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Clinical Sociology and Mixedness: Towards Applying Critical Mixed Race Theory in Everyday Life

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Abstract: Research on mixed racial and ethnic identities has developed rapidly over the past decades, increasing in theoretical scope and depth, and exploring mixedness across a growing range of national and social contexts. Recent research has highlighted the huge variations and shifts in conceptions of mixedness around the world, and the different pathways to understanding what it means to be mixed through migration, development, postcolonialism and different forms of nation-building. This paper seeks to connect theory to practice, approaching mixedness through the lens of clinical sociology, applying sociological theory on the ground and exploring the utility of critical mixed race studies in everyday life. Clinical sociology as a practice is first outlined, juxtaposed against the development in theorizing around mixed racial and ethnic identities on an international level. The paper then looks at some possibilities for practical impact: by acknowledging the complexity of mixedness and everyday life, research on mixed identities can go beyond the development of theory and case description, with applied and clinical impacts ranging from the level of the individual to the level of the state. Research on mixedness worldwide illustrates the diversity inherent within ideas of mixing, and the micro, meso and macro applications and potential outcomes of such theories. This paper draws on new and shifting conceptions of mixedness, emphasizing that the sociology of mixedness can have considerable value in effecting positive social change: positioning the (mixed) individual within the (mixed) society and allowing sociology to become action. The development and use of theories around mixedness emphasize the importance of clinical sociology as a practice: a reason for theory, connecting the abstract to the everyday.

Keywords: mixedness; mixed race; mixed ethnic identity; clinical sociology; critical mixed race studies

1. Introduction

Research on mixed racial and ethnic identities has developed rapidly over the past decades, increasing in theoretical scope and depth, and exploring mixedness across a growing range of national and social contexts: from North America and Europe to Asia and the Pacific. Mixedness as an idea is not new, and against a background of globalization, hyper mobility and developing migration streams, complex identities and heritages exist all around the world (Urry 2012). In order to make sociological sense of such a diverse and complex set of identities and histories, Daniel et al. (2014) suggest that critical mixed-race studies must go beyond description, encompassing contextual complexity across micro and macro levels, as a "critical turn" in how mixedness is understood. Much recent research has thus highlighted the huge variations and shifts in conceptions of mixedness around the world, and the different pathways to understanding what it means to be mixed, exploring histories and contemporary experiences of migration, development, colonialism and postcolonial realities and different forms of nation-building.

In shifting away from historical, pseudo-biological approaches towards mixed blood, to fluid and culturally nuanced understandings, current research illustrates the difficulties in studying such complex constructs and realities. Debates around definitions and terminology highlight different priorities in different communities, and within academia, the terminology of mixedness remains contested and challenging (Caballero et al. 2007). At

the state level, terminology continues to carry the weight of categorization, defining where boundaries exist, and how histories and state priorities create contemporary classifications: not reflecting "racial realities", but rather shaping and re-creating racial, ethnic and mixed identities in that moment (Caballero et al. 2007; DaCosta 2020).

However, much conceptualization around mixed identities remains anchored in Western philosophical and theoretical frameworks, reinforcing well-worn canons around the meanings of race, ethnicity, culture and boundary-crossing, as if these were universal and applicable worldwide (Hall 2000; Rocha 2018). This inevitably influences how mixedness is researched and conceptualized, despite the ways in which everyday life experiences of being mixed, and state policies around who is mixed, diverge around the globe. As many scholars stress, location and context are key, and rich analysis of shifting social and cultural meanings of mixing is essential (Song 2003). Frameworks for understanding, no matter how critical, must take into account the wide variety of identities, identifications and socio-historically embedded meanings of ethnicity, race, heritage, blood and citizenship around the world (Rocha 2018). As part of this, it is crucial to look at both the underpinnings and the outcomes of critical mixed race theorizing—what impact do these studies have? Is theory the final goal, or can there be other possible results?

This paper seeks to connect theory to practice by approaching mixedness through the lens of clinical sociology and exploring the utility of critical mixed race studies in everyday life. By foregrounding the importance of social context and the everyday intertwining of agency and structure, it looks towards connecting theory to social change: "working with" rather than "working on" mixedness (see Fritz 2021) across micro, meso and macro levels. Bringing together the literatures on clinical sociology and critical mixed race theory, this paper proposes that the shift away from conceptualizing mixed race as a problem can have practical, everyday impacts. By developing alternative and critical theoretical perspectives around mixedness, research in this field has the potential to be applied in a more direct manner, questioning "the way things are" and working to make a difference for individuals as they navigate their sociocultural and historical positionings (Freedman 1982). Cutting across disciplines and levels of analysis, from the individual to the state, such practical applications could emerge from an increased dialogue between practice and theory, with collaborations across academic and applied professions (Blane 1993).

2. Clinical Sociology and Applying Sociology in Everyday Life

"Clinical sociology" refers to the application of a sociological perspective in making practical, positive change (Glass 1991). Emerging in the United States in the 1930s, this applied branch of sociology focuses on intervention and action, seeing the clinical sociologist as an agent for change (see Wirth 1931; Glass 1979; Freedman 1982; Rebach and Bruhn 2001). Clinical sociology is humanistic and multidisciplinary, a form of sociological practice which aims to improve people's lives through clinical analysis, critical theorizing and differing forms of intervention (Fritz 2021). Contemporary clinical sociology draws on a number of theoretical influences, from phenomenology to symbolic interactionism, ethnomethodology and social constructionism, highlighting the complex relationships between agency, structure and what constitutes "reality" (Rhéaume 2021).

Clinical sociology is firmly practical, applied from micro to macro levels; from individuals and families, social groups and communities, to the state, institutions and international structures. This idea that sociology can be "clinical" and applied, that sociologists can work in a directly practical manner, remains on the scholarly periphery in much of the world, even in settings such as mental health where the therapeutic potential of sociological theory is often recognized and integrated into other disciplines (see Swan 1981). However, regardless of whether it is known as "clinical", the practical impacts of sociological theory and sociological practitioners can be far-reaching. As Rebach and Bruhn (2001, p. 8) describe: "Clinical sociologists do the same things that other sociologists do—they theorize, conceptualize, observe, test, evaluate, teach, do research, and become involved in professional and community service. What clinical sociologists do that other sociologists

do not we call *intervention*, active involvement in various social systems with the goal of positive social change."

Thus, in many contexts, sociological practice exists but not under the "clinical" title (Fritz 2021). Sociologists work in research, analysis and often application around the world, most notably in the US, Quebec and France, as well as in Australia, Greece, Brazil, Mexico, Japan, Malaysia, Spain, Colombia and South Africa (Fritz 2021; Spencer 2009). Wan and Wan (2020) discuss how the practice of sociology in many developing countries is frequently by necessity "clinical", as practitioners work through theorizing to address key social issues, applying research to intervention.

Clinical sociology illustrates the motivation of many sociologists to "make the world better" (Turner 1998). It is based on the idea that it is possible to make positive change for both individuals and society through the implementation of research-based best practices, drawing on sociological theory as a way to address key social issues (Vissing 2021). Taking a firmly sociological positioning, it is understood that individuals are inherently social, constantly balancing between structure and choice, influenced by wider societal forces, interrelationships, institutions, gendered socializations, cultures, communities, and histories (Fein 1997; Straus 1979; Cavanagh 2021). In this usage, "clinical" does not refer to pathology, but rather to *practice*. By shifting from perceptions of abnormality, clinical sociology seeks to position and address problematic issues as responses to the larger social context (Wirth 1931; Wan and Wan 2020).

A clinical sociological framework is particularly valuable in its applicability across and between societal levels. As Mills (1959) highlighted the interconnections between agency and structure, personal troubles and public issues, clinical sociology works to make meaningful links between individual struggles and wider social concerns, and how these interconnections can effect change (Hall 1990). Social context is crucial in socio-clinical work: levels of theory, practice and analysis are inevitably interdependent and ultimately inseparable in everyday life. Sociological intervention can be implemented at any level, from personal, individual interactions, group/community-level work, to the level of the state, as each has significant implications for the others (Bruhn and Rebach 2007). Payne and Cross (1993) highlight this as a particular strength of the discipline: its capacity to bring both macrosocial and microsocial factors and processes into play.

Clinical sociology thus shifts away from researcher/respondent relationships and power dynamics, toward clinical practitioner/client interactions, across social levels. As an applied branch of sociology, it complements the diversity of approaches within sociology by illustrating the wide spectrum within the discipline, which ranges from the purely theoretical to practical and applied (Wan and Wan 2020). However, the theoretical/applied distinction is neither helpful nor simple, as much sociological research can be applied in everyday life, and there is no clear line between "pure" theoretical sociology and applied sociological work (Payne and Cross 1993; Bulmer 1993). Clinical sociology makes this integration clear, with a practical focus and intent: going beyond providing research questions and social analysis, towards taking concrete steps in addressing issues faced by individuals, communities and states (Swan 1981).

3. Clinical Sociology and Mixedness: Micro, Meso, Macro

This paper looks at how theory can have a practical impact when exploring mixed ethnic and racial identities. By acknowledging and working with the messiness of mixedness and everyday life, research on mixed identities can go beyond the development of theory and case description, with applied and clinical impacts ranging from the level of the individual to the level of the state. Rather than describing the world as it is and the historical and systemic conditions leading to our contemporary realities, rather than adjusting individuals to "the way things are", a clinical sociological of mixedness could work towards re-shaping and reconstructing institutions and sociocultural situations, providing tools for negotiation and understanding (see Straus 1979). As applied across levels of analysis, from the micro to the macro, clinical sociology can inform theorizing around mixed race,

illuminating state categorizations of mixedness in search of bodies (Nobles 2000), mixed communities in search of legitimization, and mixed bodies in search of identities (DaCosta 2007, 2020).

Clinical sociology *is* sociology (Rebach and Bruhn 2001), and the sociology of mixedness equally ranges from theory and conceptualization, through to research and evaluation, and potentially towards active intervention in social systems. Shifting away from a frequently one-way research process—where respondents provide information to the researcher—a clinical focus reorients the direction of the outcomes, looking at how the researcher's work can impact and potentially assist the respondents (Wan and Wan 2020). By placing equal importance on both agency and structure, clinical work explores this fundamental intertwining, drawing out the personal, social and structural influences on identity and behaviour.

A clinical, practical turn to critical mixed race theorization then has the potential to enrich the field still further. International research and theorizing have highlighted the complexity of mixed identities and the sociohistorical structures around them while illuminating the crucial role of context and the vastly different social, cultural and intellectual histories around the very concept of who counts as "mixed" (Rocha 2018; O'Riain King et al. 2014). By putting these global historical shifts and specificities at the forefront of analysis, we can position and understand mixedness as "in place" (Mahtani 2002) and avoid metrocentrism (Go 2016) when developing and deploying theories around mixed identities. Clinical sociology places significant weight upon context and locating the individual within that context while working towards social change and even empowerment (Fein 1997): emphasizing agency without discounting the specificities of structure, and stressing that there is no single way to approach and understand mixed race across the social sciences, across the globe (Rocha 2018). A clinical sociology of mixedness underscores this complexity of sociology in everyday life: connecting individuals to structure, the micro to the macro, through practice.

A clinical sociology of mixedness thus draws upon these micro-macro linkages to provide breadth and depth to both theorizing and practice. Research and interventions can be directed at micro, individual levels or macro, structural levels, based on the belief that positive change can be achieved if research-based best practices are put into place (Vissing 2021). At any level, of course, all practice necessarily has cross-level implications, with microsociology and macrosociology being impossible to meaningfully separate (Bruhn and Rebach 2007). Each impacts the others: the macro level encompasses wider social structures and established institutions, the meso level includes social and cultural life and groupings, and the micro level focuses on the experiences of the individual. As stressed by Rebach and Bruhn (2001), meso structures relay macro forces in shaping individuals and families at the micro level. The strength of clinical sociology is then its attention to these linkages, bringing macro and micro social processes and interactions into focus, and drawing out the interconnections between agency and structure, as played out in everyday life (Payne and Cross 1993). Freedman suggests that clinical sociologists can make effective change by keeping this interplay in mind: "When working with individuals you have to keep the broader issues of the society in focus; when working on broader issues of social change you have to keep in mind the effect on the individual" (Freedman 1982, p. 39). This paper now turns to the potential implications of this clinical perspective, in looking at mixedness across micro, meso and macro levels.

4. Micro: Mixedness and Identity

Micro, individual approaches to mixedness have been prominent across disciplines, from sociology to psychology, social psychology, social work, education and counselling. Psychological, pseudo-biological and social psychological studies of mixed race and mixed ethnic identity have often focused on the internal workings of the psyche and individual cognition, using the micro level of identity to explore the relationship between the inner and outer worlds (see Bonovitz 2009). Positioning mixedness as "out of the ordinary", a problem to be addressed, many early approaches at this micro level problematized mixedness and

its assumed negative identity outcomes. This historical approach is exemplified in the conception of the "marginal man", seeing mixed individuals as caught between two worlds, never truly belonging in either one (Park 1928, 1931; Stonequist 1935, 1937).

More recent research has expanded on this model of marginality, suggesting alternative approaches within the micro-focused framework. Later models sought to delimit key stages within a unique "mixed" identity trajectory, drawing on both psychological and social factors, in defining a form of mixed identification that is "healthy" (Poston 1990; Finney et al. 2020). Theorization has diversified and expanded significantly from the 1990s onwards, seen particularly in the work of scholars such as Root in the US and Tizard and Phoenix (and more recently Caballero and Aspinall) in the UK (Root 1992, 1996; Tizard and Phoenix 2002; Caballero and Aspinall 2018). Root's approach to mixedness in North America in particular shifted away from stage-based models, challenging both generalizations around marginalization and the problematization of mixedness, along with assumptions of sameness within ethnic groupings (Root 1992, 1996).

However, stage-based (although not always linear) identity models with clear boundaries around what is "healthy" for a mixed identity remain popular within psychological and social psychological research (see Finney et al. 2020 for a summary). With growing numbers of individuals identifying (or being identified) as mixed, particularly within Western classificatory systems, the temptation to search for easily defined models to address (and assist) this "population" is great. While the importance of contextual differences is increasingly being recognized (Rocha 2018; Bonovitz 2009), particularly within the mental health arena, negative assumptions around difference, marginality and the inherently problematic nature of mixedness linger, suggesting that people of mixed descent are in "identity purgatory" (Finney et al. 2020). Much research draws out the assumed "less stable" racial identification of mixedness as associated with less favourable psychological outcomes (Sanchez et al. 2009), or as an identity deficit/difference, which requires targeted strategies to overcome (Shih et al. 2019).

However, in parallel, growing sociological work around the world has highlighted the turn in analysis underpinning critical mixed race studies, pushing against this problematization, breaking away from the marginal man (see, for example, Zack 1993; Parker and Song 2001; Ali 2003; Mahtani 2014; Daniel et al. 2014). Mixedness is seen through a wider lens, zooming out from micro analysis, and exploring how personal identities are positioned within wider society and historical structures, and how wider society views this mixedness (Caballero et al. 2007). This diversity in conceptualization and analysis provides a more flexible and reality-based approach to mixedness, highlighting how identity is never static, and traditional canons of thought within the social sciences can be both recognized and questioned (Hall 2000).

A clinical sociology of mixedness builds on this ever-shifting terrain, seeking to better understand mixedness as complex and inevitably contextual and to potentially make positive changes through intervention at the micro level. One way in which this can be applied is through sociotherapy, a micro level therapeutic practice informed by sociology. As described by Cavanagh: "Unlike psychotherapy, which is focused on individual psychology, sociotherapy is based on a dialectical understanding of the client-subject in society. Sociotherapists have a greater appreciation for the way neoliberal institutions, economics, politics, culture, pandemics (including, but not limited to COVID-19), effect individual well-being" (Cavanagh 2021, p. 1).

Cavanagh's work on sociotherapy (Cavanagh 2021) as an alternative practice to psychotherapy thus highlights the potential for sociologically informed micro level interventions. She illuminates the inseparability of the individual and social worlds, the intersections across levels of analysis and how these play out in everyday life for individuals. In locating mixedness as a simultaneously personal identification and a public issue, mixed ethnic identities and feelings of belonging/not belonging become less individual disorders to be solved, and more practical negotiations of identity within frequently racialized social contexts. Sociotherapy positions people in their social contexts, in relation to wider social

forces and histories which are not merely incidental to day-to-day life, but which shape everyday interactions, encounters and beliefs (Cavanagh 2021).

Going further, with this clinical focus on locating individuals in context, individual-level interventions can include such sociologically informed therapy, social work, counselling and other micro forms of assistance. By drawing on the critical frameworks being developed and expanded through international research, such theorizing highlights the importance of key socio-therapeutic concepts which illustrate the complexity and interconnectedness of identities and shift away from simplistic, racially singular and stage-based models. Hall's conception of identity empowerment (Hall 1990) draws on the deliberate enhancement of clients' awareness of their values and goals, and how these are expressed in everyday life negotiations set within a wider social context. Bonovitz approaches mixed-race identities from a sociohistorical perspective in therapy, navigating both inner and outer worlds to explore how personal identities are shaped within the social context of race, historical trauma and narratives of mixedness, conflict and marginality (Bonovitz 2009).

From another perspective, approaching mixedness from a model of identity across the lifespan provides a novel approach to micro interventions, as " . . . a powerful alternative to the pathologizing influence of racial canons and to approaches emphasizing racial characteristics to the exclusion of others" (Hall 2000, p. 91). Hall's model focuses on a personal and social recognition that race and phenotype are not wholly definitive, positioning these concepts against historical narratives of race and belonging. This form of intervention emphasizes identity as less based on race, and more based on shifting identities and identifications across the lifespan.

Broadening this individual level even more, micro research into mental health interventions in the field of mixedness can be enriched through such critical engagement with theories of colonialism, race, ethnicity and culture, and the power dynamics which shape each specific context (Cohen 2020). As these examples show, shifting away from the psycho- and more to the socio- highlights the ways in which the micro cannot be extricated from the macro, how therapeutic interventions can better address this complexity, and how mixedness for the individual is entwined with mixedness at the wider social level.

5. Meso: Culture, Community and Institutions

As fundamental to this intertwining, the meso level of analysis is useful in outlining a clinical sociology of mixedness. Bringing together individual, personal negotiations of identity, and wider social forces around race, ethnicity, identity and belonging, exploring mixedness at the meso level illuminates the ways in which identity is constructed through community, wider family and other social groupings. As institutions and communities link the state to the individual, meso-level structures reflect the interconnections and dissonances between these levels (Callister et al. 2009). All social interaction occurs within and between communities, and these overlaps and linkages are particularly important when exploring the social positioning of mixedness. Perceptions and understandings of what it means to be mixed vary between national contexts, cultural communities, social organizations and even families (Sims 2016).

Mixedness is thus constructed and reflected by these meso-level institutions, as in Cooley's looking-glass self: the shape and gravity of mixedness shifts over time and across space. Degrees of choice and (mixed) ethnic options (see Waters 1990; Song 2003) illustrate the heterogeneity of mixed experiences, as an individual's surrounding social institutions reflect racial/ethnic appraisals around belonging and mixedness (Sims 2016). At the most intimate level, for example, the institution of the family has a significant influence on individual perceptions of racial and ethnic identity, and how mixedness is negotiated within and without the family unit.

Sociological analysis of mixedness within families has grown over the past decades, with potential practical applications in terms of social support, adoption criteria, wraparound services for families and general welfare assistance. For example, in 2003, Root and Kelley produced a resource book aimed specifically at "multiracial" families, with a directly prac-

tical intent: assisting families in negotiating complex racial and ethnic realities, positioning personal mixedness with wider social frameworks (Root and Kelley 2003). Song's recent work highlights the multigenerational nature of mixedness in increasing numbers of families, drawing out the implications (and possible practical consequences) for conceptions of mixedness and racial boundaries at the policy level (Song 2017).

Zooming outwards, educational institutions also have important impacts on identity and identification at the meso level, and a number of studies have explored the implications and recognition of mixedness within education (for example, Caballero et al. 2007; Renn 2000, 2004). In both the North American and British contexts, "mixed" identities are increasingly common within younger, school populations. However, at this meso institutional level, mixedness is not always easily recognized, being conflated or replaced by generalized policies around diversity and minority ethnic groups.

In their UK study, Caballero et al. (2007) explore perceptions of mixedness within schools, finding that these conceptualizations range from marginalizing (mixedness as problematic) to positive and even celebratory. However, they note that crucially, either extreme can have powerful impacts on perceptions of student achievement and the targeting of educational policy and practices. Most students operate in a context where mixedness is neither visible in the official curriculum, nor included in terms of institutional data gathering. This lack of distinct recognition of mixedness means that in this and many other contexts, mixedness remains unseen, making it difficult for the needs of students from mixed backgrounds to be met—a key potential point of intervention through increasing recognition and representation (Caballero et al. 2007).

In the US context, Renn's work explores how university students of mixed descent navigate the largely monoracial social and institutional structures on campus. She highlights how monoracial identity models overlook much complexity within a multiracial experience, drawing on an ecological model to explore the interactions between social structures and identity at the meso level. Her work illustrates how higher education practice and policy have developed from a particular view of race and mixedness, and with a practical turn, she questions how these can be reconceived in order to foster inclusion (Renn 2004). Through qualitative research such as this, the everyday realities of students navigating the racial singularity of educational structures are brought to the fore, looking at both the personal consequences of not fitting in and the larger social issues around racial and ethnic classification and belonging within social groups.

From a clinical perspective, analysis and intervention at this meso level add a crucial dimension to understanding the individual as part of their societal context. While many clinicians address individual experiences and relationships with the family, wider social forces and institutions, such as educational institutions, mediate and structure these experiences (Cavanagh 2021). Conceptualizing and exploring mixedness at the meso level highlights this complexity, and as these examples show, definitions and experiences around mixedness at this level can have far-reaching impacts across all levels, from micro to macro: influencing personal identity, social identification, and the inclusiveness and applicability of initiatives aimed at promoting social cohesion.

6. Macro: Classification, Race and the State

Exploring mixedness at the macro level is a comfortable fit for sociological analysis, and highlights the pervasive reach of state institutions in delimiting the shape of racial and ethnic identities across contexts. While race is not a biological fact, its social and institutional power is evident in the real-life consequences of racialization and racism, and particularly in the role of the state in perpetuating racial groupings (Hall and Livingston 2003). The categorization of mixed identities illustrates the ways in which racial categorization and the (non-)recognition of mixedness reinforce the social constructedness of race and its everyday outcomes (DaCosta 2020). While much research highlights the diversity of individual experiences of mixedness, there is also an increasing focus on the negotiation of mixed

identities in relation to state policies and processes, categorization and data monitoring procedures (Caballero et al. 2007).

Measuring mixedness at the macro level remains complex and politicized. There is a growing literature that explores state attempts to capture complex identities in a meaningful way, from census taking to ancestry records, but considerable differences exist from state to state and region to region (Rocha and Aspinall 2020). In a similar vein, the terminology used to describe and delineate mixed populations varies considerably around the world, both at social and official levels: from mixed race to mixed heritage to multiracial (see Parker and Song 2001; Caballero et al. 2007).

However, what would a clinical intervention at the macro level look like? In terms of critically applying mixed race theory, the macro level is in many ways the easiest to conceptualize, and the hardest to implement: drawing out policy changes around categorization, shifting state conceptions of race and belonging, and making space for mixedness to be more than an additional racial/ethnic classification to add to the list.

Changes in census classifications in countries around the world to address (or not) the placement of mixedness in racial and ethnic frameworks are particularly interesting from a practical point of view (Rocha and Aspinall 2020). As key examples, shifts in census categories in the US (see DaCosta 2007), the UK (see Aspinall 2012, 2013, 2018) and New Zealand (see Callister 2004; Callister and Kukutai 2009) illustrate both the possibilities and the limitations around sociological interventions in policy, as detailed particularly in the prolific work—both theoretical and practical—of Peter J. Aspinall. While classificatory changes are often informed by social research and wider societal shifts, it is important to note that the interactions and processes between research and policy change are neither simple nor transparent.

Interestingly, the complications and implications of practical work at the macro level again highlight the interactions across levels: the actions of individuals as framed by their wider social systems (see Ruzzeddu 2008), and the ways in which micro and meso actions and shifts can have potential impacts at this overarching level. As an example, the activism of grassroots organizations seeking to add a "multiracial" category to the 2000 US census illustrates how personal concerns can translate to meso-level movements, working to influence macro-level policy. This "multiracial movement" did not succeed in including a "multiracial" census classification, but the census did shift towards other ways of including and defining mixedness (DaCosta 2007; Bernstein and De la Cruz 2009; Snipp 2003). The movement itself was significantly informed by sociological research around identity, highlighting issues of discrimination, ethnicity and heritage, and suggesting that a unique multiracial identity existed, as set apart from singular racial identities. Research and practice are thus closely intertwined: the challenges of defining mixedness for the state reflect the complexities of understanding identity, singular and mixed, for individuals, and the ways in which group boundaries are not always easily redrawn (Liebler 2016).

Exploring mixedness through a clinical lens works towards allowing us to make these intertwinings more explicit—acknowledging that analysis and intervention cannot be done without a contextual understanding of micro, meso and macro histories and realities of race, ethnicity and belonging. Rigid boundaries can become more permeable when classification systems based on racial singularity are questioned (Bonovitz 2009), and the notion of mixedness itself is enriched when culturally and nationally specific understandings of race, ethnicity, and culture are included. Individual experiences of mixedness are inseparable from modern social configurations and state institutions, and clinical sociology looks towards linking these levels in a practical way (Cavanagh 2021).

7. Connecting Micro to Macro: Clinical Sociology and Critical Mixed Race

A critical, clinical sociology of mixedness then has value in developing theory and intervention across levels of analysis: where the public and private, history and biography meet (see Dunham 1982). This concept paper has drawn on the considerable research around shifting understandings of mixedness, emphasizing that connections between

disciplines and analytical levels strengthen applicability in everyday life. The sociology of mixedness could have significant worth in effecting positive social change, positioning the (mixed) individual within the (mixed) society, and potentially allowing sociology to become action. This paper, in itself, presents something of a paradox, as a largely theoretical discussion of practical interventions, but it is hoped that this provides a useful starting point in exploring the clinical potential of critical mixed race theory.

From the micro level of sociotherapy as therapy through a different lens, through the meso-level institutions which structure everyday lives and experiences in the family and education, to state-level policy shifts and classificatory structures: research and theory around mixedness have great potential to have significant practical impact. In connecting these levels and positioning people within wider contexts and histories, a clinical approach to mixedness can shift away from deficit models of mixed identity in therapy, allow for mixedness to be recognized within educational institutions, and serve the dual purpose of providing more reflective racial and ethnic data and the personal validation of continuity between identity, identification and classification. As seen in the intersections of the micro, meso and macro through grassroots intervention, the shift from researcher/respondent relationships towards action (and even activism) can remain sociological, while having practical impacts.

Importantly, across micro, meso and macro levels, it is important to recognize the diversity within the concept of mixedness. While critical mixed race studies provides a vital shift away from the historical problematization of mixed identities, it is essential that the field does not narrow into self-definition: with theorization re-creating and solidifying what mixedness encompasses, without allowing for lived fluidity across context, time and space (DaCosta 2020). Rather than assuming a sameness or global theory of mixedness, a clinical and critical approach can recognize the inevitable differences, and the value that this diversity brings through comparative research, more flexible conceptualizations, and practical mediations (Rocha 2018; O'Riain King et al. 2014).

Moving away from separating research and intervention into personal versus political, or sociological versus psychological in terms of mixedness, a clinical approach stresses that the professional and theoretical divide between the social and the psychological creates an overly simplistic binary (Cavanagh 2021). All research and lived experiences of mixedness are shaped by historical context and contemporary social reality, and the historical pathologies of mixed identities can illuminate possibilities for future social change. As Cavanagh suggests, " . . . the critically informed sociotherapist will challenge the diagnostic approaches to human psychology camouflaging the nuances and vicissitudes of human experience" (Cavanagh 2021, p. 6). Redefining personal problems in terms of social structures, not just in theory, but in practical terms, and illuminating these interactions for individuals and institutions can allow people to make meaningful links between their personal experiences and society (Hall 1990). Such active recognition provides numerous possibilities for change, bridging personal identities and wider social issues (Mills 1959).

A clinical approach to mixedness thus enriches the study of mixed identities around the world. It emphasizes interconnections and disconnects around identity, identification and classification, and crucially, notes that heritage, race, ethnicity and indeed mixedness are not always central to mixed lives and identities (DaCosta 2020; Aspinall and Song 2013). Instead of focusing on theoretical commonalities, the critical position of clinical sociology highlights what much international research is reinforcing: that context and history vary, broadening our theoretical conceptions through the everyday intersections and interventions of sociological practice (Rocha 2018). By exploring outcomes and possible opportunities for social change, a clinical sociology of mixedness draws out the richness of the field and the potential for sociologists as grounded agents of change.

Certainly, the challenge remains in fully realizing the elusive link between theory and practice. While sociologists may have keen insight into key social issues around mixedness, outcome-based strategies need to be carefully directed across and between micro, meso and macro levels (see Freedman 1982). There remain many possibilities for future research

in this area: better exploring the practical applications of targeted sociological interventions across levels of analysis; working to draw out how critical mixed race theory can be leveraged in grounded and concrete ways for negotiating mixedness in everyday life; and in taking a step back, to re-conceptualize and explore anew what mixedness means across the world. As a first step, this paper has sought to provide an exploration into how critical mixed race theory and clinical sociology can intersect with and enrich each other. It is hoped that this intersection will provide a fruitful area for further research and practice. Across levels of analysis and the reality of everyday life, the development and use of theories around mixedness can work to emphasize the importance of clinical sociology as a practice: a reason for theory, connecting the abstract to the everyday.

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