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The Initial Development and Validation of the Youth Gun Violence and Voice Survey: The Classroom Experience

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THE INITIAL DEVELOPMENT AND VALIDATION OF THE YOUTH GUN VIOLENCE AND VOICE SURVEY: THE CLASSROOM EXPERIENCE

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by

Diana E. Santangelo

2020

To: Dean Michael R. Heithaus
College of Arts, Sciences and Education

This dissertation, written by Diana E. Santangelo, and entitled The Initial Development and Validation of the Youth Gun Violence and Voice Survey: The Classroom Experience, having been approved in respect to style and intellectual content, is referred to you for judgment.

We have read this dissertation and recommend that it be approved.

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Florida International University, 2020

DEDICATION

This is dedicated to each and every student that has had to suffer the unacceptable loss of a friend due to community violence. To my Miami-Dade youth, thank you for sharing your voices and for allowing me to listen.

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ABSTRACT OF THE DISSERTATION

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by

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Florida International University, 2020

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Professor Hilary Landorf, Co-Major Professor

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Community violence surrounding children and youth affects a variety of developmental outcomes, including social-emotional, behavioral, physical, and cognitive domains. Adolescents who are exposed to continual community violence can respond with aggression, anxiety, behavioral issues, academic problems, and truancy. The purpose of this study was to develop and validate a survey instrument that measures the youth perspective of the classroom experience following the loss of a schoolmate due to homicide by firearm. Youth perspectives challenge normative perspectives and can critique common policies and practices, and such findings can inform instruction and policy.

An exploratory sequential mixed methods research design was used to provide validity and reliability evidence for the instrument. The study included four phases and incorporated SAMHSA and NCTSN trauma-informed principles. Phase 1 was a qualitative phase that utilized nine experts, examining for validity evidence of test content. Phase 2 established validity evidence based on cognitive response processes by

conducting cognitive interviews with 11 youth that had recently lost their schoolmate due to gun violence. Phase 3 was a pilot study assessing the reliability and structural aspect of validity with 50 youth by using Cronbach's alpha and exploratory factor analysis. Phase 4 was a full-scale study with 181 youth assessing the same reliability and validity evidence as in phase 3. The four phases follow a sequential process, in which the results of each phase led to revisions of the instrument. The Cronbach's alpha in phase 4 showed an excellent reliability ($\alpha = .86$) and exploratory factor analysis results in this phase indicated three factors that reflect the principles of Creating a Trauma-Informed Learning Environment, Trustworthiness and Transparency, and Empowerment, Voice and Choice. This instrument with sufficient reliability and validity evidence can be utilized as a tool to better prepare and inform educators, administrators, and curriculum and mental health specialists in communities experiencing high levels of gun violence. Data gathered from youth can assist in informing organizational policy and procedures developed to support youth following the loss of life of their schoolmate.

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CHAPTER I

INTRODUCTION

The purpose of this study is to develop and validate an instrument used to obtain the youth perspective of the classroom experience following the loss of a schoolmate to gun violence. Chapter 1 provides the background to the problem, the problem statement and purpose of the study, the theoretical framework, the study's significance and delimitation. It concludes with definitions of terms and an overview of subsequent chapters.

Background to the Problem

In the United States, homicide is the third-leading cause of death for youth aged 15-24 years, following closely behind suicide (Centers for Disease Control and Prevention [CDC], 2014). According to data from the CDC Wonder system homicide has been the leading cause of death for African-Americans aged 15-24 since 1981. And since 1985, homicides committed by younger offenders have grown dramatically (Blumstein & Cork, 1996). Statistics surrounding gun violence deaths amongst youth vary depending on community, but grim figures are found in both rural and urban areas across the country.

Public Health Issue

In 1989, the American Medical Association's Council on Scientific Affairs labeled firearm deaths and injuries "a critical public health issue." The United States is an outlier in its mortality from firearm violence in comparison to industrialized nations in the Organization for Economic Co-operation and Development (OECD), as rates of firearm homicide and suicide both substantially exceed those of the other industrialized

nations (Wintemute, 2015; Cunningham, Walter & Carter, 2018).In addition the United States has the highest rate of gun-related injuries among developed countries, as well as the highest rate of gun ownership (American Psychological Association, 2018).

According to the Centers for Disease Control and Prevention (CDC), in 2014, just under 4,300 people aged 10-24 were killed in the United States. (86% by firearms), which was an average of 12 deaths each day from gun violence; 2018 data has shown an increase to an average of 13 deaths each day. In addition to the 4,300 young people that were killed by a firearm in 2014, over half a million people aged 10-24 were reported to have been treated in an emergency department due to injuries sustained by physical assault. In CDC data gathered from 2012-2016, an average of 35,000 Americans died from gun violence each year, almost two thirds of which were suicides (Abrams & Chan, 2018). The CDC reports an estimated annual loss of more than $20 billion in combined medical and work loss costs associated with homicide and nonfatal physical assault related injuries. This loss does not include costs associated with the criminal justice system, services for victims or perpetrators, or costs incurred by the community (CDC, 2020).

In addition to the United States having the highest firearm homicide mortality rate of industrialized nations, disparities amongst race are evident, disproportionately affecting African-Americans and Hispanics. These disparities are exemplified in the data provided by the CDC (2014), which shows that while homicide is the third leading cause of death for people ages 10-24, it is the number one cause of death for African-Americans and the second leading cause of death for Hispanics. Additionally, according to Spano

(2012), no studies have investigated the cause of first-time gun carrying, which is prevalent with African American youth, as part of a preventative public health initiative.

Many entities consider violence to be a major public health problem that can be prevented and addressed using public health tools and programs. In 2006, the CDC first convened an expert panel to review and advance research on factors that will lessen the likelihood of violence (Hall et al., 2012). The experts suggested that etiological studies can provide a grounded approach to youth violence prevention and identify the factors that influence youth violence perpetration. The researchers focused their efforts on protective factors, not risk factors that include elements that can predict youth violence. The experts reiterated that, while a challenge, youth violence is preventable and addressable.

Exposure to violence in its many forms can have severe cognitive, somatic, behavioral, academic, and mental health consequences for children and youth, evidencing the widespread reach of such exposure. Research has shown that trauma and exposure to violence result in decreased IQ and reading ability, low grade-point average, increased school absence, increased behavior problems, expulsions and suspensions, and lowered rates of high school graduation (Cicchetti, 2018). Additionally, posttraumatic stress disorder (PTSD) is associated with such experiences (Shapiro, Dorman, Burkes, Welker, & Clough, 1997). Considering the dire repercussions for young people across the country that are triggered by homicide and exposure to violence, this public health problem must be dealt with in the swiftest and most efficient manner possible to respond to the destructive consequences of homicide and exposure to violence.

Florida and Miami-Dade County

According to the Florida Department of Health (FDOH), in 2018, 976 people were killed in the state of Florida and 160 of these deaths occurred in Miami-Dade County. Based on 2016 data, the rate of homicide by firearm in Miami-Dade County had been statistically significantly different than that of the state of Florida every year since 1997, though current data shows that as homicide has dropped since 2016, this is currently no longer the case (FDOH, 2020). In 2016, 105 people aged 0-18 were killed by firearm in the state of Florida; 24 of those deaths occurred in Miami-Dade County. This number decreased in 2017 and declined again in 2018 as 86 people aged 0-18 were killed and 14 of these deaths occurred in Miami-Dade County (FDOH, 2020).

Miami, Florida is a community that has suffered numerous deaths of children in recent years, including the 2016 shooting of King Carter, a 6-year old caught in the crossfire of teenagers with deadly weapons. Between 2006-2016, a reported average of 30 youths were killed annually in Miami-Dade County (Rabin, 2016). “They have unimpeded access to firearms” Director Morris Copeland of the Juvenile Services Department stated. “We have 11-, 12-, 13-year-olds packing heat. I’ve been in this business for 28 years. I’ve never seen anything like it.” (Hanks, 2016, para. 3). ABC local 10 news reported in 2016 that between 2013 and 2015, 63 teens and four children were killed in Miami-Dade County. Juveniles account for approximately 10% of all homicides in Miami, double the national average (Schwaner, Socorro, Pena, & Harrison, 2016), exemplifying the gravity of the youth homicide rate in Miami, Florida.

Exposure to Violence

According to a study by Wilkinson, McBryde, Williams, Bloom, and Bell (2009), increased exposure to serious violence results in an escalation in the fear of victimization, increased youth acquisition of weapons, stronger desires for self-protection, and the perceived need to carry a weapon for personal safety. The study included data collection on 416 active violent offenders between the ages of 16 to 24 from two New York City neighborhoods that had high levels of poverty and violent crime. According to the authors, 64.5% of participants stated they carry a gun for protection and 79.9% stated that one of their friends had shot one of their peers over a dispute. The authors additionally examined the ability of students to get a gun and the dissemination of guns amongst youth in urban areas.

Witnessing crimes or knowing people who have been victimized may affect children's outlook, leading them to see the world as violent, perilous, and unjust (Ellen & Turner, 1997). According to Bingenheimer, Brennan & Earls. (2005), research has shown statistical associations between youth self-reports of exposure to community violence and concurrent or subsequent assessments of aggression and violence. Environmental stressors such as gang violence and neighborhood poverty have been linked to school-wide achievement (McEwen & McEwen, 2017). A study of 403 African American students in sixth through eighth grade from three schools in Chicago found that 10% had been shot by a gun, 34% had seen someone shot with a gun and 13% reported that they had seen someone get killed (Jenkins, Wang, & Turner, 2009). These researchers also found that seven out of 10 students reported that a friend or relative had experienced a violent traumatic event, one in four students experienced the loss of a family member due

to a violent incident and nearly 15% reported having a close friend that was killed by violence. Eleven percent of the participants were found to have had a clinically significant level of PTSD symptomology (Jenkins et al., 2009).

The National Survey of Children's Exposure to Violence (NatSCEV) measured 48 different types of victimization within 7 categories, one of which includes exposure to community violence. This survey category measured ten types of victimization, one of which includes having a friend, family member or neighbor murdered. According to Finkelhor (2009) even if children are not physically present, they may be affected by intentional harm and children who are exposed to violence undergo long-term physical, mental, and emotional harm. The first NatSCEV, conducted in 2008, evidenced that more than 60% of 4,549 children who completed the survey were exposed to violence in the past year. Finkelhor (2009) also stated that children who were exposed to one type of violence were at a much greater risk of experiencing other types of violence. More than 10% stated that they were indirectly exposed to violence. Results of the 2014 survey, which included 4,000 children, showed that 18.4% of children had witnessed community assault in the previous year (Finkelhor, Turner, Shattuck, & Hamby, 2015).

Community Violence and Academic Impact

According to Sampson, Sharkey, and Raudenbush (2008), communities that experience the stress of violence can lead parents in these communities to isolate themselves out of fear, restricting their own social interactions, language development, and social skills in verbal interactions. It is also reasonable to expect that the verbal ability and growth potential of children would diminish if they reside in communities that experience high levels of violence. Additionally, community violence affects a variety of

developmental outcomes, inclusive of social-emotional, behavioral, and cognitive domains (Sharkey, Schwartz, Ellen, & Lacoe et al., 2014). Adolescents who are exposed to continual community violence can manifest aggression, anxiety, behavioral issues, academic problems, and truancy (Margolin & Gordis, 2004; Osofsky, 1999; Fleckman, Drury, Taylor, & Theall, 2016).

Community violence can also have an immediate and negative impact on academic assessments. Research showed that students who live on blockfaces (street segments bordered by the two closest cross streets) where violent crimes occur just before an English Language Arts (ELA) standardized test performed significantly worse than students who live on blockfaces where violent crimes occur immediately after the test (Sharkey et al., 2014). Other research shows that children's performance on cognitive skills' assessments is reduced following the exposure of a local homicide (Sharkey, 2010). Ellen and Turner (1997) demonstrated from a review of literature the evidence of a strong correlation between neighborhood violence and education outcomes and Sharkey et al. (2014) hypothesized that, because incidents of local violence have acute effects on functioning and academic performance, negative long-term academic and developmental trajectories will be a natural result of local violence.

The violence that has been shown to affect academic achievement, in turn impacts graduation and post-secondary success. Violence in schools correlates with high school graduation rates, in addition to four-year college attendance rates as students in highly violent schools are 15.9% less likely to attend a four-year college (Grogger, 1997). An important component of high school graduation is the successful completion of standardized testing. According to Sharkey et al. (2014), exposure to acute neighborhood

violence may affect whether a student takes an exam, the exam score, and whether the student passes the exam. A central finding to the research by Sharkey et al. (2014) is that exposure to violence, while it does not appear to affect math scores, results in a decreased test score in the English Language Arts assessment. Spano (2012) calls for future research to examine the variation in development amongst youth who are exposed to violence in at-risk settings. Though a precise distinction between violence in schools and community violence cannot be made, violence (whether it occurs on school grounds or in the surrounding community) impacts youth, resulting in academic, social, and behavioral consequences.

Community Violence and Physical Health Outcomes

The impact of community violence is not limited simply to cognitive functioning; it also impacts physical health outcomes in youth. Researchers have studied violence exposure as it is associated with significant psychological stress, negative emotional, academic and cognitive outcomes, yet less attention is given to the physical health consequences of community violence (Wright, Austin, Booth, & Kliewer, 2016). In a study of 409 urban elementary school children (85.6% African American), self-reports of somatic complaints were significantly associated with family conflict, school and peer stress, and community violence exposure (Hart, Hodgkinson, Belcher, Hyman, & Cooley-Strickland, 2013). While there are a variety of mixed results in the literature, evidence for a positive association between community violence exposure and health issues is strongest in the sleep and cardiovascular categories (Wright et al., 2016).

Community Violence and Mental Health

Youth who witness violence report higher rates of externalizing behavior, post-traumatic stress, depression, and aggression (Buka, Stichick, Birdthistle, & Earls, 2001). Consistent findings in community violence research relate to externalizing problems and to PTSD symptoms, as children and adolescents exposed to high rates of witnessing and victimization by community violence are at greater risk for a diagnosis of PTSD (Fowler, Tompsett, Braciszewski, Jacques-Tiura, & Baltes, 2009). Traumatic events involving close others have been found to have a substantial mental and emotional impact on children, regardless of whether or not the incident was witnessed (Jenkins et al., 2009).

Research Problem

Students that live in high violence communities can be adversely impacted in a plethora of ways. Consequences of violence and homicide can result in lowered academic success and an increase in social-emotional problems, behavioral issues, and mental health issues. Though research has evidenced the detrimental consequences of community violence, there is a dearth of data to evaluate and uncover the youth perspective, in particular as it relates to students and their perception that their classrooms are safe places where they are being supported adequately in the aftermath of community violence.

There is no instrument which assesses the youth perspective in these circumstances. While there are many student surveys which evaluate teachers, these predominantly focus on teacher performance through an academic lens. In reviewing the literature, the researcher found no existing survey instrument that asks youth their

perspectives regarding the classroom experience following the homicide of a student at their school.

Role of Schools

According to the National Association of School Psychologists (NASP), schools have an important role in decreasing the impact of a traumatic event. Educators can help by maintaining routine, providing a safe place to share concerns, being sensitive to cues that may trigger a traumatic response, and providing additional supports to youth (2015). There is a responsibility of schools to provide care and mental health services to victims of trauma, and regulations are in place to require that school systems provide resources to such victims. According to Demaria and Schonfeld (2013), school staff can correct misinformation and rumors and play an important role in providing support and identifying students who may need additional support following a traumatic event.

Schools can provide other services in addition to mental health services for students. Following the Sandy Hook Elementary School shooting that claimed the lives of 20 students and six adult staff in Newtown, CT in 2012, NASP published an article regarding the role of school crisis response (2013). The association called for (a) reasonable security measures; (b) effective crisis response for all significant crises, inclusive of violence or unexpected death; (c) allocation of resources to maximize crisis capacity; (d) preparation for crises that must be an ongoing and dynamic process (p. 10). Crisis intervention in schools aims to provide immediate support to reduce the impact of trauma and facilitate recovery for students (Morrison, 2007).

Various communities have worked to diminish gun violence and protect youth, and Miami-Dade County, Florida is one of such communities. In response to local youth

gun violence and other critical incidents and disasters that have occurred both in Miami and across the nation, Miami-Dade County Public Schools (M-DCPS) operate a crisis management program to assist schools in prevention, preparation, response, and recovery from critical incidents and disasters. Having school-employed mental health counselors as part of crisis response is critical (Demaria & Schonfeld, 2013) and the M-DCPS crisis management team serves to provide a comprehensive array of services which include a variety of preventative trainings and school support following the loss of life. The staff works closely with law enforcement, the school district, mental health counselors and school administrators to determine the best course of action following the homicide of a student. Once the superintendent and principal have been informed, the principal determines the most appropriate manner to inform teachers, whether it be through a phone tree, email, or emergency staff meeting. A tailored plan is determined for the school which can include psychological first aid, a counseling center on site, and offering of mental health services through other partners.

The Miami-Dade County Public Schools system has a team in place to respond to a variety of school crises and it has also recently spearheaded the collaborative effort Together for Children to work in cohesion with other community entities to prevent local youth gun violence. This program began in September of 2016, when Miami-Dade County partners announced the Together for Children initiative to combat youth gun violence, targeting specific zip codes where a high rate of violent crimes occur (Gurney & Teproff, 2016). This initiative is an ongoing collaborative effort between government, education, business, law enforcement, and justice entities, along with the participation of community-based organizations, faith-based institutions, individual community members,

and investment partners. The stated mission of Together for Children is to leverage resources, experience, and ideas to create data-driven, neighborhood action plans to prevent youth violence. Youth are targeted on the basis of academic and behavioral indicators, and collaborative efforts between the school district, juvenile services, and community-based organizations have resulted in services being implemented for youth in a preventative effort to reduce violence. As of 2020, Together for Children has developed specialized community action plans in six different areas of the county and data are being collected in collaboration with local entities and university researchers.

There are considerable resources and curriculum for educators to use as training material; one need only search keywords such as resources for trauma, school crisis aftermath, dealing with loss, etc. to access material for school personnel. The National Association of School Psychologists (NASP) offers online resources (www.nasponline.org) related to safety and violence prevention, frameworks for school safety, and effective practices to improve student learning, behavior, and mental health. Cowan and Rossen (2013) from NASP provide a list of considerations for schools in regard to crisis response. The first consideration is that "reasonable physical security measures, response protocols, crisis drills, and solid relationships with community public safety responders are critical" (p. 10), noting that advanced planning and preparedness is fundamental. The second consideration is that effective crisis response is necessary for a variety of crises, large or small, that can affect students and school staff. The third consideration concerns allocation of resources to maximize the capacity of crisis response and the consideration of balancing security and mental health services. The final

consideration is that crisis preparation is “an ongoing, dynamic process for schools” (p.10).

Though there are guidelines provided by major educational entities (e.g., National Association of School Psychologists, U.S. Department of Education) concerning school response to a crisis in situations of violence, the focus is on active shooter situations, not community violence. Information is readily available to prepare and guide schools through such a crisis, though guidelines for the loss of a student off-campus are notably absent.

These guidelines do not include recommendations on how to best support school communities that are subjected to the loss of students at the hand of community violence, not simply on campus school shootings. There are some school districts that have outlined strategies to deal with the sudden loss of a teacher or student. Sorensen (1989) outlines steps in response to such an incident, though no part of the steps incorporates feedback from students. While some research has been written from the perspective of educators and there is some limited research discusses the student view of safety (Holley & Steiner, 2005), there is a need for empirical support to determine effectiveness of school-based crisis support (Morrison, 2007). Moreover, such research needs to include the youth voice to better inform practices in the school setting following the all too common loss of a peer to gun violence.

Purpose of the Study

The purpose of the current study is to develop and validate a survey instrument that measures the youth perspective of the classroom experience following the loss of a schoolmate due to homicide by firearm.

Research Questions

This study aims to develop and validate a survey instrument to understand the youth perspective of the classroom experience following the death of a schoolmate due to gun violence. The study addresses the following research questions:

1. What is the reliability evidence of the Youth Gun Violence and Voice Survey?
2. What is the validity evidence of the Youth Gun Violence and Voice Survey?

Theoretical Framework

Pragmatism draws upon a variety of ideas, looking to understand what works, using diverse approaches, and valuing subjective and objective knowledge (Creswell & Clark, 2011). The pragmatist worldview focuses on the importance of the question at hand and is problem-centered. According to Johnson and Onwuegbuzie (2004), classical pragmatists were interested in examining practical consequences and empirical findings "to help in deciding which action to take next as one attempts to better understand real-world phenomena (including psychological, social and educational phenomena)" (p. 17). Thus, pragmatism favors action over philosophizing and promotes theory that can best inform practice.

Utilizing pragmatism as a theoretical framework is most fitting in the development of this survey instrument, in that it is real-world practice oriented. With the prevalence of youth gun violence in many communities across the United States and a subsequent classroom environment that has not been carefully studied, examining this real-life matter through the lens of pragmatism will assist in taking tangible steps to better understand the classroom experience following the loss of a schoolmate. The validation

of the survey is intended to be followed by employing the instrument in schools that experience the loss of a student to homicide, to understand the youth perspective.

Johnson and Onwuegbuzie (2004) argue that pragmatism is an appropriate theoretical framework for mixed methods research. They state that the most fundamental component is the research question and that "research methods should *follow* research questions in a way that offers the best chance to obtain useful answers" (p. 17). The present study incorporates qualitative methodology through use of subject matter experts and cognitive interviews, along with quantitative methodology which will include statistical analysis.

According to Creswell and Clark (2011), pragmatic research always occurs in social, historical, and political contexts and truth is not stagnant, as the world is not absolute. Pragmatism does not focus on philosophy, rather it seeks to understand knowledge, as determined by the personal reality of human subjects. In garnering the perspective of youth, evidence can be collected to see what is occurring in the classroom setting following the loss of a schoolmate and what potentially needs to be changed or modified in the response of the teacher to best serve youth.

Community Responses

Due to alarming youth homicide statistics, many communities have come together to work on diminishing the rate of youth gun violence. A non-profit named Youth ALIVE! trained teenagers in Oakland, California to become peer educators in high-crime areas. Their goal was to reduce the supply and demand for guns in the community and to give youth opportunities to advocate for themselves and to present their perspectives and gathered data to the community and politicians. They worked to build solutions through

public policy change and, subsequently, a drop in gun homicides was reported (Calhoun, 2014).

In Baltimore, Maryland, in 2002, a model was created to prevent gun violence entitled the Youth Ammunition Initiative. The goal of this Baltimore initiative was to target illegal firearms sales to youth. It was a collaborative effort between the Baltimore City Health Department and the Baltimore Police Department. This collective effort worked to enjoin the health authority to declare the issue a public health emergency, a unique preventative effort to combat youth gun violence. As a result of Baltimore's Youth Ammunition Initiative, local legislation minimized the number of eligible sales outlets for firearms and ammunition by 46% and mandated improvements in business practices for those outlets still authorized to sell ammunition (Lewin et al., 2005).

Some research has been done concerning the training of urban youth workers with respect to handling instances of gun violence. Ross (2013) focused her research on exploring how youth workers had previously handled potentially fatal situations within their community-based organizations. The researcher used narrative inquiry to analyze the stories of two youth workers that successfully handled a potentially fatal situation involving a gun. Ross argued that the expertise of youth workers comes, at least in part, from the personal experiences of the employees as past participants in youth programs and also as members of inner-city communities. She stated that the first-hand knowledge of employees from their personal experiences serves to mollify situations that have a potential for violence.

Significance of the Study

There is a limited amount of research from the perspective of young students surrounding the homicide of a peer and the impact on their classroom experience. It is imperative to understand what is occurring in the classroom following the loss of a student to best address the needs of students. Studies have correlated community violence to behavioral issues, academic problems, truancy, lower graduation rates and exam scores (Grogger, 1997; Margolin & Gordis, 2004; Osofsky, 1999; Sharkey et al., 2014). Exposure to violence was found to be significantly related to higher ratings of psychological symptoms, both internalizing and externalizing, whereas higher identification with school and more teacher support was found to be significantly related to a lower rating of psychological symptoms and more hope (Ludwig & Warren, 2009). Validating a survey to collect such information is crucial to better prepare and inform teachers, administrators, curriculum and mental health specialists, and school staff in communities that experience high levels of gun violence.

Teachers that work in neighborhoods that experience high levels of community violence are often placed in the difficult situation of teaching to a classroom of students that have recently lost a peer to gun violence. Connections with teachers who provide guidance and act as role models can be a protective factor promoting resiliency (Solberg, Carlstrom, Howard, & Jones, 2007). It is vital for educators to be equipped to deal with this complex classroom environment and knowing the youth perspective of how students feel teachers can best support them, will help prepare educators in crisis situations and their aftermath. Without proper knowledge and insight, some teachers may handle the classroom environment in an uninformed manner or even avoid the tragedy completely

and react as if nothing has occurred. Teachers may benefit from the study, as the survey instrument can provide the instructor a tool to assess the needs of their students following loss of a schoolmate.

Not only may teachers benefit from the study, but administrators can benefit as well by using survey results to better inform training for teachers. Administrators have the jurisdiction to decide when and how to meet with teachers to inform them of the death of a student, whether it be through email, by phone, or a staff meeting before or after school. Administrators also need to be informed of the needs of youth as they too interact with students. Administrators make the decisions about how and if one should communicate to students following the loss of a schoolmate. These options can include a school assembly, reminding teachers to offer students the opportunity to see a school counselor, or the decision to not communicate to students regarding the loss. Data collection can provide the youth perspective of how to create a trauma-informed school environment which can best meet the needs of students According to Morrison (2007), there are no published reports of evaluations of school-based crisis intervention implementation and effects. In providing the results of data gathered by this instrument to school administrators, they will be able to incorporate the perspective of youth to better determine their needs subsequent to the homicide of a peer.

In addition to classroom teachers and administrators, curriculum specialists and mental health staff could use this information to better inform practice. Ideally, teachers, administrators, and school staff would be preemptively trained to address students in such situations, as children's reactions to traumatic situations are largely impacted by the response of teachers (Morrison, 2007). In determining the emotional needs of students in

such situations, it is essential to understand what this loss means and seek to comprehend the perspective of the student. In seeking to validate a survey instrument to gain the youth perspective of the classroom experience following the loss of a peer, school staff can employ this survey and garner valuable, first-hand information from children and youth most in need of informed, valuable support from teachers, administrators, specialists, and school staff.

Delimitations

In this study, all samples will be delimited to Miami-Dade County Public School students ages 13 to 21.

Definitions of Key Terms

Cognitive Interviews: Interviews in which participants verbalize their thoughts while they answer a survey question, so the interviewer can determine the inferences being made about the questions in the instrument.

Community Violence: Interpersonal violence, typically without warning, perpetrated by individuals who are not intimately related to the victim which can include sexual assault, burglary, mugging, the sound of gunshots, presence of gangs, drug abuse, war, racial tension, and other forms of social disorder.

Exploratory Factor Analysis: A statistical method used to uncover the underlying structure of a relatively large set of variables. EFA is a technique within factor analysis whose overarching goal is to identify the underlying relationships between measured variables.

*Exploratory sequential mixed methods design***:** A mixed methods procedure where qualitative data are collected in early phases of a study; then, after that data is analyzed it

is used to develop the instrument that will be used for the following quantitative data phase(s).

Reliability: "Measurement of variability of answers over repeated conceptual trials which addresses the question of whether respondents are consistent or stable in their answers" (Groves et al., 2009, p. 281).

Subject Matter Expert: A person who is an authority in a particular area or topic.

Table of Specifications: A two-way chart used to identify relevant content of the items, which describes the topics to be covered by an instrument and the number of items or point values that will be aligned with each topic or response.

Theoretical Framework: A rationale for the study that provides the reader an understanding of the researcher's perception of the connection to theory.

Trauma: An emotional response to a traumatic event like an accident, rape, or natural disaster (APA, 2018).

Trauma-Informed Approach: **"**(a) Realizing the impact of trauma and understanding potential for recovery; (b) recognizing signs and symptoms of trauma; (c) responding by integrating knowledge about trauma into procedures, practice, and policies; (d) avoiding re-traumatization" (SAMHSA, 2014).

Validity: "The scores being received from participants are meaningful indicators of the construct being measured" (Creswell & Clark, 2011, p. 210).

Validity evidence based on internal structure: An analysis that "can indicate the degree to which the relationships among test items and test components conform to the construct on which the proposed test score interpretations are based" (AERA, 2014, p. 16).

Validity evidence based on response processes: The evidence of validity based on information about the test takers' cognitive processes (AERA, 2014, p. 15).

Validity evidence based on test content: The evidence of validity based on the relationship between the content of the test and what it is intended to measure (AERA, 2014, p. 14).

Youth Perspective: Gaining direct reflection from youth about how they perceive and analyze their worlds through interviews, surveys, conversations with peers, and participation in projects over time, even as participants in the research process itself (Daiute & Fine, 2003).

Youth Violence: When young people between the ages of 10 and 24 years intentionally use physical force or power to threaten or harm others (CDC, 2017).

Overview of Succeeding Chapters

This dissertation consists of four additional chapters. Chapter 2 presents a review of related literature including an overview of youth empowerment programming, youth and teacher perspectives, and youth perspective surveys. Perceived support from teachers, trauma-informed classrooms, and the Adverse Childhood Experiences study are also reviewed. Chapter 2 includes a discussion on the limited availability of firearm and youth gun violence research, school shootings and community violence, and important concepts regarding validity and reliability. Chapter 3 describes the methods used for the study. It includes the study's research question, relevant concepts of validity and reliability, the research design, descriptions of the sample, data collection procedures, and data analysis procedures to be employed. The results of the study and data analysis are

presented in Chapter 4. Chapter 5 presents a discussion of the results and implications for theory, research and practice.

CHAPTER II

LITERATURE REVIEW

This chapter begins with an overview of youth-centered programming, youth and teacher perspectives, and youth perspective surveys, and notes the limited funding for gun violence research. Perceived support from teachers, trauma-informed classrooms, and the Adverse Childhood Experiences study are also reviewed, along with school shootings and community violence. The chapter continues with a review of validity and reliability measures and ends with their importance in survey methodology.

Limited Funding for Research

Students that live in high violence communities can be negatively impacted in an abundance of ways. Exposure to violence and homicide can bring about lowered academic success, social-emotional problems, and behavioral and mental health issues. Gun violence is a major social problem in the United States and particularly among youth. A person aged 15-24 is 49 times more likely to die from gun homicide in the United States than in other wealthy countries. And 19 times more money is spent on federal research of motor-vehicle accidents than gun violence- despite the fact that both have killed similar numbers of Americans (Gregory, Wilson, Park, & Jenkins, 2018). Psychologists and other public health scientists are working to develop effective methods to reduce gun violence, but political opposition has created barriers to government support for research (APA, 2018).

In 1996 Congress passed the Dickey Amendment, which mandated that no Centers for Disease Control (CDC) funds could be spent on research that "may be used to advocate or promote gun control" and additionally cut $2.6 million from the CDC

budget, the amount spent on gun research the previous year (Gregory, et al., 2018). This severe restriction on gun research has stifled academic and public knowledge, and though such research is extraordinarily under-funded, some organizations and universities and states strive to fill the gap.

In July 2017 California opened the first state-funded firearms violence research center in America, the University of California Firearm Violence Research Center (UCFC). According to Section 14231 of the California Penal Code, UCFC's outlined interdisciplinary work addresses (a) the nature of firearm violence, including individual and societal determinants of risk for involvement in firearm violence, whether as a victim or a perpetrator; (b) the individual, community, and societal consequences of firearm violence; and (c) prevention and treatment of firearm violence at the individual, community, and societal levels. In addition to research on firearm violence, UCFC is explicitly involved in policy development, public dissemination of research findings, training of new investigators in the field of firearm violence, and supporting external investigators conducting firearm violence research through a grants program as outlined on their website

Youth-Led Empowerment Programming

There are now evidenced-based trauma-informed practices to address trauma, including trauma-specific interventions and trauma-informed care training, yet little has been done to examine trauma-informed youth programs that offer the opportunity to engage youth in community change by addressing violence (Harden et al., 2015). While there are a multitude of programs that serve youth who have undergone trauma, there is

limited literature regarding programs that specifically work to empower youth in addressing community violence.

The Truth N' Trauma (TNT) program was developed by a multidisciplinary group in Chicago and was implemented in 2012 with 44 high school youth from urban communities that experienced high levels of crime. The approaches used in the creation of this curriculum included positive youth development, restorative practice, trauma-informed practice, and psycho-education (Harden et al., 2015). A mixed methods study evaluated the program using the Ozer Empowerment Survey (Ozer & Schotland, 2011).

Findings from the TNT study of this program included an increase in active involvement of youth in their communities, individual perception of empowerment-related characteristics, an increased ability to handle challenges and feelings, and a commitment to working to make things better. There were negative changes as well; participants reported increased self-blame and critical self-evaluation, difficulty recognizing good things about oneself, and spending additional time with youth who caused trouble. Notably the youth did not see themselves as more persistent at the end of the program. Harden et al. (2015) suggested that such negative findings are likely the result of an increase in community stressors related to community engagement, and an increase in family disruption and distress that is prevalent in the community. Other findings also suggest an increase in the awareness of political issues that affect their communities. Though this program evaluation included only 44 participants, it shows promise in terms of the increase in empowerment and community engagement. Qualitative data findings included participants' feelings of having a safe virtual

community due to the program, despite continued exposure to ongoing community violence.

The TNT program is a youth-centered approach to programming which describes the importance of a youth-led, empowerment methodology. According to Bulanda and Johnson (2016), "society should not only focus on preventing youth from engaging in harmful behaviors, but also on encouraging youth participation in their communities, developing capabilities, and increasing the youth's sense of agency" (p. 303). They argue that Youth Empowerment Programs (YEP) can be sources of healing for youth who experience ongoing trauma.

In a review of YEPs by Morton and Montgomery (2013), the authors define this type of programming as an intervention that involves youth as participants and having the same control as adults. YEP programming includes engagement in leadership and has an emphasis on the development of youth capacity and participation. While Bulanda and Johnson (2015) argue that YEPs can be sources of healing for youth who have ongoing trauma and Harden et al. (2015) showed an increase in community engagement and in empowerment, not all researchers share this positive perspective. Horton and Montgomery (2013) identified 8,789 citations of trials of YEPs and only found three to meet inclusion criteria. Of these three, there was insufficient evidence of the impact of YEPs and the authors state a need for further research which includes large sample sizes, theories of change, and impact study designs which would allow for a mixed methods process evaluation. It is necessary to note that as only three trials met inclusion criteria, the analysis is limited to these specific trials only.

Youth Perspective

Although Youth Empowerment Programs (YEP) incorporate the youth voice and empowerment of young people, there has been limited research on the youth perspective of community violence and its impact on the classroom experience. Research has illustrated the devastating effects that trauma can have on students in relation to cognitive, behavioral, and social-emotional skills, but specific research regarding the youth voice concerning the school response to community violence, specifically the loss of a peer to gun violence, is sorely lacking. West, Day, Somers, and Baroni (2014) state that there needs to be a culture that allows the engagement of youth to share their perspectives and experiences with administrators, teachers and policy makers.

The absence of research regarding the youth perspective was observed by Jolivette Boden, Sprague, Parks Ennis, and Kimball (2015) regarding positive behavior intervention and supports (PBIS) frameworks within secure juvenile facilities. The researchers noted the existence of research done with adults who are involved with the implementation of PBIS, yet "it is the youth who have the greatest need to make meaningful behavior change both within the facility and when they return to their community" (p.302). This desire to seek out the youth voice is not common, either in the literature or in practice, and Jolivette et al. state the importance of both acquiring the opinions of youth and examining how youth buy-in can result in more positive outcomes. To gain the youth perspective, focus groups were formed with 8-10 incarcerated youth in each and a total of 35 youth across eight facilities participated in this study. Youth were asked a variety of questions specific to their own expectations, staff and peer interactions, and programming. The three facilitator themes identified were staff confidence in youth,

authentic reinforcement, and PBIS relevancy in daily life. The analyses of these focus groups resulted in data helpful to staff in terms of the PBIS framework, interventions, and adapting programming. This research is not only beneficial for understanding the effects of PBIS programming with youth in the juvenile setting, it also provides an opportunity for the youth voice to be heard, as they provided suggestions for improving programming.

While the above study is an example of how tapping into the youth voice can institute organizational change, research in the field of youth violence rarely includes the standpoints of youth themselves, who may look at the world around them as problematic (Daiute & Fine, 2003). Student-centered research by Fallis and Opotow (2003) allowed for the incorporation of contextual issues that would have otherwise remained hidden in the data. “Instead of viewing high school students as subjects, we worked alongside them” (p.108).

As the effects of youth violence are far-reaching and include negative health outcomes (CDC, 2014; Hart et al., 2011; Shapiro, 1997; Wintemute, 2015; Wright et al., 2016), researchers sought the perspectives of adolescents in regard to addressing youth violence in the primary care setting (Riese et al., 2016). They conducted five structured focus groups with adolescents ages 12-24 that had had personal experience with violence or close contacts affected by violence. There were 28 participants in this study, many of whom had visited emergency rooms for shootings, stabbings, or assaults. Four common themes emerged from the study. The first theme was that violence plays a significant role in the well-being, behavior choices, and health of youth. Two additional themes were that youth do not inherently trust physicians and physicians do not ask about violence. The

fourth theme found was that participants had mixed feelings about how physicians could help them with violence in their lives. One participant stated that more training was needed, another said, “maybe if they got together and did something, seeing that they are the people who can save us, who can help us…” (p. 19). The ideas for physicians helping with the violence the youth experienced varied, as some felt that it was not the role of the physician to discuss violence with youth, with multiple others stating that, “they don’t ask” and “my doctor really doesn’t care” (p. 19).

Limitations to this study include a small sample size and the lack of a forum for anonymous responses, as all data was collected through focus groups. The findings are an important step in seeking to understand the perspective of youth who have interactions with hospitals due to a high level of community violence. Future work could include a larger sample size and the development of an instrument to allow youth to answer questions anonymously regarding their interactions with physicians, thus better informing practice.

Benefits of youth perspectives.

Youth perspectives challenge normative perspectives on social arrangements, “critiquing the very institutions and practices that adults take for granted and question those behaviors, institutions, policies, and practices that seem most natural in mainstream adult society” (Daiute & Fine, 2003, p.3). Though there are some resources that assist with implementing trauma-related practices in the classroom, student perspectives are largely absent from their development (West et al., 2014). In analyzing a compilation of papers regarding youth perspectives on violence and injustice in the Journal of Social Issues (Vol. 59), Daiute and Fine note three benefits to garnering the youth perspective in

research. The first is, “by listening fully and deliberately to youth perspectives, we hear, broadly and painfully, about the ways in which the very taken-for-granted structures, institutions and relations of society may assault the dignity of youth” (p. 12). This speaks to a need for openness from adults and a willingness to change or modify structures in place that are not entirely effective in serving the needs of youth. The second benefit noted by researchers is the value of involving youth in research design, university governance, media, policy, and school reform. Fallis and Opotow (2003) warn that youth can feel a sense of alienation from policies and practices that are adult-centered. Methods that garner youth perspectives allow researchers to see structures and policies through the critical lens of youth, which can impact positive change in a more meaningful manner. The third benefit of engaging the youth perspective is that in providing opportunities to critique and challenge the normalization of violence, results can uncover innovative strategies and research findings to inform policy and pedagogy (Daiute & Fine, 2003).

Youth perspective surveys.

It is essential to inquire about the opinion of youth and how youth buy-in can result in more positive outcomes and system changes (Jolivette et al., 2015), though most surveys given to youth seek to collect data without a stated goal of implementing change based on the gathered information. One of the “10 Principles of Compassionate Schools” from the Washington State Superintendent of Public Instruction Office (2011) is to provide access, voice and ownership for students. According to the Crimes Against Children Research Center (CCRC), a lack of youth-focused surveys limits the ability to assess the developmental impact of exposure and identify the most important targets for policy and programs that aim to reduce firearm-related fatal and nonfatal injury among

youth. Firearm safety researchers at the CCRC are seeking to develop the first comprehensive, developmentally focused Youth Firearm Risk and Safety Tool (Youth-FiRST) for children ages 10-17. They piloted the test the tool within three communities at high-risk for gun violence in rural Appalachia, TN, urban Philadelphia, PA, and urban Boston, MA. Pilot data was gathered from 630 youth and their caregivers from these three communities and the questionnaire incorporated items from various surveys that had been previously validated. Youth-FiRST assessed youth firearm exposure, access, and safety practices across the developmental span of childhood. Items were developed through a mixed methods approach, including focus groups with youth and caregivers, review by experts, and 24 cognitive interviews. Turner, Mitchell, Jones, Hamby, Wade, and Beseler (2019) reported on the development and results of the final version of the Youth-FiRST which was used in the pilot study. This survey consisted of 45 items to assess youth exposure to the following measures: gun violence exposure, child victimization, polyvictimization, and posttraumatic symptoms. Results included a significant overlap between different types of gun violence exposures. Additionally, the authors found that the level of threat does not need to be serious to create significant distress in young children and the traumatic effect of gun violence may simply be from seeing or hearing it in one's neighborhood (Turner et al., 2019). This youth perspective survey is an important contribution which can assist community members, organizations, and schools understand the trauma and effects that gun violence exposure can have on youth.

The Survey on Attitudes About Guns and Shootings (SAGAS) is a 37-item survey that was tested for reliability and validity evidence. This study included 625 male

participants ages 18-24 from two high-violence communities in Baltimore, Maryland. This survey assessed youth attitudes towards gun violence and items included exposure to community violence prevention programs, whether participants had been arrested or shot at, and whether they had seen a march or vigil in response to a shooting. There were also attitudinal items such as asking if it is acceptable to shoot someone in five common situations that have been found to initiate violence (Milam, Furr-Holden, Leaf, & Webster , 2016). Exploratory factor analysis resulted in five factors with adequate internal consistency and the authors determined that this study provided reliability and validity evidence of the SAGAS. This survey will be used in future studies to assess if the "Safe Streets Program" has affected attitudes towards gun violence. Limitations to this study include the homogenous sample, as the participants were all male and predominantly African American.

According to researchers at the CCRC, there are a lack of youth-focused surveys which limits the ability to assess the impact of gun violence among youth, though there are a plethora of self-report questionnaires on a variety of child victimization issues, inclusive of community exposure to violence questionnaires. These include the following: the Children's Report of Exposure to Violence (Cooley, Turner, & Beidel, 1995), Determining Our Viewpoints for Violent Events (DOVVE; Sheehan, DiCara, LeBailly, & Christoffel, 1997), Children's Interview on Community Violence (Hill, Levermore, Twaite, & Jones, 1996), Attitudes Towards Guns and Violence Questionnaire (Shapiro, 2000), Things I Have Seen and Heard (Richters, Martines, & Valla, 1990), and the Violence Exposure Scale For Children (VEX; Fox & Leavitt, 1995).

Williams and Cornell (2006) examined factors that influence a student's willingness to seek help for a threat of violence by utilizing an anonymous survey. Participants included 542 students at a suburban public middle school. This 43-item survey was developed from a longer self-report survey on bullying and measured physical, verbal, and social bullying. Students were presented with a series of questions asking if they had been bullied or been the perpetrator of bullying over the last 30 days. This was then followed by 26 items which were answered on a 4-point scale ranging from strongly disagree to strongly agree. These items addressed help-seeking from teachers and adults, attitudes towards peer aggression, and teacher tolerance. This study found that willingness to seek help is lower in higher grade levels and among males, and students that have aggressive attitudes and feel that the school climate tolerates bullying are less likely to report seeking assistance. One limitation of this study is that the target population was one middle school and school climates can vary dramatically, dependent upon school policy and leadership. Employing this survey in multiple school sites could add depth to the data collected. Additionally, this survey was not employed with high school students and therefore did access the perspectives of older youth and their assessment of school climate surrounding bullying and willingness to seek help from teachers.

Most questionnaires regarding community violence include items concerning witnessing and experiencing violence, though some contain questions about indirect exposure to violence which includes having a close family member assaulted, but when a child is not physically present (Hambly & Finkelhor, 2001). An instrument regarding indirect exposure to violence and its effects on the classroom experience is lacking in the

literature. If teachers do not have a complete understanding of how their students are affected by the handling of the potentially traumatic experience of losing a schoolmate, how can they best support their students in the classroom? Holley and Steiner (2005) state that instructors may create classrooms which they believe support honest dialogue, but students' perspectives may differ. As the unique values of children can contrast dramatically from major assumptions in the curriculum and in teachers' interpretations of the curriculum (Daiute & Fine, 2003), assumptions cannot be made about how teachers should respond to such a situation. Rather, it is the students themselves that must have the opportunity to provide insight regarding what type of support they feel is most effective.

Teacher Perspective

While there is much research regarding the damaging cognitive, emotional, and behavioral effects of community violence on youth and children, minimal research exists to examine the teacher perspective of those that teach in communities that experience high incidences of violence. Maring and Koblinsky (2013) noted this lack of research and gathered qualitative data from 20 middle school teachers from three urban schools in the Washington, DC area. The researchers asked respondents what their challenges are working in schools that are located in violent communities, which specific strategies they use to cope, and what support systems would help them respond more effectively to the needs of their students affected by community violence.

Results of this study included five major challenges to teaching which include: (a) lack of training, (b) fears for personal safety, (c) somatic stress symptoms, (d) inadequate school security, and (e) neighborhood violent crime. Strategies for coping included praying, communicating with family and friends, and emotional withdrawal. In school

settings, teachers stated that sharing stressful events with colleagues and limiting interactions with difficult students were additional coping mechanisms. Separating work life and personal life along with professional counseling were additional strategies. The results of the third question regarding the needs of teachers were a request for behavior management training along with a desire for parental support and involvement. Teachers also sought school support in providing effective leadership, improved safety and security, peer mediation programs, and mental health services.

Maring and Koblinsky's study is significant, as it deliberately asked teachers in communities that experience high levels of violence what their challenges are and what their requests for support are. This research could be replicated in other schools that experience ongoing community violence and results can provide substantial data that should inform policy and practice within schools. Seeking the perspective of those in the classroom setting is a necessity to best serve educators and, in turn, youth.

Another study explored the needs of classroom staff in terms of trauma-informed care in elementary schools. This pilot study by Anderson, Blitz, and Saastamoinen (2015) was comprised of three parts; a needs assessment completed by classroom staff, the development and implementation of professional development workshops to identify needs, and post-workshop surveys and focus groups to assess the impact of the workshops and additional support needed for classroom staff. The survey used a Likert scale and included questions regarding the content of the workshop, workplace climate, and what additional information classroom staff would like to learn.

Six themes were derived from the focus group sessions, three of which were tied to concern for students, their learning, and school climate. The remaining three themes

focused on professional development needs and workplace development. Both studies (Anderson, Blitz, & Saastamoinen, 2015; Maring & Koblinsky, 2013) found a desire from teachers and classroom staff to have more professional development training. Additional findings by Anderson, Blitz, and Saastamoinen included a discussion regarding a lack of openness regarding trauma-informed care with some staff members. A significant number of classroom staff "did not seem to understand how adult behavior in the school could contribute to the students' stress", and that "most participants continue to believe that an aggressive tone or strong words were necessary for effective discipline" (p. 129).

The Critical Incident Stress Management (CISM) model is an approach to managing traumatic stress. Morrison (2007) researched the effectiveness of this model for school-based crisis intervention as perceived by teachers and school staff. Participants came from 15 schools and 10 of the 15 crisis events at these schools were the death of a student. This quantitative study employed a questionnaire to assess the teacher perspective of the crisis intervention services. The results of this study suggested that the CISM model had a positive effect on teacher and staff, but no effect on perceptions of the impact of this model on student outcomes. Though gathering data from teachers and staff is an important component to assess the effectiveness of the CISM model, there was no inclusion of the student voice and their perception the potential benefits of this crisis intervention.

As trauma-informed schools are essential in areas that experience high levels of community violence, this study addressed the need for further research regarding the

implementation of professional development and training to establish trauma-informed schools and determine the effectiveness of school-based crisis interventions.

Trauma-Informed Classrooms and Community Violence

An increased awareness of the effects of trauma on youth has led schools to train and prepare for crisis response, though less is known about the readiness of schools in dealing with the effects of ongoing community violence (Ridgard, Laracu, Dupaul, Shapiro, & Power, 2015). Considering the detrimental effects of trauma on children and youth, it is necessary for schools to become aware and active in their response to the needs of students.

A trauma-informed approach and trauma-specific interventions are outlined by the Substance Abuse and Mental Health Service Administration (SAMHSA). According to SAMHSA (2018), a program, organization, or system with a trauma-informed approach adheres to six principles which include: (a) safety; (b) trustworthiness and transparency; (c) peer support; (d) collaboration and mutuality; (e) empowerment, Voice and Choice; and (f) cultural, historical, and gender issues. The trauma-informed approach is not a specific treatment or intervention, rather a frame of mind. SAMHSA specifies four components of the trauma-informed approach which are (a) realizing the impact of trauma and understanding potential for recovery; (b) recognizing signs and symptoms of trauma; (c) responding by integrating knowledge about trauma into procedures, practice, and policies; (d) avoiding re-traumatization.

According to the National Child Traumatic Stress Network (NCTSN), essential elements of a trauma-informed school system should be a part of the overall mission of the educational system, recognizing that, “trauma affects staff, students, families,

communities, and systems" (NCTSN, n.d., para.2). The NCTSN states that it is critical to identify and assess traumatic stress, address and treat such stress, teach trauma education and awareness, and have partnerships with students and families. Additionally, creating a trauma-informed learning environment that integrates emergency management and crisis response is necessary. Trauma-informed schools must be culturally responsive and continually evaluate and revise school policy and practice. Finally, schools must understand and address staff self-care and secondary trauma, and collaborate across systems and establish community partnerships.

According to Ridgard et al. (2015), trauma-informed approaches can be adopted by schools at a tier 1 (universal) level of delivery. Schools can integrate the four aspects of the trauma-informed approach into school procedures and policy. Though schools are the primary provider of mental health services for youth, trauma-informed practice in schools is not commonly researched (Cavanaugh, 2016). Trauma-informed schools are of utmost importance, as young children are particularly susceptible to the effects of trauma, which can result in developmental delays in language, cognitive functioning, difficulty in maintaining attention, concentration, and regulating emotions- all of which can have a detrimental impact in a classroom setting (Paccione-Dyszlewski, 2016).

A study by Lai et al. (2018) evaluated pre-disaster community violence exposure as a vulnerability factor for children following Hurricane Katrina. There were 426 children and their mothers that participated in this longitudinal study, 75% of which had been displaced from their homes during the hurricane. The children self-reported on their exposure to community violence and hurricane exposure and the mothers reported on their child's somatic symptoms. The authors found that community violence exposure

was associated with increased levels of posttraumatic stress symptoms. They concluded that post-disaster screening for students should incorporate questions assessing the child's exposure to community violence and their somatic symptoms to provide trauma-informed care in a school setting.

Adverse Childhood Experiences study.

In 1998, in a collaborative study between the CDC and Keiser Permanente, researchers Robert Anda and Vincent Felitti published the results of a longitudinal study which uncovered high amounts of trauma in a sample population of over 17,000 adults. The Adverse Childhood Experiences (ACE) study retrospectively and prospectively assessed the long-term impact of abuse and household dysfunction during childhood on the following adult outcomes: quality of life, health care utilization, disease risk factors and incidence, and mortality (Felitti et al., 1998). This oft-cited research looked at seven categories of childhood exposure to abuse and household dysfunction. The abuse categories included psychological, physical, and sexual abuse, whereas the household dysfunctions included substance abuse, mental illness, mother treated violently, and criminal behavior in household. The trauma documented amongst the participants showed that approximately two-thirds of the population experienced at least one ACE and 12.5% had four or more ACEs. Researchers found a strong relationship between the number of childhood exposures and the number of health risk factors for leading causes of death (Felitti et al., 1998). According to this study, adverse childhood experiences can lead to social, emotional, and cognitive impairment, adoption of health-risk behaviors, disease, disability, and social problems, which can lead to an early death.

The ACE study was a landmark study that has contributed to the literature, documenting the significant relationship of traumatic experiences to damaging cognitive, mental, and physical issues. Since this study was published, some researchers have seen the need to expand upon the original seven ACEs to include other traumatic experiences. ACEs incompletely represent the variety of childhood adversities and exposure to violence is a risk factor which can affect the development of a child's cognitive capacities (McEwen and McEwen, 2017; Turner et al., 2019). According to the CDC (2020), youth violence is a grave public health problem and an adverse childhood experience (ACE) that can have long-term impact on health. As witnessing community violence can result in negative outcomes, missing from the original study is the traumatic experience of exposure to violence outside the family (Finkelhor, Shattuck, Turner, & Hamby, 2013). The Philadelphia ACE Task Force included an expansion of items, which included witnessing violence, and living in unsafe and non-supportive neighborhoods (Pachter, Lieberman, Bloom, & Fein, 2017). As the prevalence of trauma among children and youth is cited throughout the literature, it is of utmost importance that educators are knowledgeable of its harmful effects and that teachers are informed in best practices to support students (Carello & Butler, 2015; Cavanaugh, 2016; Cummings, Addante, Swindell, & Meadan, 2017; Paccione-Dyszlewski, 2016; Walkley & Cox, 2013).

Trauma and Toxic Stress.

Community violence is a potentially traumatic experience and toxic stress can occur when a child's experience is strong, frequent or prolonged (Walkley & Cox, 2013; Bucci, Marques, Oh & Harris, 2016). The more adversity a child experiences, the stronger long-term developmental consequences can be and risk augments when youth

are affected by school or community trauma (Shonkoff & Richmond, 2008). According to the American Academy of Pediatrics, there is extensive evidence that toxic stress can lead to learning, physical, mental and behavioral impairments. Permanent changes in learning can include linguistic, social-emotional, and cognitive repercussions. Additionally, behavioral challenges and a chronically activated or hyper-responsive reaction to stress can result in chronic diseases (Shonkoff & Garner, 2012).

School Shootings and Community Violence

Though school shootings often land on the cover of magazines and receive major media attention, community violence and the children and youth affected on a daily basis rarely make national headlines. The two types of trauma that can result from community violence are differentiated in the literature as acute trauma (type 1) and complex trauma (type 2). Type 1 trauma is the result of a single, devastating event, whereas type 2 is the result of extended exposure to traumatic situations (Bath, 2008). Complex trauma amongst youth interrupts biological processes, self-concept, behavioral regulation, and information processing. Without understanding that traumatic stress is a central factor in the development and intensification of school violence in urban areas, resolving school violence is impossible (Rawles, 2010). In addition to the cognitive, social, and behavioral repercussions of continuous exposure to trauma due to community violence, fear and anxiety about mortality are brought about with the loss of relationships due to homicide (Jenkins et al., 2009).

Concern regarding the focus on mass shootings with less regard for ongoing community violence is noted by researchers. Santilli et al. (2017) collected survey data regarding exposure to community violence, measures of health, behavioral and social

assets or risks, and civic engagement. Demographic data was discussed in correlation with results of the survey and, though all participants lived in low-income areas, exposure to violence differed by gender and race/ethnicity, reflecting data seen in national crime statistics. According to the CDC (2014), homicide is the third leading cause of death for people ages 10-24, and it is the number one cause of death for African-Americans and the second leading cause of death for Hispanics, illuminating vast discrepancies in race/ethnicity.

In addition to national crime data collected by Santilli et al. (2017) the authors discussed how data collection methods typically report specific acts of violence, whereas the impact of community violence is significantly more widespread than is often realized. As its effects are far-reaching, media focused on mass shootings must not leave urban communities of color on the sidelines, rather a multifaceted approach must be put in place to prevent both mass shootings and chronic violence in low-income communities (Santilli et al., 2017). This approach will require more evidence-based work, which requires amplified funding from a federal level. Secondly, evidence should be used to tailor programming specific to community needs through prevention and intervention needs. Thirdly, such programming must include a public-health framework incorporating a social justice lens, meaning that, "racial inequalities, racism, and stigma at the heart of urban violence, including the cycle of trauma perpetuated in families and neighborhoods" (p. 377) must be considered in this approach.

Perceived Support from Teachers

Research on adults suggests that support appraisals are structured by type, such as emotional, tangible, and informational support, and that several theoretical formations

relate perceived social support to coping and health outcomes, though this has not been found for youth (Torsheim, Wold, & Samdal, 2000). For adolescents, social supports may come from sources that include both teacher support and classmate support, in which teachers and staff are formal sources of support and classmates are informal (Torsheim, Samdal, Rasmussen, Freeman, Griebler and Dür, 2012). The Teacher and Classmate Support Scale (TCMS) is a survey that includes some items from a classmate climate questionnaire that was used in previous research by Manger and Olweus (1994) and Olweus (1994). Pertinent to this study, the teacher support portion of the TCMS consists of the following four constructs: (a) our teachers treat us fairly, (b) when I need extra help, I get it, (c) my teachers are interested in me as a person, and (d) our teachers are nice and friendly (Torsheim et al., 2000).

The TCMS seeks to understand the perception of youth and the support they receive from teachers in the classroom. Additionally, the Identification with School Questionnaire (Voelkl, 1997) is composed of 17 items that are rated by students to measure identification with school. Items on the instrument included “teachers don’t care” and “teachers can talk to” (Table 1). While there are some questionnaires that have been developed to capture the perceived support by teachers, there is no questionnaire in the literature that speaks to the specific, all too common, situation of perceived support from teachers in the classroom following the homicide of a schoolmate, underscoring the need to develop and validate such an instrument.

Validity

When creating a survey, it is important to evidence reliability and validity. The concepts of validity and reliability used refer to the most recent *Standards for*

Educational and Psychological Testing (*Standards* thereafter) published in 2014 by a joint committee from the American Educational Research Association (AERA), American Psychological Association (APA), and the National Council on Measurement in Education (NCME). Validity is defined as the degree to which "evidence and theory support the interpretations of test scores for proposed uses of tests" and is "the most fundamental consideration in developing tests and evaluating tests" (AERA, APA, & NCME, 2014, p. 11). There are five categories of validity evidence which are composed of: (a) evidence based on content, (b) evidence based on response process, (c) evidence based on internal structure, (d) evidence based on relations to other variables, and (e) evidence based on validity and consequences of testing. For this study, the creation of a survey instrument included evidence based on content, evidence based on response process, and evidence based on internal structure.

Evidence based on content analyzes the "relationship between the content of the test and the constructs it is intended to measure" (*Standards*, 2014, p. 14). The *Standards* states that experts can assist with determining the relationship between the test and the construct and to determine the representativeness of the items on the survey. At least ten subject matter experts should be used in the development of an instrument (O'Neil, Patry, & Penrod, 2004), therefore the 12 experts in the field that were solicited for participation included M-DCPS staff, educational consultants, social workers, Miami-Dade County Juvenile Services Department staff, university professors, and non-profit staff. According to McMillan (2012), it is also the work of experts to determine if the domain represented is appropriate to the intended use of the data gathered to evidence validity.

Evidence based on response process included cognitive interviews with youth. This method is used as a primary method to identify and correct any issues with survey questions and is defined as the "administration of draft survey questions while collecting additional verbal information about the survey responses, which is used to evaluate the quality of the response or to help determine whether the question is generating the information that its author intends" (Beatty & Willis, 2007). Cognitive interviews were conducted with youth that attend schools or after-school programming in targeted zip codes to assess the functionality of the survey instrument. Pre-testing questions in questionnaire format enables the researcher to determine if participants understand the question consistently and in the way the researcher intended (Collins, 2003).

According to Creswell, construct validity has become the major objective in terms of evidencing validity (2014). It is defined by Groves et al. (2009) as the extent to which the measure is related to the construct. According to Messick (1995), it is the "evidential basis for score interpretation" (p. 743). This type of validity is most typically evidenced by showing the correlation of answers with other answers to different survey questions which should be highly related. For example, the survey questions "I think my teacher was prepared to speak about the death of my classmate" and "I think my teacher needs to be better prepared to deal with the death of a student" should not have similar responses when utilizing the Likert scale.

Evidence based on internal structure was shown by employing factor analysis, a method of data reduction which expresses how items are related to each other and how different parts of an instrument are related. Exploratory factor analysis is one of the most widely utilized statistical procedures to evidence structural validity (Costello & Osborne,

2005) and a minimum of 10 observations per variable is necessary (Institute for Digital Research and Education, n.d.) to support evidence of structural validity.

Reliability

According to Tavakol and Dennick (2011), an instrument cannot be deemed valid unless it is reliable. Reliability is the extent to which participant and/or rater scores are free from error, and there are a variety of sources of measurement error. McMillan (2012) notes that error exists, but the amount and type of error needs to be analyzed. The term reliability is used in two ways, reliability coefficient and reliability/precision (*Standards*, 2014). Reliability coefficient refers to the reliability coefficients of classical test theory and reliability/precision is the "general notion of consistency of the scores across instances of the testing procedure" (p. 33). Expressed as a number between 0 to 1 to determine internal consistency, coefficient alpha, also known as Cronbach's alpha, is the most widely used measure of reliability (Tavakol & Dennick, 2011).

Conclusion

Much of the research surrounding youth gun violence is in terms of prevention and anti-violence programming. Academic critiques of this programming often lack the youth perspective, which can be gained through the use of surveys and qualitative methods. According to the Crimes Against Children Research Center (n.d.), a scarcity of youth-focused surveys limits the ability to assess the developmental impact of exposure and identify the most important targets for policy and programs that aim to reduce firearm-related fatal and nonfatal injury among youth. The literature evidences the devastating effects of community violence on children and youth as it affects a variety of developmental outcomes, inclusive of social-emotional, behavioral, physical, and

cognitive domains (Cicchetti, 2018; Ellen & Turner, 1997; Fowler et al., 2009; Hart et al., 2011; Sharkey et al., 2014; Wright et al., 2016). Adolescents who are exposed to continual community violence can respond with aggression, anxiety, behavioral issues, academic problems, and truancy (Margolin & Gordis, 2004; Osofsky, 1999) and research additionally shows that children's performance on cognitive skills' assessments is reduced following the exposure of a local homicide (Sharkey, 2010).

The response to the potentially debilitating effects of community violence on children and youth has been to focus on trauma-informed care and the development of trauma-informed schools. This has been one way to respond to this public health crisis, and research and educational materials have been produced to assist in serving youth and preparing school staff that lives and/or works in communities that experience high levels of community violence. Youth Empowerment Programs (YEP) have been developed to provide a platform for students to use their voice and develop the ability to take control in changing their own communities (Bulanda & Johnson, 2015; Harden et al., 2015). Though there are many YEPs taking place across the country, there is a need for more research to determine the effectiveness of student-centered, empowerment programming.

The perspective of teachers who work in communities that experience high levels of violence has been noted in the literature. Some studies have found a desire of teachers and classroom staff to have more professional development training (Anderson, Blitz, & Saastamoinen, 2015; Maring & Koblinsky, 2013), though there is limited research on the student perspective. Additionally, there is limited knowledge regarding the preparedness of schools to deal with ongoing community violence, though schools can address the

detrimental impacts of continual violence through the trauma-informed approach (Ridgard et al., 2015).

There is a glaring absence of research regarding the youth perspective (Daiute & Fine, 2003; Jolivette et al., 2015) and not enough has been done to provide a platform for those most affected by violence- the youth themselves. This study seeks to validate a survey instrument which can be used to empower youth to share their perspectives and reactions to their own experiences in a school setting following the loss of a schoolmate due to gun violence.

Though mass shootings are covered nationally by the media, ongoing community violence does not receive the same attention, although it is in no way less destructive to children and youth. The validation of the Youth Gun Violence and Voice survey will contribute to the literature in creating a tool for youth to share their views on the classroom experience following the murder of a schoolmate, and help to inform practice and procedures in schools that suffer all too often from the loss of students at the hand of a gun.

Summary

The literature review established the lack of sufficient research to garner the youth perspective of the classroom experience following the loss of a schoolmate to gun violence. The literature review also demonstrated that there is limited funding for firearm research, further inhibiting knowledge. Additionally, the literature established the importance of youth surveys, and the usefulness of those few that exist. The destructive effects of traumatic experiences are discussed, along with the benefits of the youth perspective. Ideas of validity and reliability were discussed, as they are important

components to the methodology of this study, which will be described in detail in Chapter 3.

CHAPTER III

METHODS

This chapter begins by restating the research questions that were identified in Chapter 1. The methods, relevant aspects of validity and reliability, research design, descriptions of the samples, data collection procedures, and data analysis procedures will follow.

Research Questions

This study aimed to develop and validate a survey instrument to understand the youth perspective of the classroom experience following the death of a schoolmate due to gun violence. This study aimed to address the following research questions:

1. What is the reliability evidence of the Youth Gun Violence and Voice Survey?
2. What is the validity evidence of the Youth Gun Violence and Voice Survey?

Research Design

Mixed methods research is defined as "research in which the investigator collects and analyzes data, integrates the findings, and draws inferences using both qualitative and quantitative approaches or methods in a single study or a program of inquiry" (Tashakkori & Creswell, 2007, p. 4). There are a variety of research studies in which mixed methods are the most beneficial research design and, according to Creswell and Clark (2011), the mixed methods design should be used when one data source may be inefficient, results require explanations, explanatory findings need generalized, a primary method needs enhancement, and an objective can be best addressed in multiple phases.

Though some researchers object to the mixing of qualitative and quantitative research in a single study, many see the benefit of gathering data from both lenses, which

can provide a more complete picture of the data. Additionally, the strength of one method can offset the weaknesses of the other, as multiple sources of data provide more evidence when studying an issue (Creswell & Clark, 2011). By employing a mixed methods research design, the researcher was able to use multiple phases of data collection to provide strong evidence of the validity and reliability of the Youth Gun Violence and Voice survey, using both qualitative and quantitative tools.

Pragmatism is the framework for this methodology and the link between pragmatism and mixed methods research was affirmed by Tashakkori and Teddlie (2003). The authors stated that both qualitative and quantitative research methods may be used in a single study and that multiple authors have embraced pragmatism as the appropriate paradigm for mixed methods research. Johnson and Onwuegbuzie (2004) also argue that pragmatism is an appropriate framework for mixed methods research. The pragmatist worldview is often coupled with mixed methods research in that the focus is on the importance of the question asked, not necessarily the method used and, additionally, how multiple methods can inform data (Creswell & Clark, 2011).

Using an exploratory sequential mixed methods research design, phase one consisted of designing and implementing the qualitative strand to inform the second phase of refining the instrument and designing a pilot test. In phase three, a quantitative sample was used to collect data, which then informed the quantitative, full study in phase four. In this design, the researcher conducted separate phases, making reporting straightforward and using what was learned from the initial phases to design the final quantitative phases. An additional strength of the exploratory design is to produce a new instrument (Creswell & Clark, 2011), which is central to the study at hand.

This exploratory sequential mixed methods research design provided reliability evidence and three sources of construct validity: test content (phase one), response process (phase two), and the structural aspect of validity (phases three and four). According to the American Educational Research Association (2014), these three sources of validity evidence are deemed appropriate for the intended use of the survey instrument and will be further explained in the procedures section.

Population and Sampling

The target population for the study were students aged 13-21 currently enrolled in either middle or high school who have experienced the loss of a schoolmate to gun violence in the previous six months. The age range included students enrolled in middle or high school and additionally allowed for the inclusion of students had not graduated in the standard time frame and remained in an educational setting until the age of 21.

Student Samples.

Between the years of 2016 to 2018, annually, a range of 14 to 24 youth (ages 0-18) have been killed in Miami-Dade County (FDOH, 2020). Juveniles account for approximately 10% of all homicides in Miami, double the national average (Schwaner et al., 2016), therefore, the sample population was taken from Miami-Dade County Public School students due to the high occurrences of youth homicide. In the 2018-2019 school year, there were 350,040 students enrolled in Miami-Dade County Public Schools (M-DCPS), the fourth largest school system in America (Miami-Dade County Public Schools, 2019), and the sample population included students from schools that have lost a schoolmate to gun violence within the previous six months.

Cognitive interviews sample.

The first student sample consisted of 11 students who had lost a schoolmate to homicide two months prior. These students took part in cognitive interviews to help determine understanding and appropriateness of the survey items. The researcher completed this phase with a small number of students, as fewer than 10 is appropriate (Groves et al., 2009). To recruit this sample, the researcher contacted the Director of School Operations and Special Programs at Miami-Dade County Public Schools and was connected to the principal at a high school which had lost a student to gun violence two months ago. The researcher was connected by email to school administration, explained the purpose of the research study and asked for permission to recruit participants. In addition to the email explaining the purpose of the research, the researcher attached all approved IRB forms and the school district board approval letter. The researcher offered to come and share this information with school staff and speak to interested students before the cognitive interviews were conducted to elaborate on the study. One teacher was designated to support the researcher in recruitment of students by initially speaking to students and then inviting the researcher to the school to address youth who were interested in being participants in the study.

The 11 students were recruited from three different sites. Eight of the students were recruited from a high school site and one student was recruited from an alternative education program. Two students were recruited from a nonprofit in Miami that services youth in afterschool and summer programming. Interested students were given the child and parental consent form and were asked to participate the following week in the study if they had obtained permission. The researcher asked the staff and students which time

was most convenient for the cognitive interviews and met with all students at their school site during a two-day period. The two students recruited from the nonprofit completed their interviews after school at the program site the same week.

Pilot study sample.

The second student sample consisted of the required minimum of 50 students (Groves et al., 2009). These students were recruited from an M-DCPS school that experienced the loss of a schoolmate to gun violence. Following the reported loss of the student, the researcher worked with the school principal to determine when the research study could be proposed to students and staff and when students would be able to participate in the study. The principal assigned a school counselor to assist the researcher in recruitment of students from elective courses. The researcher was able to recruit 75 students through these targeted classes and collected these data over a period of four days.

Full-scale sample.

The third student sample consisted of 200 students for the full-scale study. The recruitment methods were the same as the pilot study sample, though the sample population came from a different school. One hundred eighty student participants were necessary as there were 18 questions in the instrument, therefore the minimum number of surveys to be completed was 180, as factor analysis requires at least 10 participants per survey question is necessary to evidence structural validity (Institute for Digital Research and Education, n.d.). The researcher worked with the assistant principal to target elective courses so that 200 participants completed the survey.

Subject experts sample.

There were 12 subject matter experts that were asked to participate on the basis of their knowledge of community violence, the school system, curriculum, and the mental health aspect regarding the loss of a schoolmate. Nine of the twelve were willing and able to participate in the first phase. One of the subject matter experts was Donovan Lee-Sin, the Director of Public Policy and Community Engagement at The Children's Trust. His work includes overseeing grants in youth enrichment programs, service partnerships, 211 Helpline, and community engagement in Miami-Dade County. He also played an integral role in the launching of Together for Children, a countywide youth violence prevention effort. Additional experts included those involved intimately with juvenile violence. Wayne Rawlins is a strategic consultant who developed an anti-gang strategy for Miami-Dade County and co-authored work in 2004 on offender reentry which was used by the White House Office of National Drug Control Policy. Morris Copeland is the Miami-Dade County Director of Juvenile Services with over 30 years of career experience. His department has been recognized both nationally and internationally for the humane and innovative services provided to at-risk and arrested youth and their families, with the goal of keeping youth from entering or going further into the criminal justice system.

Experts also included those who have worked both in the classroom and in school administration. Bonnie May is an Educational Management and Support Services Consultant with a career that includes teaching, school administration, and safe schools and security consulting. Kiesha Moodie, at the time of participation, was the Director of Social Innovation at the Office of Research and Economic Development at Florida International University (FIU) and is now a director at StartUP FIU. Her work experience

includes teaching in low-income schools, nonprofit and community engagement. The additional experts at FIU were selected members of the researcher's dissertation committee who were asked to participate based on their expertise in education. Dr. Landorf is the Executive Director of the Office of Global Learning Initiatives and an associate professor in the College of Arts, Sciences & Education (CASE) with specialized skills in developing, designing and implementing policies and practices of global learning. Dr. Long is an associate professor in CASE. Her work as a methodologist and practitioner makes her an expert in measurement and evaluation. Dr. Dinehart is senior associate dean for the School of Education and Human Development at CASE at FIU. Her research areas include work in school readiness and developmental outcomes of children from high-risk environments, including children in the child welfare system. In addition to the aforementioned experts, the input of these professors was extraordinarily valuable in the first phase of the study.

Sample Limitations

Sampling error is an error in statistics caused by the omission of some persons in the population as a result of systematic exclusion of selection or sampling variance (Groves et al., 2009). This could have occurred if students were absent and unable to participate in the survey due to language barriers. Additionally, there was not a precisely equal representation of respondents regarding age, gender, and geographical location. Furthermore, it is important to note that the demographics of the participants were not necessarily representative of state or national demographics as homicides affect Black and Latino youth at higher rates than white youth (CDC, 2016; Hall et al., 2012; Wintemute, 2015), so caution is advisable in discussions of generalizability. For those

students who eliminated themselves from the sample frame of their own accord or chose to not complete the entire survey, their perspectives were not collected by the instrument. There was also potential for undercoverage, the elements of the target population that are missing from the sampling frame (Groves et al., 2009), as there were likely students that had moved to a different school or neighborhood that would have initially been in the sampling frame. Such students would have been too complicated to track down and are potentially in different parts of the state or country. Moreover, there is also the likelihood that the researcher did not have access to certain students who are within the sampling frame but were suspended, jailed, or in a juvenile facility at the time of this study. These students would have been unable to participate in the survey and were not able to be recruited.

The researcher explained the importance of this study to develop a tool to understand the youth perspective and presented the survey as an opportunity to youth to share their opinions. Sampling limitations occurred as the survey could be emotionally triggering for some students, so some may have been unwilling to participate in the survey. In addition there were some students under the age of 18 that were not given permission from a parent or guardian to take part in this study and could therefore not participate. Because of the sensitivity of the subject, all participants were informed that they did not have to complete the survey if it caused them discomfort, and all participants were given the contact information of the school counselor following survey completion.

Development of the Youth Gun Violence and Voice Survey

After a thorough review of the literature, to understand the youth perspective of the classroom experience following the homicide of a schoolmate, it was determined

necessary to develop an instrument as there are no available instruments to fulfill this need. A crucial issue is determining the knowledge, skills, attitudes, intentions, and other attributes that the instrument seeks to reveal (Messick, 1995) and the constructs for this survey were informed by the trauma-informed approach outlined by the Substance Abuse and Mental Health Service Administration (SAMHSA) and the National Child Traumatic Stress Network's (NCTSN) elements of a trauma-informed school system.

Trauma-Informed Care

Trauma is an emotional response to a traumatic event like an accident, rape, or natural disaster (APA, 2018) and, according to SAMHSA (2018), a program, organization, or system with a trauma-informed approach adheres to six principles which are (a) safety; (b) trustworthiness and transparency; (c) peer support; (d) collaboration and mutuality; (e) empowerment, Voice and Choice; and (f) cultural, historical, and gender issues. The trauma-informed approach is not a specific treatment or intervention, rather a frame of mind which should be employed in the classroom. Specifically, trauma-informed schools identify and assess traumatic stress, address and treat such stress, and teach trauma education and awareness while creating a trauma-informed learning environment (The National Child Traumatic Stress Network, 2017). The Substance Abuse and Mental Health Service Administration specifies four components of the trauma-informed approach which are (a) realizing the impact of trauma and understanding potential for recovery; (b) recognizing signs and symptoms of trauma; (c) responding by integrating knowledge about trauma into procedures, practice, and policies; (d) avoiding re-traumatization.

Trauma-informed constructs

All items in the Youth Gun Violence and Voice Survey were connected to selected principles outlined in SAMHSA's trauma-informed approach and the National Child Traumatic Stress Network (NCTSN)'s essential elements of a trauma-informed school system. The principles of the trauma-informed approach outlined by SAMHSA and the NCTSN that were used in this survey were determined by use of the table of specifications that was compiled by the subject matter experts in phase one of the study. Items in this survey were initially formulated to have a clear link to constructs found in these combined principles, as it is important to relate the variables, research questions, and sample items so that readers can determine how data collection connects to the variables and questions (Creswell, 2014). These specific constructs were chosen for the development of this survey, so that the instrument can be employed to assess the appropriateness of the approach of a classroom teacher when interacting with a classroom of youth who have experienced the traumatic loss of a schoolmate.

Retrieval

There are various concepts that were considered in the development of the Youth Gun Violence and Voice Survey. It was important to ensure that the item statements and words utilized in the survey were clear so that students did not feel confused. Multiple modifications to the survey were made following each phase of this study and this evolution is discussed in chapter four. Retrieval was imperative as students were asked about an event from the past. Groves et al. (2009) advises to provide clues which can trigger information recall. The first three questions of the survey were used both to screen the participant and prompt the memory of the loss of a peer due to homicide. The first

question asked if one of their schoolmates was killed, the second question asks if a teacher or coach discussed this student's death with the student, and the third question asks at which point(s) in the day was the death discussed (i.e., before or after class, during class, outside of the school day, etc.). The National Crime Victimization Survey (NCVS) asks participants to use a six-month frame when reporting crimes to balance reporting accuracy and productivity of interviews, though accuracy of reporting would be higher if the questions were asked within two months (Groves et al., 2009). Though the NCVS allowed for collecting data within a six-month time frame, the researcher sought permission to implement the survey within two months following the homicide of a student.

Survey items

The subsequent five questions were *Yes* and *No* questions with an option for *Not Sure*, the first three of which are necessary to identify and assess traumatic stress, which is a core area of a trauma-informed school system (NCTSN, 2017). If students do have a teacher or coach that discussed the death of a student with them, the participant is asked to think of the first teacher or coach he or she remembers discussing the death and answer initial questions on whether this person spoke directly to the class, to a small group of students, or privately with the student. This assisted in gathering concise data regarding the actions of one teacher or coach, attempting to avoid the combination of multiple teachers' and staff reactions which could skew data. Additionally, the student was asked if they were offered the assistance of a counselor or school professional and if they requested to speak to a professional on their own.

The subsequent 19 questions of the initial survey form use a 7-point Likert scale with the following options: *Strongly Agree, Agree, Somewhat Agree, Neutral, Somewhat Disagree, Disagree, Strongly Disagree*. Scales use a series of gradation for measurement purposes, and the Likert scale is the most widely used scale (McMillan, 2012). According to Krosnick and Fabrigar (1997), the 7-point Likert scale is the best compromise in increasing reliability. Attitude questions' guidelines provided by Sudman and Bradburn (1982) include avoiding double-barreled questions and measuring the strength of the attitude, which is accomplished with use of the Likert scale.

All items in the initial Youth Gun Violence and Voice Survey (Appendix A) are connected to principles outlined by SAMHSA's trauma-informed approach and the NCTSN's essential elements of a trauma-informed school system. Constructs were included with a minimum of three subject experts at 80% confidence intervals to remain in the survey. Questions from the survey included: "I feel good about how my teacher/coach handled discussing the death of my schoolmate." (i.e., Addressing and Treating Traumatic Stress); "I think my teacher understands how I feel regarding the death of my schoolmate" (i.e., Social/Emotional Skills and Wellness); "I have advice/ideas for my teacher about how to speak to students when one of our schoolmates is killed" (i.e., Empowerment, Voice and Choice); and, "I know a teacher that I can talk to about the death of my schoolmate" (i.e., Trustworthiness and Transparency). The final question was an open-ended question which provided youth the opportunity to share his or her own ideas regarding how a teacher should best handle the homicide of a peer, which is linked to the SAMHSA principal of Empowerment, Voice and Choice.

This instrument is intended to assess the youth perspective of the classroom experience following the loss of a schoolmate to gun violence and the expected audience for the interpretation of the instrument's results is for all school staff, inclusive of classroom, administrative, and school district personnel.

Data Collection

Survey Methodology

The purpose of survey research is to generalize from a sample to a general population to make inferences regarding a behavior, characteristic, or attitude of a population (Creswell, 2014). Surveys go beyond simply gathering information, they are a systematic method of gathering information for the purpose of constructing quantitative descriptors (Groves et al., 2009). Surveys are a common method used in the social sciences to understand societal workings and measure attitudes and opinions of people. There are a variety of surveys that are used by the government, such as the National Crime Victimization Survey and the National Assessment of Education Progress, along with an assortment of K-12 student perception surveys used in various educational settings. The use of surveys is extensive due to their efficiency in obtaining information about a wide range of research problems (McMillan, 2012).

Constructing a new survey is necessary when, after a thorough review of the literature, it can be determined that no existing instrument is available or can be modified. Collecting data on the youth perspective of the classroom experience following the homicide of a schoolmate is not present in the literature, thus a new instrument needed to be constructed so as to understand the perspective of youth, which is the purpose of this study. The process of constructing a survey instrument requires development of the

instrument and demonstrated validation and reliability (Tavakol & Dennick, 2011), which should be evidenced throughout its construction.

Data Collection Methods

Cognitive interviewing follows a "protocol analysis" technique by Ericsson and Simon (1980, 1984) which is when subjects think aloud and their verbalizations are recorded as they work through their thought processes. Validity evidence based on cognitive response processes were established through cognitive interviews, in which the interviewer administered survey items in individual interviews and probed participants to learn how the respondents comprehended the items, thus better understanding how they formulated their answers (AERA, 2014; Beatty & Willis, 2007; Groves et al., 2009). Cognitive interviewing included the use of concurrent and retrospective think-alouds, in which participants verbalized their thoughts while they answered a question in addition to describing how they arrived at a particular answer. This was important as the verbalized thoughts of participants permitted the researcher to determine if the respondents were interpreting the items on the instrument the way the survey design intends. Moreover, probing was employed by means of follow-up questions and asking confidence ratings which provided additional insight to the researcher. Though some researchers note considerable variation across interviewers and a limit in evidence to the improvement of survey data (Beatty, 2004; Forsyth, Rothgeb, & Willis, 2004), cognitive interviews are widely used to help alleviate confusion in survey questions and assist in establishing validity evidence (AERA, 2014).

Following IRB approval (IRB-18-0348) and approval from the Miami-Dade County Public Schools (M-DCPS) Research Review Committee, the researcher worked

with the head of Crisis Management at M-DCPS to be connected to school principals following the loss of a student to homicide. Data collection methods varied slightly as they were dependent upon the administration of each school site regarding where and when the researcher could collect data. Once permission had been secured from the school site by email, the researcher then met with administrative staff to further explain the study. Following this step, the administrator assigned a staff person to assist the researcher to recruit students from elective courses that were willing to participate in the survey. This process included an explanation of the research to youth, followed by distributing a parental consent form and a child consent form.

Due to the nature of this research, the survey was administered to students who had been affected by gun violence within the last six months. The specific period of six months is in line with the National Crime Victimization Survey (NCVS) in which respondents are asked to report crimes they have experienced in the previous six months. Also early studies have shown that there is a drop-off in accuracy of reporting when participants are asked to remember events more than six months ago (Groves et al., 2009), so this survey instrument requires that the experience of the loss of a schoolmate was within the previous six months.

Exploratory factor analysis is used when the researcher seeks to understand the structure of correlations among measured variables and analyze which variables should be grouped together into descriptive categories (Yong & Pearce, 2013). It is recommended that the total number of measured variables included should be at least three to five times the number of expected common factors (Fabrigar, Wegener, MacCallum, & Strahan, 1999). The survey responses were collected and an exploratory

factor analysis with a principal axis factoring extraction method and a varimax rotation was conducted to discover how many factors are present in the pilot study and full-scale study phase. The principal axis factoring method is used to produce factors and the varimax rotation minimizes the number of variables that have high loadings on each factor and works to make small loadings even smaller (Yong & Pearce, 2013). By incorporating the results of exploratory factor analysis, the number of items was adjusted.

The Kaiser-Meyer-Olkin measure was run to determine sampling adequacy and determine the number of factors to retain (Yong & Pierce, 2013). This measure gauged how suitable the correlations of the sample size were for factor analysis. A value of .70 or higher was necessary to ensure that there were enough responses collected to determine if there were factors present. If there was not a value of .70, it would have been necessary to have a larger sample size.

Cronbach's alpha is the most commonly used objective measure of reliability (Cortina, 1993; Tavakol & Dennick, 2010). Expressed as a number between 0 and 1, Cronbach's alpha is used to provide a measure of the internal consistency of a scale. A value of 0.70 or above is typically accepted as adequate (Cortina, 1993), with a maximum of 0.90 (Tavakol & Dennick, 2011). This test was run to evidence reliability on the same data set in SPSS (AERA, 2014).

Procedure

This research design provides reliability evidence and three sources of validity evidence: test content (phase one), cognitive response process (phase two), and the structural aspect of validity (phases three and four). This mixed methods study incorporates data collected through subject matter experts (phase one) and cognitive

interviews (phase two) with students. These contributions by both professionals and youth developed the groundwork for creating and refining the items on the instrument. Following the incorporation of feedback from both phases, the researcher conducted a pilot study (phase three) to assist in determining the format of the assessment question clarity, variance in responses, and internal validation of items. The final segment (phase four) was to recruit participants at a different school site to complete the survey and employ factor analysis with a larger sample, analyze the results, and make survey adjustments.

As stated, the research was conducted in a four-phase process as shown in Table 1. Phase one established validity evidence based on test content. Phase two established validity evidence based on cognitive response processes. Phase three was a pilot study of the instrument to assess the structural aspect of validity and reliability with a small sample, and phase four employed a larger sample to provide reliability and the structural aspect of validity.

Table 1

Research Design

Phase/ Types of Validity	Phase 1: Test Content	Phase 2: Cognitive Response Process	Phase 3: Pilot Study	Phase 4: Full-Scale Study
Data Collection Method	Qualitative	Qualitative	Quantitative	Quantitative
Sample	9 subject matter experts	11 students	75 students	200 students
Data Analysis	Content Analysis	Content Analysis	Exploratory Factor Analysis and Cronbach's Alpha	Exploratory Factor Analysis and Cronbach's Alpha

Phase One

An essential question when evidencing validity based on test content is to determine if the items measure the content the research wants to measure (Newman & Pineda, 2013). In other words, validity evidence assessed using test content is "logical or empirical analyses of the adequacy with which the test content represents the content domain and of the relevance of the content domain to the proposed interpretation of test scores" (AERA, 2014, p.14). To provide such evidence, subject matter experts gauged the alignment of items to the constructs of the assessment, an iterative process which incorporated both qualitative and quantitative feedback from experts through use of a table of specifications.

A table of specifications (ToS) is a "set of procedures that attempts to align a set of items, tasks, or evidence with a set of concepts that are to be assessed" (Newman & Pineda, 2013, p.4). In the creation of a survey instrument, such a process provides

validity evidence based on test content and incorporates the use of triangulation, expert debriefing, and focus group interviews. Validity evidence derived from test content was established by employing the knowledge of nine subject matter experts (AERA, 2014) who were chosen because of their knowledge of community violence, the school system, curriculum, and the mental health aspect regarding the loss of a schoolmate.

These experts were all contacted by email (Appendix B) to explain the purpose and process of reviewing the table of specifications which included an excel spreadsheet that contained a table of specifications, with the items in randomized order. The researcher followed this email with a phone call and additionally asked for the feedback to be given in one month. The list of items (evidence) was in the first column on the left side of the document and the first row listed all the SAMHSA and NCTSN principles. The researcher left room for feedback both on the items and the principles. Following the items listed in the first column, a row at the bottom of the document was added asking for the percent to which the items estimate the concept (Newman & Pineda, 2013). The last column of the document left space for feedback regarding a specific item. The researcher additionally asked seven short answer questions regarding the principles and if there were any potentially missing items or concepts that the subject matter expert deemed vital to this survey.

Phase Two

Cognitive testing of questions has become a staple in survey development and less than ten interviewers are needed to identify important issues with comprehension or response formation (Groves et al., 2009). In this study, cognitive interviews were conducted with 11 students who had lost a schoolmate to gun violence to help determine

understanding of the survey items. Students were recruited through after-school programing and by directly contacting the principal of a high school that had lost a student to gun violence in recent months. The researcher met with two students at the location of the after-school program and the other nine students at their school site. The researcher conducted a one-on-one recorded interview in which the participant completed the entirety of the survey with the researcher. Participants answered each question in a concurrent think-aloud with probing questions made by the researcher to follow-up on statements that were unclear. With some participants, a retrospective think-aloud was used, so that the student could describe how they arrived at their answer. The verbalized thoughts of the participant allowed the researcher to help determine if the respondent was interpreting the items on the instrument the way the designer intended by observing body language and listening for any verbal cues of doubt or confusion regarding items on the survey.

Through use of cognitive interviews, the researcher determined if the language was understandable for the target population and if the statements were clear, so that it could be determined if the questions were appropriate for the scope of the instrument (Groves et al., 2009; Willis, 2005). The recorded cognitive interviews were conducted following the revisions made to the instrument, which was based on the feedback from the subject matter experts in phase one. Feedback from this second phase was used to further revise the instrument and avoid response error (Willis, 2005).

Phase Three

Following the incorporation of feedback from subject matter experts and results from the cognitive interviews, the researcher next conducted a pilot of the instrument.

The Youth Gun Violence and Voice Survey consists of self-administered questions which include visual elements, presentation of directions, and one question being asked at a time. These guidelines by Jenkins and Dillman (1997) are important to assist in evidencing the validity of this survey instrument, therefore it was important that the researcher gave explicit directions regarding how to answer survey questions in each section and carefully reviewed the survey with participants before having them begin to complete it. This pilot survey was completed by 75 high school students that had lost a schoolmate to gun violence in the last six months. The sample included students from a Miami-Dade County public school and, with the permission of the school principal, the researcher recruited students with the help of a counselor. Students were presented with a synopsis of the research and given consent forms to complete. The pilot study was completed one week later.

The data that were collected from this third phase were important to establish content validity of scores on the instrument and to improve format, scales, and items (Creswell, 2014). This sample validation helped determine question clarity, questionnaire format, variance in responses, and internal validation through exploratory factor analysis. Conducting a pilot study was essential so that the survey could be modified following exploratory factor analysis and examining reliability by utilizing Cronbach's alpha.

Phase Four

Following the pilot study, revisions were made to the survey and, subsequently, the survey instrument was distributed to a larger sample size. Following modifications that resulted after the pilot phase, there were 18 items in the instrument, therefore, 180 surveys was the minimum to be completed, as factor analysis requires at least 10

participants per survey to provide the evidence for structural validity (Institute for Digital Research and Education, n.d.). The minimum of 180 surveys includes only valid surveys in which the participant remembered an interaction with his or her teacher or coach and could therefore complete the survey in its entirety. (The initial nine survey screening items were noted as descriptive statistics.) Once the pilot study concluded and revisions were made, the final sample was recruited at a different school site that had experienced the homicide of a student in the previous six months. The phase 4 sample did not include any students from the cognitive interviews or pilot study phase. Access to this information came from the M-DCPS Crisis Management team, and the same data collection methods and procedures were used as in the pilot study phase.

According to the American Educational Research Association (2014), internal structure evidence can be established by factor analysis, which was utilized with the data collected in this final phase of the research and evidenced how items on the instrument were related to each other. Validity evidence is essential to show that the scores are meaningful indicators to the construct being measured (Creswell & Clark, 2011).

Data Analysis Procedures

This study used exploratory sequential mixed methods design, in which the findings from the qualitative data in phases one and two were used to inform the quantitative data phases (phases three and four).

Phase One

Feedback from subject matter experts determined if the scores from the instrument would adequately reflect what the survey intends to measure. As there were nine subject matter experts that provided feedback, it was unlikely that all experts would

rate 100% agreement of the representativeness of content, therefore 80% was considered sufficient for confidence in the instrument in terms of expert judge validity and content (Newman & Pineda, 2013). If the expert did not state 100% agreement, the researcher requested feedback in the allotted space for further analysis. Once the table of specifications was completed and returned by all subject matter experts, the researcher tallied the degrees of agreement and recorded it on a master excel spread sheet (Appendix C). Additionally, the researcher analyzed the qualitative feedback for modification of the instrument to improve estimation of the concepts. Once adjustments had been made, the researcher returned the instrument along with an updated table of specifications and requested final feedback from the subject matter experts.

Phase Two

Validity evidence based on cognitive response processes was established through cognitive interviews. While conducting the cognitive interviews, it was of vital importance to take notes and record the interviews while administering the survey. These notes included observations regarding how participants constructed their answers, explanations on how they interpreted the meaning of the questions, noted report of difficulty, and anything else of note that could elucidate broader circumstances that their answers were drawn from (Beatty & Willis, 2007). Use of probing determined confidence ratings and comprehension, and asking participants to paraphrase was part of the process.

While the students spoke, the researcher made note of body language and speech to determine if any of the vocabulary seemed difficult. The researcher also observed participants if there was a notable hesitation in recall or an overly hasty response time. Such observations assisted the researcher in determining if the participants' thoughts

were in line with what the item intended to measure. At the end of the interview, the researcher asked insight from the participant regarding the instrument, items, the scale being used, or any other comments that could assist in the validation of the survey. This allowed the participant to share additional feedback to better inform the researcher. Due to the sensitivity of the subject, the researcher also purposely created space for students to share their stories and emotions and their voices were documented and are expanded upon in chapter four.

Phase Three

The pilot study phase of the research analyzed question clarity, questionnaire format, variance in responses, and internal validation through exploratory factor analysis. Exploratory factor analysis with a principal axis factoring extraction method was conducted with the 50 valid survey responses to analyze the data and to see if the number of variables needed to be reduced. (The 25 surveys in which students did not recall a teacher mentioning the death of their schoolmate were not included in analysis.) To indicate internal consistency reliability, Cronbach's alpha was employed. As Cronbach's alpha can be affected by the length of the test, if the length is too short, more items testing the same concept will need to be added (Tavakol & Dennick, 2011).

Phase Four

The final phase of this research study established validity evidence based on internal structure in addition to evidence of reliability (AERA, 2014). Following modifications from phase three, the analysis of the final phase included exploratory factor analysis with a principal axis factoring extraction method with a varimax rotation, which was conducted in SPSS. The analysis of these data assisted the researcher in discovering

how many factors emerged from the survey items. Additionally, Cronbach's alpha was used to provide a measure of internal consistency and to determine if items needed to be added, whereas some needed to be revised or discarded due to low correlation (Tavakol & Dennick, 2011).

Summary

This chapter is a description of the methods that were used in this study. It includes the research questions, pertinent aspects of validity and reliability, research design, descriptions of the samples, data collection procedures, and data analysis procedures. The study employed an exploratory sequential mixed methods design intended to validate the survey instrument.

CHAPTER IV

RESULTS

The purpose of this study was to develop and validate a survey instrument that measures the youth perspective of the classroom experience following the loss of a schoolmate due to gun violence. Data were collected and analyzed to answer the study's two research questions:

1. What is the reliability evidence of the Youth Gun Violence and Voice Survey?

2. What is the validity evidence of the Youth Gun Violence and Voice Survey?

This study used an exploratory sequential mixed methods design, in which the findings from the qualitative data were used for the subsequent quantitative data phases. The results presented as follows are organized in order of the four phases of research conducted.

Phase One

Phase one collected qualitative data to establish validity evidence based on test content, which determined if the inferences of the score from the instrument appropriately reflect what it is intended to measure (AERA, APA, & NCME, 2014).

The nine subject matter experts were first asked to review the principles outlined by the Substance Abuse and Mental Health Service Administration's (SAMHSA) trauma-informed approach and the National Child Traumatic Stress Network's elements of a trauma-informed school system. The subject matter experts were asked to determine which item (or items) connected to which principle (or principles), include a response confidence percentage and to provide feedback on the survey items. Their results are

compiled in Appendix C1. The second tab of the spreadsheet included six questions to be answered in short form shown in Appendix C2.

A minimum of three items that had at least three (out of nine) subject matter experts connect it to a principle at a minimum of 80% response confidence were classified as evidence of correlation. The first principle, Safety, was related to one item only, stating that the way the teacher talked about the death made the student feel comfortable. This principle did not elicit any comments from the subject matter experts. The second, Trustworthiness and Transparency, was connected to ten of the twenty items in this survey. Collaboration and Mutuality was connected to three items. These included being informed that the student could speak with a counselor or other school professional (item five) and the final two questions in the survey which sought the student voice by asking if the student has advice for their teacher and what the teacher could do to make the student feel more comfortable talking about the death of their schoolmate.

The fifth principle, Empowerment, Voice and Choice, correlated strongly with nine items, as six of the nine items had a minimum of five subject matter experts that tied the items to this principle with a 100% confidence response rate. Notably, Item 19, having advice for their teacher about how to speak to students after their classmate was killed, was responded to by all with a 100% confidence response rate.

Identifying and Assessing Traumatic Stress was correlated with two items and four subject matter experts had 100% confidence response rate with item 12, “I think my teacher helped me emotionally deal with the death of my schoolmate”. Three items connected to Addressing and Treating Traumatic Stress and three items connected to Teaching Trauma Education and Awareness. The tenth principle was Having

Partnerships with Students and Families and was not found to correlate with any of the items. The principles Peer Support and Cultural, Historical, and Gender Issues did not achieve the minimum of three subject matter experts at a minimum of 80% confidence rate to correlate with any items.

Creating a Trauma-Informed Learning Environment was found to correlate to 80% of the survey items (16 out of 20). This principle relates to social-emotional skills and wellness (NCTSN, n.d.). As this principle connected to over 75% of all survey items, it appeared to be an overarching theme, with potential for encompassing many of the principles. For example, Empowerment, Voice and Choice is a principle that would likely occur within a trauma-informed learning environment, therefore, it can be considered that some principles overlap and interconnect with one another.

The subsequent five principles did not correlate to any items in the survey: (a) Being Culturally Responsive, (b) Integrating Emergency Management and Crisis Response, (c) Understanding and Addressing Staff Self-Care and Secondary Traumatic Stress, (d) Evaluating and Revising School Discipline Policies and Practices, and, (e) Collaborating Across Systems and Establishing Community Partnerships.

In review of the subject matter experts' overall correlations to the sixteen principles, a minimum of three items tied to one principle at a minimum of 80% confidence rate were considered to be constructs of this survey. In this first phase of research the following principles were determined to be constructs of the Youth Gun Violence and Voice Survey: (a) Trustworthiness and Transparency, (b) Collaboration and Mutuality, (c) Empowerment, Voice and Choice, (d) Addressing and Treating Traumatic Stress, (e) Teaching Trauma Education and Awareness; and (f) Creating a Trauma-

Informed Learning Environment (Social-Emotional Skills and Wellness). Table 2 below shows the resulting constructs and number of survey items that were deemed related to the construct.

Table 2

Table of Specifications' Principle to Item Correlation

	Trust-worthiness	Collaboration	Empower-ment	Traumatic Stress	Trauma Education	Learning Environment
No. of items	10	3	9	3	3	16
Confidence rate	100%	100%	100%	100%	100%	100%

In addition to connecting items to principles to determine the constructs of this survey, comments were left by the subject matter experts concerning the items themselves. Regarding item one, "Teacher discussed death with class", one subject matter asked for clarification regarding the discussion and whether it encompassed youth participation in the discussion. It was additionally noted by another subject matter expert that this item does not ask if youth wanted to discuss the death, nor what the discussion entailed or its outcome.

Item two, "Teacher discussed death with small group", resulted in one subject matter expert stating that it doesn't cover the discussion details or outcomes (also noted for items one and three) and another stated that it was similar to the first item and third item "Teacher discussed death with individual student". One subject matter expert noted that item seven, "I feel that my teacher handled discussing the death of my schoolmate well", could be reframed to assess how the student felt after the conversation. Items nine

and ten were stated by one subject matter expert to be appropriate items that highlight that the students had choice.

Item 11, “My teacher seemed to care about the death of my schoolmate, resulted in a comment asking what the phrase “seemed to care” exactly means and whether this entailed a lukewarm or strong affirmation. A similar remark was made regarding item 12, “I think my teacher helped me emotionally deal with the death of my schoolmate”, which questioned how the word “think” is defined and will be interpreted by youth.

Some subject matter experts asked if someone else, such as a mental health professional or counselor should discuss the death of a student, as item 14 reads, “In general, I think teachers should not talk about the death of a student”. The last item, “If my teacher said or did the following, I would be more comfortable talking about the death of my classmate” was noted by two subject matter experts that this allows for the student perspective and will provide important insight.

In addition to feedback on specific items in this survey, subject matter experts were also asked to respond to six short answer questions. These inquiries asked if the principles utilized were sufficient to address the youth perspective, if there were any missing items or missing principles, were there any unclear items and, lastly, if were there items that should be removed.

One subject matter expert shared that the principles seemed limited in scope when considering cultural diversity and trauma. It was also noted that the National Child Traumatic Stress Network’s elements of a trauma-informed school system applied more appropriately to a school setting than the Substance Abuse and Mental Health Service Administration’s trauma-informed approach. Regarding the potential additional

principles, the only noted response was that there could be questions incorporating both students and teachers, rather than adhering strictly to the student perspective.

In response to the question asking if there were additional items that should be added to the survey, multiple subject matter experts proposed additional items. Two subject matter experts noted that it would be important to inquire whether both the students and teachers feel they are in a safe/engaging environment in school after a tragedy.

Some items were found to be repetitive; three subject matter experts stated that duplicative items should be removed. One subject matter expert advised to clarify the purpose of the student asking if he or she would like to see a counselor, coach or school administrator and to add the reason as it appeared unclear. Another responded advised to add an item to assess the impact secondary traumatic stress has on youth and to elicit feedback as per the youth perspective of the support of administration and school staff. One subject matter expert shared that the two principles, Evaluating and Revising School Discipline Policies and Practices and Collaborations Across Systems and Establishing Community Partnerships, are valuable principles but seemed detached from survey.

The nine subject matter experts were also given the opportunity to provide general feedback on the survey overall. Reponses included a commentary on the principal of Safety, asking if it is intended to mean physical safety, emotional safety, or both? One subject matter expert commented that the survey is focused on the classroom experience, but items refer to teacher response (not peers, staff, etc.) and clarification is needed to state that the focus is the interaction of teacher and student. Three subject matter experts shared that the questions should be clear and simple to limit confusion of students that

may have lower literacy skills. Lastly, several respondents noted that they are interested in the results of this survey and while the questions assess the youth experience of death and violence in the classroom it would be beneficial for a subsequent survey for teachers and school administrators to assess abilities to be trauma-informed.

Analysis of the feedback of the nine subject matter experts resulted in the researcher making multiple modifications to the Youth Gun Violence and Voice Survey. The survey commenced with three questions to confirm that in the last six months, the student knew a schoolmate was a victim of gun violence and died and that at least one classroom teacher discussed this student's death with the student and/or class. The third question asked when the teacher discussed the student's death and this question was added to assist in recalling the interactions with the teacher following the homicide of the schoolmate. These initial three questions were not part of the table of specifications as they were screening questions. The subsequent five questions were included in the survey to assist with the recall of the event as Groves et al. (2009) advises to provide clues which can trigger information recall. These five items utilized the options of *Yes*, *No*, or *Not Sure*, the second portion of the survey included asked with whom and when the teacher discussed the death. Participants were also asked if he or she asked their teachers to see a counselor, coach, or another school administrator to discuss the death of my schoolmate or if that option was offered to students. All items were tied to a minimum of one construct and were therefore maintained in the updated version of the survey.

Due to the feedback of subject matter experts, the researcher determined it was important to clarify the student-teacher relationship being the central purpose of this study. To support the reliability of the participants' answers, the second set of questions

for youth included directions for participants to think of the *first* teacher that he or she remembers discussed the student's death. This was done so that youth would not be confused if they had interactions with multiple teachers and would therefore have potentially different perspectives on the experience, resulting in conflicting answers.

Following these five questions, the next 17 items were presented in the first person with a seven point Likert Scale for responses. In addition to the content of the original items reviewed by the subject matter experts and utilizing their feedback, the researcher added four additional items to the survey: (a) My teacher provides and environment that makes me feel safe, (b) My teacher gave me coping strategies in class, (c) I feel like my teacher is stressed about the death of my classmate, and (d) I feel that my teacher is open to feedback from me regarding how the death of my schoolmate is handled in class. The final item was presented as a short answer question, allowing participants the opportunity to share their perspective "If my teacher said of did the following, I would be more comfortable talking about the death of my schoolmate". Once the survey was updated by the researcher, it was sent to all nine subject matter experts for final feedback. All feedback received was positive and there were no additional comments or modifications suggested. The updated survey following phase one feedback can be found in Appendix D.

Phase Two

Phase two was a qualitative phase employed to establish validity evidence based on response processes by utilizing the cognitive interview process. This allowed the researcher to help determine if participants would interpret the items in the manner the

researcher intended (AERA, 2014; Groves et al., 2011; Messick, 1995) to garner the perspective of youth who have lost a schoolmate to gun violence.

Eleven high school youth from Miami-Dade County participated in the cognitive interview phase, which was conducted one-on-one with the researcher. Nine of the students were male, the remaining two were female. Additional demographics were not collected, though each student was asked if they understood the requested demographic information at the end of the survey. At one school site, the school administrator had selected a coach to initially explain the project to all students on their team and interested students were given printed copies of the parental and child consent forms. The researcher came to the school the following week to further explain the research to the team and do the cognitive surveys. At this school, eight students completed the cognitive interview in a private classroom over the course of two days.

An additional two students completed the cognitive interview in a private office at a local nonprofit during afterschool programming. The researcher had reached out to the executive director who asked her students directly if they were interested in participating. These two students were given the parental and child consent forms to complete and the researcher came to the site to do the cognitive interviews with both students after school. The researcher had also reached out to a nonprofit alternative school and one adult student completed the cognitive interview after she asked the researcher to provide more information regarding the purpose of the survey. All students were explained the purpose of a cognitive survey and were asked to voice their thoughts audibly as they considered the item and their response. All students agreed to being

recorded and were provided a paper copy of the updated Youth Gun Youth and Voice Survey.

In response to the first item, three participants were not initially sure if the death of their schoolmate had happened within the last sixth months, though the male student had been killed less than three months before the cognitive interviews were conducted. One participant first stated no and shared, “One of my family members was. And I was almost a victim.” This participant then shared that he didn’t know the student that had been killed for a long time, so the researcher clarified that the student could still complete the cognitive interview even if there had not been a close relationship with the deceased. Though all three students who initially responded *No* or *Not Sure* remembered the death when prodded for their thoughts by the researcher, they could not immediately pinpoint in which month it had occurred. This showed the importance of memory retrieval and that, if not prodded by a researcher or subsequent items, not all students may immediately recall the incident.

The second item, which served to screen participants, stated “At least one of my classroom teachers discussed this student’s death with me and/or my classmates”. Six students immediately stated yes, two participants initially responded no, and three respondents were unsure. This second item read, “*At least one* of my classroom teachers discussed this student’s death with me and/or my classmates”. Upon clarification by the researcher that the word “discussion” could also mean a mention of the student’s death and did not imply that there was a long conversation, all students stated that a teacher at least mentioned the death of the student. Regarding the two participants that initially stated no, after prodding by the researcher to think through each of their teachers, one

student minimally recalled a mention of the death by a classroom teacher and the other students remembered his coach discussing the death at a team meeting. In the third item asking what time of day the discussion of the death occurred, five students chose *During class*, two responded *After class*, and the remaining four students selected *Not sure* or provided multiple responses orally. During these initial three items, it was clear to the researcher that multiple students interpreted their coach as a teacher, some of whom had a coach that was also a classroom teacher as well. The researcher determined that the concept of "teacher" would include both a classroom teacher, afterschool coach, or a classroom teacher that was also a coach and these modifications would be made before the pilot study in phase three.

Following these initial items, the next section of the survey included five questions with *Yes, No,* and *Not Sure* response options. The first three items asked if the teacher's discussion of the student death occurred with the entire class, small group setting or individually. Only one student stated that there was no discussion or mention of the death with the entire class as all other students stated there was. Additionally, four students stated there was a small group discussion and three students stated that they had individual discussions with their teacher or coach. In item four, there was no respondent that stated he or she requested to speak to a counselor, whereas ten of the eleven students stated that their teacher offered the opportunity for the student to speak to a counselor or another staff member (item five). In response to this item one participant stated, "She made it clear. They brought someone in from the school district. He didn't understand me or know the pain, he's there because it's his job."

The subsequent section of the survey consisted of 18 items in which respondents were instructed to respond with the number that corresponds to their degree of agreement, utilizing a Likert Scale (i.e., 1= *Strongly Agree* to 7=*Strongly Disagree*). In this section, it became apparent to the researcher that the students were sharing information on more than one teacher or coach. In item 8, "I think my teacher needs to be better prepared to deal with the death of a schoolmate", five of the participants did not make remarks about one teacher, rather, their thoughts were inclusive of multiple teachers. One participant stated, "Some teachers know what to do and some teachers have never been in that situation." Another student said, "All our coaches understand, they grew up in the same area". One student took an overall assessment stating that the four coaches, psychologist, principal, and staff "handled it pretty well and talked to us and tried to make us feel better". In total, six participants referred to multiple teachers and school staff, so it was determined that the survey would need to explicitly require the participant to refer to one interaction and that all responses should be based on the teacher or coach that the student had the most vivid memory of. The third item was modified to be a more concise fill in the blank question, "The teacher and/or coach that I remember saying the most about what he/she said about this student's death was _____". (This question was then modified to its final version for the full-scale study which further simplified the question; see appendix F.) Additionally, the directions for the subsequent two sections of the survey asked the student to "continue to think of the teacher or coach that was named in number three and to answer the following questions". This was done so that the student would have multiple reminders to complete the survey with one staff person in mind. If

not, the student could have difficulty in responding to an item if the student was considering multiple interactions and could therefore have multiple answers.

Item 11, “My teacher gave me coping strategies in class”, created some confusion for participants as three students asked the researcher what coping strategies were and one additional participant seemed unsure, but was then able to respond after the researcher explained the term. As this item resulted in confusion, the researcher determined that for the next phase “healthy ways to deal with grief” would be added to the item (Appendix E). In item 13, "I wanted to talk to my teacher about the death of my schoolmate”, not one participant chose *Agree* or *Strongly Agree* and only one participant selected *Somewhat Agree*. Conversely, in item 15, “In general, I think teachers should not talk about the death of a student”, all participants selected the range of *Strongly Disagree* to *Neutral* which evidences that students desire teachers to talk about the death of a student. Participant responses included, “Teachers should take time out from learning and address it”, “Teachers should be trained and be able to talk about it”, and, “If they care, they should. Don’t fake it, even if you’re a teacher.” One participant expressed his own contradictory thoughts, sharing, “You should talk about it to prepare students to deal with it, but you shouldn’t because it can make them uncomfortable and mad”.

Item 19, “I feel like my teacher is stressed about the death of my schoolmate”, resulted in multiple participants expressing that they are not able to state what is going on in the mind of a teacher. The interpretation of the word “stressed” varied as some participants responded with general emotional responses, with one participant sharing “I’m not sure about stressed”, and three participants explicitly stated that they cannot answer this question as “It’s not like I’m in that person’s head” and “I can’t say how

someone is feeling". Due to the variety in responses and ample feedback as per being unable to accurately respond to this item, the researcher determined that the item would need to be modified for the pilot study. This item was modified to "I can tell, due to my teacher's/coach's reaction to the death of my schoolmate, that my teacher/coach is stressed about the death."

Defining "safety" was discovered by the researcher to be an important modification to item 21, "My teacher provides a classroom environment that makes me feel safe", as the interpretation of "safety" varied greatly. Six participants considered safety to be physical and indicate to keeping one from harm. When referring to his coach, one participant shared, "That's why they keep us here late. We go home and are tired and are off the streets. He keeps us safe from violence." Four participants considered safety to be both physical and emotional protection with one participant stating, "Nothing happens to me mentally or physically". One participant explained safety through an emotional lens, expressing that "Safe means they understand you as you understand them. It's not a physical safe like being in danger". As a result of the variety in interpretations of the word safety, the researcher modified the item to read an "environment that makes me feel physically safe from harm" and added a supplementary item to address the additional connotations of the word safety. This added item reads, "My teacher/coach provides a 'safe space' that makes me feel safe to express my emotions and feelings if I want to."

Two participants asked for clarification on item 22, so the item was modified from "I feel that my teacher is open to feedback from me regarding how the death of my schoolmate is handled in class" to "I think that my teacher/coach would want to listen to my thoughts about how he/she handled the death of my schoolmate". This modification

was made to simplify the item and avoid confusion as to the meaning of the term "feedback". Following this section in which responses were provided by the participants in the form of a number, the final item in the survey was an open-ended question asking students to respond to the prompt: "If my teacher said or did the following, I would be more comfortable talking about the death of my schoolmate:" This prompt resulted in two students asking what the question referred to. Upon further prompting by the researcher, these participants expanded and said it was confusing and one participant asked whether the item is referring to the past questions. As this item was not clear, it was modified to the prompt: "My advice for my teacher/coach about how to handle the death of my schoolmate is to:" and was followed by five lines in which students can write down their thoughts or advice.

Throughout the cognitive interview process, the researcher both recorded and made notes so that additional concepts could be covered at the end of the survey. This was done to assist the researcher in making sure that the appropriate modifications were made to the survey in preparation for the upcoming pilot study and that common issues that arose during this process were noted for analysis. (See Appendix E for the updated survey.) At the conclusion of the survey, the researcher asked each student if there were any additional questions that they felt were important to add and three participants provided feedback. One participant shared that potentially asking students their level of comfort in talking about death before the survey began could be added. One student shared, that items about "opening up on how we feel about the teacher", and, "What other steps did you take for help or to talk?" could be added. The third participant shared that the survey had to do with the classroom experience, but "ask students how they feel, like,

how did you get yourself together and get back to school after something like that happened?". The researcher then asked students how completing the survey made them feel and six students responded to this prompt. Participants shared that it made them feel "more comfortable with it", "neutral", "honest", and "its feedback to make things better so it made me feel good in a way". One student shared, "I did this because what you said before, you're a person who sounds like you care…it was a little difficult to do and a little emotional". Another participant said that completing the survey "made me reminisce about what happened. How I picture him in my mind. When we talk we just be joking. I just seen him a couple days ago and … it was hard."

Phase Three

The third phase of this research study established validity evidence based on internal structure in addition to evidence of reliability (AERA, 2014). Following modifications from phase two, analysis included exploratory factor analysis with a principal axis factoring extraction method with a varimax rotation. Additionally, Cronbach's alpha was determined to provide a measure of internal consistency and evaluate which items may need to be added, revised or discarded due to low correlation (Tavakol & Dennick, 2011).

Seventy-five high school youth from a Miami-Dade County school participated in the pilot study. Participants were targeted by classroom, under the direction of the College Assistance Program advisor who reached out directly to teachers. Only elective classes were targeted, as per the request of the school administration. The researcher visited the school on two separate days to explain the purpose of the research to the three targeted classrooms and returned the following week to employ the survey (Appendix E).

The researcher experienced difficulty collecting consent forms from students under the age of 18. All but two students from the first two classrooms targeted stated that they wanted to participate and signed the student consent form. When the researcher returned to employ the survey, not one student had brought a signed parental consent form from either class. Both teachers also stated that they had forgotten to remind the students to bring the form and multiple students shared with the researcher that they had forgotten the signed consent form. The counselor then brought the researcher to additional elective courses that had larger amounts of 18-year-old students, which was also the age of the student who had been killed. For those that provided student and parental consent, the surveys were administered in small groups within each targeted classroom until 75 surveys were completed.

This collection of surveys occurred approximately four months following a student's homicide. Of these 75 surveys, 50 surveys were analyzed using SPSS as 25 participants stated that they had no recollection of a teacher or coach mentioning the death of their schoolmate and were therefore not included in the analysis. Of the 50 surveys, there were 27 male and 22 female student participants (one student did not select any gender identification). Sixty-seven point three percent of the participants were 18 years old and 83.7% of the participants were in their senior year of high school. 46% of participants identified as Black/African American and 32% identified as Hispanic/Latino. 6% of participants identified as both American Indian and Black/African American, 4% identified as Hispanic/Latino and White, and 2% identified as White.

When examining the overall Youth Gun Violence and Youth Voice Survey, the item that got the highest score was, "My teacher/coach seemed to care about the death of

my schoolmate" with a mean of 6.14 and standard deviation of 1.09. The item, "In general, I think teachers/coaches should not talk about the death of a student" had the lowest score of 2.52 and standard deviation of 1.542. Table 3 shows the descriptive statistics for the pilot study.

Table 3

Pilot Study Descriptive Statistics

Item	Mean	Std Dev
The way T/C talked about death made me comfortable	5.10	1.909
More than one T/C offered emotional support	4.69	1.981
T/C needs to be better prepared to deal with death	3.28	1.896
I know T/C that I can talk to	5.52	1.764
T/C seemed unsure of what to say	3.24	1.697
T/C talked about coping strategies	4.40	1.641
T/C seemed to care about death of schoolmate	6.14	1.088
Wanted to talk to T/C about the death	3.54	2.062
T/C helped me emotionally deal w/death	4.51	1.861
In gen., T/C should not talk about death of student	2.52	1.542
T/C understands how I feel	5.18	1.395
T/C provides a safe space to express my emotions	5.28	1.785
In gen., comfortable speaking w/ T/C about death	5.08	1.676
Feel good about how T/C handled discussing death	5.46	1.199
I can tell T/C stressed about death	4.16	1.683
T/C knows how to speak to the class about death	5.66	1.334
T/C provides environment that feels safe from harm	4.82	1.976
T/C would want to listen to my thoughts on how T/C handled discussion	4.98	1.732
I have advice for T/C how to speak to students about death	4.44	1.853

Cronbach's alpha was used to test reliability on the overall instrument and each individual construct. When the overall instrument was examined, Cronbach's alpha was initially .76, which indicated an adequate internal consistency. Upon closer examination

of the items, the researcher determined that item 8, “I think my teacher/coach needs to be better prepared to deal with the death of a schoolmate” and item 10, “My teacher/coach seemed unsure of what to say after the death of my schoolmate” should be reverse coded as they assess negative concepts of the teacher/coach. While item 15, “In general, I think teachers/coaches should not talk about the death of a student” was written negatively, it was deemed subjective as to whether it is positive or negative if staff talks about the death of a student, therefore it was not recoded. Additionally, it was determined that this item would be modified for the full-scale study for the purpose of clarity and was changed to, “I think teachers/coaches should talk about the death of a student”. Following the recoding of the two items, Cronbach’s alpha was .84 overall, indicating strong internal consistency. Each construct was then examined for internal consistency.

In the first construct, Creating a Trauma-Informed Learning Environment, Cronbach’s alpha was .81 on seven items. The second construct included a combination of factors 2 and 3, Trustworthiness and Transparency, and, Empowerment, Voice and Choice. Cronbach’s alpha was .74 on these seven items. The third construct, Addressing and Treating Traumatic Stress, included a grouping of factors four, five and six. Cronbach’s alpha for these five items was .3. Upon further examination, if the item “In general, I think teachers/coaches should not talk about the death of a student” were removed, Cronbach’s alpha would move from .3 to .46. Though reliability was not found to be adequate in the third construct (with or without the removal of this item) the researcher determined this item essential to garner important insight from youth and therefore determined not to delete it at the pilot stage of this study. (See Appendix F for the updated survey.)

Table 4

Inter Item Correlations for Pilot Study (N=50)

Item	Cronbach's Alpha if Item Deleted
The way T/C talked about death made me comfortable	.830
More than one T/C offered emotional support	.831
I know T/C that I can talk to	.822
T/C talked about coping strategies	.839
T/C seemed to care about death of schoolmate	.833
Wanted to talk to T/C about the death	.827
T/C helped me emotionally deal w/death	.820
In gen., T/C should not talk about death of student	.857
T/C understands how I feel	.831
T/C provides a safe space to express my emotions	.817
In gen., comfortable speaking w/ T/C about death	.815
Feel good about how T/C handled discussing death	.821
I can tell T/C stressed about death	.827
T/C knows how to speak to the class about death	.828
T/C provides environment that feels safe from harm	.817
T/C would want to listen to my thoughts on how T/C handled discussion	.829
I have advice for T/C how to speak to students about death	.842
I think my T/C needs to be better prepared to deal with death	.826
My T/C seemed unsure of what to say	.838

When exploratory factor analysis (EFA) with principal axis factoring extraction and varimax rotation was conducted on the 19-item pilot data, six factors emerged. Seven items loaded on factor 1, three items on factor 2, four items on factor 3, two items on factor 4, two items on factor 5, and one item on factor 6. The factor loadings presented in Table 5 shows that some items loaded strongly on some factors and nine of the items cross-loaded onto multiple factors. Factor loading of the fourth factor ranged from .33 to .93. The second factor loaded strongly with factor-loadings of .4 to .87. One item loaded on four factors, "I can tell, due to my teacher's/coach's reaction to the death of my schoolmate, that my teacher/coach is stressed about the death." The researcher then reviewed the cognitive interviews and noted that four students explicitly stated that they would be unable to know if their teacher was stressed or not, and therefore had difficulty answering this item. Additionally, when examining Cronbach's alpha, upon the removal of this item, Cronbach's alpha would increase from .3 to .36 for the third construct. Utilizing the information garnered from the cognitive interviews and EFA, along with re-examining reliability analysis, the researcher determined that this item be removed from the survey. See Table 5 for a complete summary of the exploratory factor analysis results.

The researcher compared the six factors to the principles derived from the table of specifications in phase one. There were seven principles that at least three subject matter experts tied to the item with an 80% confidence rate. These seven principles were then compared to the items that loaded on the six factors. Upon further analysis, the seven items in factor 1 related to the principal of Creating a Trauma-Informed Learning Environment. The seven items in factors 2 and 3 tied most closely to the two principles,

Trustworthiness and Transparency, and Empowerment, Voice and Choice. Factors 4, 5, and 6 encompassed five items related to Addressing and Treating Traumatic Stress.

Table 5

Summary of Exploratory Factor Analysis Results for Pilot Study (N = 50)

Construct	Item	Factor Loadings					
		1	2	3	4	5	6
Trauma-Informed Learning-Environment	More than one T/C offered emotional support	**.490**			.329		.442
	The way T/C talked about death made me comfortable	**.436**	.399				
	I know T/C that I can talk to	**.429**			.327	.304	
	T/C helped me emotionally deal w/death	**.538**		.398			
	T/C provides a safe space to express my emotions	**.719**					
	T/C provides environment that feels safe from harm	**.679**	.397				
	I think my teacher/coach needs to be better prepared to deal with the death of a schoolmate	**.610**					
Trustworthiness and Transparency / Empowerment, Voice and Choice	Wanted to talk to T/C about the death			**.758**			
	T/C understands how I feel			**.580**			
	T/C knows how to speak to the class about death		**.869**				
	In gen., comfortable speaking w/ T/C about death	.463	.497	**.538**			
	Feel good about how T/C handled discussing death	.389	**.674**				
	T/C would want to listen to my thoughts on how T/C handled discussion		**.443**				
	I have advice for T/C how to speak to students about death			**.679**			
Addressing and Treating Traumatic Stress	In gen., T/C should not talk about death of student					**.740**	
	I can tell T/C stressed about death			.327	**.533**	.465	.335
	T/C seemed to care about death of schoolmate				**.928**		
	T/C talked about coping strategies				.499	**.510**	
	My teacher/coach seemed unsure of what to say after the death of my schoolmate						**.624**

Note: Strongest factor loadings are bolded.

Phase Four

The final phase of this research study was to establish validity evidence based on internal structure as well as evidence of reliability (AERA, 2014). An exploratory factor analysis with a principal axis factor method with a varimax rotation was conducted in SPSS. Reliability was also examined in this phase using Cronbach's alpha on the overall instrument, and each construct was examined for internal consistency. The researcher used the 10:1 ratio rule (10 persons per item) (Yong & Pearce, 2013) and as 18 items were analyzed using SPSS, acquired the number of responses to examine for validity and reliability evidence. There were 200 participants in total and 181 surveys were analyzed in SPSS. The remaining 19 surveys were not analyzed as these participants responded *No* or *Not Sure* to the screening item, "At least one of my teachers and/or coaches mentioned or said something about this student's death to me or my class".

To recruit participants, the researcher was supported by the assistant principal who reached out to elective teachers to let them know that the researcher would be visiting their classes to explain the purpose of the survey. Like the pilot study, the researcher explained the purpose of the study to all selected classes and passed out paper student consent forms for interested participants to sign. Due to the difficulty of collecting signed parental consent forms in the pilot study, the researcher obtained IRB approval to amend the collection process to include an online consent form option for parents. Therefore, students were also asked to share their parent's email to receive an online link to complete the parental consent form, in addition to the paper option. This online option assisted considerably in collecting parental signatures, as over 50% of the consent forms were signed electronically.

Of the surveys collected, 136 were collected in paper format during class. Due to the Covid-19 pandemic and subsequent closure of all schools beginning March 16, 2020, an IRB amendment was approved to distribute the survey online to students that had not yet completed the survey in paper form. Therefore, the remaining 64 surveys were collected online using Qualtrics. The online link was sent to students who had already stated they had wanted to participate in the survey, but had not yet turned in a parental consent form. This online link was also shared with an additional three elective teachers who sent the survey link to their classes. Shifting to an online format resulted in a significantly lower number of students reporting that their schoolmate had been killed by gun violence within the last six months (57.9%). This is potentially because in the classroom, though students were asked to not discuss the survey, some students verbalized the name of the student that had been killed, likely prompting the memories of students.

Of the 176 participants that identified gender, 65.2% of the participants were female, 31.5% male, and .6% other. 35.9% of the respondents were in ninth grade, 30.9% were in tenth grade, 10.5% in eleventh grade, and 16.6% in twelfth grade. The median grade was tenth grade and the median age was 16 years. 24.3% of students identified as Black/African American and 51.9% identified as Hispanic/Latino. 3.9% identified as Hispanic, 3.3% identified as a combination of both Black/African American and Hispanic/Latino, and 2.2% identified as Other.

The Kaiser-Meyer-Olkin measure was run to determine sampling adequacy and determine the number of factors to retain (Yong & Pierce, 2013). This measure gauged

how suitable the correlations of the sample size are for factor analysis. This test resulted in a value of .89, therefore, sampling adequacy was met.

When examining the overall Youth Gun Violence and Youth Voice Survey, the item that got the highest score was, “My teacher/coach seemed to care about the death of my schoolmate” with a mean of 5.97 and standard deviation of 1.397. The item “My teacher/coach seemed unsure of what to say after the death of my schoolmate” had the lowest score of 3.43 and standard deviation of 1.805 and the item “I wanted to talk to my teacher/coach about the death of my schoolmate” had the second lowest score of 3.47 and standard deviation of 1.553. Table 6 shows the complete descriptive statistics for the full-scale study.

Table 6

Descriptive Statistics for Full-Scale Study (N = 181)

Item	Mean	Std. dev.
The way T/C talked about death made me comfortable	4.91	1.881
More than one T/C offered emotional support	4.53	1.881
T/C needs to be better prepared to deal with death	3.71	1.820
I know T/C that I can talk to	5.27	1.666
T/C seemed unsure of what to say	3.43	1.805
T/C talked about coping strategies	4.56	1.805
T/C seemed to care about death of schoolmate	5.97	1.397
Wanted to talk to T/C about the death	3.47	1.553
T/C helped me emotionally deal w/death	4.19	1.691
T/C should talk about death of student	4.68	1.719
T/C understands how I feel	4.66	1.636
T/C provides a safe space to express my emotions	5.15	1.580
I feel comfortable speaking w/ T/C about death	4.75	1.624
Feel good about how T/C handled discussing death	5.37	1.407
T/C knows how to speak to the class about death	5.32	1.624
T/C provides environment that feels safe from harm	4.99	1.583
T/C would want to listen to my thoughts on how T/C handled discussion	4.80	1.446
I have advice for T/C how to speak to students about death	3.94	1.711

Cronbach's alpha was used to test reliability on the overall instrument and each individual construct. When the overall instrument was examined, Cronbach's alpha was .86, which indicated a strong internal consistency. Though items 8 and 10 were initially recoded in the pilot study, upon further consideration, they were not recoded, as it was determined that they were potentially vague and not written negatively in a definitive manner. These items were noted to be questions that may work best as "Yes/No" questions and considerations such as exploratory factor analysis would assist in determining if they should be kept in the original form. Each construct was then examined for internal consistency.

In the first construct, Creating a Trauma-Informed Learning Environment, Cronbach's alpha was .88 on ten items. In the second construct, Trustworthiness and Transparency, Cronbach's alpha was .77 on five items, which was adequate. In the third construct, Empowerment, Voice and Choice, Cronbach's alpha for these five items was .57 and under the .7 threshold of being adequate. The researcher then reviewed these three items: "I have advice/ideas for my teacher/coach about how to speak to students when one of our schoolmates is killed", "My teacher/coach seemed unsure of what to say after the death of my schoolmate", and, "I think my teacher needs to be better prepared to deal with the death of a schoolmate". If these three items were to be removed, Cronbach's alpha would be .9 for the overall instrument.

Table 7

Inter Item Correlations for Full-Scale Study (N=181)

Item	Cronbach's Alpha if Item Deleted
The way T/C talked about death made me comfortable	.858
More than one T/C offered emotional support	.857
I know T/C that I can talk to	.854
T/C talked about coping strategies	.854
T/C seemed to care about death of schoolmate	.853
Wanted to talk to T/C about the death	.858
T/C helped me emotionally deal w/death	.848
T/C should talk about death of student	.859
T/C understands how I feel	.850
T/C provides a safe space to express my emotions	.847
I feel comfortable speaking w/ T/C about death	.853
Feel good about how T/C handled discussing death	.851
T/C knows how to speak to the class about death	.852
T/C provides environment that feels safe from harm	.852
T/C would want to listen to my thoughts on how T/C handled discussion	.849
I have advice for T/C how to speak to students about death	.860
I think my T/C needs to be better prepared to deal with death	.881
My T/C seemed unsure of what to say	.880

When exploratory factor analysis (EFA) with principal axis factoring extraction and varimax rotation was conducted on the 18-item pilot data, three factors emerged. 10 items loaded on factor 1, five items loaded on factor 2, and three items loaded on factor 3. The factor loadings demonstrate that all items loaded strongly on one predominant factor, though seven of the items cross-loaded into two factors. The first factor loaded the strongest with factor-loadings of .45 to .82. See Table 8 for a complete summary of the exploratory factor analysis results.

The researcher then compared the three factors to the principles derived from the table of specifications in phase one. There were seven principles that a minimum of three subject matter experts tied to the item with an 80% confidence rate. These seven principles were then compared to the items that loaded on the three factors. While all three factors can be argued to overlap constructs as all principles obtain components of creating a trauma-informed classroom, upon EFA analysis, the three factors grouped themselves into different themes which demonstrate different roles in creating a trauma-informed classroom setting.

In factor 1, each of the 10 items analyzed appeared to include logistical elements of creating a trauma-informed classroom environment, focused on youth judging the decisions and actions made by the teacher/coach, subsequent to the loss of their schoolmate. These items included, “I think teachers/coaches should talk about the death of a student”, “I think my teacher/coach knows how to speak to the class/team about the death of a student”, “My teacher/coach provides an environment that makes me feel physically safe from harm”, and, “My teacher/coach seemed to care about the death of my schoolmate”. These items are staff-led actions, which can determine the level of

comfort a student experiences and create the feeling of a safe space for youth. Additional items that loaded on this factor include, “The way my teacher/coach talked about the death of my schoolmate made me feel comfortable”, “I feel comfortable speaking with a teacher/coach about the death of a schoolmate”, and, “I feel good about how my teacher/coach handled discussing the death of my schoolmate”. These items address the actions of a teacher or coach and the youth assessment of such actions, and are therefore tied to the construct Creating a Trauma-Informed Learning Environment.

Factor 2 items tied to personal emotional elements and feelings of students, inclusive of the subsequent five items: “I wanted to talk to my teacher/coach about the death of my schoolmate”; “My teacher/coach understands how I feel regarding the death of my schoolmate”; “My teacher/coach talked about coping strategies (healthy ways to deal with grief)”; “My teacher/coach helped me emotionally deal with the death of my schoolmate”; and, “More than one teacher/coach offered me some form of emotional support after my schoolmate was killed”. This theme of support requires trust and openness between a student and staff member, therefore the researcher tied these items most closely to the construct Trustworthiness and Transparency.

Factor 3 clearly tied to Empowerment, Voice and Choice as the three items that loaded on this factor express the youth voice of how their teacher or coach handled the situation regarding the loss of a fellow schoolmate. These three survey questions prompted student response to the following items: “I have advice/ideas for my teacher/coach about how to speak to students when one of our schoolmates is killed”, “My teacher/coach seemed unsure of what to say after the death of my schoolmate”, and, “I think my teacher needs to be better prepared to deal with the death of a schoolmate”.

Table 8

Summary of Exploratory Factor Analysis Results for Full-Scale Study (N = 181)

Construct	Item	Factor		
		1	2	3
Creating a Trauma-Informed Learning Environment	T/C provides environment that feels safe from harm	**.559**	.345	
	The way T/C talked about death made me comfortable	**.445**		
	I know T/C that I can talk to	.**544**	.305	
	T/C would want to listen to my thoughts on how T/C handled discussion	**.562**	.474	
	T/C seemed to care about death of schoolmate	**.575**		
	T/C should talk about death of student	**.459**		
	T/C provides a safe space to express my emotions	**.670**	.423	
	I feel comfortable speaking w/ T/C about death	**.572**		
	Feel good about how T/C handled discussing death	**.818**		
	T/C knows how to speak to the class about death	**.711**		
Trustworthiness and Transparency	More than one T/C offered emotional support		**.458**	
	T/C understands how I feel	.443	**.564**	
	T/C helped me emotionally deal w/death	.392	**.687**	
	T/C talked about coping strategies		**.534**	
	Wanted to talk to T/C about the death		**.620**	
Empowerment, Voice and Choice	My teacher/coach seemed unsure of what to say after the death of my schoolmate			**.559**
	I have advice for T/C how to speak to students about death		.310	**.411**
	I think my T/C needs to be better prepared to deal with the death of a schoolmate			**.775**

Note: Strongest factor loadings are bolded

Summary

Chapter 4 presented an explanation of the results of each phase and how they were used to implement the next phase of research. It also presented the qualitative and quantitative methods used in this mixed methods design. Phase one was a qualitative phase that utilized nine subject matter experts, both academic and practitioners. This phase established validity evidence based on test content through those experts matching items to principles in a table of specifications. Phase two was also a qualitative phase that established validity evidence based on cognitive processes through cognitive interviews which were conducted with eleven students. Phase three was a pilot of the quantitative phase of the study, which resulted in one item being removed before conducting the full-scale study. The fourth and final phase was a quantitative phase that established validity evidence based on internal structure and reliability evidence with Cronbach's alpha.

CHAPTER V

DISCUSSION

Chapter 5 begins with the analysis of the results of the study. The chapter continues with an interpretation of the results as they relate to the existing literature and theoretical framework. The chapter concludes with implications for practice, study limitations, and recommendations for future research.

Results

This study aimed to develop and validate a survey instrument to understand the youth perspective of the classroom experience following the death of a schoolmate due to gun violence. This study addressed the following research questions:

1. What is the reliability evidence of the Youth Gun Violence and Voice Survey?
2. What is the validity evidence of the Youth Gun Violence and Voice Survey?

In this research, a new tool was developed to harness the youth voice so that school systems can utilize students' feedback to inform policy on how to address the loss of a student due to community violence. Students that live in high violence communities can be adversely impacted in a multitude of ways. Consequences of violence and homicide can result in lowered academic success and an increase in social-emotional problems, behavioral issues, and mental health issues. This instrument can be used to assess the extent to which students feel that their classrooms are safe places where they are being supported by their teachers in the aftermath of community violence. The validity and reliability of this tool were examined as essential properties to its development. The combined results from the four phases of this study provided evidence

that the instrument yields valid and reliable conclusions regarding the youth perspective of the classroom experience.

Research Question 1

This question asked what is the reliability evidence of the Youth Gun Violence and Voice Survey?

Evidence supported the finding that the Youth Gun Violence and Voice Survey yielded reliable inferences about three constructs: Creating a Trauma-Informed Learning Environment, Trustworthiness and Transparency, and Empowerment, Voice and Choice (18 items; $\alpha = .86$). This indicates that all the items in this survey measure the same underlying concept. Reliability for each of the three constructs was examined using Cronbach's alpha: .88 for Creating a Trauma-Informed Learning Environment (10 items), .77 for Trustworthiness and Transparency (five items), and .57 for Empowerment, Voice and Choice (three items).

Research Question 2

This question asked what is the validity evidence of the Youth Gun Violence and Voice Survey?

Evidence supported the finding that the Youth Gun Violence and Voice Survey yielded valid conclusions about multiple principles of trauma-informed care and trauma-informed school systems. Validity evidence based on test content was established using nine subject matter experts. Validity evidence based on response process was established through cognitive interviews with 11 students. Validity evidence based on the internal structure was established by conducting an exploratory factor analysis using principal axis factoring extraction and varimax rotation on data gathered from 50 participants in

the pilot study, resulting in six factors. This was followed by the full-scale study conducted with 181 participants in which items loaded on three factors. The constructs that resulted from the full-scale study included 10 items that loaded on factor 1, Creating a Trauma-Informed Learning Environment, five items that loaded on to factor 2, Trustworthiness and Transparency, and three items that loaded on to factor 3, Empowerment, Voice and Choice.

Interpretation and Analysis of Results

This study has provided an instrument to assess the youth perspective of the classroom experience following the loss of a schoolmate to gun violence. The study's methodology was based on combined concepts of validity and reliability, where test content, cognitive response process, internal structure, and reliability were used as sources of evidence regarding the interpretation and use of the results (AERA, 2014; Messick, 1996). The collective results from the four research phases of the study provided evidence that the instrument yields valid and reliable information regarding the youth voice.

Cronbach's alpha for the overall instrument was .86, showing strong reliability evidence. The first and second factors, when examined individually, evidenced strong internal consistency (.88 and .77). The first factor, Creating a Trauma-Informed Learning Environment, included items that measured logistical elements of creating a trauma-informed classroom environment and focused on youth judging the decisions and actions made by the teacher/coach, subsequent to the loss of their schoolmate. These items allowed students to assess their teachers' actions by responding to questions such as, "I think my teacher/coach knows how to speak to the class/team about the death of a

student", and, "My teacher/coach provides an environment that makes me feel physically safe from harm". In engaging the youth perspective to evaluate the classroom environment created by the teacher, schools can uncover innovative strategies and research findings to inform policy and pedagogy (Daiute & Fine, 2003). Maring and Koblinsky (2013) showed that teachers and classroom staff desire more professional development training; feedback from youth through this instrument can form the building blocks to structuring an environment that is trauma-informed.

The second factor, Trustworthiness and Transparency, included five items that tied to personal emotional elements and feelings of students, such as, "I wanted to talk to my teacher/coach about the death of my schoolmate". In a study exploring the relationship between youth and their doctors, Riese et al. (2016) found that youth do not inherently trust physicians and had mixed feelings about how physicians could help them with violence in their lives. Assessing the trust of youth in their interactions with teachers and other professionals is imperative and, according to the Substance Abuse and Mental Health Service Administration, trustworthiness is essential to creating a trauma-informed system.

Though the first and second factors evidenced strong internal consistency, the third factor did not meet the threshold of .7. Three items loaded onto factor 3, which demonstrates that more items could be added to address the construct of Empowerment, Voice and Choice. The items currently include, "I have advice/ideas for my teacher/coach about how to speak to students when one of our schoolmates is killed", "My teacher/coach seemed unsure of what to say after the death of my schoolmate", and, "I

think my teacher needs to be better prepared to deal with the death of a schoolmate". According to Williams and Cornell (2006), high levels of internal consistency are not necessary for scales measuring heterogeneous constructs and internal consistency is strongly affected by scale length, which may need to be brief for students to complete in a school setting. As there were only three items that tied to this construct, other items could be added such as, "By completing this survey, I feel like my voice has been heard", "I feel that my opinion is important in determining school policy of response to the death of a fellow student", and "I feel empowered to share my voice and feelings regarding this matter". These items would align with the emphasis of Youth Empowerment Programs which emphasize youth being engaged in leadership and participation and having the same control as adults (Morton & Montgomery, 2013). By adding more such items to this construct of Empowerment, Voice and Choice, it is probable that the internal consistency of this construct will then be achieved (Tavakol & Dennick, 2011).

The purpose of this work was to develop a valid tool to gather the perspective of youth following the classroom experience of loss. The three resulting factors exhibit that the survey succeeded in instilling the perspective of youth into its content. Creating a Trauma-Informed Learning Environment cannot happen without the voice of students. This is crucial as students want to be able to voice their views and have buy-in to the classroom environment. Youth Empowerment Programs do provide a platform for students to use their voice and develop the ability to take control in changing their own communities (Bulanda & Johnson, 2015; Harden et al., 2015) but these programs should not only exist in an afterschool, extracurricular setting. In reflecting on the Youth Gun

Violence and Voice Survey one high school student described school as “where I come to get away from all that sadness. I do love school and it's where I can let my mind be free…I do feel safe.” Another student shared about his coach, “That's why they keep us here late. We go home and are tired and are off the streets. He keeps us safe from violence.” Schools themselves are spaces where students must be protected and teachers must provide a safe space for youth, but the youth must be the ones to share and collaborate with teachers and staff to determine what a safe space means to them and how it can be created. Utilizing results from the Youth Gun Violence and Voice Survey can provide important insider information on how to create a trauma-informed learning environment and set school policy and procedure to the needs of youth.

This empowerment of youth to determine an appropriate trauma-informed classroom environment by using the Youth Gun Violence and Voice survey aligns with the second factor of Empowerment, Voice and Choice. In this study students reported that they slightly disagree or feel neutral about wanting to talk to their teacher about the death of their classmate (see Table 6). This is in accordance with the findings of Wesseley and Deahl (2004) which state that debriefing may be appropriate for some, whereas not talking may be appropriate for others. Children can react differently to traumatic events depending on their developmental stage, skills at managing stress and anxiety, and cognitive capacity (Demaria & Schonfeld, 2013). As a result this can create complications when determining how a teacher should address the situation of the homicide of a fellow schoolmate, as some students may want to speak about it whereas others do not. As the consequences of adversity can have long-term negative effects on

youth, there is a need for innovative strategies to reduce toxic stress in students within a coordinated system of services and policies, particularly as students that live in high violence communities can experience such a loss at multiple times during their school experience (Shonkoff & Garner, 2012; Walkley & Cox, 2013). The Youth Gun Violence and Voice Survey can be tool for students to voice their needs so as to provide critical information for teachers and school administrators for determining and adjusting the classroom experience and school policy following the loss of a schoolmate.

Trustworthiness and Transparency was the third resulting factor of this study While the central purpose of the Youth Gun Violence and Voice Survey is to provide a platform for youth to feel empowered to share their voices, thus informing the making of a trauma-informed classroom, this cannot be possible without trust. This factor is integral to the whole survey; youth must feel that they are able to voice their perspectives and interact with their teachers in a manner that is transparent and honest. The Substance Abuse and Mental Health Service Administration states that trustworthiness is essential to creating a trauma-informed system. One survey item asks students if they wanted to talk with their teacher about the death of their schoolmate and this could imply that a student trusts their teacher enough to talk about the death. During the cognitive phase of this study, multiple youth shared that they felt their teachers that grew up in their neighborhood understood the death because they came from the same area. One student shared, “Since we come up in the same place they know about some things.” This seemed to create a space of trust in which students could open up to their teachers and be honest

about their thoughts and emotions. Potentially, an additional item could be added to this survey to explicitly ask if the student trusts their teacher.

Implications for Theory

This study employed trauma-informed theory guided by principles of the Substance Abuse and Mental Health Administration's trauma-informed approach and the National Child Traumatic Stress Network's essential components of a trauma-informed school system. Combined, these 16 principles were used to guide the development of the Youth Gun Violence and Voice Survey. In the first phase of this study, subject matter experts determined which principles they felt related to the items that sought to assess the youth perspective, which resulted in the selection of six principles. From these six principles in phase one, four constructs emerged in the pilot study: Creating a Trauma-Informed Learning Environment, Trustworthiness and Transparency, Empowerment, Voice and Choice, and Addressing and Treating Traumatic Stress.

According to the results of this study's exploratory factor analysis in the full-scale study, the Creating a Trauma-Informed Learning Environment and Addressing and Treating Traumatic Stress constructs overlapped conceptually as all items loaded onto one factor. Overlapping of the first two constructs could indicate that the definitions of these two constructs should be further refined because of the overarching reach of the principle of establishing a trauma-informed setting can include constructs of addressing and treating trauma within its meaning. These two constructs were incorporated into the one construct of Creating a Trauma-Informed Learning Environment. Trustworthiness and Transparency, and Empowerment, Voice and Choice were the other two principles that were labeled as constructs in the final phase of this study.

These three constructs specifically address those components of the guiding principles which are youth-centered. Understanding the importance of these concepts to acquire the youth perspective, and utilizing the theoretical framework of pragmatism, should lead researchers and policy makers to further incorporate the youth voice into trauma-informed work and theory. Pragmatists are interested in examining practical consequences and empirical findings to help in determining which action to take next (Johnson & Onwuegbuzie, 2004). As pragmatism favors action over philosophizing, evidencing the validity of the Youth Gun Violence and Voice Survey has important implications for practice.

Implications for Practice

The purpose of the development and validation of this survey is to provide a tool for school systems to gain the youth perspective to better inform practice. According to the National Association of School Psychologists (NASP), schools have an important role in decreasing the impact of a traumatic event. The Crimes Against Children Research Center (n.d.) notes that a scarcity of youth-focused surveys limits the ability to assess the developmental impact of exposure and identify the most important targets for policy. This survey is most beneficial for schools that are located in high-violence neighborhoods, as they can experience higher incidents of youth homicide. Initial findings from the Youth Gun Violence and Voice Survey showed that, on average, high school youth from one Miami-Dade County school slightly agreed (mean score=4.68) that teachers or coaches should talk about the death of a student. This item's score is an example of how a school can use this information to inform their own policies or procedures when providing guidance for staff response to the loss of a student. Upon

receiving the results of this survey, school administration can determine if their own students believe that teachers or coaches should discuss this death. Item 23 asks if students have advice to share with their teacher or coach and the subsequent short answer questions allows the opportunity to write down their advice about "how to handle the death of my schoolmate". Upon gaining this knowledge, results can be shared in staff meetings and incorporated into crisis management trainings and policy to prepare school staff to support their students following the loss of a schoolmate.

This survey can also serve as an assessment of teachers and coaches as to whether or not youth feel that they are being supported by staff. With a mean score of 5.97, the youth sampled in the pilot study agreed that their teacher or coach "seemed to care" about the death of their schoolmate, which is valuable, firsthand information in assessing whether youth feel their teachers are concerned about the death of their student. If an administrator finds that the study body overwhelmingly does not feel that the teachers or coaches "seem to care" then this should trigger a serious reassessment of the training and capacity of staff to empathize with and support their students.

This survey also provides the opportunity for youth to share, in their own words, any advice or ideas they have for their teachers or coaches on how to speak to handle such an incident and to share if they feel like their classroom is a safe space with teachers that help them "emotionally deal with the death of my schoolmate". Daiute and Fine (2003) found that youth perspectives challenge normative perspectives on social arrangements, "critiquing the very institutions and practices that adults take for granted and question those behaviors, institutions, policies, and practices that seem most natural in mainstream adult society" (p.3). Though there are some resources that assist with

implementing trauma-related practices in the classroom, student perspectives are largely absent from their development (West et al., 2014) and this survey can be a tool to access the youth lens.

The Youth Gun Violence and Voice Survey can also be used as a first step in enabling youth to process the trauma, and to work with their teachers in processing the trauma as a collaborative learning experience. Cromer and Newman (2011) found that participants benefit from being questioned about their traumatic experiences by feeling valued and listened to and Jolivette et al. (2015) noted that youth participants are appreciate of being able to share their perspectives. In phase 2 of this study, students voiced feelings about completing the survey. One student shared that participating in the survey "made me feel like I'm more comfortable with it. Now you know a little something about me and how I deal with stuff." Another student noted that the survey is "feedback to make things better so it made me feel good in a way." One shared that it "made me feel honest". Two students shared that completing the survey was difficult for them emotionally as, "It made me reminisce about what happened. How I picture him in my mind. When we talk we just be joking. I saw him a week before and to hear about it, I was home and got a call from somebody that he just died. I just seen him a couple of days ago and…it was hard." Another student shared that, "It was a little difficult to do and a little emotional" but that her motive to participate was that it "sounds like you care and are trying to get more info". It is clear from these results that even the administration of a survey in of itself is an important part of the process in empowering youth and building their trust. And further that the teachers and administrators can gain immediate information about how the youth are feeling about the traumatic experience.

The Youth Gun Violence and Voice survey is not only a tool that can be utilized by school systems as a self-assessment that can inform training and the needs of students. Nonprofits and organizations that work directly with youth can utilize this survey as they can assess their own policies and procedures, based on the feedback that this instrument provides. While this survey was created for middle and high school youth, it could also be modified for other age groups that live or work in high violence areas that may experience the homicide of their peers or co-workers.

Limitations

This study was implemented in public high schools in Miami-Dade County with an almost exclusively Black/African American and Hispanic/Latino demographic. In fact, surveys that were analyzed in SPSS in the pilot and full scale study included only one white respondent. Though the demographic makeup of the participants were not representative of state or national demographics, homicides affect Black and Latino youth at higher rates than white youth (CDC, 2016; Hall et al., 2012; Wintemute, 2015), therefore, as the demographics were representative of communities that experience higher levels of violence, generalizability can be appropriate for communities that are predominantly Black/African American and Hispanic/Latino.

This study was limited to high school respondents only in the cognitive interview, pilot study and full-scale study phases. Therefore, the perspectives of middle school youth were not present in this study. In the cognitive interview phase, 9 of the eleven students that completed the cognitive survey were male, though the pilot study and full-scale study was more evenly distributed amongst gender. Limitations also included not

having the perspective of participants who did not speak English, and were therefore unable to participate in the study.

There were also limits to accessing participants, as school administration allowed the researcher to recruit from elective courses only. The researcher did not have access to participants from all classes of the deceased nor the ability to survey all students at the entire school. There were also students within the targeted courses that simply did not want to participate, therefore their perspectives were not shared with the researcher. Additionally, following the specific procedures of the IRB-approved verbatim introduction of this study to students was rarely possible. As the researcher has fifteen years of experience working with high school youth, it was important to be able to connect with youth to garner their interest in participating. Some students wanted more detailed information and had questions that were not addressed in the verbatim statement. Another student demanded to be told why she should even be interested in this work and the researcher understood that it would be important to gain her trust in a genuine manner, not simply reading off the script. Moreover, one teacher did not allow the researcher to share detailed information about the survey, rather she said any students that were interested in sharing their thoughts on violence could take a survey in the back of the class and did not allow the researcher to speak to the entire class. For those students that chose to do so, at the start of the survey, one male student told the researcher that he realized who this was about and pointed to a poster on the wall that contained a picture of some young men and quotes from students under the heading “Forever in our Hearts”. Only then did the researcher understand that the student that had died was a member of this class. Afterwards, the teacher confirmed this information in private and added that

his best friend was in that class and she wanted to be sensitive to the loss of their classmate. Future implementation of this survey should include a person who is already trusted by the student or has the ability and experience to connect with youth to access the voices of as many students as possible.

Recall was also a limitation in this study. In phase 2, upon completion of the survey, the researcher understood that one student was responding to items based on student that had been killed the year prior, not within the previous six months. It appeared that she felt that it had happened recently, perhaps because the experience had been so visceral and it was her relative that was killed. In the pilot study phase, the researcher was permitted access to the school four months following the death of the student, which appeared to result in less acute memories of the classroom experience. The results of this study confirmed that 33% of participants stated that their teacher did not talk about the student's death or they did not remember. These results align with Groves et al. (2009) in which they found that accuracy of reporting would be higher if the questions were asked within two months. In the cognitive and full-scale study phases, the researcher was able to employ the survey within two months of the student's death in which all students remembered the death in the cognitive phase, and in the paper survey implementation of the full-scale study only 9.5% of students stated that their teacher did not talk about the student's death or they did not remember.

Recommendations for Future Research

As this research centered upon the initial development of the Youth Gun Violence and Voice Survey, there are further modifications that could be made. As previously discussed, only three items loaded on the Empowerment, Voice and Choice construct,

which did not meet the reliability threshold of .7, therefore more items could be added to this instrument in future studies. Upon the addition of additional items, there is strong likelihood that the internal consistency of this construct will evidence adequate reliability. This future recommendation will be a continuing validation of the instrument, as validation is an on-going process.

This current study was specific to the teacher student experience, but there are multiple interactions and experiences that students experience following the homicide of a fellow student. Future studies could include the assessment of those students that sought assistance from a school psychologist, administrator, or staff member. In Miami-Dade County, Crisis Management policy includes the ability of students to speak with a psychologist, and this experience was noted in some of the cognitive interviews as students voiced their thoughts. This issue was also brought up by teachers who gave the researcher their own perspectives and commentary on this policy of offering the services of a school psychologist. The inclusion of other staff in student experiences could be explored in future research to better inform practice.

Additional studies looking at the overall school experience, and not strictly limited to that of the classroom or specific staff personnel, would be beneficial. For example in the cognitive interview phase, one participant expressed her anger with school administration, as she shared that the two deaths at her school were treated differently because one student was “a gangbanger but he didn’t deserve it” and one was “an angel”. She stated that, “They treated their deaths different because of who they were at school. And that’s fucked up.” Another participant shared that it would be important to ask students, “How did you get yourself together and get back to school after something like

that happened?". A future case study could include discovering how some youth recover from such loss and acquire the support that they may need.

In three phases of the study, the researcher was explicitly asked about addressing the teacher perspective. In phase one, two subject matter experts advised in the notes section that there should be an addition to ask teachers their own perspectives. In the pilot study, one teacher asked the researcher to consider creating a survey for teachers as it would be helpful to have information from the teacher's perspective. This teacher also noted that the results of the Youth Gun Violence and Voice Survey would be helpful as she has experienced the loss of multiple students to community violence and such results could provide guidance to her on how to address her students in her classroom. These requests from multiple teachers align with Maring and Koblinsky's (2013) findings in their study which targeted teachers in communities that experienced high levels of violence. The authors worked with teachers to assess what their challenges are and what support systems would help them respond more effectively to the needs of their students affected by community violence.

In the full-scale study, the researcher spent four days at the high school, and over that time spoke with a teacher who had both taught and known the student that had died by a gunshot wound. He shared the same feedback as the aforementioned teacher, but also shared more intimate information about the student who had been killed, stating, "He was very smart. He just lived in the wrong place." The teacher, who had served in the military, stated, "They're like soldiers. They just didn't choose to be." This organic proffering of feelings and insight from this teacher would be valuable to future studies. In particular a qualitative case study of the teacher perspective could highlight the stressors

and trauma that teachers experience when their student has been killed at the brutal hand of community violence.

Conclusion

As many schools and neighborhoods deal with community violence and the death of young people by homicide, support for students who deal with this violence and its aftermath is of vital importance to the school community and the community as a whole. For students the consequences of violence and homicide can result in lowered academic success and an increase in social-emotional problems, behavioral issues, and mental health issues. Currently there is a dearth of student-centered research to address this impact and research is sorely lacking regarding the youth voice concerning the school response to community violence, specifically the loss of a peer to gun violence.

This study developed and validated a survey instrument to understand the youth perspective of the classroom experience following the death of a schoolmate due to gun violence. The Youth Gun Violence and Voice Survey is an essential step in assessing this experience. The tool surveys youth directly and ask them to share their perspectives of subsequent classroom experiences with their teachers. This instrument also assesses the extent to which students feel that their classrooms are safe places where they are being supported by their teachers.

Schools systems can use student feedback from this survey to inform policy and create procedures on how to address the loss of a student from the school due to community violence. In particular, schools and organizations can utilize this tool to create youth-centered and youth-informed policies and procedures to address the needs and support for students. In addition it can be used as a self-assessment of the impact

schoolteachers have made in the classroom in attempts to address or avoid discussing such tragedies.

The Youth Gun Violence and Voice Survey instrument is a significant contribution to the ability of schools to gather information from students and understand the youth perspective so as to better inform their own policies to support their students following the tragic loss of a youth's life.

REFERENCES

Abrams, A. & Chan, M. (2018, November 5). Guns in America. Time, 28-30.

American Educational Research Association (AERA), American Psychological Association (APA), & National Council on Measurement in Education (NCME). (2014). *Standards for educational and psychological testing*. Washington, DC: American Educational Research Association.

American Medical Association Council on Scientific Affairs. (1989). Firearms injuries and deaths: a critical public health issue. *Public Health Rep.* 104:111–20.

American Psychological Association. (2018). Trauma. Retrieved from https://www.apa.org/topics/trauma/

American Psychological Association. (2018). Research on gun violence. Retrieved from https://www.apa.org/topics/violence/gun-violence-prevention.aspx

Anderson, E. M., Blitz, L. V., & Saastamoinen, M. (2015). Exploring a school-university model for professional development with classroom staff: Teaching trauma-informed approaches. *School Community Journal*, 25(2), 113.

Bath, H. (2008). The three pillars of trauma-informed care. *Reclaiming children and youth*, 17(3), 17.

Beatty, P. (2004). The dynamics of cognitive interviewing. *Methods for testing and evaluating survey questionnaires*, 45-66.

Beatty, P. C., & Willis, G. B. (2007). Research synthesis: The practice of cognitive interviewing. *Public opinion quarterly*, 71(2), 287-311.

Bingenheimer, J. B., Brennan, R. T., & Earls, F. J. (2005). Firearm violence exposure and serious violent behavior. *Science*, *308*(5726), 1323-1326.

Blumstein, A., & Cork, D. (1996). Linking gun availability to youth gun violence. Law and Contemporary Problems, 59(1), 5-24.

Bucci, M., Marques, S. S., Oh, D., & Harris, N. B. (2016). Toxic Stress in Children and Adolescents. *Advances in pediatrics*, *63*(1), 403–428.

Buka, S. L., Stichick, T. L., Birdthistle, I., & Earls, F. J. (2001). Youth exposure to violence: Prevalence, risks, and consequences. *American Journal of Orthopsychiatry*, *71*(3), 298-310.

Bulanda, J., & Johnson, T. B. (2016). A trauma-informed model for empowerment programs targeting vulnerable youth. *Child and adolescent social work journal*, *33*(4), 303-312.

Calhoun, D. (2014). Decreasing the supply of and demand for guns: Oakland's Youth Advocacy Project. *Journal of Urban Health*, 91(1), 72-83.

Carello, J., & Butler, L. D. (2015). Practicing what we teach: Trauma-informed educational practice. *Journal of Teaching in Social Work*, 35(3), 262-278.

Cavanaugh, B. (2016). Trauma-informed classrooms and schools. *Beyond Behavior*, *25*(2), 41-46.

Centers for Disease Control and Prevention. (2014). [cited 2016]. *Youth violence: Facts at a glance 2016.* Atlanta: National Center for Injury Prevention and Control.

Centers for Disease Control and Prevention. (2017). Youth violence: Definitions. Retrieved from https://www.cdc.gov/violenceprevention/youthviolence/definitions.html

Centers for Disease Control and Prevention. (2020). Preventing Youth Violence. Retrieved from https://www.cdc.gov/violenceprevention/youthviolence/fastfact.html

The Children's Trust Research and Evaluation Department. (2016). [Map of targeted zip codes at-risk youth in Miami Dade County]. *Together for Children.* Retrieved from http://togetherforchildren.dadeschools.net/pdfs/TFC-Map.pdf

Cicchetti, C. (2018). Proceedings from The Melissa Institute for Violence Prevention and Treatment 2018*: Impact of Trauma and Violence*. Miami, FL: Center for Childhood Resilience.

Collins, D. (2003). Pretesting survey instruments: An overview of cognitive methods. *Quality of Life Research (12),* 229-338.

Cohen, J. A., Mannarino, A. P., & Deblinger, E. (2016). *Treating trauma and traumatic grief in children and adolescents*. New York, NY: Guilford Publications.

Cooley, M. R., Turner, S. M., & Beidel, D. C. (1995). Assessing community violence: The children's report of exposure to violence. *Journal of the American Academy of* Child & Adolescent Psychiatry, 34(2), 201-208.

Cortina, J. M. (1993). What is coefficient alpha? An examination of theory and applications. *Journal of applied psychology*, 78(1), 98.

Costello, A.B., Osborne, J.W. (2005). Best practices in exploratory factor analysis: Four recommendations for getting the most from your analysis. *Practical assessment, research & evaluation*, *10*(7), 1-9.

Cowan, K. C., & Rossen, E. (2013). Responding to the Unthinkable: School Crisis Response and Recovery. *Phi Delta Kappan*, *95*(4), 8–12.

Crimes Against Children Research Center (CCRC). (n.d.) Firearm violence. Development of a youth firearm risk and safety assessment tool (Youth-FiRST). Retrieved from http://www.unh.edu/ccrc/firearms/

Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches*. Thousand Oaks, CA: Sage publications.

Creswell, J. W., & Clark, V. L. P. (2011). Designing and conducting mixed methods research (2nd ed.). Sage publications.

Cromer, L.D. & Newman, E. (2011). Research ethics in victimization studies: Widening the Lens. *Violence Against Women, 17*(12), 1526-1548.

Cronbach, L. J. (1951). Coefficient alpha and the internal structure of tests. *Psychometrika, 16*(3), 297-334. doi:10.1007/BF02310555

Cummings, K. P., Addante, S., Swindell, J., & Meadan, H. (2017). Creating supportive environments for children who have had exposure to traumatic events. *Journal of Child and Family Studies*, 26(10), 2728-2741.

Cunningham, R. M., Walton, M. A., & Carter, P. M. (2018). The major causes of death in children and adolescents in the United States. *The New England journal of medicine, 379*(25), 2468–2475.

Daiute, C., & Fine, M. (2003). Youth perspectives on violence and injustice. *Journal of Social Issues, 59*(1), 1-14.

Daiute, C., Stern, R., & Lelutiu-Weinberger, C. (2003). Negotiating violence prevention. *Journal of Social Issues*, 59(1), 83-101.

Demaria, T., & Schonfeld, D. J. (2013). Do it Now Short-Term Responses to Traumatic Events. *Phi Delta Kappan, 95*(4), 13-17.

Ellen, I. G., & Turner, M. A. (1997). Does neighborhood matter? Assessing recent evidence. *Housing policy debate, 8*(4), 833-866.

Ericsson, K., & Simon, H. (1980). Verbal reports as data. *Psychological Review*, 87, 215-251.

Ericsson, K., & Simon, H. (1984). Protocol analysis: Verbal reports as data. Cambridge, MA: MIT Press.

Fabrigar, L. R., Wegener, D. T., MacCallum, R. C., & Strahan, E. J. (1999). Evaluating the use of exploratory factor analysis in psychological research. *Psychological methods, 4*(3), 272.

Fallis, R. K., & Opotow, S. (2003). Are students failing school or are schools failing students? Class cutting in high school. *Journal of Social Issues*, *59*(1), 103-119.

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE)Study. *American journal of preventive medicine*, 14(4), 245-258.

Finkelhor, D. (2009). *Children's exposure to violence: a comprehensive national survey.* U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

Finkelhor, D., Shattuck, A., Turner, H., & Hamby, S. (2013). Improving the adverse childhood experiences study scale. *JAMA pediatrics*, *167*(1), 70-75.

Finkelhor, D., Turner, H. A., Shattuck, A., & Hamby, S. L. (2015). Prevalence of childhood exposure to violence, crime, and abuse: Results from the national survey of children's exposure to violence. *JAMA pediatrics*, *169*(8), 746-754.

Fleckman, J. M., Drury, S. S., Taylor, C. A., & Theall, K. P. (2016). Role of direct and indirect violence exposure on externalizing behavior in children. *Journal of Urban Health*, *93*(3), 479–492.

Florida Department of Health. (2018). FL Health Charts: Homicide by firearms discharge deaths. Retrieved from: http://www.flhealthcharts.com/charts/DataViewer/DeathViewer/DeathViewer.aspx?indNumber=0732

Forsyth, B., Rothgeb, J. M., & Willis, G. B. (2004). Does pretesting make a difference? An experimental test. *Methods for testing and evaluating survey questionnaires*, 525-546.

Fowler, P. J., Tompsett, C. J., Braciszewski, J. M., Jacques-Tiura, A. J., & Baltes, B. B. (2009). Community violence: A meta-analysis on the effect of exposure and mental health outcomes of children and adolescents. *Development and psychopathology*, *21*(1), 227-259.

Fox, N. & Leavitt, L. (1995). The violence exposure scale for children-revised (VEX-R). College Park, MD: University of Maryland.

Gregory, S., Wilson, C., Park, A., Jenkins, A. (2018, April 2). What we can do to stop it. *Time.*

Grogger, J. (1997). Local violence and educational attainment. *Journal of human resources*, 659-682.

Groves, R. M., Fowler Jr, F. J., Couper, M. P., Lepkowski, J. M., Singer, E., & Tourangeau, R. (2009). *Survey methodology* (2nd ed.). Hoboken, NJ: John Wiley & Sons, Inc.

Gurney, K. & Teproff, C. (2016, September 6). These 2,000 kids are at highest risk to shoot or be shot. The Miami Herald. Retrieved from: http://www.miamiherald.com/news/local/education/article100286827.html

Hall, J. E., Simon, T. R., Mercy, J. A., Loeber, R., Farrington, D. P., & Lee, R. D. (2012). Centers for Disease Control and Prevention's expert panel on protective factors for youth violence perpetration: Background and overview. *American journal of preventive medicine*, *43*(2), S1-S7.

Hamby, S. L., & Finkelhor, D. (2001). Choosing and using child victimization questionnaires. Juvenile Justice Bulletin.

Hanks, D. (2016, April 7). County juvenile chief on kids with guns: 'I've never seen anything like it'. *The Miami Herald.* Retrieved from: http://www.miamiherald.com/news/local/community/miami-dade/article70592947.html

Harden, T., Kenemore, T., Mann, K., Edwards, M., List, C., & Martinson, K. J. (2015). The truth N' trauma project: Addressing community violence through a youth-led, trauma-informed and restorative framework. *Child and Adolescent Social Work Journal*, *32*(1), 65-79.

Hart, S. L., Hodgkinson, S. C., Belcher, H. M., Hyman, C., & Cooley-Strickland, M. (2013). Somatic symptoms, peer and school stress, and family and community violence exposure among urban elementary school children. *Journal of behavioral medicine*, *36*(5), 454-465.

Hill, H. M., Levermore, M., Twaite, J., & Jones, L. P. (1996). Exposure to community violence and social support as predictors of anxiety and social and emotional behavior among African American children. *Journal of Child and Family Studies*, *5*(4), 399-414.

Holley, L.C. & Steiner, S. (2005). Safe space: Student perspectives on classroom environment. *Journal of Social Work Education*, 41(1), 46-64.

Humbley, A.M. & Zumbo, B.D. (1996). A dialectic on validity: Where we have been and where we are going. *The Journal of General Psychology*, 123, 207-215.

Institute for Digital Research and Education (IDRE), University of California, Los Angeles. (n.d.). Factor analysis SPSS annotated output. Retrieved from https://stats.idre.ucla.edu/spss/output/factor-analysis/

Jenkins, C. R., & Dillman, D. A. (1997). Towards a theory of self-administered questionnaire design. in Lyberg, L., Biemer, P., Collins, M., de Leeuw, E., Dippo, C., Schwarz, M. &Trewin, D. (Eds.) *Survey Measurement and Process Quality*, pp.165-196. New York, NY: Bureau of the Census.

Jenkins, E. J., Wang, E., & Turner, L. (2009). Traumatic events involving friends and family members in a sample of African American early adolescents. *American Journal of Orthopsychiatry*, 79(3), 398.

Johnson, R. B., & Onwuegbuzie, A. J. (2004). Mixed methods research: A research paradigm whose time has come. *Educational researcher*, *33*(7), 14-26.

Jolivette, K., Boden, L. J., Sprague, J. R., Parks Ennis, R., & Kimball, K. A. (2015). Youth voice matters: Perceptions of facility-wide PBIS implementation in secure residential juvenile facilities. *Residential Treatment for Children & Youth*, 32(4), 299-320.

Krosnick, J. A., & Fabrigar, L. R. (1997). Designing rating scales for effective measurement in surveys. *Survey measurement and process quality*, 141-164.

Lai, B. S., Osborne, M. C., Lee, N., Self-Brown, S., Esnard, A. M., & Kelley, M. L. (2018). Trauma-informed schools: child disaster exposure, community violence and somatic symptoms. *Journal of affective disorders*, *238*, 586-592.

Lewin, N. L., Vernick, J. S., Beilenson, P. L., Mair, J. S., Lindamood, M. M., Teret, S. P., & Webster, D. W. (2005). The Baltimore Youth Ammunition Initiative: A model application of local public health authority in preventing gun violence. *American journal of public health*, 95(5), 762-765.

Ludwig, K. A., & Warren, J. S. (2009). Community violence, school-related protective factors, and psychosocial outcomes in urban youth. *Psychology in the Schools*, *46*(10), 1061-1073.

Manger, T., & Olweus, D. (1994). A short-form classroom climate instrument for elementary *and junior high school students*. Mimeo. HEMIL, University of Bergen, N-5015 Bergen, Norway.

Margolin, G., & Gordis, E. B. (2004). Children's exposure to violence in the family and community. *Current Directions in Psychological Science*, 13(4), 152-155.

Maring, E. F., & Koblinsky, S. A. (2013). Teachers' challenges, strategies, and support needs in schools affected by community violence: a qualitative study. *Journal of school health*, *83*(6), 379-388.

McEwen, C. A., & McEwen, B. S. (2017). Social structure, adversity, toxic stress, and intergenerational poverty: An early childhood model. *Annual Review of Sociology, 43*, 445-472.

McMillan, J. H. (2012*). Educational research: Fundamentals for the consumer*. Boston, MA: Pearson Education, Inc.

Messick, S. (1995). Validity of psychological assessment. Validation of inferences from persons' responses and performances as scientific inquiry into score meaning. *American Psychologist,* 50, 741-749.

Miami-Dade County Public Schools. (2018). *Statistical highlights 2018-2019.* Retrieved from http://drs.dadeschools.net/StatisticalHighlights/M970%20-%20ATTACHMENT%20-%20Statistical%20Highlights%2018-19.pdf

Miami-Dade County Public Schools (2016). *Together for children.* Retrieved from http://togetherforchildren.dadeschools.net/history.asp

Milam, A. J., Furr-Holden, C. D., Leaf, P., & Webster, D. (2016). Managing conflicts in urban communities: youth attitudes regarding gun violence. *Journal of interpersonal violence*, *33*(24).

Morrison, J. Q. (2007). Perceptions of teachers and staff regarding the impact of the critical incident stress management (CISM) model for school-based crisis intervention. *Journal of School Violence*, *6*(1), 101-120.

Morton, M. H., & Montgomery, P. (2013). Youth empowerment programs for improving adolescents' self-efficacy and self-esteem: A systematic review. *Research on social work practice*, *23*(1), 22-33.

National Association of School Psychologists. (2015). *Trauma: Brief facts and tips.* Retrieved from: https://www.nasponline.org/resources-and-publications/resources/school-safety-and-crisis/trauma

National Child Traumatic Stress Network. (n.d.). *Essential elements of a trauma-informed school system*. Retrieved from https://www.nctsn.org/trauma-informed-care/trauma-informed-systems/schools/essential-elements

National Child Traumatic Stress Network, Schools Committee. (2017). Creating, supporting, and sustaining trauma-informed schools: A system framework. Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress.

Newman, I., Lim, J., & Pineda, F. (2013). Content validity using a mixed methods approach: Its application and development through the use of a table of specifications methodology. *Journal of Mixed Methods Research*, 7(3), 243-260.

Olweus, D. (1994). Annotation: Bullying at school: Basic facts and effects of a school based intervention program. Child Psychology & Psychiatry & Allied Disciplines, 35 (7), 1171-1190.

O'Neil, K. M., Patry, M. W., & Penrod, S. D. (2004). Exploring the effects of attitudes toward the death penalty on capital sentencing verdicts. *Psychology, Public Policy, and Law, 10*(4), 443-470. http://dx.doi.org/10.1037/1076-8971.10.4.443

Osofsky, J. D. (1999). The impact of violence on children. *The future of children*, 33-49.

Ozer, E. J., & Schotland, M. (2011). Psychological empowerment among urban youth: Measure development and relationship to psychosocial functioning. *Health Education & Behavior*, *38*(4), 348-356.

Pachter, L. M., Lieberman, L., Bloom, S. L., & Fein, J. A. (2017). Developing a community- wide initiative to address childhood adversity and toxic stress: a case study of the Philadelphia ACE task force. *Academic pediatrics*, *17*(7), S130-S135.

Rabin, C. (2016, March 12). Grim toll from decade of gunfire in Dade: 316 kids, teens killed. *The Miami Herald.* Retrieved from: http://www.miamiherald.com/news/local/crime/article65690222.html

Rawles, P. D. (2010). The Link between poverty, the proliferation of violence and the development of traumatic stress among urban youth in the united states to school violence: A trauma informed, social justice approach to school violence. In *Forum on Public Policy Online* (Vol. 2010, No. 4). Oxford Round Table. 406 West Florida Avenue, Urbana, IL 61801.

Richards, D. (2001). A field study of critical incident stress debriefing versus critical incident stress management. *Journal of Mental Health*, *10*(3), 351-362.

Richters, J., Martinez, P. & Valla, J. (1990). Levonn: A cartoon-based structured interview for assessing young children's distress symptoms. Bethesda, MD: National Institute of Mental Health.

Ridgard, T. J., Laracu, S. D., Dupaul, G. J., Shapiro, E. S., & Power, T. J. (2015). Trauma-Informed Care in Schools: A Social Justice Imperative. *Communiqué, National* Association of School Psychologists, 44(2), 1-15.

Riese, A., Frank, A. G., Frederick, N., Dawson-Hahn, E., Bagley, S. M., O'Conner, B. (2016). Adolescent perspectives on addressing youth violence in the primary care setting. *Rhode Island Medical Journal*, 99(5), 18.

Ross, L. (2013). Urban youth workers' use of "personal knowledge" in resolving complex dilemmas of practice. *Child & Youth Services*, *34*(3), 267-289.

Sampson, R. J., Sharkey, P., & Raudenbush, S. W. (2008). Durable effects of concentrated disadvantage on verbal ability among African-American children. *Proceedings of the National Academy of Sciences*, 105(3), 845-852.

Santilli, A., O'Connor Duffany, K., Carroll-Scott, A., Thomas, J., Greene, A., Arora, A., Agnoli, A., Gan, G. & Ickovics, J. (2017). Bridging the response to mass shootings and urban violence: exposure to violence in New Haven, Connecticut. *American journal of public health*, *107*(3), 374-379.

Schwaner, S., Socorro, R., Pena, J. & Harrison, M. (2016). A stream of homicidal violence in Miami, Florida: Making sense of juvenile victimization. *Goals NOT Guns forum.*

Shapiro, J. P., Dorman, R. L., Burkes, W. M., Welker, C. J., & Clough, J. B. (1997). Development and factor analysis of a measure of youth attitudes toward guns and violence. *Journal of clinical child psychology*, 26(3), 311-320.

Shapiro, J. P., Scale, N. A., & Inventory, P. (2000). Attitudes toward guns and violence questionnaire (AGVQ). Los Angeles: Western Psychological Services.

Sharkey, P. (2010). The acute effect of local homicides on children's cognitive performance. *Proceedings of the National Academy of Sciences*, 107(26), 11733-11738.

Sharkey, P., Schwartz, A. E., Ellen, I. G., & Lacoe, J. (2014). High stakes in the classroom, high stakes on the street: The effects of community violence on student's standardized test performance. *Sociological Science*, *1*, 199-220.

Sheehan, K., DiCara, J. A., LeBailly, S., & Christoffel, K. K. (1997). Children's exposure to violence in an urban setting. *Archives of pediatrics & adolescent medicine*, 151(5), 502-504.

Shonkoff, J. P., Garner, A. S., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., Pascoe, J., Wood, D.L. & Committee on Psychosocial Aspects of Child and Family Health, Committee on Early Childhood, Adoption, and Dependent Care and Section on Developmental and Behavioral Pediatrics. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, *129*(1), e232-e246.

Shonkoff, J.P. & Richmond, J.B. (2008, June 26). *The science of child development and the future of early childhood policy.* Presentation at the National Symposium on Early Childhood Science and Policy, Cambridge, MA.

Solberg, V. S. H., Carlstrom, A. H., Howard, K. A., & Jones, J. E. (2007). Classifying at-risk high school youth: The influence of exposure to community violence and protective factors on academic and health outcomes. *The Career Development Quarterly, 55*(4)313-327.

Sorensen, J. R. (1989). Responding to student or teacher death: preplanning crisis intervention. *Journal of Counseling & Development*, 67(7), 426-427.

Spano, R. (2012). First time gun carrying and the primary prevention of youth gun violence forAfrican American youth living in extreme poverty. *Aggression and Violent Behavior*, *17*(1), 83-88.

Substance Abuse and Mental Health Service Administration. (2014). SAMHSA's concept of trauma and guidance for a trauma-informed approach. Retrieved from https://s3.amazonaws.com/static.nicic.gov/Library/028436.pdf

Sudman, S. & Bradburn, N. (1982) Asking questions: A practical guide to questionnaire design. San Francisco, CA: Jossey-Base

Tashakkori, A. & Teddlie, C. (Eds.). (2003). *Handbook of mixed methods in social & behavioral research.* Thousand Oaks, CA: Sage.

Tashakkori, A & Creswell, J.W. (2007). The new era of mixed methods [Editorial]. *Journal of Mixed Methods Research*, 1(1), 3-7.

Tavakol, M. & Dennick, R. (2011). Making sense of Cronbach's alpha. *International journal of medical education*, 2, 53.

Torsheim, T., Wold, B., & Samdal, O. (2000). The teacher and classmate support scale: factor structure, test-retest reliability and validity in samples of 13-and 15-year-old adolescents. *School Psychology International*, 21(2), 195-212.

Torsheim, T., Samdal, O., Rasmussen, M., Freeman, J., Griebler, R., & Dür, W. (2012). Cross-national measurement invariance of the teacher and classmate support scale. *Social indicators research*, 105(1), 145-160.

Turner, H. A., Mitchell, K. J., Jones, L. M., Hamby, S., Wade, R., Jr, & Beseler, C. L. (2019). Gun Violence Exposure and Posttraumatic Symptoms Among Children and Youth. *Journal of traumatic stress*, *32*(6), 881–889.

University of California Firearm Violence Research Center (UCFC). (2017). Retrieved from http://www.ucdmc.ucdavis.edu/vprp/UCFC/index.html

Voelkl, K. E. (1997). Identification with school. *American Journal of Education*, *105*(3), 294-318.

Walkley, M., & Cox, T. L. (2013). Building trauma-informed schools and communities. *Children & Schools*, *35*(2), 123-126.

Washington Office of Superintendent of Public Instruction. (N.D.). Compassionate schools: learning and teaching support. Retrieved from https://www.k12.wa.us/student-success/health-safety/mental-social-behavioral-health/compassionate-schools-learning-and-teaching-support

Wessely, S., & Deahl, M. (2003). Psychological debriefing is a waste of time. *The British Journal of Psychiatry*, *183*(1), 12-14.

West, S. D., Day, A. G., Somers, C. L., & Baroni, B. A. (2014). Student perspectives on how trauma experiences manifest in the classroom: Engaging court-involved youth in the development of a trauma-informed teaching curriculum. *Children and Youth Services Review*, *38*, 58-65.

Williams, F., & Cornell, D. G. (2006). Student willingness to seek help for threats of violence in middle school. *Journal of School Violence*, *5*(4), 35-49.

Willis, G. B. (2005). Cognitive interviewing: A tool for improving questionnaire design. Thousand Oaks, CA: Sage.

Wilkinson, D. L., McBryde, M. S., Williams, B., Bloom, S., & Bell, K. (2009). Peers and gun use among urban adolescent males: An examination of social embeddedness. *Journal of Contemporary Criminal Justice*, 25(1), 20-44.

Wintemute, G. J. (2015). The epidemiology of firearm violence in the twenty-first century United States. *Annual review of public health*, 36, 5-19.

Wonder, C. D. C. (2006). Compressed Mortality Data (Underlying cause of death). Retrieved from: http://wonder.cdc.gov/mortSQL.html

Wright, A. W., Austin, M., Booth, C., & Kliewer, W. (2016). Systematic review: exposure to community violence and physical health outcomes in youth. *Journal of pediatric psychology*, *42*(4), 364-378.

Yong, A. G., & Pearce, S. (2013). A beginner's guide to factor analysis: Focusing on exploratory factor analysis. *Tutorials in quantitative methods for psychology*, 9(2), 79-94.

APPENDICES

Appendix A

Youth Gun Violence and Voice Survey

The purpose of this questionnaire is to understand your honest perspective.
There are no right or wrong answers.
Your answers *will not* be shared with students or any teachers.

Please choose one answer to the following questions and mark the box next to your choice.

1. In the last six months one of my schoolmates was a victim of gun violence and died.

   Y= yes □
   N= no □
   NS= not sure □

2. *At least one* of my classroom teachers discussed this student's death with me and/or my classmates.

   Y= yes □ **(if yes, continue to #3)**
   N= no □ **(if no, skip to #9)**
   NS= not sure □ **(if not sure, skip to #9)**

3. The first teacher that I remember discussing this student's death with me was at the following time:

   During class □
   Before or after class □
   Outside of the school day □
   I don't remember □

Please think of *the first teacher* that you remember discussed this student's death with you and/or your classmates and answer the following questions:

1. My teacher discussed the student's death with the entire class.
   Y= yes □
   N= no □
   NS= not sure □

2. My teacher discussed the student's death with me in a small group.
   Y= yes □
   N= no □
   NS= not sure □

3. My teacher discussed the student's death with me individually.
   Y= yes □
   N= no □
   NS= not sure □

4. I asked my teacher to send me to a counselor, coach, or another school administrator to speak about the event.
   Y= yes □
   N= no □
   NS= not sure □

5. My teacher let me know that I can speak to a counselor or another school professional.

   Y= yes □
   N= no □
   NS= not sure □

Answer the following questions by circling the degree of agreement that corresponds with your answer using the range of 1=strongly disagree to 7= strongly agree.

6. The way my teacher talked about the death of my schoolmate made me feel comfortable.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

7. I feel that my teacher handled discussing the death of my schoolmate well.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

8. *More than one teacher* offered me some form of emotional support after my schoolmate was killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

Answer the following questions by circling the degree of agreement that corresponds with your answer using the range of 1=strongly disagree to 7= strongly agree.

9. I feel comfortable speaking with a teacher about the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

10. I know a teacher that I can talk to about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

11. My teacher seemed to care about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

12. I think my teacher helped me emotionally deal with the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

13. I think my teacher understands how I feel regarding the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

14. I think teachers should not talk about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

15. I think my teacher needs to be better prepared to deal with the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

16. I do not care about what my teacher had to say to me about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

17. I think my teacher knows how to speak to the class about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

18. My teacher seemed unsure of what to say after the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

19. I have advice/ideas for my teacher about how to speak to students when one of our schoolmates is killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

20. If my teacher said or did the following, I would be more comfortable talking about the death of my classmate:

_____

_____

_____

_____

_____

_____

_____

_____

_____

Please provide the following information:

1. Gender:

   Male □
   Female □
   Other □

2. School: _____

3. Age: _____

4. Grade: _____

5. Race/Ethnicity: (mark all that apply)

   American Indian or Alaska Native □
   Asian □
   Black or African American □
   Hispanic or Latino □
   Native Hawaiian or Other Pacific Islander □
   White □

Appendix B
Subject Matter Experts Request

Dear -----,
As I consider you a subject matter expert, I would like to get your feedback regarding the attached Table of Specifications. This is the first of four phases of my dissertation research I will be conducting to demonstrate reliability and validity for the Youth Gun Violence and Voice Survey.

Brief Background
In 2016, 24 people aged 0-18 were killed due to gun violence in Miami-Dade County. Community violence affects a variety of developmental outcomes, inclusive of social-emotional, behavioral, and cognitive domains and adolescents who are exposed to continual community violence can manifest aggression, anxiety, behavioral issues, academic problems, and truancy. Though research has evidenced the detrimental consequences of community violence, there is a dearth of data to evaluate and uncover the youth perspective, as there is not an instrument available to assess if students feel that their classrooms are safe places where they are being supported adequately in the aftermath of community violence.

The purpose of this study is to validate a survey instrument that measures the youth perspective of the classroom experience following the loss of a schoolmate due to homicide by firearm. Validating a survey to collect such information is crucial to better prepare and inform teachers, administrators, curriculum and mental health specialists in communities that experience high levels of gun violence, and to inform school procedures and policies.

Table of Specifications
A Table of Specifications is a set of procedures that aligns a set of items with a set of concepts that are to be assessed. In the creation of a survey instrument, such a process provides validity evidence based on test content. Items in the Youth Gun Violence and Voice Survey will be connected to the principles outlined by the Substance Abuse and Mental Health Service Administration's trauma-informed approach and the National Child Traumatic Stress Network's elements of a trauma-informed school system. There are a total of 16 principles. Please review the them below:

- https://www.samhsa.gov/nctic/trauma-interventions
- https://www.nctsn.org/trauma-informed-care/trauma-informed-systems/schools/essential-elements

Instructions
In the attached excel document, you will find two tabs. In the first tab, labeled **TOS**, you will see the 16 principles listed horizontally in **Row 1** and the 20 items listed vertically in **Column A**.

- Review the SAMHSA and NCTSN principles in the previous section.
- Match each survey item to *one or more* of the principles listed horizontally.

    - *Note:* Some principles may appear similar or identical, therefore, you can choose multiple principles per item, though they do not need to have the same confidence percentage.
    - *Note:* Some principles may not pertain to any items, therefore, you will not necessarily select all principles.
- Use the "fill color" function to connect the item to the principle(s).
- Include your response confidence percentage by degrees of 20% (i.e., 100%, 80%, 60%, 40%, 20%) and add comments if the percentage is below 100%.
- Add comments regarding the survey item in the **item comments** section.
    - *Note: See the example item in the document. Three principles have been selected. The principle that does not have 100% confidence is explained. Additional notes have been left in the item comments section.*
- Please see **Tab 2** for six short answer questions regarding the survey.

I want to thank you again for your assistance in this process. I will incorporate your feedback to help refine the principles and the items. **Please send me your feedback by February 10, 2019**. I will follow up with you if I have questions regarding your feedback. Once my analysis is complete you will have an opportunity to make sure your feedback is included. If you have any questions, please do not hesitate to contact me.

Sincerely,
Diana Santangelo

Appendix C1
Table of Specifications

SAMHSA and NCTSN Principles	Safety	Trustworthiness and transparency	Peer support	Collaboration and mutuality	Empowerment, voice and choice	Cultural, historical and gender issues	Identifying and assessing stress	Addressing and treating traumatic stress	Teaching trauma education and awareness	Having partnerships with students and families	Creating a trauma-informed learning environment (Social-emotional skills and wellness)	Being culturally responsive	Integrating emergency mangemen t and crisis response	Understanding and addressing staff self-care and secondary traumatic stress	Evaluating and revising school discipline policies and practices	Collaborating across systems and establishing community partnerships
Survey Items																
1|Teacher discussed death	100%: 9	80%: 2, 6	80%: 2		100%: 5		100%: 1	100%: 1	75%: 10		100%: 2, 4, 5, 8		80%: 1			
2|Teacher discussed death		80%: 2, 6	100%: 5	80%: 2	100%: 5		100%: 1	100%: 1	100%: 5		100%: 2, 4, 5, 8		80%: 1			
3|Teacher discussed death		100%: 2			100%: 2, 5		100%: 1	100%: 1	100%: 5	80%: 2	100%: 5, 7, 8		80%: 1			
4|Asked teacher to go to	80%: 2	100%: 5			100%: 1, 2, 3, 5, 6, 8, 10		100%: 2	80%: 9	100%: 4		100%: 5, 6		100%: 4			
5|My teacher let me know	100%: 6	100%: 2, 5, 6, 8		100%: 2, 3, 6	100%: 1, 3, 5, 6, 10	60%: 6	90%: 10	90%: 10	100%: 5	60%: 4	100%: 5, 6, 10	60%: 6	100%: 1			100%: 10
6|The way my teacher	100%: 2, 3, 6	100%: 1, 5, 6, 8, 10			100%: 5		100%: 1, 2	90%: 10	100%: 5	40%	100%: 2, 4, 5, 6		100%: 1			
7|I feel that my teacher	100%: 2, 6	100%: 1, 5, 10			100%: 5		100%: 1, 2	100%: 8, 9	100%: 5		100%: 1, 2, 4, 5, 6,		80%: 1			
8|More than one teacher	100%: 6	100%: 2, 5		100%: 5, 6	100%: 5		100%: 1, 5	100%: 4	100%: 5		100%: 1, 4, 5, 6, 8		40%: 5			
9|In general, I feel	100%: 2, 6	100%: 1, 2, 4, 5, 8, 9, 10		100%: 1, 2, 4, 5, 6, 10			100%: 1	100%: 4			100%: 1, 2, 4, 6, 8,					
10|I know a teacher that I	100%: 2, 6	100%: 1, 2, 4, 5, 8, 10	100%: 1	100%: 2, 4, 5, 6, 8, 10			100%: 1	100%: 1, 4			100%: 2, 6, 10					
11|My teacher seemed to	70%:	100%: 1, 5, 8, 10		100%: 5			100%: 1	100%: 1	80%: 1	100%: 2	100%: 2, 6, 8, 10	100%: 2		100%: 10		
12|I think my teacher	100%: 6	100%: 1, 5, 10		100%: 1, 5			100%: 1, 4, 5, 10	100%: 1, 3, 9, 10	100%: 1, 4, 5, 10	100%: 2	100%: 1, 2, 5, 6, 8,	100%: 2	100%: 1			
13|I think my teacher	100%: 6	100%: 1, 5, 8, 10		100%: 2, 4, 5			100%: 1, 5, 10	100%: 1, 5, 10	100%: 1, 5, 10	100%: 2	100%: 1, 5, 6, 8, 10	100%: 1	100%: 1			
14|In general, I think				100%: 4, 5, 6				80%: 9			90%: 10					
15|I think my teacher needs	100%: 6	100%: 1		100%: 4, 5, 8		100%: 1	100%: 1	100%: 1, 9	100%: 1, 6	100%: 1	100%: 1, 5, 6	100%: 1	100%: 1, 5		100%: 4	
16|I do not care about what	70%: 9	100%: 1	60%: 9	100%: 4, 5		100%: 1	100%: 1	100%: 1	100%: 1	100%: 1	100%: 1	100%: 1	100%: 1			
17|I think my teacher knows	100%: 6	100%: 1, 5, 8	80%: 5	100%: 5	100%: 1, 4	100%: 1	100%: 1	100%: 1, 5, 9	100%: 1, 5, 6		100%: 1, 2, 5, 6, 8,	100%: 1	100%: 1			
18|My teacher seemed		80%: 10		100%: 8			90%: 10	100%: 9	100%: 6		80%: 2		100%: 1			
19|I have advice/ideas for	100%: 6	100%: 1, 4, 5	100%: 5	100%: 1, 2, 3, 6	100%: 1, 2, 3, 4, 5, 6, 8, 9	100%: 2, 6		60%: 4	100%: 5	100%: 1, 6	100%: 1, 5, 6	100%: 3, 4	100%: 1			
20|If my teacher said or did	100%: 2, 6	100%: 2, 5		100%: 1, 3, 6	100%: 1, 2, 3, 4, 5, 6, 8,	100%: 1		100%: 9	100%: 1	100%: 1, 6	100%: 1, 5, 6	100%: 1	100%: 1			

Appendix C2
Table of Specifications: Short Answer Questions

QUESTIONS	RESPONSES
Do you think the SAMHSA and NCTSN principles are sufficient to address the youth perspective?	1: Seemed limited in scope when considering cultural diversity and trauma. NCTSN applies better to school setting than SAMHSA.
Do you think that there are missing principles? If so, please explain.	1: Yes, segment for students AND teachers. 2: Sufficient. May benefit from more details on how to incorporate youth or youth voice.
Are there additional items you would add to the survey?	1: Yes, ask about whether or not both the students and teachers feel they are in a safe/engaging
Are there any items you would remove from the survey?	1: Remove items saying the same thing.
Do you find any of the items unclear? If so, please include the number and explanation.	1: Yes, evaluating and revising school discipline policies and procedures and collaborations across all
Do you have any additional comments or feedback?	3: Safety, is it physical, emotional or both? Answers might not get a confident response.

Appendix D

Youth Gun Violence and Voice Survey: Cognitive Interview Phase

The purpose of this questionnaire is to understand your honest perspective.
There are no right or wrong answers.
Your answers *will not* be shared with students or any teachers.

Please choose one answer to the following questions and mark the box next to your choice.

1. In the last six months, one of my schoolmates was a victim of gun violence and died.
   Y= yes □
   N= no □
   NS= not sure □
2. *At least one* of my classroom teachers discussed this student's death with me and/or my classmates.
   Y= yes □ **(If yes, continue to #3.)**
   N= no □ **(If no, please stop here.)**
   NS= not sure □ **(If not sure, please stop here.)**

3. The first teacher that I remember discussing this student's death with me was at the following time:
   During class □
   Before or after class □
   Outside of the school day □
   I don't remember □

Please think of *the first teacher* that you remember discussed this student's death with you and/or your classmates and answer the following questions:

1. My teacher discussed the student's death with the entire class.
   Y= yes □
   N= no □
   NS= not sure □
2. My teacher discussed the student's death with me in a small group.
   Y= yes □
   N= no □
   NS= not sure □

3. My teacher discussed the student's death with me individually.
   Y= yes □
   N= no □
   NS= not sure □
4. I asked my teacher (on my own) to send me to a counselor, coach, or another school administrator to discuss the death of my schoolmate.
   Y= yes □
   N= no □
   NS= not sure □

5. My teacher told me that I can speak to a counselor or another school staff member.
   Y= yes □
   N= no □
   NS= not sure □

Please continue to think of *the first teacher* that you remember discussed this student's death with you and/or your classmates and answer the following questions by circling the degree of agreement that corresponds with your answer using the range of 1=strongly disagree to 7= strongly agree.

6. The way my teacher talked about the death of my schoolmate made me feel comfortable.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

7. *More than one teacher* offered me some form of emotional support after my schoolmate was killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

8. I think my teacher needs to be better prepared to deal with the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

9. I know a teacher that I can talk to about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

10. My teacher seemed unsure of what to say after the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

11. My teacher gave me coping strategies in class.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

12. My teacher seemed to care about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

13. I wanted to talk to my teacher about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

14. I think my teacher helped me emotionally deal with the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

15. In general, I think teachers should not talk about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

16. I think my teacher understands how I feel regarding the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

17. In general, I feel comfortable speaking with a teacher about the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

18. I feel good about how my teacher handled discussing the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

19. I feel like my teacher is stressed about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

20. I think my teacher knows how to speak to the class about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

21. My teacher provides a classroom environment that makes me feel safe.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

22. I feel that my teacher is open to feedback from me regarding how the death of my schoolmate is handled in class.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

23. I have advice/ideas for my teacher about how to speak to students when one of our schoolmates is killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

24. If my teacher said or did the following, I would be more comfortable talking about the death of my schoolmate:

_____

_____

_____

_____

Please provide the following information:

1. Gender:

   Male □
   Female □
   Other □

2. School: _____

3. Age: _____

4. Grade: _____

5. Race/ethnicity: (mark all that apply)

   American Indian or Alaska Native □
   Asian □
   Black or African American □
   Hispanic or Latino □
   Native Hawaiian or Other Pacific Islander □
   White □

Appendix E
Youth Gun Violence and Voice Survey: Pilot Study

The purpose of this anonymous questionnaire is to understand your honest perspective.
There are no right or wrong answers.
Your answers *will never* be shared with other students or school staff.

Please choose one answer to the following questions and mark the box next to your choice.

1. In the last six months, one of my schoolmates was a victim of gun violence and died.
   Y= yes □
   N= no □
   NS= not sure □

2. *At least one* of my teachers and/or coaches mentioned or said something about this student's death to me.
   Y= yes □ **(If yes, continue to #3.)**
   N= no □ **(If no, please stop here.)**
   NS= not sure □ **(If not sure, please stop here.)**

3. The teacher and/or coach that I remember the most about what he/she said about this student's death was **(choose one and fill in the blanks):**
   a. My _____ period **teacher** who teaches me _____ (name of class).
   b. My _____ (name of sport) **coach**.

4. This teacher and/or coach said something about this student's death to me at the following time:
   During class □
   Before or after class □
   Outside of the school day □
   I don't remember □

Please think of the teacher or coach that you named in #3 for each of the following questions:

1. My teacher/coach discussed the student's death with the entire class/team.
   Y= yes □
   N= no □
   NS= not sure □
2. My teacher/coach discussed the student's death with me in a small group.
   Y= yes □
   N= no □
   NS= not sure □

3. My teacher/coach discussed the student's death with me individually.
   Y= yes □
   N= no □
   NS= not sure □
4. I asked my teacher/coach (on my own) to send me to a counselor, coach, or another school administrator to discuss the death of my schoolmate.
   Y= yes □
   N= no □
   NS= not sure □
5. My teacher/coach told me that I can speak to a counselor or another school staff member.
   Y= yes □
   N= no □
   NS= not sure

Please continue to think of the teacher or coach that you named in #3 and answer the following questions by using the range of 1=strongly disagree to 7= strongly agree.

6. The way my teacher/coach talked about the death of my schoolmate made me feel comfortable.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

7. *More than one* teacher/coach offered me some form of emotional support after my schoolmate was killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

8. I think my teacher/coach needs to be better prepared to deal with the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

9. I know a teacher/coach that I can talk to about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

10. My teacher/coach seemed unsure of what to say after the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

11. My teacher/coach talked about coping strategies (healthy ways to deal with grief).

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

12. My teacher/coach seemed to care about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

13. I wanted to talk to my teacher/coach about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

14. I think my teacher/coach helped me emotionally deal with the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

15. In general, I think teachers/coaches should not talk about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

16. I think my teacher/coach understands how I feel regarding the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

17. My teacher/coach provides a “safe space” that makes me feel safe to express my emotions and feelings if I want to.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

18. In general, I feel comfortable speaking with a teacher/coach about the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

19. I feel good about how my teacher/coach handled discussing the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

20. I can tell, due to my teacher's/coach's reaction to the death of my schoolmate, that my teacher/coach is stressed about the death.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

21. I think my teacher/coach knows how to speak to the class/team about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

22. My teacher/coach provides a classroom/training environment that makes me feel physically safe from harm.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

23. I think that my teacher/coach would want to listen to my thoughts about how he/she handled the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

24. I have advice/ideas for my teacher/coach about how to speak to students when one of our schoolmates is killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

25. My advice for my teacher/coach about how to handle the death of my schoolmate is:

_____

_____

_____

_____

_____

_____

Please provide the following information:

1. Gender:

   Male □
   Female □
   Other □

2. School: _____
3. Age: _____
4. Grade: _____
5. Race/ethnicity: (mark all that apply)

   American Indian or Alaska Native □
   Asian □
   Black or African American □
   Hispanic or Latino □
   Native Hawaiian or Other Pacific Islander □
   White □

Appendix F

Youth Gun Violence and Voice Survey: Full-Scale Study

The purpose of this anonymous questionnaire is to understand your honest perspective.
There are no right or wrong answers.
Your answers *will never* be shared with other students or school staff.

Please choose one answer to the following questions and mark the box next to your choice.

1. In the last six months, one of my schoolmates was a victim of gun violence and died.
   Y= yes □
   N= no □
   NS= not sure □

2. *At least one* of my teachers and/or coaches mentioned or said something about this student's death to me or my class.
   Y= yes □ **(If yes, continue to #3)**
   N= no □ **(If no, go to #24)**
   NS= not sure □ **(If not sure, go to #24)**

3. The teacher and/or coach that I remember saying the most about this student's death was: **(choose one and fill in the blanks)**
   c. My _____ period **teacher** who teaches me _____ (name of class).
   d. My _____ (name of sport) **coach**.

4. This teacher and/or coach said something about this student's death to me at the following time:
   During class □
   Before or after class □
   Outside of the school day □
   I don't remember □

<u>Please think of the teacher or coach that you named in #3 for each of the following questions:</u>

1. My teacher/coach discussed the student's death with the entire class/team.
   Y= yes □
   N= no □
   NS= not sure □
2. My teacher/coach discussed the student's death with me in a small group.
   Y= yes □
   N= no □
   NS= not sure □

3. My teacher/coach discussed the student's death with me individually.
   Y= yes □
   N= no □
   NS= not sure □
4. I asked my teacher/coach (on my own) to send me to a counselor, coach, or another school administrator to discuss the death of my schoolmate.
   Y= yes □
   N= no □
   NS= not sure □
5. My teacher/coach told me that I can speak to a counselor or another school staff member.
   Y= yes □
   N= no □
   NS= not sure □

Please continue to think of the teacher or coach that you named in #3 and answer the following questions by using the range of 1=strongly disagree to 7= strongly agree.

6. The way my teacher/coach talked about the death of my schoolmate made me feel comfortable.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

7. *More than one* teacher/coach offered me some form of emotional support after my schoolmate was killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

8. I think my teacher/coach needs to be better prepared to deal with the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

9. I know a teacher/coach that I can talk to about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

10. My teacher/coach seemed unsure of what to say after the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

11. My teacher/coach talked about coping strategies (healthy ways to deal with grief).

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

12. My teacher/coach seemed to care about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

13. I wanted to talk to my teacher/coach about the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

14. I think my teacher/coach helped me emotionally deal with the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

15. I think teachers/coaches should talk about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

16. I think my teacher/coach understands how I feel regarding the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

17. My teacher/coach provides a “safe space” that makes me feel safe to express my emotions and feelings if I want to.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

18. I feel comfortable speaking with a teacher/coach about the death of a schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

19. I feel good about how my teacher/coach handled discussing the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

20. I think my teacher/coach knows how to speak to the class/team about the death of a student.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

21. My teacher/coach provides a classroom/training environment that makes me feel physically safe from harm.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

22. I think that my teacher/coach would want to listen to my thoughts about how he/she handled the death of my schoolmate.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

23. I have advice/ideas for my teacher/coach about how to speak to students when one of our schoolmates is killed.

Strongly disagree	Disagree	Somewhat disagree	Neutral	Somewhat agree	Agree	Strongly agree
1	2	3	4	5	6	7

24. My advice for my teacher/coach about how to handle the death of my schoolmate is:

_____

_____

_____

_____

_____

_____

Please provide the following information:

1. Gender:

   Male □
   Female □
   Other □

2. Age: _____

3. Grade: _____

4. Race/ethnicity: (mark all that apply)

   American Indian or Alaska Native □
   Asian □
   Black or African American □
   Hispanic or Latino □
   Native Hawaiian or Other Pacific Islander □
   White □
   Other □

VITA

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PUBLICATIONS AND PRESENTATIONS

Santangelo, D., Espinosa, M., and Vicera, V. (March 2019). United Way Youth Institute: A Youth Empowerment and Service Learning Initiative. Presented at the National Youth-At-Risk Conference, Savannah, GA.