African American couples in the media?
7	What do you think are some of the societal messages or narratives around African American couples?
8	What are some techniques or skills you use to cope with racism?
9	How does racism control your behavior?
10	Explain how easy/difficult it is for you to see your children deal with racism in their surroundings.
11	How does racism affect your finances?
12	How does racism affect your willingness to have children?
13	Please talk about any severe traumatic experiences of racism or microaggressions that you or your spouse/family have experienced. How difficult was it for you to share it with others/anyone? Explain why you have not shared it with others.
14	Describe the chronic racism and microaggressions that are part of your life.
15	Talk about any White people who are supportive and caring toward you in your life. How do supportive White people demonstrate their support and care? Are they supportive of you as a couple and family, and why do you think that is so?
16	Explain how you and your partner share thoughts and feelings about racism with others who are not people of color?

Delphi Questionnaire II

In the second phase of the study, the primary researcher sent a link from Survey Monkey for DQII to the experts via email. The panel experts reviewed and rated the questions collected in DQI, evaluating the responses on importance using a 7-point Likert scale that had a range of ratings: (1) strongly disagree, (2) moderately disagree, (3) slightly disagree, (4) neither agree nor disagree, (5) slightly agree, (6) moderately agree, and (7) strongly agree, to indicate whether the item is important to ask clients in the construction of a genogram to explore transgenerational trauma, racism, and microaggressions experienced by the couple and their family.

The researcher calculated the interquartile range (IQR) for each question/item using SPSS to determine which responses had a consensus from the experts (strongly agree) that the item was important to include. Tables 8 through 12 are showing the SPSS calculations of all 81 questions.

SPSS was used to calculate the Interquartile Range for Prompt 1.

Table 8

Prompt 1. What questions should a counselor ask African American couples in order to explore the intergenerational impact of racism on African American couples?

Question	Quartile 1	Median	Quartile 3	IQR	Consensus Y/N/Acceptable
Question 1	4.00	6	7.00	3.00	no
Question 2	6.25	7	7.00	.75	yes
Question 3	6.25	7	7.00	.75	yes
Question 4	6.00	7	7.00	1.00	acceptable
Question 5	6.25	7	7.00	.75	yes
Question 6	6.25	7	7.00	.75	yes
Question 7	5.25	7	7.00	1.75	no
Question 8	5.00	7	7.00	2.00	no
Question 9	5.00	7	7.00	2.00	no
Question 10	5.00	7	7.00	2.00	no
Question 11	6.00	7	7.00	1.00	acceptable
Question 12	6.00	7	7.00	1.00	acceptable
Question 13	5.00	6	7.00	2.00	no
Question 14	5.25	7	7.00	1.75	no
Question 15	6.00	7	7.00	1.00	acceptable
Question 16	5.25	7	7.00	1.75	no
Question 17	5.25	7	7.00	1.75	no
Question 18	6.00	6	7.00	1.00	no
Question 19	5.00	6	7.00	2.00	no

Notes: Quartile, Median, Interquartile Range

SPSS was used to calculate the Interquartile Range for Prompt 2.

Table 9

Prompt 2. What questions would you ask to explore an individual's current experience with racism?

Question	Quartile 1	Median	Quartile 3	IQR	Consensus Y/N/Acceptable
Question 1	5.50	7	7.00	1.50	no
Question 2	6.00	7	7.00	1.00	acceptable
Question 3	5.25	7	7.00	1.75	no
Question 4	5.00	5	7.00	2.00	no
Question 5	4.50	6	7.00	2.50	no
Question 6	5.00	7	7.00	2.00	no
Question 7	5.00	7	7.00	2.00	no
Question 8	4.00	6	7.00	3.00	no
Question 9	5.00	7	7.00	2.00	no
Question 10	5.00	7	7.00	2.00	no
Question 11	5.25	7	7.00	1.75	no
Question 12	5.25	7	7.00	1.75	no
Question 13	5.25	7	7.00	1.75	no
Question 14	6.00	7	7.00	1.00	acceptable
Question 15	4.25	6	6.75	2.50	no

Notes: Quartile, Median, Interquartile Range

SPSS was used to calculate the Interquartile Range for Prompt 3.

Table 10

Prompt 3. What questions would you ask to explore how microaggressions impact them as individuals and as a couple?

Question	Quartile 1	Median	Quartile 3	IQR	Consensus Y/N/Acceptable
Question 1	5.00	7	7.00	2.00	no
Question 2	6.00	7	7.00	1.00	acceptable
Question 3	5.25	7	7.00	1.75	no
Question 4	6.25	7	7.00	.75	yes
Question 5	5.00	7	7.00	2.00	no
Question 6	5.25	7	7.00	1.75	no
Question 7	6.00	7	7.00	1.00	acceptable
Question 8	6.00	7	7.00	1.00	acceptable
Question 9	6.00	7	7.00	1.00	acceptable
Question 10	6.00	7	7.00	1.00	acceptable
Question 11	5.25	6	7.00	1.75	no
Question 12	6.00	7	7.00	1.00	acceptable
Question 13	5.25	7	7.00	1.75	no
Question 14	4.25	6	7.00	2.75	no
Question 15	6.00	7	7.00	1.00	acceptable
Question 16	6.00	7	7.00	1.00	acceptable
Question 17	6.25	7	7.00	.75	yes
Question 18	6.00	7	7.00	1.00	acceptable

Notes: Quartile, Median, Interquartile Range

SPSS was used to calculate the Interquartile Range for Prompt 4.

Table 11

Prompt 4. What questions would you ask to explore how racism has impacted a couple's relationship?

Question	Quartile 1	Median	Quartile 3	IQR	Consensus Y/N/Acceptable
Question 1	6.25	7	7.00	.75	yes
Question 2	4.00	5	6.00	2.00	no
Question 3	5.25	7	7.00	1.75	no
Question 4	5.25	7	7.00	1.75	no
Question 5	4.50	7	7.00	2.50	no
Question 6	6.00	7	7.00	1.00	acceptable
Question 7	6.25	7	7.00	.75	yes
Question 8	6.00	7	7.00	1.00	acceptable
Question 9	6.25	7	7.00	.75	yes
Question 10	6.25	7	7.00	.75	yes
Question 11	6.00	6	7.00	1.00	no
Question 12	6.00	7	7.00	1.00	acceptable
Question 13	7.00	7	7.00	.00	yes

Notes: Quartile, Median, Interquartile Range

SPSS was used to calculate the Interquartile Range for Prompt 5.

Table 12

Prompt 5. What other questions would you ask clients in this topic area?

Question	Quartile 1	Median	Quartile 3	IQR	Consensus Y/N/Acceptable
Question 1	6.00	7	7.00	1.00	acceptable
Question 2	5.00	6	6.75	1.75	no
Question 3	5.00	7	7.00	2.00	no
Question 4	4.00	6	6.75	2.75	no
Question 5	5.00	6	7.00	2.00	no
Question 6	6.00	7	7.00	1.00	acceptable
Question 7	6.25	7	7.00	.75	yes
Question 8	6.00	7	7.00	1.00	acceptable
Question 9	4.25	6	7.00	2.75	no
Question 10	5.25	7	7.00	1.75	no
Question 11	6.00	7	7.00	1.00	acceptable
Question 12	4.25	6	7.00	2.75	no
Question 13	6.00	7	7.00	1.00	acceptable
Question 14	6.00	6	7.00	1.00	no
Question 15	3.25	5	7.00	3.75	no
Question 16	4.25	6	7.00	2.75	no

Notes: Quartile, Median, Interquartile Range

Of the $n = 81$ questions, 43% ($n = 35$) were ranked as strongly/acceptable for use with clients in the creation of a genogram to explore transgenerational trauma and racism with African American couples. The questions that the experts reached consensus on as being important to include are provided in Table 13 through Table 17.

Using SPSS, consensus was reached on seven of the 19 responses from Prompt 1 as shown in Table 13.

Table 13

Prompt 1. What questions should a counselor ask African American couples in order to explore the intergenerational impact of racism on African American couples?

Question #	Quartile 1	Median	Quartile 3	IQR
Question 2	6.25	7	7.00	.75
Question 3	6.25	7	7.00	.75
Question 4	6.00	7	7.00	1.0
Question 5	6.25	7	7.00	.75
Question 6	6.25	7	7.00	.75
Question 11	6.00	7	7.00	1.00
Question 12	6.00	7	7.00	1.00
Question 15	6.00	7	7.00	1.00

Notes: Quartile, Median, Interquartile Range

Using SPSS, consensus was reached on two of the 15 responses from Prompt 2 as shown in Table 14.

Table 14

Prompt 2. What questions would you ask to explore an individual's current experience with racism?

Question #	Quartile 1	Median	Quartile 3	IQR
Question 2	6.00	7	7.00	1.00
Question 15	6.00	7.	7.00	1.00

Notes: Quartile, Median, Interquartile Range

Using SPSS, consensus was reached on 11 of the 18 responses from Prompt 3 as shown in Table 15.

Table 15

Prompt 3. What questions would you ask to explore how microaggressions impact them as individuals and as a couple?

Question #	Quartile 1	Median	Quartile 3	IQR
Question 2	6.00	7	7.00	1.00
Question 4	6.25	7	7.00	.75
Question 7	6.00	7	7.00	1.00
Question 8	6.00	7	7.00	1.00
Question 9	6.00	7	7.00	1.00
Question 10	6.00	7	7.00	1.00
Question 12	6.00	7	7.00	1.00
Question 15	6.00	7	7.00	1.00
Question 16	6.00	7	7.00	1.00
Question 17	6.25	7	7.00	.75
Question 18	6.00	7	7.00	1.00

Notes: Quartile, Median, Interquartile Range

Using SPSS, consensus was reached on eight of the 13 responses from Prompt 4 as shown in Table 16.

Table 16

Prompt 4. What questions would you ask to explore how racism impacted a couple's relationship?

Question #	Quartile 1	Median	Quartile 3	IQR
Question 1	6.25	7	7.00	.75
Question 6	6.00	7	7.00	1.00
Question 7	6.25	7	7.00	.75
Question 8	6.00	7	7.00	1.00
Question 9	6.25	7	7.00	.75
Question 10	6.25	7	7.00	.75
Question 12	6.00	7	7.00	1.00
Question 13	7.00	7	7.00	.00

Notes: Quartile, Median, Interquartile Range

Using SPSS, consensus was reached on six of the 16 responses from Prompt 5 as shown in Table 17.

Table 17

Prompt 5. What other questions would you ask clients in this topic area?

Question #	Quartile 1	Median	Quartile 3	IQR
Question 1	6.00	7	7.00	1.00
Question 6	6.00	7	7.00	1.00
Question 7	6.25	7	7.00	.75
Question 8	6.00	7	7.00	1.00
Question 11	6.00	7	7.00	1.00
Question 13	6.00	7	7.00	1.00

Notes: Quartile, Median, Interquartile Range

Summary

In the modified Delphi study, five prompts were given to a panel of experts to develop a group of questions that would help clients to explore the impact of transgenerational trauma and racism on African American couples. The experts generated 120 responses. The primary researcher and a secondary reviewer conducted an analysis of the responses to eliminate responses that were redundant or off-topic. For example, many of the experts generated questions related to comparing the experiences of past generations (parents or grandparents) with their own experiences with racism. The two questions that were duplicated most frequently were:

- How has racism affected your relationship or the relationships of your parents/grandparents as an African American couple?
- What are some differences between the issues you face with racism as a couple and those your grandparents might have experienced?

Some of the eliminated responses were removed because they did not specifically address the topic of transgenerational trauma, racism, or microaggressions. Although they may have been culturally appropriate for constructing a genogram with African Americans, they were not specifically focused on the topic of racism. For example, several answers were geared toward exploring extended families and kinship relationships, topics that, while culturally appropriate for African Americans, did not address the influence of racism in this area. As a result of the analysis of the initial responses, 32% ($n = 39$) of the responses were eliminated. During Phase 2 of the study, the experts rated the remaining responses ($n = 81$) on a 7-point Likert scale. The experts came to consensus on 39% ($n = 35$) of the remaining responses, broken down into consensus on 23% ($n = 8$) of responses to Prompt 1, 18% ($n = 2$) responses to Prompt 2, 61% ($n = 11$) responses to Prompt 3, 62% ($n = 8$) responses to Prompt 4, and 38% ($n = 6$) responses to Prompt 5.

The number of consensus questions from Table 3 was seven, $n = 7$.

Table 18

Prompt 1. What questions should a counselor ask African American couples in order to explore the intergenerational impact of racism on African American couples?

Number	Question
2	Describe your earliest experiences of race.
3	How was race discussed in your family?
4	What messages did you receive from your family or interactions outside your family about being African American? What stories about racism have you heard from your family?
5	How has racism affected your relationship or the relationships of your parents/grandparents as an African American couple?
6	What are some differences between the issues you face with racism as a couple and those your grandparents might have experienced?
11	What conversations do you and your children have about being African American?
12	Looking back on your family of origin, how did your encounters with people who were racially different from you have an impact on the way you view other races today?

The number of consensus questions from Table 4 was two, $n = 2$.

Table 19

Prompt 2. What questions would you ask to explore an individual's current experience with racism?

Number	Question
2	How does being African American impact the dynamics between you and the people in your workplace/profession/industry, school system, community (physical and cultural), the legal system, the medical system, and any other institution/organization?
15	What are your feelings and beliefs about your community's role in amplifying or deactivating racism?

The number of consensus questions from Table 5 was 11, $n = 11$.

Table 20

Prompt 3. What questions would you ask to explore how microaggressions impact them as individuals and as a couple?

Number	Question
2	How have you supported one another during a microaggression as an individual or as a couple?
4	Tell me about a situation where you felt subtle discrimination?
7	Tell me about a time when you have avoided talking about race because the other person would not understand you.
8	Tell me about a situation where you avoided talking about race because it might have jeopardized the relationship you had with an authority figure? Explain how it made you feel.
9	Tell me about how you would react to someone who minimized the importance of your racial identity?
10	How do you feel when someone minimizes the impact of race on your life experiences?
12	How have microaggressions impacted your dynamics as a couple?
15	Tell me how daily experiences with microaggressions impact your daily life, health, activities decisions, and or/relationships?
16	As a couple, describe how you discuss the impact of racism in your workplace.
17	Define microaggression in your own words.
18	Tell me how frequently you experience microaggressions (few, many, or constant). Why do you think this is so?

The number of consensus questions from Table 6 was eight, $n = 8$

Table 21

Prompt 4. What questions would you ask to explore how racism has impacted a couple's relationship?

Number	Question
1	When racism impacted your relationship as a couple, to whom did you turn (family and friends), and how did they support you?
6	What ideas or beliefs about racial identity do you have in common?
7	Where do you differ in your beliefs or understanding of racial identity?
8	Tell me about how you are similar and different in your beliefs about racial dynamics in our society?
9	In what ways have differences in the way you view racism impacted your interpersonal relationship?
10	How important is it for your spouse to be familiar with the racism that you face every day, and why?
12	In what ways are your work environment, your faith community, or other affiliations supportive or 'hostile'?
13	How do you protect yourself or your partner from racist experiences?

The number of consensus questions from Table 7 was six, $n = 6$.

Table 22

Prompt 5. What other questions would you ask clients in this topic area?

Number	Question
1	Describe a way in which your career might have been influenced by racism.
6	What do you think about the portrayal of African American couples in the media?
7	What do you think are some of the societal messages or narratives around African American couples?
8	What are some techniques or skills you use to cope with racism?
11	How does racism affect your finances?
13	Please talk about any severe traumatic experiences of racism or microaggressions that you or your spouse/family have experienced. How difficult was it for you to share it with others/anyone? Explain why you have not shared it with others.

CHAPTER V: DISCUSSION

Assessment in family-focused clinical practice is a complex process that can be overwhelming. One widely used instrument in the assessment process is the genogram, a powerful tool designed to help clinicians assist clients in the process of exploring their family systems in depth. Through a series of questions, the clinician and client collect and organize information to be used in assessment and intervention. The kind of questions that the clinician asks will shape the kind of information collected on the genogram. The goal of this mixed method study was to develop a list of questions to help counselors explore the topic of racism and its impact on African American couples by way of constructing a genogram. The Modified Delphi process and quantitative analysis of the responses generated in the study produced a final list of 35 questions that the participating experts strongly recommended as important to ask African Americans in exploring the impact of transgenerational trauma and racism. As part of the process, the experts were asked to rate the questions that they thought would be important to include in an interview. It is surprising that the experts generated some responses resembling possible questions for inclusion yet chose not to include them in the results. The elimination of questions addressing the topic might have been due to differences in the participants' level of experience with the population or the topic as well as a reflection of personal bias. For example, Prompt 2 elicited 15 suggested questions; however, only two of the questions reached consensus among the experts. In this section, the researcher provides a synthesis of the questions and the literature review. Questions are organized and discussed according to the prompt that elicited the reported responses from the experts.

Discussion of Results

The study netted 35 responses that the experts rated as strongly recommended to ask African Americans when constructing a genogram that explored, the impacts of transgenerational trauma and racism. This discussion includes examples of how the expert responses could be used when constructing specialized genograms with African American clients and how Critical Theory and Critical Race Theory inform the responses.

Prompt 1

The Prompt 1 question asked, “What questions should a counselor ask African American couples in order to explore the intergenerational impact of racism on African American couples?” The eight responses that the experts developed could be used in a Transgenerational Trauma and Resilience Genogram. If used in the construction of a such a genogram, these responses would elucidate not only the transgenerational trauma that the African American client had experienced, along with examples of how past generations survived, but also potential sources of resilience for present and future generations. Resilience is the ability to withstand and rebound from disruptive life challenges by using strengths, resources, and positive adaptations (Walsh, 2003). For example, individuals who saw their parents overcome a natural disaster may be able to recall the strength and perseverance that their parents possessed and use this as a guide for overcoming a present-day disaster (Goodman & West-Olatunji, 2008). For families with a long history of trauma, persecution, or discrimination, resilience factors may include such protective mechanisms as becoming a cohesive and somewhat closed family system (Goodman, 2013).

The flexibility to adapt these mechanisms to the current context, such as increasing protection when threatened or relaxing in times of safety (Danieli, 2007), is an example of

resilience. The Transgenerational Trauma and Resilience genogram (Goodman, 2013) examined transgenerational trauma and resilience through a framework that considered trauma across generations. The questions that the experts developed were consistent with the kind of questions or discussion topics that can help counselors develop a genogram that assesses the impact of trauma or racism across multiple generations. Literature on the transmission of trauma within families and communities across generations has indicated a need for practitioners to examine and address historical and current trauma with their clients (Danieli, 2007). Some questions elicited from Prompt 1 included consideration of “how race/racism was discussed in the family, what messages were received from the family about being African American, what stories were shared about racism, and how racism affected relationships.” These questions could be used to construct a Transgenerational Trauma and Resilience genogram that explores trauma experienced by family members in past generations.

The experts also asked, “What conversations do parents and their children have about being African American?” This question opens an opportunity to share resilience by passing strengths and methods of coping from parent to child. It is important to recognize questions that explore resilience because including sources of strength within the genogram enables the counselor and client to move beyond a deficit focus to one that promotes resilience (Walsh, 2006). Arredondo and Perez (2003) contended that multiculturalism helps counselors gain insight into the inequities experienced by clients from marginalized groups as well as the privileges bestowed to clients from privileged groups. The responses that these questions elicit will help counselors to gain multicultural insight into these inequities and can help counselors to identify and engage in social justice initiatives.

The questions generated by Prompt 1 will help the client to become aware of attitudes and beliefs as well as his or her experiences with oppression. At a systems level, oppression manifests itself in the form of rules, policies, laws, and institutions that create inequities for marginalized individuals. Critical Theory and Critical Race Theory remind clinicians to look at the responsibility of society in creating social ills. The transgenerational framework also included the transmission of resilience across generations (Goodman & West-Olatunji, 2008). The eight questions developed in the study under Prompt 1 will help future practitioners guide their African American clients in the construction of a genogram that examines their familial trauma history.

It was surprising that none of the questions aimed to turn the client's attention to forming new strengths and positive ways of coping. However, the focus of this study was on developing questions to elicit reflection on experiences of past generations to understand how they survived racism. Future work may result in a process that takes the client from reflection on the resilience of past generations to the application of those skills in present and future generations.

Prompt 2

Prompt 2 queried, "What questions would you ask to explore an individual's current experience with racism?" The first response generated by the experts asked clients about "how being African American impacts the dynamics between the client and the people in the client's workplace/profession/industry, school system, community (physical and cultural), the legal system, the medical system, and any other institution/organization." Although this question is asked on an individual level, the client's response helps the client to realize his or her social location within the larger sociopolitical system and historical context. The second response generated asked, "What has been your reaction when you witnessed the racist experiences of

others?” These questions are informed by Critical Theory and Critical Race theory, and they are important because they help the client to recognize the impact of racism on a systemic level.

Critical Theory and Critical Race Theory are philosophical approaches to culture and literature that confront the social historical and ideological focus and structures that produce and constrain society. Critical Theory and Critical Race Theory inform the Critical Genogram (CritG; Koustic et al., 2009), which was designed to develop reflection, sensitivity, and action aimed at reshaping social and institutional politics surrounding social locations. The two responses developed by the experts in pondering Prompt 2 are examples of questions that would be appropriate to use in constructing a critical genogram (CritG). While the literature showed that reflective questioning is part of the process of generating a critical genogram (CritG), questions specifically for African Americans that could be used to help in the construction of a CritG were lacking. The two questions generated by the experts in response to Prompt 2 provide reflective questioning appropriate for African Americans in the construction of a CritG that looks specifically at racism toward African Americans. Although the CritG focuses on nationalism, sexism, racism, classism, and other forms of oppression, this tool was in fact designed to provide therapists with a vehicle to raise their own critical consciousness.

The responses generated in this study are examples of questions that help bring to light the power differentials between dominant and oppressed groups and aid in depicting the influences these differentials have on African American familial and individual dynamics. Koustic et al. (2009) asserted that awareness of the differentials on familial and individual dynamics illuminates the interlocking forms of oppression, together with action aimed at dismantling oppressive practices. This awareness is referred to as critical consciousness. The two questions generated from Prompt 2 are good examples of reflective questioning that would be

effective for generating a CritG with African American clients as the CritG focuses on the power dynamics surrounding social locations. These questions fit in Critical Race Theory and, if used to construct a CritG, prompt movement toward deeper understanding of the influence of race in social and institutional systems and on the individual and family dynamics of African Americans. Counselors have realized the need to take a more contextual approach to working with clients and communities, recognizing that individuals are part of a larger ecosystem. According to the literature, as society evolves, multicultural competence among counselors must also evolve in the counseling profession to address the needs of culturally diverse clients as well as the social justice concerns that both shape and contextualize mental health and overall well-being (Ratts, Singh, Nassar-McMillan, Butler & Rafferty McCullough, 2015).

Prompt 3

Prompt 3 inquired, “What questions would you ask to explore how microaggressions impact them as individuals and as a couple?” The experts agreed that 11 responses were appropriate for inclusion when crafting a genogram with African Americans to address racial trauma. The major theme that emerged in the responses to Prompt 3 centered on the many forms of microaggression. For example, the experts’ responses included “how have you supported one another during a microaggression as an individual or as a couple, tell me about a situation where you felt subtle discrimination, define microaggression in your own words.”

Microaggressions are brief daily assaults experienced by marginalized individuals that can take the form of verbal or nonverbal forms of behavior (Ratts et al., 2015). Miller et al. (2018) asserted that counseling psychologists have produced a number of important, innovative, and informative articles that elucidate our understanding of racism. Using the 11 responses generated from Prompt 3 in the construction of a cultural genogram (CG) could help clients to

explore trauma resulting from microaggressions. As mentioned earlier, the CG reveals family traditions that promote family solidarity and strength as it considers cultural heritage and influences as well as intergenerational family values, patterns, transactions, and strengths (McCullough-Chavis & Waites, 2004). Several key areas and 27 direct probes were posited by McCullough-Chavis and Waites (2004) to help practitioners gather information for the construction of a CG with African Americans. However, none of the questions they proposed addressed microaggressions or racism. The 11 responses developed under Prompt 3 fill this gap, and using these responses in constructing a CG will enable the client and counselor to bring clarity to the microaggression that the client experiences in his or her day-to-day life. This is important because illuminating these experiences will provide a contextual backdrop for the client's narrative. Examining the genogram may reveal the resilience of past generations and opportunities for coping strategies and social advocacy.

Prompt 4

Prompt 4 asked, "What questions would you ask to explore how racism has impacted a couple's relationship?" The eight responses that the experts generated had a theme focusing on support systems, including familial support, faith community, and similarities and differences in a couple's beliefs related to racism. The experts felt that these responses were appropriate for working with African American couples to create a genogram reflecting how African American couples could use their existing support systems. Miller et al. (2018) posited that providing detailed guidance to address systemic racism beyond traditional approaches is important, and it is also important to reiterate what others have stated in the past. The Family Integrated Genogram (FIG) accomplishes both as it considers family strengths, intergenerational family history,

values, beliefs, patterns, and communication in African American families (McCullough-Chavis, 2004; McCullough-Chavis & Waites, 2004).

The Family Integrated Genogram (FIG) builds on three identified African American strengths: spirituality, spiritual beliefs, and religious beliefs and practices; adaptability of family roles; and extended family kinship networks. McCullough-Chavis (2004) provided a series of questions for counselors to ask clients in constructing the FIG. However, none of the questions address racism. Adding questions generated by experts that focus on racism and microaggressions would build on the FIG, allowing the client and counselor to understand how past generations survived the trauma of racism, in some cases dating from slavery to current times. Future counselors will be able to incorporate the responses generated by the experts highlighting the topic of trauma that has resulted from racism and how best to overcome its impact. It is important that counseling professionals use interventions that work well with their clients. The responses developed by the experts draw attention to the strength areas of African Americans and will work well with client support interventions such as the FIG.

Prompt 5

Prompt 5 asked, “What other questions would you ask clients in this topic area?” Although the topics for Prompt 1 through Prompt 4 were dictated by the researcher, no topic for Prompt 5 was provided as this was an “other” category where the experts could offer questions of their choosing in the topic area. The responses generated included questions that the participants felt were appropriate for working with African American couples to create a genogram that explored transgenerational trauma and racism. The generated responses covered a range of items, including the impact of racism on career, coping skills, socioeconomic status, and couples’ relationships. The common theme in these responses is the guidance they give the

counselor in the construction of the genogram as a vehicle for exploring the transgenerational experience of racism. The responses could in fact be included in any one of the specialized genograms for use with African Americans discussed thus far because they reflect the literature in terms of the importance of multiculturalism as well as social advocacy inherent in Critical Theory and Critical Race Theory.

Non-consensus Responses

The purpose of this Modified Delphi study was to develop a set of questions that the experts thought would be appropriate for use in creating a genogram to explore transgenerational trauma and racism experienced by African American couples. The calculation of the interquartile ranges of the expert ratings allowed the researcher to eliminate responses for which consensus had not been reached. The 43 eliminated questions could also be effective in promoting contextual awareness and could be beneficial in moving therapists and clients toward clearer critical consciousness. Although the non-consensus responses were not added to the results as recommended to be included in an interview, they could prove useful. These questions, along with any that may develop through the phenomenological interaction of the therapist and client, would be effective.

Under Prompt 1, one of the response questions that did not reach consensus was, “Explain how your approach to racism is different from/similar to that of your parents or grandparents.” This item did not reach consensus with the experts; however, in the literature, this question is an example supported by both family systems theorists and scholars who specialize in working with African Americans. Several scholars (Boyd-Franklin, 2006; McCullough-Chavis & Waites, 2004; Watts-Jones, 1997) have written about African American strengths and note the importance of family in the African American culture. Family systems therapists Kerr and

Bowen (1998) wrote about transgenerational transmission; this question specifically asks the client to reflect on how racism has impacted their family over two generations.

Under Prompt 2, the experts selected questions 2 and 14 as important to include and deemed these two questions the most effective in asking clients to reflect on the effect of racism. The other generated responses also focused on racism in places like the workplace/profession industry, school system, and community. In addition, the other questions developed under this prompt asked the client about racism; however, they did not focus on professional settings.

Question 12 asked, “How do you protect yourself or your partner from racist experiences?” Although the experts did not choose this question, the researcher considered it most important to include, especially with couples. The question is helpful for the client to use to reflect on how his/her experiences with racism might be mitigated. Discussing Question 12, the counselor could help the couple to assess how the impacts of microaggressions experienced outside of the home—for example, in the workplace—could be negatively impacting their relationship and how they could work together to protect each other from the impact of these microaggressions. This question is supported in the literature; for example, Kakiuchi and Weeks (2009) explored family scripts affecting the roles of work and career in couple and family dynamics. Through Question 12, the counselor could help clients to recognize how microaggressions experienced in the workplace or elsewhere may manifest as aggression expressed in the home. Specific articles in the literature addressed multicultural competence; for example, Bean, Perry, and Bedell (2002) explained how to develop culturally competent marriage and family therapists. This literature is of assistance to non-African American therapists working with African American families. However, the authors did not address racism specifically. Question 5 under Prompt 3 asks, “How do you react when people unintentionally

say racist things to you?” This question is beneficial to the therapist as well as the client for recognizing microaggression and would be helpful when used with a cultural genogram.

The focus of this section was to examine the questions that were eliminated that should have or could have been included. Based on the literature, Question 2 under Prompt 4 was correctly eliminated. Question 2 asked, “How do you think different races experience different kinds of racism?” This question minimizes the importance of the African American experience of racism, unconsciously disregarding the impact of transgenerational trauma experienced by African Americans as a result of 400 years of slavery and racism (DeGruy, 2017). The question fails to recognize the racism that African Americans continue to live under and even hints at the supposition that the African American experience with racism is equal to that of others who may experience racism.

Implications

The research conducted on genograms showed a paucity of literature on the use of genograms to address racism. The Modified Delphi study was timely and important, given the current sociopolitical climate in the United States that has seen the reemergence of explicit racial hate and violence. This study was an opportunity to reexamine the strides that the counseling profession has made toward addressing and finding solutions for racism in the real world. Whether subtle microaggressions or blatant and overt, individual or systemic, direct or vicarious, the mental health consequences of racism for people of color are overwhelmingly negative (Miller et al., 2018). A review of the literature illuminated the dearth of work that has been done using genograms with African American couples in general and highlighted the lack of studies exploring how genograms could be used to address the impacts of racism and transgenerational trauma in African American couples. Miller et al. (2018) posited that the most helpful

recommendations are those providing detailed and tangible steps or procedures that can be employed to address racism. Counselors often take a phenomenological approach for establishing a therapeutic alliance with clients. However, difficult topics—especially for counselors who are unfamiliar with the cultural experiences of their clients—should be approached with guidance. More specific training on the difficult topic of racism and transgenerational trauma and other “taboo” topics is needed, particularly for novice practitioners and counselors-in-training. It cannot be assumed that the multicultural training offered in counseling programs will produce skills among counselors that will generalize to equip counselors to work with African American couples on a topic as sensitive as transgenerational trauma and racism. This study helps to achieve this through the development of specific probes to be used with African American clients to construct a genogram that explores the impact of transgenerational trauma and racism. Based on the lack of available books or articles, it is likely that counselors and other mental health professionals are currently receiving inadequate training related to this topic.

The purpose of this study was to address the void in the literature regarding the exploration of racism and microaggressions through the genogram and to take advantage of this opportunity to improve the efficacy of this tool when used with African Americans. It was not the goal of the study to create a protocol to be used with every African American but rather to examine what experts in the field thought were the best questions to use to explore transgenerational trauma and racism in African American couples. The researcher suggests that the questions developed in this mixed methods study may be used to expand the existing interview protocols. By including the items that were developed, existing protocols may be augmented to focus specifically on the impact of racism and microaggressions on African

American couples since slavery. This is important because therapists who fail to recognize and address the stress and trauma associated with racism and microaggressions that their clients experience miss an opportunity to improve their therapeutic alliance with African American clients (Miller et al., 2018).

Specialized genograms for use with African American families as discussed earlier (McCullough-Chavis, 2004; McCullough-Chavis & Waites, 2004; Warde, 2012) provided recommended questions for constructing a genogram with African Americans. Missing from the suggested questions are queries that address the impacts of racism and microaggressions. The results of this study provide the missing component.

Limitations of the Study

Study findings should be considered in light of a number of study limitations. While the Delphi study eliminated the cost associated with face-to-face meetings, other aspects may have been lost by excluding personal interaction in this method. This Modified Delphi study employed a two-round survey strategy. The first step consisted of an expansive literature review; however, the literature review did not net much recent work about the genogram, which was a limitation. The elimination of consecutive rounds might have reduced the flow of ideas; however, the panel of experts appeared to reach a point of saturation as evidenced by a 33% ($n = 39$) redundancy of ideas after two rounds. In the second step of the survey, the experts were asked to rate the questions on a 7-point Likert scale. Although the number of questions that the experts were asked to rate (81) was not excessive, the length of the list might have resulted in participant fatigue and might have negatively impacted the ratings that the experts applied to the items. Some of the 46 questions that were eliminated because the experts failed to reach consensus on their importance may still be useful. The term expert is ambiguous and has been widely debated;

thus, it is possible that a more stringent criterion for determining “expert” qualification might have influenced the development of the questions and the ratings. Although the researcher gave succinct instructions on how the participants were to answer the survey, instructions were not always strictly followed.

Definitions of the terms trauma, racism, and microaggressions were not provided to the panel experts. In the study, the development of the pool of questions was based on each expert’s individual worldview, professional and personal experiences, and personal biases. The definition of racism in the literature was consistent with Harrell’s (2000) statement that racism is “a system of dominance, power, and privilege based on racial-hierarchy rooted in the historical oppression of a group defined or perceived by the dominant-group members as inferior deviant, or undesirable.” However, this definition was not provided to the experts to set a context for the study. The methodology chosen for this study was suitable because the Delphi is an appropriate method when consensus is sought in an area where none previously existed. While the literature corroborated the importance of exploring the impact of racism, no articles were found that replicated the researcher’s work. Neither were any studies found that sought the opinion of experts for treating African Americans using a genogram to explore the impact of transgenerational trauma or racism. Innovations in technology reduced the time expenditure and participant attrition that are historically typical of Delphi studies. Automation of email and online survey vendors like Survey Monkey made the Delphi a more user-friendly method of data collection; however, the lack of participant interaction might have limited the pool of responses generated in Phase 1 of the study. Focus groups used instead of a Modified Delphi might have generated interaction between participants and resulted in a larger pool of recommended questions.

Suggestions for Future Studies

Racism is a difficult subject for clients and therapists alike. The researcher suggests that it would be beneficial in the construction of genograms with African American couples considering the impact of racism and transgenerational trauma to develop direct probes to help the clinician and client to explore the experiences of the client. Helms (2015) posited that a discussion of the impact of racism with African American couples can improve the therapeutic alliance between the counselor and the client. Counselors who assist clients in an examination of the clients' experiences with racism and microaggression demonstrate a sensitivity to the negative impact on their clients. Future opportunities for work in this area include the development of a specialized interview protocol and training for future counselors. The template of interview questions created by experts through this study is a first step toward building an interview protocol for use in constructing a specialized genogram that explores the impact of transgenerational trauma and racism. This work will be useful in creating specific training on conducting the interview and constructing the genogram. The responses resulting from this study could be incorporated into previous work by McCullough-Chavis (2004) that provided specific questions to be asked of African Americans to construct a genogram.

Future empirical studies could be conducted to test the impact of using genograms with African Americans in exploring transgenerational trauma and racism. Such studies could examine whether using a genogram with African Americans has a positive impact on the therapeutic alliance between the counselor and client in a cross-racial dyad. By using existing scales that measure the client's assessment of the multicultural competence of their counselors future researchers will be able to assess the efficacy of using an interview protocol to guide counselors in genogram construction.

References

- Abrams, M. S. (1999). Intergenerational transmission of trauma: Recent contributions from the literature of family systems approaches to treatment. *American Journal of Psychotherapy*, 53(2), 225–232.
- Adler, N. E., & Rehkopf, D. H. (2008). U.S. disparities in health: Descriptions, causes, and mechanisms. *Annual Review of Public Health*, 29, 235–252. doi:10.1146/annurev.publhealth.29.020907.090852
- Alexander, M. (2012). *The new Jim Crow: Mass incarceration in the age of colorblindness*. New York, NY: The New Press.
- Altman, N. (2006). Whiteness. *The Psychoanalytic Quarterly*, 75(1), 45–72. doi:10.1002/j.2167-4086.2006.tb00032.x
- Aniciete, D., & Soloski, K. L. (2011). The social construction of marriage and a narrative approach to treatment of intra-relationship diversity. *Journal of Feminist Family Therapy: An International Forum*, 23(2), 103–126. doi:10.1080/08952833.2011.576233
- Arredondo, P., & Perez, P. (2003) Expanding multicultural competence through social justice leadership. *The Counseling Psychologist*, 31(3), 282–289. <https://doi.org/10.1177%2F0011000003031003003>
- Baum, B. (2015). Decolonizing critical theory. *Constellations*, 22(3), 420–434. <http://dx.doi.org/10.1111/1467-8675.12169>
- Bean, R. A., Perry, B. J., & Bedell, T. M. (2002). Developing culturally competent marriage and family therapists: Treatment guidelines for non-African-American therapists working with African-American families. *Journal of Marital and Family Therapy*, 28(2), 153–164. doi:10.1111/j.1752-0606.2002.tb00353.x
- Bell, D. A. (1995). Who's afraid of critical race theory? *University of Illinois Review*, 1995(4), 893–910.
- Belous, C. K., Timm, T. M., Chee, G., & Whitehead, M. R. (2012). Revisiting the sexual genogram. *American Journal of Family Therapy*, 40(4), 281–296. doi:10.1080/01926187.2011.627317
- Bender, S. M. (2004). Transgenerational effects of the holocaust: Past, present, and future. *Journal of Loss and Trauma*, 9(3), 205–215.
- Blitstein, R. (2009, June 15). Racism's hidden toll. *Pacific Standard*. Retrieved from: <http://www.psmag.com/>

- Bowen, M. (1976). Theory in the practice of psychotherapy. In P. J. Guerin (Ed.), *Family therapy: Theory and practice* (pp. 42–90). New York, NY: Gardner Press.
- Boyd-Franklin, N. (2006). *Black families in therapy: Understanding the African American experience* (2nd ed.). New York, NY: Guilford Press
- Boyd-Franklin, N., & Franklin, A. J. (1998). African American couples in therapy. In M. M. McGoldrick (Ed.), *Re-visioning family therapy: Race, culture, and gender in clinical practice* (pp. 268–281). New York, NY: Guilford Press.
- Brondolo, E., ver Halen, N. B., Pencille, M., Beatty, D., & Contrada, R. J. (2009). Coping with racism: A selective review of the literature and a theoretical and methodological critique. *Journal of Behavioral Medicine, 32*(1), 64–88. doi:10.1007/s10865-008-9193-0
- Bronner, S. E. (2011). *Critical theory: A very short introduction*. New York, NY: Oxford University Press.
- Bronner, S. E. (2013). *Of critical theory and its theorists*. Hoboken, NJ: Routledge.
- Brookfield, S. (2001). Repositioning ideology critique in a critical theory of adult learning. *Adult Education Quarterly, 52*(1), 7–22. doi:10.1177/07417130122087368.
- Carpenter, Z. (2017). Black births matter: In America black infants are twice as likely as white infants to die before their first birthday. Why? *The Nation*. 03/06/2017.
- Centers for Disease Control and Prevention. (2013). CDC health disparities and inequalities report: United States, 2013. *Morbidity and Mortality Weekly Report, 62*(3), 1–186.
- Choi, S., & Friso, S. (2010). Epigenetics: A new bridge between nutrition and health. *American Society for Nutrition, 8*(16), 8–16. doi:10.3945/an.110.1004
- Coleman, J. A. (2016). Racial differences in posttraumatic stress disorder in military personnel: Intergenerational transmission of trauma as a theoretical lens. *Journal of Aggression, Maltreatment & Trauma, 25*(6), 561–579.
- Constantine, M. G. (2001). Predictors of observer ratings of multicultural counseling competence in Black, Latino, and White American trainees. *Journal of Counseling Psychology, 48*(4), 456–462. doi:10.1037/0022-0167.48.4.456
- Cook, J. M., & Poulsen, S. S. (2011). Utilizing photographs with the genogram: A technique for enhancing couple therapy. *Journal of Systemic Therapies, 30*(1), 14–23. doi:10.1521/jsyt.2011.30.1.14
- Crenshaw, K., Gotanda, N., Peller, G., & Thomas, K. (Eds.). (1995). *Critical race theory: Key writings that formed the movement*. New York, NY: The New Press.

- Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.). Thousand Oaks, CA: SAGE Publications.
- Danieli, Y. (1998). *International handbook of multigenerational legacies of trauma*. New York, NY: Plenum Press. doi:10.1007/978-1-4757-5567-1
- Danieli, Y. (2007). Assessing trauma across cultures from a multigenerational perspective. In J. P. Wilson & C. S.-k. Tang (Eds.), *International and cultural psychology. Cross-cultural assessment of psychological trauma and PTSD* (pp. 65–89). New York, NY: Springer Science + Business Media.
- Danieli, Y., Norris, F. H., & Engdahl, B. (2016). Multigenerational legacies of trauma: Modeling the what and how of transmission. *American Journal of Orthopsychiatry*, 86(6), 639–651. doi:10.1037/ort0000145
- DeGruy, J. (2017). *Post traumatic slave syndrome: America's legacy of enduring injury and healing*. Portland, OR: DeGruy Publications.
- DeMaria, R., Weeks, G., & Hof, L. (1999). *Focused genograms: Intergenerational assessment of individuals, couples and families*. New York, NY: Routledge.
- DeMaria, R., Weeks, G. R., & Twist, M. L. C. (2017). *Focused genograms: Intergenerational assessment of individuals, couples, and families*. New York, NY: Routledge.
- Dixon, P. (2009). Marriage among African Americans: What does the research reveal? *Journal of African American Studies*, 13(1), 29–46. <https://doi.org/10.1007/s12111-008-9062-5>
- Drexler, M. (2007, July 15). How racism hurts—literally. *Boston Globe*. Retrieved from <http://www.boston.com/>
- Duba, J. D. (2009). The basic needs genogram: A tool to help inter-religious couples negotiate. *International Journal of Reality Therapy*, 29(1), 13–17.
- Duba, J. D., Graham, M. A., Britzman, M., & Minatrea, N. (2009). Introducing the basic needs genogram in reality therapy-based marriage and family counseling. *International Journal of Reality Therapy*, 28(2), 15–19.
- Dunham, S. M., Dermer, S. B., & Carlson, J. (Eds.) (2011). *Poisonous parenting*. New York, NY: Routledge.
- Dunn, A. B., & Dawes, S. J. (1999). Spirituality-focused genograms: Keys to uncovering spiritual resources in African American families. *Journal of Multicultural Counseling and Development*, 27(4), 240–254. doi:10.1002/j.2161-1912.1999.tb00338.x

- Duran, E., Firehammer, J., & Gonzalez, J. (2008). Liberation psychology as the path toward healing cultural soul wounds. *Journal of Counseling & Development, 86*(3), 288–295.
- Fish, L. S., & Busby, D. M. (2014). The Delphi method. In D. H. Sprenkle & F. P. Piercy (Eds.), *Research methods in family therapy* (2nd ed., pp. 238–252). New York, NY: Guilford Press. Retrieved from <http://ebookcentral.proquest.com/lib/govst/detail.action?docID=306876>
- Goodman, R. D. (2013). The transgenerational trauma and resilience genogram. *Counselling Psychology Quarterly, 26*(3–4), 386–405. <https://doi.org/10.1080/09515070.2013.820172>
- Goodman, R. D., & West-Olatunji, C. (2008). Transgenerational trauma and resilience: Improving mental health counseling for survivors of Hurricane Katrina. *Journal of Mental Health Counseling, 30*, 121–136.
- Gottman, J. M. (2011). *The science of trust: Emotional attunement for couples*. New York, NY: W. W. Norton.
- Graff, G. (2011). The name of the game is shame: The effects of slavery and its aftermath. *The Journal of Psychohistory, 39*(2), 133–144.
- Graff, G. (2014). The intergenerational trauma of slavery and its aftermath. *The Journal of Psychohistory, 41*(3), 181–197.
- Graff, G. (2016). Post-civil war African American history: Brief periods of triumph and then despair. *The Journal of Psychohistory, 43*(4), 247–261.
- Graff, G. (2018). The name of the game is shame part II: From slavery to Obama and now Trump. *The Journal of Psychohistory, 45*(5)
- Greenberg, L. S., & Johnson, S. M. (1988). *Emotionally focused therapy for couples*. New York, NY: Guilford Press.
- Gump, J. P. (2000). A White therapist, an African-American patient—Shame in the therapeutic dyad: Commentary on paper by Neil Altman. *Psychoanalytic Dialogues, 10*(4), 619–632. <https://doi.org/10.1080/10481881009348571>
- Gump, J. P. (2010). Reality matters: The shadow of trauma on African American subjectivity. *Psychoanalytic Psychology, 27*(1), 42–54. doi:10.1037/a0018639
- Halevy, J. (1998). A genogram with an attitude. *Journal of Marital & Family Therapy, 24*(2), 233–242. doi:10.1111/j.1752-0606.1998.tb01079.x
- Hardy, K. V., & Laszloffy, T. A. (1995). The cultural genogram: Key to training culturally competent family therapists. *Journal of Marital and Family Therapy, 21*, 227–237.

- Harrell, S. P. (2000). A multidimensional conceptualization of racism-related stress: Implications for the well-being of people of color. *American Journal of Orthopsychiatry*, 70(1), 42–57. doi:10.1037/h0087722
- Harris, S. M. (1995). Psychosocial development and Black male masculinity: Implications for counseling economically disadvantaged African American male adolescents. *Journal of Counseling & Development*, 73(3), 279–287.
- Hasson, F., Keeney, S., & McKenna, H. (2000). Research guidelines for the Delphi survey technique. *Journal of Advanced Nursing*, 32(4), 1008–1015.
- Helms, J. E. (2015). Taking action against racism in a post-racism era: The origins and almost demise of an idea. *The Counseling Psychologist*, 43(1), 138–145. <http://dx.doi.org/10.1177/0011000014564250>
- Helms, J. E., Nicolas, G., & Green, C. E. (2012). Racism and ethnoviolence as trauma: Enhancing professional and research training. *Traumatology*, 18(1), 65–74. doi:10.1177/1534765610396728
- Herlihy, B., & Dufrene, R. L. (2011). Current and emerging ethical issues in counseling: A Delphi study of expert opinions. *Counseling and Values*, 56(1–2), 10–24. doi:10.1002/j.2161-007X.2011.tb01028.x
- Hermans, H. J. M., & Kempen, H. J. G. (1999). Categorical thinking is the target. *American Psychologist*, 54(10), 840–841. doi:10.1037/0003-066X.54.10.840
- Hernández, P., Carranza, M., & Almeida, R. (2010). Mental health professionals' adaptive responses to racial microaggressions: An exploratory study. *Professional Psychology: Research and Practice*, 41(3), 202–209. doi:10.1037/a0018445
- Hines, P. M., & Boyd-Franklin, N. (2005). African American families. In M. McGoldrick, J. Giordano, & J. K. Pearce (Eds.), *Ethnicity and family therapy* (pp. 84–107). New York, NY: Guilford Press.
- Hook, J. N., Farrell, J. E., Davis, D. E., DeBlare, C., Van Tongeren, D. R., & Utsey, S. O. (2016). Cultural humility and racial microaggressions in counseling. *Journal of Counseling Psychology*, 63(3), 269–277. doi:10.1037/cou0000114
- Horkheimer, M. (1972). *Critical theory: Selected essays* (M. J. O'Connell, Trans.). New York, NY: Seabury Press.
- Hsu, C. C., & Sanford, B. A. (2007). The Delphi technique: Making sense of consensus. *Practical Assessment, Research & Evaluation*, 12(10), 1–9.

- Huynh, V. W. (2012). Ethnic microaggressions and the depressive and somatic symptoms of Latino and Asian American adolescents. *Journal of Youth and Adolescence*, 41(7), 831–846. doi:10.1007/s10964-012-9756-9
- Kabaci, M., & Cude, B. (2013). Coming to consensus: A Delphi study to identify the personal finance core concepts and competencies for undergraduate college students. In *Consumer Interests Annual*, 59. Available from <http://www.consumerinterests.org/cia2013>
- Kakiuchi, K. K. S., & Weeks, G. R. (2009). The occupational transmission genogram: Exploring family scripts affecting roles of work and career in couple and family dynamics. *Journal of Family Psychotherapy*, 20(1), 1–12. doi:10.1080/08975350802716467
- Kerr, M. E., & Bowen, M. (1998). *Family evaluation: An approach based on Bowen theory*. New York, NY: W. W. Norton.
- Koustic, I., Garcia, M., Graves, T., Barnett, F., Hall, J., Haley, E., . . . Kaiser, B. (2009). The critical genogram: A tool for promoting critical consciousness. *Journal of Feminist Family Therapy*, 21(3), 151–176. <https://doi.org/10.1080/08952830903079037>
- Leary, J. D. (2005). *Posttraumatic slave syndrome*. Milwaukie, OR: Uptone Press.
- Litwack, L. F. (2009). *How free is free? The long death of Jim Crow*. Cambridge, MA: Harvard University Press.
- McAdoo, H. P. (1982). Stress absorbing systems in Black families. *Family Relations*, 31(4), 479–88.
- McCullough-Chavis A. (2004). Genograms and African American families: Employing family Strengths of spirituality, religion ad extended family network. *Michigan Family Review*, 9(1), 30-36.
- McCullough-Chavis A., & Waites, C. (2004). Genograms with African American families: Considering cultural context. *Journal of Family Social Work*, 8(2), 1–19. https://doi.org/10.1300/J039v08n02_01
- McDowell, T., & Jeris, L. (2004). Talking about race using critical race theory: Recent trends in the *Journal of Marital & Family Therapy*. *Journal of Marital and Family Therapy*, 30(1), 81–94.
- McGoldrick, M. (Ed.). (1998). *Re-visioning family therapy: Race, culture, and gender in clinical practice*. New York, NY: Guilford Press.
- McGoldrick, M., & Gerson, R. (1985). *Genograms in family assessment*. New York, NY: W. W. Norton.

- Miller, M. J., Keum, B. T., Thai, C. J., Lu, Y., Truong, N. N., Huh, G. A., . . . Ahn, L. H. (2018). Practice recommendations for addressing racism: A content analysis of the counseling psychology literature. *Journal of Counseling Psychology*. doi:10.1037/cou0000306
- Neville, H., Spanierman, L., & Doan, B.-T. (2006). Exploring the association between color-blind racial ideology and multicultural counseling competencies. *Cultural Diversity and Ethnic Minority Psychology, 12*(2), 275–290. doi:10.1037/1099-9809.12.2.275
- Pascoe, E. A., & Smart Richman, L. (2009). Perceived discrimination and health: A meta-analytic review. *Psychological Bulletin, 135*(4), 531–554. doi:10.1037/a0016059
- Pert, C. B. (1997). *Molecules of emotion: Why you feel the way you feel*. New York, NY: Simon & Schuster
- Prest, L. A., & Keller, J. F. (1993). Spirituality and family therapy: Spiritual beliefs, myths, and metaphors. *Journal of Marital and Family Therapy, 19*(2), 137–148. doi:10.1111/j.1752-0606.1993.tb00973.x
- Ratts, M. J., Singh, A. A., Nassar-McMillan, S., Butler, S. K., & Rafferty McCullough, J. (2015). Multicultural and social justice counseling competencies: Guidelines for the counseling profession. *Journal of Multicultural Counseling and Development, 44*(1), 28–48. doi:10.1002/jmcd.12035
- Salkind, N. J. (2006). *Encyclopedia of measurement and statistics*. Thousand Oaks, CA: SAGE Publications.
- Salkind, N. J. (2010). *Encyclopedia of research design*. Thousand Oaks, CA: SAGE Publications.
- Schiele, J. H. (2000). *Human services and the Afrocentric paradigm*. New York, NY: The Hawthorn Press.
- Shapiro, T., Meschede, T., & Osoro, S. (2013). *The roots of the widening racial wealth gap: Explaining the Black–White economic divide* (Research and Policy Brief). Retrieved from <http://health-equity.lib.umd.edu/4120/1/racialwealthgapbrief.pdf>
- Shellenberger, S., Dent, M. M., Davis-Smith, M., Seale, J. P., Weintraut, R., & Wright, T. (2007). Cultural genogram: A tool for teaching and practice. *Families, Systems, & Health, 25*(4), 367–381. doi:10.1037/1091-7527.25.4.367
- Solorzano, D., Ceja, M. & Yosso. (2000). Critical race theory, racial microaggressions, and campus racial climate: The experiences of African American college students. *Journal of Negro Education, 41*, 171–187.

- Sotero, M. (2006). A conceptual model of historical: Implications for public health practice and research. *Journal of Health Disparities Research and Practice*, (1), 93-108, available at SSRN: <https://ssrn.com/abstract=1350062>.
- Speight, S. L. (2007). Internalized racism: One more piece of the puzzle. *The Counseling Psychologist*, 35(1), 126–134. doi:10.1177/0011000006295119
- Stander, V., Piercy, F. P., MacKinnon, D., & Helmeke, K. (1994). Spirituality, religion and family therapy: Competing or complementary worlds? *American Journal of Family Therapy*, 22(1), 27–41. doi:10.1080/01926189408251295
- Stefancic, J., & Delgado, R. (Ed.). (2013). *Critical race theory* (3rd ed.). Philadelphia, PA: Temple University Press.
- Sue, D. W., Arredondo, P., & McDavis, R. J. (1992). Multicultural counseling competencies and standards: A call to the profession. *Journal of Multicultural Counseling and Development*, 20(2), 64–88. doi:10.1002/j.2161-1912.1992.tb00563.x
- Sullivan, S. (2013). Inheriting racist disparities in health: Epigenetics and the transgenerational effects of White racism. *Critical Philosophy of Race*, 1(2), 190–218. <http://www.jstor.org/stable/10.5325/critphilrace.1.2.0190>
- Sullivan L., Meschede, T., Dietrich, L., & Shapiro, T. (2011). The racial wealth gap: Why policy matters. Retrieved from https://scholar.google.com/scholar?hl=en&as_sdt=0%2C14&q=the+racial+wealth+gap&btnG=
- Torres-Harding, S. R., Andrade, A. L., Jr., & Romero Diaz, C. E. (2012). The Racial Microaggressions Scale (RMAS): A new scale to measure experiences of racial microaggressions in people of color. *Cultural Diversity and Ethnic Minority Psychology*, 18(2), 153–164. doi:10.1037/a0027658
- Trahan, D. P., Jr., & Lemberger, M. E. (2014). Critical race theory as a decisional framework for the ethical counseling of African American clients. *Counseling and Values*, 59(1), 112–124. doi:10.1002/j.2161-007X.2014.00045.x
- Tyson, Lois. (2006). *Critical theory today: A user-friendly guide* (2nd ed.). New York, NY: Routledge. (2013).
- Walsh, F. (2003). Family resilience: A framework for clinical practice. *Family Process*, 42(1), 1–18
- Walsh, F. (2006). *Strengthening family resilience* (2nd ed.). New York, NY: Guilford Press.

- Ward, E. C., Wiltshire, J. C., Detry, M. A., & Brown, R. L. (2013). African American men and women's attitude toward mental illness, perceptions of stigma, and preferred coping behaviors. *Nursing Research, 62*(3), 185–194.
<http://doi.org/10.1097/NNR.0b013e31827bf533>
- Warde, B. (2012). The cultural genogram: Enhancing the cultural competency of social work students. *Social Work Education, 31*(5), 570–586.
<http://dx.doi.org/10.1080/02615479.2011.593623>
- Watson, D. J. (2015). *Genograms: A literature review from 2001–2014* (Unpublished doctoral dissertation). Governors State University, University Park, IL.
- Watts-Jones, D. (1997). Toward an African American genogram. *Family Process, 36*(4), 375–383.
- Wildman, S. M., & Davis, A. D. (2013). Language and silence: Making systems of privilege visible. In J. Stefancic & R. Delgado (Ed.), *Critical race theory* (3rd. ed., p. 794). Philadelphia, PA: Temple University Press.
- Williams, D. R., & Mohammed, S. A. (2009). Discrimination and racial disparities in health: Evidence and needed research. *Journal of Behavioral Medicine, 32*(1), 20–47.
doi:10.1007/s10865-008-9185-0
- Williams, D. R., Neighbors, H. W., & Jackson, J. S. (2003). Racial/ethnic discrimination and health: Findings from community studies. *American Journal of Public Health, 93*(suppl 1), S29–S37.
- Young, S. J., & Jamieson, L. M. (2001). Delivery methodology of the Delphi: A comparison of two approaches. *Journal of Park & Recreation Administration, 19*(1), 42–58.

Appendix A – Letter to Participants

Dear XXXX,

Based on a search of the literature, you have been identified as a potential participant in a study on using genograms to explore intergenerational racism and trauma with African American couples. I am requesting your service as an expert panelist in a modified Delphi study. If you consent to being part of the study and you meet the criteria of expert for this particular study, you will be asked to provide answers to some open-ended questions. In Phase 2, you will be asked to rate the importance of each of these answers from the experts.

If you wish to participate, please click this link to Survey Monkey. There you will find a brief explanation of the study, demographic and professional background questionnaire, and consent.

Thank you for your participation.

Ms. Hollie Campbell
Doctoral Candidate, Governors State University

And

Dr. Shannon B. Dermer
Interim Dean, College of Education
Governors State University

Appendix B – Demographic and Professional Background Questionnaire

For this study, the participants will be selected for their knowledge of Bowen Family Systems Theory or other intergenerational models, knowledge of clinical work with African American couples, and/or knowledge of the clinical effect of racism on African Americans. All participants will be required to have a clinical graduate degree in the fields of marriage and family therapy, counseling, psychology, social work, or a related degree with specialized training in working with African American couples and/or families.

Demographics

(You will be asked your first name, last name, and email for correspondence purposes only. Your name will not be associated with any information you provide.)

First Name:

Last Name:

Email:

Please select your highest degree in a mental health or related field:

Doctorate

Master's

In what field is your highest degree?

In what year did you complete your highest degree?

What is your age?

How do you identify?

Male

Female

Other

How do you identify?

Black or African American

White (non-Hispanic)

White (Hispanic)

Asian

American Indian/Alaska Native

Native Hawaiian/Other Pacific Islander

Other

The questions below are used to determine if you are an expert in the areas of Bowen Family Systems Theory or other intergenerational models, clinical work with African American couples, and/or knowledge of the clinical effect of racism on African Americans. Please mark all of the statements below that apply to you:

I have five or more years of clinical experience of working with a significant number (at least 30% of case load) of African American couples and/or families.

I have five or more years of clinical experience with Bowen Family Systems or another intergenerational model as my primary model used for clinical work and use genograms in my clinical work.

I have five or more years' experience teaching graduate-level coursework on how to work with African American couples and/or families.

I have five or more years' experience teaching graduate-level coursework in the use of intergenerational models and genograms.

I have published a minimum of one book or three peer-reviewed journal articles on clinical work with African American couples or families.

I have published a minimum of one book or three peer-reviewed journal articles on clinical work using intergenerational models and/or genograms.

I have published a minimum of one book or three peer-reviewed journal articles on helping African American clients explore the effects of racism.

I have presented a minimum of eight peer-reviewed presentations at national conferences on clinical work with African American couples or families.

I have presented a minimum of eight peer-reviewed presentations at national conferences on clinical work with intergenerational models and/or genograms.

I have presented a minimum of eight peer-reviewed presentations at national conferences on helping African American clients explore the effects of racism.

Appendix C – Consent Form

Dear Potential Participant,

Please consider participating in a study on the use of genograms in addressing the effects of racism and intergenerational trauma on African American couples. We are asking experts in the fields of counseling, Bowen Family Systems Theory, and/or experts in racism to participate. Please read this form carefully and ask any questions you may have before agreeing to take part in the study.

What the study is about: The purpose of this study is to learn how experts would gather information from African American clients to construct a genogram exploring the effects of racism on African American couples.

What you will be asked to do: Potential participants will be asked basic demographic questions and questions about their professional experience in order to determine if they meet the criteria of expert in the areas of genograms, Bowen Family Systems, or another intergenerational model. If you agree to be in this study and you meet the criteria to participate, you will become a member of a panel of experts in a modified Delphi study. You will be asked to participate in two phases of the study. In Phase 1, you will create questions you would ask African American couples in order to explore racism, microaggressions, and intergenerational trauma. After the researcher does a content analysis of the questions provided by experts, you will be contacted to let you know that Phase 2 is ready. In Phase 2, you will be asked to rate the importance of each of the unique statements provided by experts. Each phase should take no more than 30 minutes of your time.

Benefits and Risks: It is expected that the information gathered from this study will facilitate the development of mental health treatment plans for African American couples that address the effects of transgenerational trauma due to historical and current racism and microaggressions. There is no expected risk to participants.

Confidentiality: Your answers will be confidential to everyone except the researchers. Participants will provide their name and address in order to be contacted for Phase 2. The records of this study will be kept private. The primary researcher will present the data in the aggregate; therefore, your identity will not be discernable. The primary researcher will not include any information that will make it possible to identify you. Research records will be kept in a locked file. Only the researchers will have access to the records.

If you have questions: The researcher conducting this study is Hollie Campbell. Mrs. Campbell is a doctoral candidate in the Counselor Education and Supervision Program of Governors State University, under the supervision of Dr. Shannon Dermer, Committee Chair and Interim Dean College of Education. You may contact Hollie Campbell [REDACTED] or [REDACTED] 3. You can reach Dr. Dermer at [REDACTED].

Whom to contact about your rights as a research participant in the study: If you have any questions regarding your rights as a participant in this research study or concerns regarding the study itself, you may also contact the Chair of the Governors State University Institutional Review Board (IRB): Renee Theiss, Ph.D. at [REDACTED] or email at [REDACTED]

The IRB reviews research projects to ensure the ethical conduct of research with human subjects. If you have any questions or concerns regarding your rights as a subject in this study, you may contact the Institutional Review Board (IRB) at irb@govst.edu or access their website at www.govst.edu/irb.

Taking part is voluntary: Taking part in this study is entirely voluntary. You may skip any questions that you do not want to answer. If you decide to take part, you are free to withdraw at any time.

Statement of Consent: I have read the above information, and by taking the Inquiry questionnaire, DQI and DQ II, I consent to participation in the study.

A record of this consent will be kept by the researchers for three years beyond the end of the study.

Appendix D – Delphi Questionnaire I

Please write questions you would ask clients to address each of the topics below. You may write as many questions as you wish.

1. What questions should a counselor ask African American couples in order to explore the intergenerational impact of racism on African American couples?
2. What questions would you ask to explore an individual's current experience with racism?
3. What questions would you ask to explore how microaggressions impact them as individuals and as a couple?
4. What questions would you ask to explore how has racism impacted a couple's relationship?
5. What other questions would you ask clients in this topic area?