

School Counselor's Perceptions of the Influence of Sudden Traumatic Loss on Secondary Urban  
Adolescents

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Department of Community Care and Counseling, Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Education

School of Behavioral Sciences

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Approved by:

Dr. Krystal L. Clemons, Committee Chair

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### **Abstract**

When an adolescent has a traumatic experience, the impact of the incident may be manifested within the confines of the educational setting. Educators are then required to support the student as they attempt to handle the trauma. When a student experiences a sudden and traumatic loss (death) of a parent, family member, or close friend, they are not prepared to handle the trials that come with grief. Often, teachers are not equipped with best practices of trauma-informed teaching methodology in order to best meet the needs of traumatized adolescents. When students are unable to handle their challenges, they are typically sent to the school counselor for assistance and support. The purpose of this phenomenological research investigation was to identify the perceptions of secondary (middle and high) school counselors as they dealt with adolescents who are grieving sudden and traumatic deaths. Interviews of ten secondary school counselors in an urban school division served as the source of data collection. With the results of this study, the following seven themes were identified: (a) individual/personal factors affecting the impact of death, (b) grieving process/negative mental health reactions to death, (c) societal impacts/aspects, (d) interventions/treatment strategies, (e) contextual factors affecting the impact of death, (f) academic impacts, and lastly (g) barriers to process grief.

*Keywords:* sudden loss, trauma, school counselor, bereavement, adolescent, grief

**Copyright Page**

### **Dedication**

In the bible, Philippians 4:13 reflects, “I can do all things through Christ who strengthens me.” This inspirational verse has never resonated with me more. Completing my doctoral journey, completing this marathon, would never have been possible without God’s grace and mercy. I am grateful and blessed for His kindness that was bestowed upon me during this process and I am cognizant that I am highly favored. Without God, none of this would have been possible.

To my husband, retired ABE (Aviation Boatswain’s Mate – Launch and Recovery) Navy Chief Petty Officer, Brian E. Sullivan, there are not enough words for me to thank you for your unconditional love and support. Throughout this journey, you have been my rock, my peace, and my strength. I dedicate this dissertation to you. Thank you for always being there, believing in me, and making me smile. Thank you for the MANY times you made me giggle and laugh (even when I did not want to), when I was frustrated. God knew precisely who I needed and what I needed when our paths crossed. Thank you, my favorite medic firefighter, “You make every day better just by being in it. I am happy to be your wife and share my life with you. I love you forever” - Anonymous.

To my intelligent, magnificent, and kind-hearted son, Justin T. Sullivan, I dedicate this dissertation to you. Thank you for being patient, understanding, and always checking on me when I was locked in my office for hours. I love you Justin and, “Remember you are capable of amazing things. Believe in yourself and reach for the stars” - Anonymous.

I knew I was blessed with a gift of having both parents” - Kendrick Lamar. I am convinced I have the best parents in the world, Richard, and Sarah Hinton Hillian. Daddy and Mommy, everything I am, is because of YOU. Thank you for your unwavering faith

and values that were instilled in me. Mommy, you taught me at an early age the power and magic that is stored in books. With that, both of you consistently enforced the significance of obtaining an education as a means of securing a future for myself. Further, you emphasized the importance of being a diligent worker and simply being a “good” person. I will never be able to thank you (or repay you) for everything you have done (encouragement, stories to make me smile, listening) that contributed to my development and determination to complete my dissertation. However, I love you immensely and every child should be blessed to have parents like you!

Family - where life begins and love never ends.” Thank you to the Hinton’s and Hillian’s who provided a listening ear, encouragement and much more over the years while I was in school. During our family vacations to Nags Head during Christmas, you understood when I needed to work and would ask about my progress with interested faces. Frequently, you texted or called to just check in and that was amazing for my spirit and soul. I love you.

What you leave as a legacy is not what is etched in monuments, but what is woven into the lives of others” - Anonymous. To my paternal great grandparents, Malachi and Pauline Watson Hillian, maternal great, great grandparents Divies and Maryetta Reid Mullen (born into slavery, freed in 1865), maternal great grandparents Moses and Roberta White Mullen, paternal grandparents Albert and Essie Mae Watson Hillian and maternal grandparents Vernon and Essie Mae Mullen Hinton, I dedicate this to you as I stand on your shoulders. Because you existed, I exist. Papa Moses your drive, determination, and resilience led you to acquire 100 acres (about half the total floor space of the Pentagon) of land in 1937 as a Black man in North Carolina which was extraordinary and unheard of

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“Many people will walk in and out of your life, but only true friends will leave footprints in your heart” - Elenor Roosevelt. To my sister/best friend Carla, I dedicate this to you. We discussed obtaining a doctorate multiple times and made plans to begin the process together. Although God had other plans, I completed a task we planned for ourselves. I pray I made you proud and I love you and miss you daily.

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Further, you encouraged me many times and I am certain you were not aware of how you were filling my cup. TJ, I see such greatness in you. The world is yours. Picca, (inside joke)

“Having a godson like you is a true blessing. I love you to the moon and back” -

Anonymous.

“A million memories, a thousand inside jokes, and a hundred shared secrets. That’s what makes us best friends” - Anonymous. Dr. Michele Hopkins and Mrs. Natasha Spivey Johnson, we have been sisters/best friends forever. This dissertation is dedicated to you. The support and encouragement you have provided during my doctoral journey has been amazing. Thank you for always having a listening ear and providing words of motivation and inspiration whenever it was needed. I love you.

To my goddaughter Aliyah, I dedicate this dissertation to you. Thank you for always rooting for me and providing words of encouragement at the perfect times. You are an exceptional young woman, and I am eager to see what the future holds for you. I love you!

“I’m as lucky as can be, the world’s best goddaughter belongs to me” - Anonymous.

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**List of Abbreviations**

American School Counselor Association (ASCA)

Intimate Partner (IP)

Intimate Partner Homicide (IPH)

Intimate Partner Violence (IPV)

Multi-tiered Systems Support (MTSS)

[Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#)

Virginia Department of Education (VDOE)

## **Chapter One: Introduction**

### **Overview**

During the adolescent years, it is probable a teenager will experience the death of a family member or peer (Ener & Ray, 2018; Ross et al., 2021; Chen & Panebianco, 2018). Further, it is estimated that roughly 7% of adolescents will experience the death of a parent (or primary caregiver) or sibling prior to the age of 18. Moreover, nearly 78% of adolescents will lose a family member or peer before becoming adults (Ross et al., 2021). Grief during the adolescent years is a turbulent event with the prospect of having a detrimental effect upon an individual. Experiencing a significant loss by traumatic means further complicates the grieving process for teenagers. Grief-stricken adolescents may experience responses such as: crying, feelings of despair, guilt, intense longing for the deceased, museful thinking regarding the individual, anger, or acting out (Alvis et al., 2023; Andriessen et al., 2018; Ross et al., 2021).

Experiencing a traumatic death influences multiple aspects of an adolescent's life inclusive of their interpersonal relationships, self-concept, and their capacity to function at school (Abramovitz & Albrecht, 2013; Brent et al., 2012; Ener & Ray, 2018). The lingering impact of a traumatic death may also cause a bereaved adolescent to be susceptible to mental health challenges such as depression and anxiety. Further, the adolescent may even be at a heightened risk for dying by suicide or by other means (Hill et al., 2018; Ross et al., 2021). Every adolescent will have a unique response to grief including the length of time for manifesting grief reactions. Without the opportunity to process grief, a bereaved adolescent may have extreme challenges emotionally and behaviorally which will thwart the stereotypical grieving process (Ener & Ray, 2018; Gould et al., 2021; Ross et al., 2021; Young, 2017). An adolescent who has trouble processing a sudden and traumatic death may present their challenges

in the educational setting. In most cases, the first adult the adolescent would encounter would be their classroom teacher. Yet, teachers are not trained to respond to the mental health needs a student will present when they may be in a crisis. Consequently, school counselors are utilized as the primary resource for bereaved adolescents (Ener & Ray, 2018).

### **Background**

Prior to entering adulthood, it is calculated that nearly 78% of all adolescents will experience the death of a parent (or caregiver), sibling, family member or peer (Ross et al., 2021). Some adolescents may experience multiple losses during their teenage years. Experiencing death as an adolescent may disrupt multiple facets of an adolescent's life and cause discord such as emotional and behavioral challenges, problems at home and school, and maladaptive coping methods (Andriessen et al., 2020; Berg et al., 2016; Ener & Ray, 2018; Gross & Lo, 2018). Adolescents experiencing grief often manifest acute psychological reactions after the death of a loved one. Moreover, because each adolescent will uniquely display their grief, the adolescent may not be cognizant of the emotional stressors that are correlated with grief and proceed to internalize and/or outwardly convey their challenges with grief (Ener & Ray, 2018).

In urban communities where crime is prevalent, brutality and loss of life is a pattern. Santiago and Galster (2014) determined two neighborhood indicators that being exposed to community violence and residing in a disadvantaged community put children at an intensified risk for being victimized. According to the Center for Victim Research (2019) neighborhoods with larger African American and Hispanic populations are correlated with higher rates of homicides, making these populations of adults, adolescents and children more vulnerable to becoming a homicide co-victim. To address the flourishing concern of the influence of

community exposure to violence, best practices for trauma exposure have been established to address this growing population of adolescents (Dutil, 2019; Harden et al., 2015). Designed to either instruct mental health professionals on how to implement interventions or assist with the comprehension of the influence of traumatic events on these individuals, strategically crafted programs have been developed (Harden et al., 2015).

Homicides are a part of every locality across America. The impact of losing an individual because of homicide is long-standing and grief will be experienced for an undisclosed amount of time. As 78% of adolescents will lose a family member or peer prior to adulthood, losing a cherished individual will cause acute reactions for a teenager (Cupit, 2017; Dinizulu et al., 2013; Ener & Ray, 2018; Gupta, 2018; Ross et al., 2021). Homicide victims leave behind co-victims, members of their family and friends, who are now left to cope with the aftermath of their death (Center for Victim Research, 2019). Adolescent co-victims may become challenged by their grief and may manifest their reactions via anger, losing their appetite, have considerable apprehension for other family members or friends, by withdrawing, depression, or engaging in maladaptive behaviors (Chen & Panebianco, 2018; Dinizulu et al., 2013; Gould et al., 2018; Hill et al., 2018).

The Center for Victim Research (2019) revealed that 8% to 18% of adolescents are victims of homicide co-victimization. Likewise, adolescents are at an inflated risk for co-victimization more so than adults as adolescents typically have larger peer groups than adults. When an adolescent loses a family member or peer the experience is taxing and presents an array of complications as the teen attempts to make sense of the tragedy. Although the adolescent may respond to a traumatic death in a plethora of ways, some adolescents will become riddled with depression, post-traumatic stress disorder, substance abuse disorder, prolonged grief disorder, be

impacted by their physical well-being, face financial difficulties, or challenged by hurdles to the grieving process (Center for Victim Research, 2019; Gupta, 2018; Hill et al., 2018).

Teachers encounter students for an extended period daily once they enter the school facility. Moreover, when the students enter a school, they enter with a vast array of academic, social, emotional, and physical necessities (Dinizulu et al., 2013; RB-Banks & Meyer, 2017). RB-Banks and Meyer deduced that the way trauma is viewed within the classroom setting today is different because trauma is often unnoticeable, and teachers are not familiar with appropriate techniques to implement when students are traumatized. When students exhibit behaviors (e.g., reacting to a traumatic death) a teacher cannot handle or adequately address; the student is typically referred to an administrator or school counselor as a means of support (Dods, 2015; Lane et al., 2014).

Every adolescent will react to a sudden and traumatic death in a dissimilar manner (Dinizulu et al., 2013; Dods, 2015; Dutil, 2019; Gupta, 2018; Gross & Lo, 2018;). Moreover, when a death is distressing like a homicide, adolescents are prone to challenges by complicated grief which will further exacerbate the grieving process (Dinizulu et al., 2013; Ferow, 2019; Herberman Mash et al., 2013). Violent deaths are directly related to elevated levels of sorrow, anxiety, and maladaptive grief. If the child witnesses the homicide of a family member or peer the likelihood, they will be plagued with triggering thoughts or invasive memories, or even post-traumatic stress disorder throughout their lifetime increases substantially (Ferow, 2019; Kennedy & Ceballo, 2016).

While having distinct ways of coping with sudden and traumatic deaths, adolescents who reside in urban communities may not consistently have adequate access to sufficient resources to assist with the challenges they experience (Dinizulu et al., 2013; Harden et al., 2014; Johnson,

2014). When a teenager experiences a traumatic death, the feelings and emotions connected with that event are stressful and the teen may display challenging symptoms in the educational setting (Johnson, 2014; Lane et al., 2014; McLean et al., 2022; RB-Banks & Meyer, 2017). Students are referred to the school counselor as a means of support and for assistance with processing the event when symptoms are displayed after traumatic events. School counselors have direct knowledge of the experiences of urban adolescents with sudden and traumatic deaths. Likewise, school counselors may also be privy to how sudden and traumatic deaths impact urban adolescents.

### **Situation to Self**

The researcher began in the field of education as a Spanish teacher. After a few short years working as a teacher (and as elective department chairperson), she wanted to assist students in a different manner. Because of this intense desire to support the diverse needs of students, she completed her master's degree in urban education with a concentration in school counseling. Upon completing her degree, the subsequent school year, she remained in the same middle school.

Tiffany Hillian-Sullivan has been a school counselor for over 20 years. Currently, she is the director of school counseling for an urban high school. Throughout her career, she served at the middle and high school level in an urban school division. During her tenure as a school counselor, she has always had superb rapport with students and strived to establish genuine, meaningful, and impactful relationships with her students. During her career she would lose a student because of tragedies. Mrs. Hillian-Sullivan has lost students because of horrific car accidents, suicides, health complications, domestic violence or intimate partner incidents, and homicides. The grief she has sustained would be unpalpable. Nevertheless, she would

strategically suppress the grief in a concerted effort to support the bereaved students and staff of her school.

Within the past four to five years, Mrs. Hillian-Sullivan began to detect an increase in the number of adolescents killed; this was perplexing to her. She could not comprehend why so many teenagers were dying, often at their peers' hands. When working in an urban school division, there are concentrated areas of poverty that are often riddled with crime and individuals living in these areas frequently lack access to sufficient education and resources (Abramovitz & Albrecht, 2013). Within these poverty-stricken communities, neighborhood conflicts inevitably infiltrate the school, forcing the educational setting to try to mitigate the neighborhood's challenging circumstances. Mrs. Hillian-Sullivan observed that when an adolescent tragically dies in a low-income community, the following day grief-stricken students will come to school. Depending upon the popularity of the student or the nature of the tragedy, the academic environment has been disrupted for a day or multiple days. She noticed some students were so distraught, they were unable to attend school. Other students have utilized the school as a coping mechanism, viewing it as a means of escaping their brutal reality. Moreover, Mrs. Hillian-Sullivan recognized that some students who elected to utilize their school as a refuge may present a plethora of challenges in the educational setting. Frequently, the students will attend school the day after the tragic event seeking grief support and desiring to be comforted by trusted adults or their peers. At times other students may not desire assistance but elect to manifest their sorrow in diverse ways in the instructional setting. For example, Mrs. Hillian-Sullivan recalled meeting with an adolescent attending school after a traumatic event that presented with anger or depression. In some instances, the recent sudden, traumatic loss has triggered emotions related to a previous loss.

Working in an education setting for multiple years enabled the researcher to observe the way an adolescent reacts to sudden and traumatic death during school. Mrs. Hillian-Sullivan, experienced educators, are the first individuals to be on the receiving end of the reactions. Nevertheless, often teachers lack adequate instruction regarding the implementation of trauma-informed care best practices. During select instances, Mrs. Hillian-Sullivan observed teachers becoming reactive (through no fault of their own in select instances) as they were not afforded the time to question a student regarding the rationale behind their disruptive behavior. Consequently, when a teacher determines a student is under duress, the student is directed to an administrator for discipline (depending on the severity of the reaction) or to the school counselor for mental health assistance.

In working with students who have experienced sudden and traumatic death throughout the researcher's career, a trend was observed. As she discussed and supported students with the current loss they were attempting to process, they began to share stories of other losses they had experienced. The students shared layers upon layers of traumatic loss. Essentially, a loss would occur, and they would never have ample time to process the initial loss. The researcher labeled this "the layering effect" where an individual has innumerable layers of unprocessed traumatic grief.

### **Problem Statement**

Adolescents are likely to experience a significant loss (i.e. death of a parent, sibling, family member, or peer) during their teenage years (Burrell et al., 2020; Ener & Ray, 2018; Johnsen et al., 2021). Experiencing a death that occurs because of a traumatic incident is challenging, but even more perplexing for an adolescent. The way a child reacts and becomes

cognizant of a death, comprehends the notion of death, and their cognitive capacity when the death occurred are critical components (Bottomley et al., 2019; Ener & Ray, 2018; Gupta, 2018).

Inevitably, adolescents will react to the traumatic death of a family member or peer (Andriessen et al., 2020; Johnson, 2014; McLean et al., 2022). The developmental level of an adolescent will influence their comprehension of death and how they are exposed to death and make meaning of the loss (Ener & Ray, 2018). Mental health professionals in the educational setting (i.e., school counselors) are charged with providing grief support for this unique population (Chen & Panebianco, 2018; Dods, 2015; McClatchy & Peters, 2015).

School counselors are responsible for a myriad of tasks during each school day that extend beyond providing counseling to students in need. These additional responsibilities create a problem, and it is not feasible for school counselors to provide extensive support for grief-stricken adolescents when needed. It is critical to have a synopsis of what school counselors have detected within this population in order to know how the school setting may be able to dispense more in-depth resources. Urban school counselors have first-hand knowledge of what is occurring in the lives of their students. By researching their impressions of how sudden and traumatic deaths impacts urban adolescents, inestimable data will be accrued. Knowing the ways students are impacted by sudden and traumatic deaths will also permit the opportunity for the strategic formulation of programs to directly support students riddled with traumatic grief.

### **Purpose Statement**

The purpose of this phenomenological research study was to identify the perceptions of secondary urban school counselors on the impact of sudden and traumatic deaths on secondary urban adolescents. For purposes of this research, a sudden loss was deemed a death that occurred unexpectedly (Johnson, 2014; Johnsen, et al., 2021). The losses could have occurred due to

health complications, domestic or intimate partner violence, mass shootings, natural disasters, racism, police brutality, gang violence, homicide, or other circumstances (Johnsen et al., 2021; Lindsey et al., 2019). School counselors play a vital role in meeting the diverse needs of their students. Therefore, when students experience a sudden and distressing loss (i.e., parent, sibling, family member, or peer), they will often bring their feelings and emotions regarding the incident into the educational setting (Andriessen, et al.; Lane et al., 2014; Masterson, 2012; Palmer et al., 2016).

Often, adolescents are not proportionately equipped to manage the challenging feelings and emotions they are experiencing due to trauma (Johnson, 2014; McClatchey & Peters, 2015; Mrug et al., 2016). Students may bring feelings of depression, confusion, despair, and anger into school. Teachers are not adept at supporting the emotional needs of students in a crisis. When students experience a sudden loss, they are referred to the school counselor for support with processing their grief (ASCA, 2020; Chen & Panebianco, 2018; Edwards et al., 2023).

The research investigation participants were secondary (middle and high) school counselors working in urban schools in southeastern Virginia. Middle and high school counselors were selected instead of elementary school counselors because of the researcher's extensive experience with secondary students. The viewpoints of the school counselors will not be a representation of every school locality in the nation, but rather the data gathered will be solely relevant to the Hampton Roads area of Virginia.

### **Significance of the Study**

The significance of the study was to comprehend how secondary school counselors perceive the influence of sudden and traumatic losses on urban adolescents. This study is critical because urban communities are often saturated with lower socioeconomic communities with

higher incidents of crime (Dutil, 2019; Harden et al., 2015; Kennedy & Ceballo, 2016). As a result of higher crime rates, homicides occur more frequently compared to communities with lower crime rates (Busby et al., 2013; Kennedy & Ceballo, 2016; Mrug et al., 2016). Adolescents residing in high crime communities are affected because of connections to the deceased individuals who perished due to violent crimes such as homicide. When students experience numerous traumatic deaths, they may not seek counseling services to address their mental anguish (Palmer et al., 2016; Sharpe et al., 2014; Smith, 2015). Instead, adolescents may elect to engage in maladaptive coping methods, become depressed, or lash out in anger (Andriessen et al., 2020; Blueford et al., 2021; Palmer et al., 2016). Mood changes, depression, or anger may manifest in the school setting. Adolescents are directed to school counselors for support. It is vital to understand the current trends secondary school counselors in urban school settings have noticed with adolescents regarding sudden and traumatic deaths. If cognizant of the needs of our students, school counselors will be better equipped to support them. Moreover, school divisions will be empowered to devise student-centered grief programs tactically designed to address traumatic loss in schools.

### **Research Questions**

**Research Question 1:** What are school counselors' experiences with sudden and traumatic death in urban school settings?

**Research Question 2:** What are school counselors' perceptions of the impact of sudden and traumatic death on adolescents?

### **Definitions**

1. *Adolescent* – “is defined as someone between the ages of 11 to 18 years of age” (Palmer et al., 2016, p. 275).

2. *Bereavement* – “refers to “the state or fact of being bereaved or having lost a loved one by death” (National Child Traumatic Stress Network, 2004, p. 4).
3. *Complicated Grief* is – “identified by the following symptoms: unbidden memories of intrusive fantasies related to the lost relationship, intense pangs of severe emotion related to the lost relationship, distressingly strong yearnings or wishes that the deceased were there, feelings of being far too much alone or personally empty, excessive avoidance of people places, or activities that remind the person of the deceased, unusual levels of sleep interference, and lastly, loss of interest in work, social, caretaking, or recreational activities to a maladaptive degree” (Neria & Litz, 2004, p. 75).
4. *Grief* – describes “the intense emotional distress an individual has following a death” (National Child Traumatic Stress Network, 2004, p. 4).
5. *Mourning* – refers to “the encompassing family, social, and cultural rituals associated with bereavement” (National Child Traumatic Stress Network, 2004, p. 4).
6. *Trauma* – “is defined as “an extremely distressing experience that causes severe emotional shock and may have long-lasting psychological effects” (McEachron, 2014, p. 63).
7. *Traumatic Grief* – is defined as “a distinctive psychopathological condition stemming from chronic bereavement” (Neria & Litz, 2004, p. 75).
8. *Traumatic Loss* – refers to “the loss of loved ones in the context of potentially traumatic circumstances; such as homicide, suicide, homicide, accidents, and natural disasters” (Boelen et al., 2019, p. 2).

### **Summary**

This chapter detailed the rationale for this qualitative, phenomenological study. The chapter explained the background of adolescent exposure to sudden and traumatic death and provided a brief synopsis of the impact of sudden and traumatic deaths on adolescents. It is critical to understand the observations of secondary school counselors with this phenomenon. The purpose of this research study was to obtain the lived experiences of secondary school counselors during their work with adolescents who have experienced sudden and traumatic death.

## Chapter Two: Literature Review

### Overview

A wealth of knowledge currently exists regarding how trauma impacts adolescents (Andriessen et al., 2020; Blueford et al., 2021; Berg et al., 2016; Busby et al., 2013; Currier et al., 2015; McClatchey & Peters, 2015). Frequently, traumatic experiences occur within the home or in the community where adolescents reside, and the distress of those harrowing events follow the students into the confines of the educational setting. However, educators are not privy to the trauma or traumatic experiences of their students (Dods, 2015). Students may elect not to share recent events or because they have been habitually exposed to disturbing events they inadvertently (or purposefully) discover other ways to manage their pain and/or frustration. Because the teachers typically lack formal training regarding trauma-informed practices, the students are referred to the school counselors as a means of supporting the student. Consequently, school counselors may have salient information about how repeated sudden losses are impacting American adolescents.

Although death is an inevitable facet of life, losing a parent, close family member or friend during the adolescent years is particularly problematic. When adolescents reside in select urban communities of a lower socioeconomic status, these areas are often riddled with crime and violence, and death is a common norm for the community. Experiencing numerous deaths puts adolescents at an eminent risk of inadequate performance in school (Busby et al., 2013; Carlson et al., 2013; Oosterhoff et al., 2018). Subpar academic performance is directly associated with many challenges that could occur later in life. School counselors are obligated to implement crisis counseling for a student when an either a death in the community occurs or a student loses a family member. Yet, what trends do school counselors notice with students regarding the losses

they experience? What interventions do they implement? What is the impact of the sudden and traumatic loss upon the adolescent? An abundance of literature may be found regarding how the teacher handles bereaved traumatized adolescents; however, not much research exists regarding the observed trends of the subject from the perspective of the school counselor. Since school counselors are deemed the mental health experts within the confines of the educational setting, are they adequately prepared to handle the growing demands of traumatized bereaved students? This literature review analyzes the impact of trauma on the community, describes how trauma is rapidly desensitized, and synthesizes the experiences of bereaved African American adolescents. Furthermore, the literature review considers the effect of death on the mental health of adolescents, how death influences teenagers and their education, how trauma interacts with learning and how trauma is addressed in schools and finally the grieving process.

### **Theoretical Framework**

A theoretical framework comprises the study's purpose, description, and significance. Concepts, theories, assumptions, and past research collectively advise the topic (Hughes et al., 2019). This study examined school counselors' perceptions of sudden and traumatic loss on urban adolescents.

Prior research has examined the impact of trauma on children and adolescents. Literature also discusses trauma informed teachers and classrooms. However, there is a gap in the literature concerning school counselors' beliefs about the impact of trauma on students, particularly those in urban settings. The topic for the current study was chosen because of the researcher's extensive experience as a professional school counselor in an urban environment and the realization of this gap in the research.

The interconnections of the researcher's assumptions and biases encompass empirical knowledge (Nicol, 2012). As a professional school counselor, the researcher has evident biases and assumptions based on lived experiences. Her assumptions, expectations, and biases as a researcher were documented via bracketing and reflexive journaling.

The researcher operated from an ontological philosophical perspective, meaning research about some idea of truth in context is allowed (Nicol, 2012). She acknowledges the difficulty in researching a topic about a phenomenon that has shaped her professional mentality in an objective way. There are multiple ideas about trauma and urban adolescents, and ontology permits the dialogue of the independent realities of these ideas. Ontology will also allow for the participants' subjective experiences with trauma to be revealed. This study will operate from an emic viewpoint rather than an etic viewpoint. An emic viewpoint will allow for the investigation of the subculture of school counselors in urban districts within the larger space of education and their experiences with trauma to derive meaningful perceptions. An etic viewpoint would require the investigation of school counselors in several different education spaces, such as suburban, rural, etc. (Land, 2024).

Social constructivism works within a cultural context, and the researcher works with the participants to define, understand, and resolve the research question (Nicol, 2012). Flynn et al. state phenomenology is a social constructivist research methodology. Discussing school counselors' experiences with death and trauma of adolescents is best told qualitatively because of its personal nature.

## Related Literature

### Homicide

Homicides infiltrate every community, rural and urban, across the United States. The unequivocal violence a homicide brings to a locality not only disrupts the neighborhood community where the incident occurred, but also has a long-lasting and detrimental impact upon the victim's family and friends. The term homicide co-victim is defined as individuals who mourn the loss of an individual by homicide, including members of their immediate or extended families and/or friends (Center for Victim Research, 2019). The Center for Victim Research estimates unfortunately 64,000 to 213,000 human beings lose an individual to homicide. Moreover, African American adolescents and adults are most likely to be identified as homicide co-victims (Center for Victim Research, 2019; Santiago & Galster, 2014).

Select demographic considerations exist to make individuals at risk for co-victimization. First, the Center for Victim Research (2019) asserts homicide co-victimization is exceptionally intense amongst teenagers, with this unique population being more apt to lose a family member or friend amid their adolescent years. When adolescents tragically lose individuals in their lives, frequently they are unable to cope during the aftermath of the sudden and traumatic loss. Furthermore, when these tragedies occur, schools are left to manage the grief-stricken adolescents as they struggle to cope with the distressing emotions correlated to the anguish they are experiencing. Some research currently exists regarding how teachers support bereaved adolescents; however, there is a gap regarding the support received by the school counselors (Frieze, 2015; Dari & Gay, 2022).

Secondly, females are invariably indicated more as individuals of co-victims of homicide. Lastly, individuals who reside in an urban area are at a heightened risk for co-victimization, in

comparison to their rural or suburban counterparts (Center for Victim Research, 2019). In essence, urban school divisions must serve as a sturdy support system for these grief-stricken adolescents because the challenges they face within their communities will inevitably follow them into the confines of the educational setting.

### **Suicide**

According to King et al. (2019), the second leading cause of death among adolescents in the world is suicide. In the United States, the suicide rate among adolescents aged 14 to 19 years has increased 28% since 2000. Adolescent suicide increased 87% from 2007 to 2016 (Grupp-Phelan et al., 2019). Black children and adolescents have experienced an increase in suicide and suicidal ideation over the last few years (Lindsey et al., 2019). Dari and Gay (2022) posit the increases may be due to the uptick in racial violence. Culturally, urban people tend to think suicide is not an issue in their communities. However, the numbers tell a different story. As the increases in urban communities happen, urban schools are greatly affected.

Adolescents are the most susceptible age group for imitating suicidal behavior, and Black adolescents are no different. A classmate's suicide can intensify preexisting negative life events. Urban adolescent vulnerability factors such as current or past psychiatric conditions, family history, substance abuse, stressful life events, access to lethal methods, incarceration, social impairments, environmental factors, and lack of protective factors can predict suicidal behavior in addition to the suicide of a classmate (Gould et al., 2018; Herberman Mash et al., 2013; Hill et al., 2018). As the suicide rates rise among urban adolescents, school counselors must address this issue within the school building.

Statistically the rates of suicide and components of suicidal actions have climbed across the United States (Hedegaard et al., 2021; Post et al., 2023; Turecki et al., 2019). When

considering the rates of suicide, it must be noted that suicidal behavior encompasses suicide and attempts (Bachmann, 2018). However, an array of factors is typically present considering suicidal behaviors. In the United States, suicide has been discovered to be the secondary source of death for adolescents. The reasons that contribute to suicide as source of death for this age group include challenges with substance abuse, emotional well-being, diminished self-esteem, dysfunctional peer and caregiver relationships, and educational difficulties (SAMHSA, 2020). According to Turecki et al., (2019) suicidal behavior encompasses suicidal ideation “which is defined as thoughts about ending one’s own life, whether active (with a plan) or passive (with only a wish to die but no plan)” (p. 2). Despite the lack of physically adverse behaviors, more than one third of teenagers that endure suicidal ideation will attempt suicide during their lives (SAMHSA, 2020). The potential to die by suicide becomes more heightened when the individual has a plan and has elevated levels of doubt and/or despair.

Suicide, suicide attempts, self-harm, suicide contagion, suicidal ideation are impactful health concerns for American youth. The SAMHSA (2020) defines suicide as “a death caused by self-directed injurious behavior with an intent to die as a result of the behavior” (p. 4). A suicide attempt is directed at oneself, not lethal, and the individual engages in possibly dangerous behavior with an intention. When an adolescent has a history of suicidal attempts, they are at an elevated risk of dying by suicide and may engage in more deadly attempts. When an individual is exposed to suicide or the suicidal actions of others who are at risk because they are considering suicide, this is considered suicide contagion. When a person loses a family member, friend, or someone else they are connected to it becomes a substantial hazard for the individual and the community at large (SAMHSA, 2020).

The concept of suicidal ideation is about an individual considering or preparing for suicide. The beliefs reside on a scale of intensity ranging from a desire to die with no means, plan, or intent to operate to suicidal ideation with a precise plan with intent (SAMHSA, 2020). Physically damaging behaviors are not encompassed in suicidal ideation despite more than one third of teenagers who engage in suicidal ideation also attempt suicide at some point in their life. Any behavior that directly impacts the individual and consciously causes injury will likely cause injury to the individual is defined as self-harm. The SAMHSA asserts the category of self-harm is also inclusive of suicidal and non-suicidal self-injury, and “self-harm with unclear intent” (p. 4). Moreover, in recent years, a non-suicidal self-injury has been deemed a considerable risk factor for dying by suicide and attempting suicide and possibly (or not) connected with suicidal rates of ideation (SAMHSA, 2020).

There has been an upsurge in the quantity of teenagers and young adults who have died by suicide (Dari & Gay, 2022; Mirick et al., 2018; SAMHSA, 2020). Suicidal ideation, self-harm, and suicide attempts are substantially elevated in adolescents in comparison with adults, although adult completion rates for suicide are higher (SAMHSA, 2020). During the year of 2018 the quantities of suicide completions for teenagers was 2.85 per 100,000 for the age range of 10 to 14 and 11.39 per 100,000 for the age range of 15 to 19. Furthermore, according to SAMHSA (2020) during 2019 precisely 18.8% of adolescents enrolled in high school had thoughts of suicidal ideation within the preceding year while 8.9% had a suicide attempt.

Select adolescent populations are predisposed to suicidal thoughts and behaviors. The adolescent groups at an elevated risk for the aforementioned behaviors include lesbian, gay, bisexual, transgender, and questioning or queer adolescents, and adolescents that fall within the realm of LGBTQ+ (SAMHSA, 2020). Statistically, lesbian, gay, and bisexual teenagers are two

to four times more inclined to communicate self-harm, suicidal thinking, or attempt a suicide in correlation to their heterosexual peers. Adolescents who are transgender are 4 to 5 times more prone to try suicide when compared to their cisgender counterparts. In addition, 34.6% of adolescents who consider themselves transgender indicated they attempted suicide within the last year (SAMHSA, 2020).

Adolescents of distinct ethnic and minority populations have increased rates of suicidality. During 2017 adolescents who were American Indian, Alaska natives, or identified as more than one race indicated increased amounts of suicidal attempts and ideation (SAMHSA, 2020). Despite the decrease in suicide attempts with most ethnic groups between 1991 and 2017, there was a surge in the quantity of Black youth who attempted suicide or who experienced an injury due to a suicide attempt. The distinction in suicide attempt rates may be correlated to inequalities related to accessibility to mental health resources and other services that American Indian, Alaska Native, and Black adolescents “disproportionally experience, including poverty, historical trauma, and adverse childhood experiences” (SAMHSA, 2020, p. 6).

Risk factors are identified as distinctive characteristics that may elevate a person’s risk of suicide. The SAMHSA (2020) asserts because adolescents are in a state of evolution in their lives, often engaged in changeable and/or fluid relationships at home and school, and may experience challenges at home, it is likely they will encounter depression or anxiety. Challenges with mental health and substance abuse also elevate the probability an adolescent will attempt suicide and die by suicide. Moreover, some of the following individualized risk factors are also linked to increased suicides and attempts:

- Previous suicide attempts
- Childhood trauma such as emotional, physical, or sexual abuse

- Being in the child welfare system
- Being a victim or perpetrator of bullying
- Experiencing a stressful event
- Consistent low-level or toxic stress
- Dysregulated sleep
- Hopelessness
- A sense of losing control
- Emotional reactivity or pattern of aggressive or aggressive-impulsive behavior
- Access to non-secure firearms
- Access to lethal means of suicide, including medications (SAMHSA, 2020, p. 6)

Protective factors “are factors that mitigate against risk” (SAMHSA, 2020, p. 6).

Acknowledging that protective factors have the same critical role as risk factors is vital.

Protective factors that encourage adolescents not to consider suicide as an option involve: being attached to their community, knowing who they are as individuals, having the capacity to be solution-focused, flexibility, efficient medical and mental health resources, and mindset about religion and culture. When risk factors are minimized and protective factors are highlighted, adolescents are equipped with strategies, will be more supported, and will be more capable of thriving in adulthood (SAMHSA, 2020).

While having a thorough comprehension of the risk and protective factors for adolescents, because adolescents frequently fail to divulge thoughts of suicidality, school-based screenings are implemented as a means of identification (Myrick et al., 2018; SAMHSA, 2020).

Universal screenings are defined as, “screenings of all students in one grade or in the school, not

just those identified as high risk, and are often used by schools to identify students who are at risk for suicide (Myrick et al., 2018, p. 22). The incorporation of school-based universal screenings are a productive means for the identification of students with depression, suicidal thoughts, and behaviors (Myrick et al., 2018).

The predominant advantage of universal screenings is that they encourage the authentication of youth that are deemed high-risk which will enable the mental health professionals in the school building (i.e., school counselors, school psychologists, school social workers) to align them with appropriate resources (Myrick et al., 2018). Researchers have discovered urban schools typically have elevated rates for positive screenings when compared to more suburban schools. During a study of large, urban and ethnically diverse high schools located in the southwest and pacific coast of the United States, Hallfors et al. (2006) discovered 29% of the screenings for suicide returned elevated. Yet, Brown and Gromet (2009) screened minority students in Washinton D.C. via a grant funded program initiative. With the 229 adolescents who were evaluated, almost half (45%) were at risk for suicide (Brown & Grummett, 2009). Even though universal screenings can connect struggling students to beneficial resources, often collaborators may not believe in the merit of the action and prefer other suicide prevention programs such as “curriculum-based” education or programs strategically designed to train staff (Dari & Gay, 2022; Mirick et al., 2018, p. 23).

### **Intimate Partner Violence**

Intimate partner violence (IPV) includes, “stalking, sexual violence, physical violence, the threat of physical or sexual violence, psychological aggression or coercion, and other exertions of abusive control over a partner within the context of a romantic relationship” (Graham et al., 2021, p. 18). When an individual suffers abuse by an intimate partner (IP), they

are at an intensified risk of being continuously and critically abused or murdered by their partner (Graham et al., 2021). For females in the United States, one in three homicides that are committed are done by IP (Graham et al., 2021, Messing et al., 2021). Likewise, precisely 51% of female victims of homicide die at the hands of a current or former IP, in comparison to almost eight percent of male homicide victims (Adina et al., 2019; Graham et al., 2021). Comparatively two-thirds to almost 75% of women who are killed by their prevailing or prior partner suffer from being abused ahead of being murdered (Messing et al., 2021). Moreover, when females murder men, previous IPV versus the female exists in 75% of the incidents (Messing et al., 2021).

Relationships during the adolescent years are more susceptible to experiencing IPV (Adhia et al., 2019). The 2011 National Intimate Partner and Sexual Violence Survey approximated slightly under 25% (23.2) of females and 14% of males are involved in domestic incidents prior to reaching 18 years of age. Further, the 2017 National Youth Risk Behavior Survey revealed 6.9% of teens had been subjected to sexual violence and precisely eight percent were physically assaulted by their romantic partner within the year (Adhia et al., 2019). The National Survey on Teen Relationships and Intimate Violence concluded over 60% of adolescents with a current or previous (within precisely one year) have been exposed to some form of IPV (Adhia et al., 2019).

Intimate partner homicide (IPH) is identified as the most extreme aspect of IPV (Adhia et al., 2019). Precisely seven percent of teenage homicides were done by intimate partners with females being identified as the vast majority of the IPH victims. Moreover, teenagers are more inclined to murdered by another teen and over one-third of those teens who were killed, died in a residence where they did not reside (Adhia et al., 2019).

### **Sudden Loss and Trauma**

Sudden loss can be extremely traumatic for all who are survivors. In fact, survivors of sudden and traumatic loss are at risk for psychological harm (Andriessen et al., 2020; Carlson et al., 2013; Dutil, 2019; McEachron, 2014). Oosterhoff et al. (2018) note that not only do people experience their first sudden loss during middle adolescence, but sudden loss also often co-occurs with other traumatic events. Trauma is a serious physical or psychological injury that has resulted from a highly threatening, terrifying, or horrifying experience and results from an event, series of events, or set of circumstances that have lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual wellbeing (Currier et al., 2015; 2005; Turner et al., 2021; SAMHSA, 2020). A traumatic event, such as a sudden loss at a young age, can disastrously cause significant impacts in social relationships, career aspirations, and academics. Examples of such consequences may cause truancy and lack of focus. In severe situations, this leads to more contrary educational issues, such as lower academic achievement, quitting school, or frequent disciplinary actions.

There is a significant need for trauma-informed care and grief counseling among urban communities, and this need extends to the schools. A trauma-informed school promotes learning about and understanding the whole student, increases positive academic outcomes, helps to develop socially and emotionally responsible citizens, creates safe spaces (Gross & Lo, 2018; Kurian, G., 2014; Leitch, 2017; Oosterhoff et al., 2018). Collaboration with community support and integration of mindfulness practices into school culture can assist students with handling their trauma. These practices can also assist with the incorporation of knowledge of the impact of early trauma into policies and programs and create practical skills to build self-regulation and self-care.

### **Impact of Trauma on the Urban Community**

Communities of a lower socio-economic status are frequently riddled with strife and discord and neighborhood conflicts may invade the school, depending on the nature of the conflict. When neighborhood conflicts are present within a school, educators are involuntary obligated to attempt to mediate the conflict (if possible) and/or diffuse the situation. Deaths in the community because of homicide, suicide, or gang violence are frequently regular events in an array of low-income communities and are also typically the result of social interactions (Abramovitz & Albrecht, 2013; Busby et al., 2013; Dutil, 2019; Johnson, 2014). When these unfortunate events occur, the students will bring their challenges with grief to the educational setting which forces educators to assist them with coping and trying to process the loss. Then, educators are required to address these issues within their classrooms; however, they are often not cognizant of the trauma experienced by the students, or they are ill-equipped to handle the challenges that are brought into their classrooms.

Hardships that occur during adolescence and are cumulative can cause trauma which impacts the child's health and well-being. Exposure to violence within urban, low-income, and crime-ridden communities that are predominately African American are directly correlated to adolescent anxiety and depression (Bottomley et al., 2017; Busby et al., 2013; Center for Victim Research, 2019). Furthermore, the impact of the trauma frequently lingers into adulthood (Campbell, 2020; Leitch, 2017; Liu et al., 2023; Smith, 2015). School counselors, psychologists, and social workers are charged with supporting the mental health needs of students. Nevertheless, school counselors may not have received adequate training relating to supporting students with specific traumatic needs related to the layered impact of experiencing multiple deaths.

### **Desensitization of Trauma**

Across the United States, crime occurs in every facet of society. Likewise, adolescents have an elevated exposure to violence in select communities. Neighborhoods of a lower socio-economic status are often crime-ridden areas where an array of unfortunate events occur on a consistent basis. Mrug et al. (2016) discovered adolescents subjected to heightened frequencies of violence experience less emotional anguish than those exposed to average levels of violent behavior. Moreover, adolescents who have been moderately exposed to violent behavior will suppress challenges over the course of time which will lead to violent behavior. Interestingly, when adolescents are exposed to extreme amounts of violence, they have less cognitive, emotive, and bodily symptoms of suppressing violence because of being acclimated to the violence itself (Campbell, 2020; Carlson et al., 2013; Cupit, 2017; Dutil, 2019; Gross & Lo, 2018). Yet, what are the observations of secondary school counselors as they counsel students who experience traumatic deaths in these communities?

Because crime is prevalent, adolescents in some neighborhoods are accustomed to multiple events occurring in their neighborhood which may cause them to either not fully process the gravity of events or they become indifferent. Likewise, because of this exposure they become less distraught by violence but cultivate predispositions to adjust to the environment (Busby et al., 2013; Kennedy & Ceballo, 2016; Turner et al., 2021). Despite not having a direct reaction to adverse incidents in the community, adolescents will respond to the trauma by engaging in maladaptive behaviors and utilize these behaviors to survive in their stressful environments. The youth become accustomed to and numb their reactions toward violence within their community, further youth become more susceptible to violent behavior which may result in developmental maladaptive results in their future (Busby et al., 2013; Currier et al., 2015; Mrug et al., 2016).

Similarly, experiencing or witnessing violence in numerous settings is potentially more damaging and makes it appear pervasive and unavoidable, which inevitably fosters desensitization (Dods, 2015; Harden et al., 2015; Mrug et al., 2016; Smith, 2015; Turner et al., 2021).

### **Effects of Sudden Loss on Secondary Students**

Loss is an inevitable facet of life that may occur at any time. Experiencing the death of a family member or close friend as a teenager is problematic and is a complicated experience. Nevertheless, how a teenager elects to manage their grief will fluctuate from teenager to teenager as some may superficially present “all is well” and yet others will spend more time with their peers, distance themselves from family, or engage in risky behaviors which may be their coping technique (Herberman Mash et al., 2013; Hill et al., 2018; Melhelm et al., 2013; Palmer et al., 2016). Further, Palmer and colleagues indicate teenagers may strike out in anger, have complications with their health, subpar academic performance, have struggles with peers, and manifest low self-esteem. All the challenges are problematic and may be manifested in the classroom but will ultimately be reported to the school counselor as a means of soliciting support for the student. When adolescents are exposed to a plethora of deaths, the exposure has the possibility of disturbing the advancement of developmental achievements that directly lead to emotionally cohesive individuals who are well-equipped to handle the ever-changing demands of society (Cupit, 2017; Dods, 2015; Gross & Lo, 2018; Turner et al., 2021).

When adolescents lose someone who is close to them the possibility the incident will completely disrupt their lives becomes heightened and the teens may acquire feelings of rage and injustice (Andriessen et al., 2018; Gould et al., 2018; Oosterhooff et al., 2018; Smith, 2015). The losses are often excruciatingly painful and terrifying for teenagers and cause intense feelings and

emotions that persevere for an extended amount of time. Because these extreme emotions prevail, it causes adolescents to become overwhelmed by grief (Andriessen et al., 2020; Bottomley et al., 2017; Gupta, 2018; Turner et al., 2021). The intense emotions and feelings are what could be felt at school when the student is unable to cope with the multiple traumas. It is not possible for adolescents to swiftly progress from grief to post-traumatic growth (PTG) as they go through phases of grief such as denial, resentment, bargaining, despair, and acknowledgment over a period (Andriessen et al., 2020; Asgari & Naghavi, 2020; Chen & Panebianco, 2018). Post-traumatic growth occurs when individuals have “positive psychological changes experienced as a result of the struggle with trauma or highly challenging situations” (Dell’Osso et al., 2022, p. 391). Moreover, adolescents are not sufficiently adept at self-regulating and may be easily triggered by diverse situations, people, and places (Andriessen et al., 2018; Dutil, 2019; Ener & Ray, 2018; Harden et al., 2015; Santiago & Galster, 2014).

Adolescents who lost a parent as a child were discovered to be at an elevated risk for reduced self-esteem, likely to engage in criminal activity, elevated suicidality, increased delinquency, abuse substances, and have decreased academic performance (Asgari & Naghavi, 2020; Brent et al., 2012; Busby et al., 2013; Dutil, 2019). This group of teens was also identified as likely to be of a decreased socioeconomic status because of challenges with school and retracting from school hastily (Feigelman et al., 2017). When the adolescent had a closer relationship with an individual who died suddenly by tragic means, (i.e., sibling or peer) they are more likely to experience complicated grief. Complicated grief is severe, constant, and hinders an individual’s capacity to progress after a loss (Neria & Litz, 2004; Shear, 2012). When the teen is tremendously connected to the deceased, there is a heightened risk for sustained and increased grief. Likewise, if conflict existed within the relationship prior to the death, self-criticism,

relentless adverse feelings, severe feelings of guilt, may be connected to the lack of expression regarding the grief (Herberman Mash, 2013; Lindsey et al., 2019). Masterson et al. (2013) surmised males were generally less emotional after the death of a parent than females. However, the prevailing worry for male and female adolescents was the diminished financial resources after the death which magnified the trepidation and angst. If the other parent or sibling was deficient in strength, this caused further pressure on the adolescent.

After an adolescent loses a sibling, they are challenged by the grieving process. Utilizing friends as a means of support proves to be beneficial for this specific group of bereaved teens. The teens prefer to spend more time with their peers and do not engage with their family which is developmentally common for this specific age group (Barrera et al., 2013; Chen & Panebianco, 2018). Some grieving adolescents may participate in perilous activities such as skipping schools or abusing substances, and these behaviors may intensify as time progresses. Theoretically, the actions may be manifestations of the conventional activities that are common within this age group (i.e., experimenting, examples of independence, and more dependence on peers for approval and support). It will be advantageous to identify these problematic behaviors early to implement appropriate psychological intercessions for the grieving teens who participate in dangerous behavior after losing a sibling (Barrera et al., 2013; Boelen et al., 2019).

In addition to high rates of violence leading to sudden loss in low socioeconomic communities, suicide rates are also elevated (Liu et al., 2023) When an adolescent loses a friend by suicide, a unique set of dilemmas are presented. This population of grieving youths are at an intensified risk of an array of emotional troubles such as depression, sustained grief, and in select instances self-harm or suicide (Andriessen et al., 2018; Herberman Mash, 2013; Hill et al., 2018; Turner et al., 2021). The adolescents are quite challenged during the aftermath of the loss of their

friend and consistently struggle to process their friend is no longer alive. As a result of their inability to process the loss, some adolescents become involved in unsafe activities as they endeavor to attain comfort within themselves, and yet other teens are incapable of sustaining significant relationships and continually experience complicated guilt reactions. The perilous coping methods could potentially endure for several years which could make the adolescents at risk for overall diminished well-being. Moreover, some adolescents are riddled with pervasive suicidal thoughts or even feelings of survivor guilt while struggling with attempting to analyze why the incident occurred or why the friend did not seek their assistance or support (Andriessen et al., 2020; Bartik et al., 2013; Turner et al., 2021; Turecki et al., 2019). Family friends play a critical role in the lives of bereaved adolescents after a traumatic event as they provide the adolescents with feelings of protection (Asgari & Naghavi, 2020; Bottomley et al., 2017). Secondary school counselors play a pivotal role in the support system of grief-stricken teens.

### **Effects of Sudden Loss and Trauma on African American Adolescents**

When African Americans are coping with grief as a direct result of homicide, receiving concrete manifestations of support are more revered than emotional support (Bottomley et al., 2017; Busby et al., 2013; Dutil, 2019). Attempting to cope with the loss of a friend by homicide adds to the typical stress a teenager experiences developmentally and psychologically. Being mandated to handle grief because of the loss of a friend will burden an adolescent's psychological makeup and psychosocial identity (Busby et al., 2013; Johnson, 2014; McEachron, 2014). The anxiety of grieving and attempting to cope with a homicidal loss increases the standard stressors that are correlated with the adolescent development of females. Because of the challenging atmosphere that African American teenage girls traverse in the aftermath of a friend's homicide, they are left to handle and manage their anxious feelings regarding the

incident on their own. Further, since the adolescent may be struggling to manage and/or process her emotions, they may engage in unhealthy coping strategies like sexual promiscuity, which predisposes them to becoming pregnant.

Individuals with a close connection to a victim of homicide may potentially have post-traumatic stress symptoms as opposed to someone who did not have a close relationship with the individual (Johnson, 2014; Sharpe et al., 2014; Smith, 2015). Posttraumatic symptoms include intrusion and avoidance symptoms, negative alterations in cognitions and mood, and lastly alterations in arousal and reactivity (Boelen et al., 2019; Briere & Scott, 2015; Friedman, 2015). Smith (2015) asserted African American males had encounters with homicidal deaths as early as their childhood years and it was prevalent throughout adolescence. As the African American males grew older, they became more cognizant of how the untimely nature of the demise of their peers made them susceptible to death as well because of the community where they reside. Moreover, the requirement to remain powerful and tough in select poor communities causes African American adolescents to refrain from expressing themselves emotionally.

Losing a family member, close friend or acquaintance has an undeniable impact on the emotional status of an adolescent. Vicious deaths are correlated with heightened levels of trepidation, depression, and maladaptive grief (Bottomley et al., 2017; Busby et al., 2013; Currier et al., 2015; Ferow, 2019; Poquiz & Fite, 2018). When the loss is sudden the teens may experience debilitating feelings that infiltrate every aspect of their lives. Adolescents could continue to manifest reactions to grief up to 3.5 years after the death of close peers and may display complicated grief symptoms, avoidant behavior, and intrusive pensive thoughts over time (Johnsen et al., 2021; Poquiz & Fite, 2018). After a traumatic event, because of the avoidant behavior and the ruminative thinking, the process of grieving could continue to be challenged as

individuals may engage in avoidant coping methods. During the grieving process although avoidance is a normal stage after a distressing event, it could be problematic as it could develop into evading thinking about the loss (Boelen et al., 2019; Johnsen et al., 2021; Gupta, 2018; Hedegaard et al., 2021).

A child who loses a parent may experience developmental challenges (Melhem et al., 2013). The adolescent may experience behavioral problems or have issues with social skills (Andriessen, K. et al., 2020; Melhem et al., 2013; Palmer et al., 2016). Moreover, if an adolescent loses their parent because of suicide, they are at a heightened risk of dying by suicide or having a sibling die by suicide. Furthermore, this specific group of bereaved adolescents may be hospitalized for inflicting self-harm (del Carpio et al., 2021). Adolescents who experienced parental loss were two to three times more likely to be at risk for being hospitalized or require outpatient services for depression (Barrera et al., 2013; Berg et al., 2016; Burrell et al., 2020). Family risk factors such as substance abuse by the parents may place adolescents at risk for depression because those characteristics are hereditary. Essentially adolescents may be predisposed for depression prior to losing a parent because of the hereditary nature of depression and because of the traumatic nature of losing a parent during adolescence itself. School counselors should be cognizant of how family risk factors influence an adolescent's grieving process.

Thirty-nine percent of adolescents who have experienced grief also indicated they have mild to severe depressive symptoms that remained anywhere from one to three years after the death (Alvis et al., 2023). Complicated grief was correlated to the quality of connection the individual had with the deceased (Berg et al., 2016; Herberman Mash et al., 2013; Melhelm et al., 2013). Individuals who consistently mourn the deceased and how they died, may be in

danger of complicated grief. However, the bond a person has with the deceased individual will ultimately influence how attached a person will be which will also result in diverse outcomes for grief and possibly attachment anxiety (Brent et al., 2012; Currier et al., 2015; Ener & Ray, 2018).

### **Impact of Trauma and Loss on Academics**

When loss occurs in the community or a student loses a parent or close family member, the impact will inevitably be felt within the confines of the educational setting. A few adolescents will elect to avoid school for the day; however, many will decide to report to school. If a teen chooses to return to school, typically they may be seeking assistance or may simply be searching for a way to escape their current situation. When the students decide to attend school, educators often find themselves supporting the bereaved students. Teenagers and children who lose a parent are unlikely to complete their education at all levels (compulsory to collegiate) (Burrell et al., 2020). The most notable impact was detected amongst students in high school and at the university level. There are probable reasons parentally bereaved students do not matriculate. Some of the reasons an adolescent from a lower socioeconomic status, or violent community may not complete their education before death of a parent are reduced family income, education of the parent, parent psychological illness, or a chaotic and/or toxic family home (Burrell et al., 2020; Santiago & Galster, 2014). When the adolescent commences the grieving process, the factors that are likely to influence their inability to graduate are psychological distress caused by the grief of losing a parent, reduced family unity and support, and issues explicitly related to education such as weakened concentration, reduced mastery of concepts, low self-esteem, and poor school attendance (Burrell et al., 2020).

Every teenager will manifest their grief in a dissimilar manner. Dods (2015) postulated the distinctive manner each individual student may display or manage their bereavement

indicates educators must be familiar with an array of indicators of student distress. When educators had sound and established rapport with students, they were able to have real conversations with students about grief. Therefore, the establishment of healthy rapport with students is essential. These open conversations with adolescents when rapport has been established would also frequently transform into more constructive academic connections (Gross & Lo, 2018; Lane et al., 2014). An educational setting may serve as a locality for safety where trusting relationships may be established between school staff, students, and their peers (Currier et al., 2015; Dods, 2015; Gross & Lo, 2018).

Student grade level, at the secondary level proved to be a determining factor for the quantity of assistance provided by the school when a student's parent dies (Masterson, 2012; National Child Traumatic Stress Network, 2004). Typically, the more popular a student was amongst the faculty and the student's peers, the magnitude of support was elevated. When a student does not receive support at home generally, they expect more support in the educational setting and manifested more emotional symptoms than those adolescents who had support within their residences (Dods, 2015; Masterson, 2012).

### **Trauma and Learning**

Providing a secure and caring environment for learning may permit students to focus on their education as opposed to their traumatic experiences (Frieze, 2015; Gupta, 2018; Lane et al., 2014; McClatchey & Peters, 2015). When students believe they are in a safe environment, they may be comfortable, however, they may not be capable of processing trauma. Every adolescent will manage their traumatic experiences in a diverse manner. According to Dods (2015), teenagers may decide to manage their anguish by avoiding triggers (i.e., situations, people, places) that have the potential to cause a traumatic reaction. Although avoidance is a

conventional coping technique for anxiety, it becomes challenging in an educational setting when a student is required to attend to be educated.

Youth who lost a parent (or parents) were revealed to have decreased proficiency in employment, planning for careers, peer attachment, and post-secondary aspirations (Brent et al., 2012). Nevertheless, Asgari and Naghavi (2020) construed high scholastic achievement, organizing for a variety of academic and professional aspirations, and having a thriving educational and vocation selection afforded adolescents a feeling of fulfillment, self-efficiency, and capacity to handle the sudden loss. When a bereaved adolescent has a sense of connectedness with their school, it serves as a means of caring and support. Often diverse faculty members become surrogate parents for teenagers who have experienced the death of a parent (or parents) as the adolescents become comfortable with sharing information with them and they long for the parental and/or guardian connection they once had. Further, when faculty members establish rapport with students, they are able to fully comprehend the needs of the teen while simultaneously utilizing tactical strategies to support their bereavement (Asgari & Naghavi, 2020; RB-Banks & Meyer, 2017; Stylianou & Zembylas, 2018).

Educating adolescents about the process of grief teaches them what they are experiencing is normal while concurrently permitting them to categorize their emotions and identify coping strategies to manage their feelings. Developmentally, adolescents experience an array of feelings and emotions, and the trauma of sudden losses exacerbates those feelings and emotions. Further, the influence of the incident (or incidents) the adolescent experienced is what defines the trauma (Andriessen et al., 2020; Dods, 2015; McClatchy & Peters, 2015). When bereaved children participate in a defined program strategically designed to address grief, they will acquire a richer expressive vocabulary which will empower them to discuss their feelings more (Dutil, 2019;

Gould et al., 2018; Stylianou & Zembylas, 2018). Unfortunately, participating in a formal bereavement program in the educational setting at the secondary level is not always logistically feasible.

Educators play a vital role in encouraging their students with processing their grief when they lose a parent. The nature of the student's relationship with the parent was the determining factor for the level of support that was needed by the student. For instance, if the relationship between the adolescent and the parent was strained, typically the student required extensive support (Asgari & Naghavi, 2020; Lane et al., 2014; Masterson, 2012). Regularly, faculty and staff members serve as parental figures for students as students quickly feel attached to them. It is possible for educators to feel overwhelmed when working with adolescents from communities where violence prevails, and sudden and traumatic deaths are the norm (Eisman et al., 2015; Lane et al., 2014; McEachron, 2014). Nonetheless, despite educators being cognizant of the unique bereavement situations of each student, they may be challenged by providing an individualized response for a student and may become plagued with feelings of helplessness which will inhibit their capacity to be emotionally available for the student (Chen & Panebianco, 2018; Lane et al., 2014).

Dyregrov et al., (2015) discovered educators indicated three core principles when working with bereaved students: "care, availability, and communication" (p. 294). For teachers to truly comprehend how to assist students with their grief, having a working knowledge of the symptoms of grief in adolescents is essential. Being available permits the adolescent to select who they desire to confide in regarding the grief they are experiencing, and the educators must have the willingness to serve in that capacity. Communication with those who are grieving is also of the utmost importance as it builds rapport and fosters relationships.

It is possible for trauma and misfortune to stimulate positivity within individuals in addition to pain and suffering (Brewer & Sparks, 2011). Since grief is cyclical in nature and a lifelong process, adolescents will need to learn how to modify their lives without their family member or friend (Cupit, 2017; Ener & Ray 2018; Ferow, 2019; McLean et al., 2022).

Participating in a structured bereavement program influences the traumatic growth youth and adolescents may experience. If schools implement bereavement programs adolescents will have a means to assist with their grief.

To develop a school-based structured bereavement program Blueford et al., (2020) developed a multi-tiered system of support (MTSS) as a tiered system that bereavement program with interventions across all three tiers to meet the needs of students within the realm of school counseling. Tier 1 serves all students; Tier 2 serves students in small groups and the final tier provides individualized support. Tier 1 strategies will coordinate a bereavement response plan to establish a guide, a social-emotional program that is a purposeful aspect of the educational program of the school and school counselors' classroom counseling lessons, the process to detect adolescents who are stressed and safe spaces. The purpose of Tier 2 is to provide group support for small groups of students. To conclude, Tier 3 centers on customized counseling services that are tailored to meet the unique needs of the bereaved adolescent. This comprehensive plan should include strategies for recent deaths that impact the students as well as approaches for those who continue to be confronted with problems of grief (Blueford et al., 2021).

### **The Process of Grief**

Grief is a standard response to death which causes pain to individuals (Briere & Scott, 2015; Rubin et al., 2024; Shear & Mulhare, 2008; Wheat et al., 2022). Grief "refers to the physical, emotional, cognitive, spiritual and social experiences of the loss" (Smit, 2015, p. 34).

Moreover, the way an individual responds to the death varies and multiple factors influence the grief response such as the relationship the individual had with the deceased, how the individual died, individual history, personality, religion, age, gender and ethnicity (McKnight, 2015; Smit, 2015).

### **Theories of Grief**

Perspectives on grief have been influenced by the beliefs of Sigmund Freud who explored his grief when his father died (McKnight, 2015). Freud deduced that as individuals grieve, they proceed through stages following a loss (Granek, 2010; McKnight, 2015). Further, the phases encompass numbness, mixed with periodic acute distress, and longing for the deceased (Kaplow et al., 2012; McKnight, 2015; McLean et al., 2022).

Servaty-Seib (2004) commented that as grief is an instinctive response to bereavement, grief theories provide illustrative examples of how individual responses to grief may appear. The Dual Process Model of Coping with Bereavement (DPM) devised by Stroebe and Schut indicates that bereavement is a compilation of concepts which involves several stressors (Daniel, 2023; Servaty-Seib, 2004; Harris, 2015). Additionally, the stressors are divided into two categories – loss oriented and restoration oriented (Daniel, 2023; Servaty-Seib, 2004). Stressors that are related to the loss of an individual are considered loss oriented. A loss-oriented stressor causes the bereaved individual to mourn the conclusion of the physical relationship with the person or the absence of the support previously provided by the deceased. Restoration-oriented stressors “are those that are secondary (with regard to timing rather than intensity) to the death loss such as altered communication patterns with friends and family members” (Servaty-Seib, 2004, p. 130). Moreover, loss-oriented and stress-oriented stressors are correlated with a distinct coping orientation. With loss-oriented coping, the individual is focused on specific components of the

loss such as manifesting emotions related to the death or visiting the grave. Restoration-oriented coping is where the individual considers the other tasks that must be handled and decides how to proceed. According to Servaty-Seib, when dealing with the death of a loved one, females operate in a loss-oriented manner while men who are grieving may focus in a restoration-oriented way. Additionally, utilizing the loss and restoration coping techniques may be advantageous to employ when contrasting cultural responses of bereavement (Servaty-Seib, 2004).

Servaty-Seib (2004) indicated that Neimeyer believed creating meaning after a death is the primary process grieving individuals face. Making sense of death requires individuals to acknowledge the recent changes and decide their new awareness of how the world operates. Moreover, understanding death requires a mixture of an individual reconstituting themselves along with the individual considering how they interact with the world. Since sudden and traumatic losses are troublesome to individuals and the way the bereaved process situations in the world. Grieving individuals are left to consider how their lives will be altered, what was the purpose of the death, and question their safety in the world.

Attachment theory is based upon the concept that infants will naturally bond with their primary caregivers and when they grow into adults, they establish relationships with other adults with an emotional connection (Servaty-Seib, 2004; Shear & Mulhare, 2008). Further the relationship an infant creates with the primary caregiver influences how they will create and sustain relationships. As individuals progress through life, they devise an attachment approach that could be deemed, “secure, avoidant, anxious/ambivalent, and disorganized/disoriented” (Servaty-Seib, 2004, p. 136). Individuals with select attachment patterns may be more likely to experience challenges with grief. Those with an anxious-ambivalent style of attachment are predisposed to experience expanded grief. However, those with an avoidant attachment pattern

may not engage in establishing relationships, and potentially may “experience inhibited or absent grief” (Servaty-Seib, 2004, p. 137). Finally, individuals with a “disorganized style” are lack the capacity to trust others or themselves and when they experience a death, they may manifest “learned helplessness” (Servaty-Seib, 2004, p. 137).

### **The Stages of Grief**

Elizabeth Kubler-Ross is known for her work establishing that grief occurs in stages (McLean et al., 2022; Wang & Wang, 2021). Originally, Kubler-Ross devised the model of grief based upon individuals who were terminally ill (Dzhurova, 2020; McKnight 2015; Wang & Wang, 2021). Kubler-Ross considered working through sorrow incorporates managing reactions through the recognized stages of grief which will support the individual with relinquishing the loss (McKnight, 2015). She identified that throughout life; individuals will encounter the diverse phases as they experience death and could potentially return to a specific stage at any time during the grieving process.

The five stages of grief are denial, anger, bargaining, depression, and acceptance which comprises the guide of how individuals process and manage grief according to Kubler-Ross (Daniel, 2023; Maciejewski et al., 2007; McKnight, 2015). Although Kubler-Ross perceived grief to be linear, grief experts believe the concept of bereavement is more complex in that theories about grief stages do not account for the distinctive factors such as social and cultural elements that are correlated with every death (McCoyd, 2022; Poxon, 2023). Further, currently there is no substantiation to support the need for an individual to progress through a series of steps to accept a loss (McLean et al., 2022). Individuals manifesting responses to bereavement may not be a typical component of the average grieving process as people tend to respond to grief in a broadly accepted and recognized way (McLean et al., 2022; Plant, 2022). When

bereaved individuals conform to societal norms of grief, they may exhibit grief reactions that are considered socially acceptable instead of displaying their true reactions (McLean et al., 2022).

### **Summary**

The literature review addressed the following in part: homicide and suicide, sudden loss and trauma, desensitization of trauma, impact of trauma on the urban community, effects of sudden loss and trauma on African American adolescents, trauma and learning, the process of grief and grief stages. While many studies discussed school counselors and their part in caring for students who experienced sudden losses, there is a gap in the research regarding school counselors' experiences with trauma and loss in urban secondary settings. This study is important because one's perception often influences one's actions. School counselors in these settings must examine their beliefs to appropriately serve students in urban settings.

## **Chapter Three: Methods**

### **Overview**

Classroom educators are not formally trained to manage and/or instruct regarding grief (McEachron, 2014). According to McEachron (2014), teachers will typically abide by their impulses when considering how to respond to a traumatic death their students may have experienced. However, there appears to be a gap in the literature concerning the school counselor's perception of how the trauma of sudden death impacts the functioning of secondary urban adolescent students. Sudden and traumatic deaths disrupt the lives of adolescents. Within the educational setting, school counselors serve as the mental health "experts" and are tasked with supporting the emotional needs of students while also tending to their other duties and responsibilities. As one of the designated mental health professionals in a school facility, school counselors are tasked with the implementation of strategies to support bereaved adolescents. To this researcher's knowledge, there has been no other research conducted regarding the school counselor's perception of how secondary urban adolescents manage grief related to a sudden and traumatic death.

To investigate school counselors' perception of adolescent grief surrounding sudden and traumatic loss, a qualitative study was utilized. A qualitative researcher should strategically select the framework for their study. Per Moeller et al. (2021), an essentialist paradigm permits the investigator to discover what the participants consider regarding the topic. Further, Moeller et al. indicated that the use of self-reporting methods (e.g., interviews or questionnaires) to acquire personal observations and insights regarding a topic, require the researcher must establish and/or clarify why the qualitative method was selected to ensure honest replies from participants.

This chapter is separated into three distinct segments. The first section describes the research design, presents the proposed research questions, explains the setting for the study, and outlines the procedure for selection of the research participants. The second section explains the data collection methods and analysis processes used to acquire value from the school counselor's working knowledge. The final portion of this chapter illustrates the validity, reliability, and ethical considerations that were applied to augment the trustworthiness of this research investigation.

### **Design**

This study was designed to identify the perceptions of school counselors in relation to how sudden and traumatic loss influences the grief (or grieving process) of secondary urban adolescents. Moeller et al. (2021) asserted studies that are qualitative in nature are comprised of circumstantial data that are compiled from participants and typically consists of two varieties. The first category is self-reporting which is based upon personal experience, insights, and beliefs. This information is predominantly collected via interviews or focus groups the interviewer coordinates (Moeller et al., 2021). For the purposes of this research investigation, self-reporting served as the foundation for my study. Self-reported data from the participants provided robust information grounded in the personal experiences of the secondary urban school counselors. This research investigation incorporated interviews with secondary school counselors within an urban school division.

Phenomenology was the appropriate research technique to utilize for this as it provided an opportunity for individuals to express their experiences with a specific phenomenon (Creswell & Poth, 2018). Further, phenomenology seeks to discover commonalities among participants of a study as they encounter a particular phenomenon- sudden and traumatic loss (Creswell & Poth,

2018). Praveena and Sasikumar (2021) asserted phenomenology is divided into the following four phases: bracketing, intuiting, analyzing, and describing.

With phenomenology, bracketing is the method of detecting and withholding biased principles and thoughts regarding the phenomena (Heppner et al., 2016; Praveena & Sasikumar, 2021). Moreover, bracketing affords the researcher the opportunity to converse about their unique personal experiences with the phenomena (Creswell & Poth, 2018). Having the capacity to defer my knowledge of how school counselors believe secondary urban adolescents cope with traumatic grief was crucial during this research study as I have extensive experience working with urban adolescents.

The next phase of phenomenology according to Praveena and Sasikumar (2021) is intuiting. Intuiting arises when the investigator is open to the implications recognized by the phenomena by the individuals being studied. The researcher determined the appropriate way to introduce my interpretation of the gathered data. Then, the analyzation phase afforded the researcher the opportunity to pinpoint substantial themes, categorize, and make sense of the phenomena. Lastly, the descriptive phase provided an opportunity for me to comprehend and explain the phenomenon by identifying the perceptions of urban secondary school counselors as they worked with adolescents who have experienced a sudden or traumatic loss (Praveena & Sasikumar, 2021).

Guillen (2019) theorized phenomenological research is centered on the analysis of life events from an individual's viewpoint. Phenomenological research examines the extremely intricate facets of human existence beyond computable qualities. In-depth interviews provided the researcher with critical information and substantial detail that numerical data is not capable of providing. Creswell and Poth (2018) deduced interviews derive the meaning of a phenomenon

from a select group of individuals. The individuals used to derive meaning about the sudden and traumatic loss experienced by urban adolescents were school counselors in this study.

Consequently, school counselors who work closely with secondary urban adolescents were interviewed to identify their perceptions of the impact of sudden and traumatic loss on these adolescents regarding their experiences, and how traumatic deaths impact students.

### **Research Questions**

**Research Question 1:** What are school counselors experiences with sudden and traumatic death in urban school settings?

**Research Question 2:** What are school counselors perceptions of the impact of sudden and traumatic death on urban adolescents?

### **Setting**

This research took place in one school division in southeastern Virginia. There are 16 public school divisions in the Superintendent's Region 2. This region is called the Tidewater area (VDOE, 2023).

### **Participants**

The participants of this study were secondary school counselors of an urban school division, located in southeastern Virginia—Tidewater region. The school counselors served Grades 6-12 students in a medium-sized urban school division. Heppner et al., (2016) affirmed diverse populations are ideal because they are comprised of an array of individualities enabling the research investigation to be generalized. The secondary school counselors within the selected school division had diverse backgrounds and were comprised of varying ethnicities and nationalities. Participants of this investigation included both male and female school counselors

who have attained master's degrees, supplementary degrees or advanced certifications and licensures such as Licensed Professional Counselor (LPC).

Institutional Review Board (IRB) approval was obtained prior to the researcher contacting the participants via email and telephone (see Appendix A). All middle and high school counselors within the Tidewater region will be contacted to determine their eligibility to participate in the study. Selecting urban school counselors who can provide concrete information regarding their experiences surrounding the grief of adolescents who experience sudden and traumatic death will be invaluable to this study (Creswell & Poth, 2018).

When selecting participants for phenomenological studies it is appropriate for the researcher to choose a sample of individuals who have direct exposure to a phenomenon (Creswell & Poth, 2018). The school counselors selected to participate had experience with this unique population as all currently work for an urban school division, located in southeastern Virginia—Tidewater region.

### **Procedures**

All participants in this study worked at public schools in the southeastern Virginia—Tidewater region. The participants for this research investigation were secured via snowball sampling. Creswell and Poth (2018) asserted snowball sampling occurs when research participants assist the investigator with the identification of additional knowledgeable candidates to interview. Snowball sampling was employed as a method to gather more data as needed. Snowball sampling was also useful in identifying supplemental interviewees from the initial contacts made among the school counselors (Creswell & Poth, 2018). After the identification of potential participants, the researcher sent an email to potential participants identified. Ten

interviews were conducted by the researcher. All interviews were recorded (with permission) and transcribed. Only the researcher knows the identity of each of the interview participants.

At the beginning of the introductory interview, the researcher presented and disclosed informed consent (See Appendix B). The researcher carefully explained the study and described the specific measures that would be taken to ensure confidentiality is maintained at all times. Finally, research participants were asked to sign the consent documentation, indicating they had a clear understanding of the goal of the study, what was requisite if they elected to participate, and confirmation of their participation in the research investigation.

### **The Researcher's Role**

The researcher has facilitated and coordinated numerous crisis events at her school because of the untimely death of a student. Additionally, the researcher has also been required to support a student or a group of students who are struggling to cope with a sudden or traumatic death that occurred within their neighborhood community. She has also participated in the crisis events of neighboring schools to support tragic events at their schools. It is a challenge for students to comprehend why such a distressing event happens to an individual during one of the most engaging times of their lives.

The researcher has been a director of school counseling at the secondary level for over 20 years. For the last 8 years of her career, she served at the only Title 1 high school within her school division. The school is in the most economically challenged zip code within the school division. It is always a challenge for students to experience the tragic loss of one of their peers.

Since she has participated in or managed a plethora of crisis support teams regarding the untimely death of students or other community members, she has often wondered about the experiences of other school counselors as they supported grieving students. Due to familiarity

with this phenomenon, she implemented trustworthiness techniques in a concerted effort to diminish ethics being compromised. Reflexive journaling was used as a means of inquiry and identification of any issues that may indicate trustworthiness has been compromised. The investigator also considered who she is professionally, in relationship to the study and also utilized a trusted mentor for support to discuss data and revelations. However, this was done in a manner that did not compromise the validity of the research (Creswell & Poth, 2018). For best practices, the qualitative researcher considers who they are in relation to the phenomenon being evaluated and simultaneously recognizes the opinions of the individuals represented in the research sample (Creswell & Poth, 2018).

### **Data Collection**

The researcher employed a qualitative phenomenological method and utilized semi-structured interviews as the core source for collection of data. Interviews provide the researcher with an opportunity to comprehend the phenomenon from the participant's view (Creswell & Poth, 2018; Moller et al., 2021). Specifically, the school counselor participants will provide their insight regarding their unique experiences with counseling urban secondary adolescents who are experiencing grief because of sudden and traumatic death. All interviews were recorded (pending permission from the interviewees) and were transcribed. Guillen (2019) contended the goal of a comprehensive interview is to obtain knowledge from an individual about the phenomena being evaluated.

### **Interviews**

Interviews served as the basis for all the research investigation. Utilizing interviews for this qualitative research study permitted the researcher to garner an in-depth perspective from the study's participants (Heppner et al. 2016; Hughes et al., 2020). Implementing semi-structured

interviews provided the perfect equilibrium between structured and unstructured interviews as the researcher was able to generate uniformity amongst the interviews while simultaneously providing an opportunity for participants to provide more robust and tailored responses (Heppner et al., 2020).

Each interview participant was asked to participate in a 60-to-90-minute interview (via Zoom or in person). The participants were emailed a copy of interview protocol procedures. Before each interview, the researcher emailed each participant a copy of the interview questions, to give participants ample time to review them and ponder responses. Moreover, prior to each interview, the participants responded to demographic questions (See Appendix C). The interview questions are indicated below (See Appendix D):

1. How many years have you been a school counselor?
2. What is your current placement? Middle or high school?
3. How many years have you been at the secondary level?
4. Describe your observations of how death impact students during their adolescent years?
5. Describe your observations of how repeated sudden and traumatic deaths impacts students during their adolescent years? (*Prompt: How are the students different after these losses?*)
6. How does the impact of a sudden and traumatic loss inhibit a student's capacity to be successful academically? (*Prompt: How do their grades, test scores, behavior, etc. change?*)

7. What are some of the barriers that contribute to a student's inability to process the grief they are experiencing because of a sudden and traumatic loss? (*Prompt: time to process, preconceived ideas of showing emotion, etc.*)
8. What are the long-term effects of grief on adolescents when they are repeatedly exposed to sudden and traumatic losses?
9. Describe your thoughts regarding adolescents being desensitized to death.
10. What are some of the interventions you have implemented with traumatized adolescents who have experienced traumatic grief?
11. Is there anything else you would like to contribute?

### **Data Analysis**

Grodal et al. (2021) affirmed the practice of qualitative analysis requires the examiner to analyze the data to distinguish and identify common themes or categories. The recorded interviews were transcribed by the researcher. Then, each transcription was strategically and meticulously reviewed to discover common concepts, themes, and trends. This review provided the researcher with sound information to include in the discussion portion of the paper. If school counselors were able to identify specific trends they were detecting, the formation of traumatic grief programs to address this need may be created. Heppner et al., (2020) established interviews desire to comprehend the knowledge of the individual. Moreover, there are three kinds of interviews: structured, unstructured, and semi-structured. For the purposes of this research study, semi-structured interviews will be utilized as they will provide an opportunity for me to have some constancy for all the interviews that are facilitated while simultaneously permitting the participant sufficient time to respond in a way that will allow for in-depth responses.

Heppner et al., (2020) asserted the objective of qualitative research is to detect patterns, ideas, connections, and beliefs, which guide an individual's response to a specific topic. The process of exploring the data from a qualitative study commences as an inductive procedure where the investigator strives to comprehend the implications of the data that has been gathered. Next, the process turns to deductive as the researcher assesses the existing information with the new information collected throughout the process.

Overall, this research investigation desires to ascertain school counselor perceptions of the impact of sudden and traumatic losses on adolescents and how the grief impacts the students academically. Classroom educators may be the individuals who consistently deal with a myriad of behaviors daily, school counselors are deemed the mental health supports for students when they are having problems managing their emotions and feelings. As a result of this research, it may be discovered school counselors are overwhelmed by the influx of traumatized youth they are required to regularly support at any given time. Or conceivably, the school counselors may believe the adolescents have become desensitized to sudden and traumatic losses because violence is rampant in the community and the world at large.

### **Trustworthiness**

An array of techniques were implemented to certify this research investigation had trustworthiness. In qualitative studies, the establishment of trustworthiness is requisite to ensure the validity of the research investigation (Creswell & Poth, 2018). The researcher utilized reflexive journaling and conferred with a trusted mentor as a means of ensuring trustworthiness is not compromised. The researcher employed credibility, dependability, transferability, and confirmability to ensure and maintain the validity of the data as it is gathered and evaluated.

**Credibility**

When the researcher can support their research from the information discovered within the data, the researcher will inevitably feel more empowered about their understandings and conclusions regarding their discoveries. During the data analysis phase, the researcher sought recurring themes, opinions, and patterns across the participant interviews obtained for this research investigation. When qualitative researchers seek to establish credibility, they are seeking items from their data that will be persuasive in nature (Creswell & Poth, 2018).

The data for this research study were derived from utilized participant interview transcripts. To bolster the credibility of this research, member checking was implemented. Member checking allowed the researcher to confer with the study participants to ensure their perceptions were accurately depicted (Creswell & Poth, 2018; Hughes et al., 2020). Moreover, member checking permitted the researcher to pursue the understandings and assumptions of the research pool via their distinct lens of the data review (Creswell & Poth, 2018).

**Dependability and Confirmability**

Dependability indicates if, over time, the research results will be consistent among researchers (Creswell & Poth, 2018). The researcher of this study consulted with the participants and a peer debriefer as the data were being evaluated to preserve consistency throughout the research investigation. The researcher followed Creswell and Poth's recommendations of becoming fully engaged with the participants by maintaining observation, learning about the culture, establishing rapport to build trust.

Confirmability is the way results of research investigation are authentic depictions of the participant's viewpoint and evaluation, and not a reflection of the investigator's biased thinking or ideas (Creswell & Poth, 2018). The researcher avoided biases by utilizing methodical data

compilation procedures, an audit trail, various origins of data, and a reflexive journal. The raw data compiled (i.e., transcripts) were inspected by the peer mentor to verify the researcher's discoveries, interpretations, and developments are supported by the data (Creswell & Poth, 2018).

### **Transferability**

The researcher sought transferability in this research via comprehensive explanations of the participants, settings, and conditions that are required to determine if the results of the study are germane to the individuals or the locations where they are employed (Creswell & Poth, 2018). The researcher provided detailed profiles of each participant, recorded the measures for data collection and analysis, and composed an audit trail. These methods and robust explanations assist the readers with concluding if the results of this study are transferable to other individuals and contexts.

### **Ethical Considerations**

An array of strategies were implemented to safeguard the security of the participants prior to the commencement of this research investigation. Confidentiality was established by providing each participant with a distinct pseudonym to ensure anonymity. All notes, recorded interviews, and interview transcriptions were securely preserved. A professional transcription service will be utilized to transcribe the recorded interviews. Upon completion of this research study, the interviews and transcripts will be properly destroyed.

### **Summary**

This study utilized semi-structured interviews as the primary source of data collection. Utilizing interviews for a qualitative research investigation provided the most robust information to evaluate school counselor perceptions of how urban secondary adolescents respond to the

grief directly correlated with sudden and traumatic losses. This chapter explained why a qualitative, phenomenological approach was the selected modality and explained steps to conduct the research. Moreover, within the chapter the design of my study, research questions, a description of the participants, the researcher's role, and how the data will be collected was included. To conclude, this chapter culminated with the precise procedures that were implemented to ensure trustworthiness was established.

## **Chapter Four: Findings**

### **Overview**

The purpose of this phenomenological study was to analyze secondary school counselors' perceptions and understanding of the influence of sudden and traumatic deaths on secondary urban adolescents. This chapter will contribute to the study's discoveries obtained through the strategic collection of data, descriptive analysis, and lastly results. This chapter provides a picturesque overview of each participant and features the themes and subthemes that originated from the data.

### **Overview of Data Collection and Analysis Procedures**

The researcher used purposeful sampling to pinpoint possible candidates from a group of school counselors. All participants agreed to a 60- to 90-minute interview and completed a demographic form (See Appendix C). Semi-structured interviews were employed to afford the researcher the opportunity to understand the phenomenon from the participant's viewpoint (Creswell & Poth, 2018). The interviews were scheduled at the connivence of each participant either via zoom, phone, or in person. After each interview was recorded, it was uploaded to a secure transcription service.

After all interviews were transcribed, each transcription was printed to begin the review process. Every transcription was strategically and meticulously reviewed numerous times. As the transcripts were examined, bracketing was implemented to exclude the researcher's personal connections with the subject matter. Moreover, as the transcriptions were carefully reviewed, the researcher compiled notes about specific patterns, ideas, associations, and beliefs that were guiding the responses of the participants to the interview questions (Heppner et al., 2020). This

detail-oriented process enabled me to identify commonalities by distinguishing potential themes and subthemes.

### **Verification Procedures**

Member checking is a technique in which the researcher provides interview transcripts to research participants seeking feedback (Birt et al., 2016; McKim, 2023). By conducting member checking during the semi-structured interviews, the researcher ensured their perception of their responses were precise (Birt et al., 2016). Additionally, the researcher provided an opportunity for the participants to make clarifications or modify an inaccurate interpretation. Birt et al. indicated member checking allows the research participants to become fully integrated into the research process.

Since the researcher had direct experience with the phenomenon being researched, being able to bracket was significant. Bracketing is a method in which the researcher briefly puts aside their personal assumptions, former experiences, thoughts, and feelings to illustrate the phenomenon (Habibullah et al., 2023; Thomas & Sohn, 2023). Reflexive journaling was utilized as a means of documenting the personal emotions and feelings of the researcher after each interview and as a way of recording thoughts which began the preliminary data analysis (Orange, 2016; Ortlipp, 2008).

Qualitative research studies typically utilize extensive interviews to answer research questions based upon a phenomenon (Creswell & Poth, 2018; McKim, 2023). To generate a robust depiction of the research participant's experiences and insight, the researcher was required to convey detailed information regarding the participant's feelings, lived experiences, and interactions (Younas et al., 2023). Frequently, the research investigator referenced thought-provoking quotes, and supplemental details that were shared and my analysis of their

perceptions. By completely immersing herself in each interview, conducting member checking, and completing follow-up with the interview transcriptions, the researcher could fully comprehend each participant's lived experiences and impressions.

Throughout the research process an audit trail was utilized to explain how the study was conducted, and conclusions were derived (Carcary, 2020). The audit trail provided a clear depiction of the research design, data collection, analysis and combination methods, and perceptions that led to the discoveries of the research (Carcary, 2020). The audit trail was comprised of the following items: consent documents, demographics of participants, participant transcriptions, reflexive journals, bracketing documents, and the coding analysis system which included the identification of my themes and sub-themes.

The research team member and peer debriefer for this study was an education administrator, who holds a doctorate in education. Additionally, prior to interpreting each interview transcript, debriefing was facilitated, and the researcher was assisted with the identification of assumptions and biases throughout the process.

### **Participants**

This research investigation used convenience sampling and was comprised of ten secondary school counselor participants. All participants were employed at a middle or high school in Norfolk, Virginia. The participants consented to participate. Below is a depiction of the participant demographics in Table 1. Moreover, the researcher utilized pseudonyms to protect the privacy of the participants.

#### **Table 1**

##### *Demographic Information of Interview Participants*

Demographic characteristic	<i>n</i>	%
Gender		
Female	9	90%
Male	1	10%
Age range		
31-40	1	10%
41-50	5	50%
51-60	3	30%
61 or older	1	10%
Length of time as a school counselor		
Less than 5 years	2	20%
5-10 years	1	10%
11-15 years	3	30%
Over 16 years	4	40%
School level		
Middle	4	40%
High	6	60%
Ethnicity		
Black/African American	8	80%
Multiple Ethnicities	1	10%
White/Caucasian	1	10%

### Chloe

Chloe is a Black female in her forties who has over 16 years of experience as a school counselor at the middle and high school level. When describing her perspective of how death impacts adolescents, Chloe indicated most of her experience with this phenomenon had been at the middle school level. She states since she works in an urban school division, students habitually are directly and indirectly exposed to death. Further, the deaths the students are cognizant of are often related to crime. Chloe believes because the exposure to death is

consistent, it becomes a normal aspect of life. Also, although the students may be angry about the death, they are also desensitized because of its prevalence within their communities.

### **Demi**

Demi is a Black female in her forties who has worked 11 to 15 years as a school counselor at the secondary level. Demi described noting a difference in the response to death of high school students. She stated students were often shocked by the incidents and appeared to comprehend the concept of death. However, the students at that level did not seek her counseling services for support. At the middle school level, Demi believed the students were more challenged by the concept of death and struggled to manage their emotions. Demi attributes these issues with death at the middle school level to the specific time of their lives and their capacity to comprehend and cope with grief.

### **Fallon**

Fallon, a Black female in her sixties has served as a school counselor at the elementary and middle school level. Currently she is employed at a K-8 school, where she is employed as one of the middle school counselors. Fallon reported she has maintained grief groups for her students for several years in addition to meeting with students amid a crisis because of a death. Fallon believes the tragic deaths compromises students emotionally and mentally, which substantially inhibits their capacity to concentrate. She also expressed when students are “wrapped up” with their emotions surrounding the death, they miss time in class which causes them to seek counseling support from the school counselor.

### **Francesca**

Francesca is a Black female in her fifties who has been a secondary school counselor at a high school for less than 5 years. She believes the way adolescents handle grief differs depending

upon if they are grieving the death of a family member or a friend. Francesca also stated if an adolescent lacks a support system, they will come to school seeking assistance from school counselors.

### **Jayden**

Jayden is a Black male in his forties with 11 to 15 years of experience as a secondary school counselor at the high school level. From Jayden's perspective, the impact of death varies according to the child's age. He states many adolescents are apathetic towards death because they have experienced it with the loss of a friend or family member. Also, Jayden indicated because of familiarity with death, many adolescents are numb to it because it is "glorified on social media and other platforms." He also believes in an urban school environment school counselors typically see traumatic death as a chronic theme as death envelops the teens because of the communities where they reside.

### **Leilani**

Leilani is a school counselor in her forties of multiple ethnicities. Her experience between five to ten years has been at the high school level. Leilani believes adolescents have diverse reactions to death which is determined by the individual and the situation. She has observed adolescents respond to death by being emotionally numb, specifically when it is correlated to gun violence in their community. Leilani believes because violence has become the norm for them, they will display it does not have an influence on their emotions. In addition, Leilani noted when academically sound students unexpectedly lose a portion of their support system, it becomes more challenging for them to cope, and school will not be a priority.

**Mia**

Mia is a Black female, middle school counselor in her forties. She has 11 to 15 years of experience as a secondary school counselor. Mia has observed adolescents become withdrawn and introverted when dealing with death. Mia also indicated sudden and traumatic death causes them to be “shell shock” as the death hits them hard.

**Riley**

Riley is a Black female in her sixties who has been a high school counselor for over 16 years. Throughout Riley’s tenure as a secondary school counselor, she noted when an adolescent experiences the loss of a family member, the student is noticeably upset, and school counselors readily support them by providing grief counseling as a means of assisting them with processing the death. Nevertheless, Riley indicated when adolescents tragically lose a peer, the students are not “moved”, they are desensitized, and lack empathy towards the deceased. She also believes their inability to display empathy is attributed to the adolescents having an “emotional and mental block” towards manifesting feelings and emotions for that individual. Riley states because death is quite prevalent for many, they become accustomed to it.

**Sydney**

Sydney, a Black female in her thirties, has been a high school counselor less than 5 years. Per Sydney, death causes some adolescents to withdraw and begin to disengage. She continued with they may pretend not to be impacted, but they are. Sydney believes initially adolescents will react with anger and they tend to perseverate on the intricate details surrounding the death instead of concentrating on coping with their emotions about the incident.

### Taylor

Taylor is a Caucasian female in her fifties who has been a middle school counselor between 11 to 15 years. She believes the adolescent response to death is never “overt” and always varies. Taylor has observed teens that may withdraw and some who lash out in anger. According to Taylor, most of the time they are dejected.

### Results

The participants of this study contributed feedback that enabled the researcher to develop themes and sub-themes. Table 2 depicts the connection between the themes and sub-themes that were identified and the research question of this study. Research Question 1 garnered four themes and nine sub-themes. Five themes and sub-themes were identified to answer Research Question 2.

**Table 2**

*Theme: Individual/personal factors affecting impact of death*

Sub Themes	Frequency
General individual differences	8
Age	5
Gender	2
Ability to adapt/adjust	1
Personality	1
Students’ reception	1

**Table 3**

*Theme: Grieving process/Negative mental health reactions to death*

Sub Themes	Frequency
Numb/shock	16
Withdraw/hopeless	11
Lack of focus	6

General mental health related symptoms	6
Little emotion	5
Relationships/social skills	3
Delayed reactions	3
Grief stages	3
Anger/retaliation	2
Depression/self-harm	2
Avoidance	2
Behavior	1
Self medicate	1

**Table 4**

*Theme: Barriers to process grief*

<b>Sub Themes</b>	<b>Frequency</b>
Lack of awareness	7
Lack of support system	4
Stigma of treatment	4
Ability/lack of support to process grief	4
Lack of teacher knowledge/support	3
Logistics of pursuing treatment	3
Lack of relationships	1
Social media	1
Desensitized/numb	1

**Table 5**

*Theme: Interventions / Treatment Strategies*

<b>Sub Themes</b>	<b>Frequency</b>
Relationships (trusted adult)	13
Art/journaling	6
Family involvement/support	6
Additional counseling resources	5
School group counseling	4

Individual counseling	3
Empowering/education about coping strategies	3
Instilling motivation	2
Quiet time	2
Breaks	1
Mental health treatment	1

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### **Theme Development**

The researcher developed themes of this research investigation by beginning with organizing the data. Creswell and Poth (2018) confirmed qualitative researchers review transcripts to identify potential themes. The researcher reviewed the transcript data multiple times to disaggregate the information into themes common amongst the participant's interview transcriptions. As the researcher identified each theme, the researcher reviewed the themes to establish recurrent sub-themes. After identifying the themes, the researcher connected the themes to each research question of this study.

### **Research Question 1 Responses**

The first research question sought to ascertain the lived experiences of secondary school counselors with sudden and traumatic deaths in urban schools. School counselors in secondary schools indicated they had first-hand experience with navigating sudden and traumatic deaths within schools. The goal of this research question was to identify specific experiences school counselors had with this phenomenon. Despite having similar responses in select instances, the depth of their responses contributed to the data to the study.

Several school counselors emphasized how adolescents respond to grief varies. Specifically, Chloe and Jayden referenced how the adolescent exposure to death is prevalent for them when working in an inner-city school division. Chloe accredited this to the students having

a “direct and indirect exposure to death,” with the deaths being more so correlated with crime than a death because of natural reasons. She explained the adolescents had familiarity with experiencing traumatic deaths within their families or peer group, and in their community. While Jayden concluded that in an urban setting, students being exposed to death is a “recurrent theme.” Additionally, he revealed these adolescents are repeatedly exposed to sudden and traumatic death in their community.

Riley believes, “Some adolescents do better than others as far as their ability to adapt and adjust their emotions or even begin to try to balance their emotions”. However, Sydney shared adolescents pretend to be more “non-affected by a traumatic death than they actually are.” When discussing her observations of the grieving process of adolescents, Demi discussed the difference between middle and high school students when providing grief counseling services. She explained as a middle school counselor she would “seek the students out” to provide an intervention, such as facilitating a small group, if a group of adolescents had recently experienced a loss. However, Demi noted that in middle or high school, “some students willingly participate and others not.”

Gender was also identified amongst the participants as an element that influences reactions to death. Sydney believes, “Girls talk about death more, cry, and are more open about it. But for boys, they’d prefer to talk about other stuff as if they need a break or distraction.” Moreover, Riley discussed how males have the tendency to “suppress their emotions” and females are “more emotional.”

### ***Individual/Personal Factors Affecting the Impact of Death***

The research participants believed individual and personal factors affect the impact of sudden and traumatic death for adolescents. Further, they deduced because of the individual

ways an adolescent grieves influences the impact of the death. When requested to describe their observations of the way death impacts adolescents, the school counselors provided a plethora of ways. From the feedback, it was evident that regardless of secondary level or experience of the school counselor, similar impressions were shared. A primary observation of the school counselors was that the impact of a sudden and traumatic death varies amongst adolescents.

Jayden asserted often adolescents grieve differently. Further, he indicated:

They grieve in different ways. Some of them self-medicate by using drugs or alcohol. I see a lot of unhealthy ways and some just isolate themselves because they do not know how to communicate their feelings effectively. Then, if they do decide to discuss it, they will only do so depending upon who they are around.

Taylor conveyed the way adolescents process and make sense of the death is also impactful because it varies according to the student. Specifically, she revealed:

I had this one female student who had lost really everybody and been horribly abused. She was a fantastic kid and an exceptional student. Somehow, she compartmentalized and put everything in a place. Obviously, she was sad about the losses she experienced, yet she knew she still had a life to live, and she continued to live her life.

**Subtheme: Age.** Many school counselors attributed the age of the adolescent as a critical component of adolescent reactions to grief. Although Demi had experience at the middle and high school level, most of her career was served at the high school level. She noted the following:

At the secondary level, I see a difference between middle and high school students. I vividly recall at the high school level in some tragedies the students were either in accidents or had medical concerns. The response from the students was a little bit

different. The students understood death, despite being shocked by it. They even rallied together for support. At the middle school level, it was more difficult.

Demi also believed the middle school years were more of a challenge because of the students, “ability to understand and cope with grief as a whole.” Similarly, Leilani discussed a time during her school counseling internship experience, where she was providing support to a younger student who was mourning the loss of a pet. She reflected:

He was sad about the death of his dog; however, it wasn’t a big deal. The student discussed how the dog was not dead. He indicated the dog had gone to doggy heaven and how he was going to heaven too and we are going to play together. The way he described it made it seem as if it was not much of a loss for him.

Leilani also reflected the student made it appear as if things were temporary. She concluded, “Death is something else they do not pick. They just have to go with it.”

**Subtheme: General Individual Differences.** With Leilani’s experience at the high school level, she concluded the way sudden and traumatic deaths influence an adolescent’s ability to achieve academic success depends on their age. She revealed how close an adolescent was to completing school could have an impact. When Leilani considered students who had sudden losses before arriving at high school, she believes the students will reflect on the losses and conclude, “everybody leaves them.” Furthermore, she discussed how older students, despite continuing to cope with sudden and traumatic loss, “...have made it this far and were really trying to maintain sight of the end goal.”

When Taylor reflected upon adolescent desensitization, she discussed how some are impacted by it and how a percentage of students become consumed with it. Additionally, she stated because the students become so consumed, “they worry about everything and develop

huge anxiety.” Leilani agreed with Taylor that adolescent responses to grief cannot be generalized and are individual. Leilani shared, when a school counselor’s responds to teens after a sudden and traumatic death it is essential to discover the needs of the student. Moreover, she asserted, interventions cannot be “a one size fits all.” She also believes facilitating grief groups provides an opportunity for students to process their feelings and share, yet “they may not be thinking about coming to a group to talk to other students or peers that aren’t related to what they are specifically experiencing.” Jayden affirmed this and recognized, “Knowing that we all grieve differently, and with children, especially adolescents there is no proper way, no textbook way to grieve and deal with trauma.”

### ***Grieving Process/Negative Mental Health Reactions to Death***

The second theme of this research investigation emerged as the secondary school counselors provided poignant feedback about the grieving processes of adolescents. Some school counselors indicated relationships influenced adolescent reactions to the grieving process. Mia mentioned sudden and traumatic death hits students “hard.” She continued with because of this, students will not trust or “become a little too trusting.” Mia also believes because some adolescents who experienced a sudden and traumatic loss are challenged by being able to control things. Further, Mia reflected that since the adolescents were unable to control the death, they begin to grieve. She commented:

Not trusting someone means this person that I lost was here and now suddenly they are gone. I cannot control that. I could not control that, and I don’t know what else I can control. So, I don’t trust anybody.

When Fallon shared her perceptions of the long-term influence of grief on adolescents, she concluded their grief can change their relationships. She believes grief can have a long-term

impact on adolescents when they become confronted with situations. Fallon expressed, “Because they don’t know how to offer support, they cannot empathize properly. They just don’t know how to communicate well with someone that’s going through any time of emotional crisis.”

Demi concurred with Fallon in that adolescent responses to death may be a “catalyst” to impact the way they form relationships with others and their decision-making process. She also determined; it has a lasting effect which causes teens to have a negative disposition. Demi expressed concern:

Students do not fully process traumatic deaths because it has frequently occurred. I worry about the relationships they form and how they seek support. Because if they feel like it’s going to happen, or know it is going to happen, they may conclude that they don’t really need support to help them through the crisis because it happened before or it happened so routinely.

**Subtheme: Withdrawal.** Multiple research participants contributed during the grieving process of adolescents; many withdraw. Mia believes students who are typically outgoing become introverts and desire to be in a “shell.” Sydney agreed with Mia’s observations and reflected that in addition to becoming withdrawn, adolescents will choose not to engage or pretend they are not impacted, when they are. Further, Jayden concluded, “Unless it really, really and truly hits home, then we see a different reaction where they are more emotion.” Jayden also indicated that he observed students present with different behaviors. Taylor concurred with Jayden as she affirmed when adolescents withdraw, their reactions may be manifested as anger, “...but really it’s just they’re sad.”

Leilani believes when some students become withdrawn after experiencing repeated sudden and traumatic deaths it causes them to lose hope. She commented:

The losses dim their light. However, I do not think that that is the case for every student. But for the students that I have worked with that had repeated sudden losses, it was harder to pull goals out.

Mia reported adolescents begin to give up and see no point. Moreover, she stated the students begin to question things and say:

What's the point? Where is this going to take me? I am just going to die anyway too.

Also, everybody's going to die. But why am I even pushing myself to be great when I am just going to die?

Francesca expressed students may "shut down" and not want to engage in anything, despite being present in school. While Sydney asserted the death causes students to feel unsafe and at times hopeless.

**Subtheme: Numbness/Shock.** Several school counselors indicated the adolescent grieving process causes the students to be numb or in shock. Chloe and Leilani conveyed they had observed adolescents in their inner-city school division be numb and desensitized to death. Chloe reflected:

Death becomes a normal process for them. They are angry, yet they become desensitized to it because it's so prevalent in their communities. They just seem to operate from a survival mode mentality. Many of them, because of their experience with grief, are not looking to the future. They are more so operating from day-to-day, or a moment to moment experience, just for survival.

According to Jayden many students are "numb to death" because they have yet to experience it. Further, Jayden indicated some have familiarity with death because of losing a family member or close friend. Riley reported during crisis situations, "The children are not even moved." Riley

also stated, “They’re desensitized. They do not show empathy towards that individual. It’s almost like they have an emotional and mental block towards feeling something for someone else.”

Mia explained she was uncertain if adolescents accept the death immediately. Moreover, she stated although they may know a death has occurred, they may not cry because they are numb and “...operate as if they were in the Twilight Zone.” Taylor concluded the students are “somewhat standoffish” and she attributed this behavior to the adolescents attempting to cope with the confusion of the situation. Taylor also said over the years she has had several students in that predicament. However, when she attempted to provide support via grief counseling initially the support was tolerated, but eventually it manifests into annoyance that was easily detectible. Chole commented that she was unsure if the adolescent grief responses are because of desensitization or because of resilience they have developed due to death having become a commonplace in their lives. Additionally, Chole reported:

I believe along with being exposed to death within their community, the adolescents have become extremely exposed to death socially on social media platforms. I believe if it is not personal in the community, it is the constant exposure to death through social media.

As the participants provided feedback regarding their observations of adolescent reactions to sudden and traumatic deaths, becoming desensitized, numb or in shock was prevalent. Riley mentioned students are not as impacted as she has previously observed. She specifically noted: After the candlelight vigil and the t-shirt, that’s it. They do not talk about it anymore. They move on as if the person has gone or left and never existed. It is very disheartening, and that is the majority.

Fallon believes as adolescents repeatedly experience loss, initially they will cry and proceed through the grieving process. However, frequently, some are desensitized and lack emotion and will discuss the event, “like a day at the mall.” Like Fallon, Chloe agrees the traumatic deaths become another event that has occurred. Chloe also believes that it becomes a topic for gossip amongst the students, and “then they move past it.” Jayden mentioned many continue to do the same things that led to the death of their friends or peers. Likewise, he described:

They just get numb to it and it’s like a recurring event. I think seeing death on social media kind of numbs them to what is happening. Because they see it in their communities, they have experienced it a great deal. Many have friends around their ages (that they grew up with) that have been killed or been involved in volatile accidents or situations that cause death.

As the participants reflected on the long-term impact of being exposed to repeated sudden and traumatic deaths, they indicated numbness and desensitization was a result. Fallon and Riley determined the adolescents become desensitized. Moreover, Riley expressed:

When you live in urban neighborhoods, they see people get shot every day. So, when we consider the long-term effects, they are certain they are not looking at it as this may impact me. How does it impact me. What does it have to do with me? It becomes ‘I did not know the person. I am not directly related to the person.’

Francesca and Leilani agreed that numbness occurs. Specifically, Leilani concluded the students become detached and “try not to grow close to other people because other people get taken away.” While Francesca explained repeated exposure causes them to become numb, which then becomes their norm. Additionally, she declared:

Some traumatic events, depending on the student, their socioeconomic status, where they live, if they live in a certain neighborhood that is riddled with traumatic events such as shooting or deaths, they become numb to it. I have had students say it is what it is. Death is what it is because they have seen it so much or it is part of their family.

Demi believes adolescents also expect it because of being repeatedly exposed. She also conveyed they will become numb, and it is not possible to identify an appropriate reaction to their grief.

Demi concluded:

I believe things that happen in adolescence transcend throughout their adulthood. I think it has a lasting effect on them. In their environment and in situations if it happens repeatedly, do they have a negative perspective? Do they expect some negative event to occur?

**Subtheme: General Mental Health Related Symptoms.** The participant feedback revealed general mental health symptoms are correlated to adolescent response to sudden and traumatic deaths. Francesca and Sydney agreed depression is prevalent in adolescents when habitually exposed to sudden and traumatic deaths. Furthermore, Sydney added fear and anxiety as additional emotions adolescents may experience. Sydney described how she has observed several students struggle socially with being in crowds and making friends. She also expressed that these adolescents lack the typical effect of being “invincible” as a teenager. Additionally, she explained:

You see this sort of thing when they are not very impulsive and can be very shut down, and not apt to try new things, because new things are perceived as a threat. I’ve had students tell me they never go outside because it is not safe. I cannot fathom a kid not being able to spend time outside, going to the park, or walking around with their friends.

Fallon believes the relationships of the adolescent will be impacted in the long-term because of their inability to provide support and empathize with others experiencing challenging circumstances. She revealed that “They just don’t know how to communicate well with someone that’s going through any type of emotional crisis.” Jayden mentioned as the adolescents evolve into adults, they harbor unresolved issues, and the baggage is carried into adulthood. Moreover, Jayden believes:

This is where we get these depressed and bipolar adults because of things carried over from their childhood into adulthood. Some people never dealt with the issues and trauma of the past and things are bottled inside and sometimes this manifests into other things as an adult. It may not be on the mental health side, it can be behavioral, and it can cause anger issues.

Chloe reflected the exposure limits the adolescent's capacity to appreciate life and living. She also deduced that their light within becomes diminished because they are consistently operating in “survival mode.” The adolescents believe everything becomes an emotional burden and life is not valued as being precious. Demi described an incident when she had a student who repeatedly cut themselves to “cope with the pain.”

### ***Societal Impacts/Aspects***

The research participants agreed that social media contributes to an adolescent’s incapacity to process grief. Sydney discussed in select communities; violence becomes normalized. Specifically, she referenced how at times parents condone their children’s actions, particularly when fighting is involved. Furthermore, she conveyed:

I believe that is something that we are moving more and more towards, where kids believe this (fighting) is what people do. You can see the pathway of why adolescents are

desensitized when we are living in a culture like this and in some communities where fighting is encouraged.

Sydney also believes some parents will encourage their children to fight others and some parents will even fight another child.

**Subtheme: Social Media.** The participants conveyed social media was a contributing factor for how adolescents process grief. Mia revealed video games heavily influence the desensitization of adolescents. Mia expressed with video games students believe, “I’m just going to get a new life and pop back up again.” She also stated because of the array of death on television and in video games, adolescents do not perceive death as being permanent. Jayden and Taylor reflected that social media also increases desensitization. Taylor expressed, “I believe maybe in real life they wouldn’t be that desensitized, but they repeatedly see these images and other things and they are like, oh whatever.” Additionally, Chloe contributed:

If death is constantly happening everywhere in your community, via TikTok, Instagram, or Facebook you become desensitized. The adolescents see people experiencing death and people want to record it. Death becomes something as simple as flipping on a light switch.

Riley concluded that because death is more accepted in today’s society, in general people (not solely the adolescents) become numb to it, and people just “mind their business.” She also commented about having concern for the future impact of the desensitized adolescents in the world. Riley mentioned that perhaps adolescents do not desire to express emotions, despite attempts made by the school counselors of diverse interventions to provide support. Likewise, Chloe and Sydney asserted that when you have more youth who do not value life and perceive it to be “precious”, there will continue to be an increase of the inability to show love and emotions.

*Interventions/Treatment Strategies*

Multiple interventions and treatment strategies were provided by the participants when they supported grief-stricken students. Francesca explained that sometimes you cannot repeatedly ask questions and school counselors need to provide “quiet time” by providing a space for the students to process their feelings and emotions in solitude. Jayden discussed having adolescents involved in different extracurricular activities allows them to alleviate their minds from the current situation. Within this theme, the participants expressed relationships, the amount of family involvement (support), and education about coping techniques of the adolescents as part of their lived experience with this phenomenon.

**Subtheme: Relationships.** Many participants reflected that having relationships with a trusted adult assists with the long-term impact of sudden and traumatic deaths. Francesca mentioned when educators foster positive relationships with adolescents, the students will be more likely to seek support. Chloe emphasized the significance of building relationships which can provide the grounds for self-disclosure. Demi and Sydney agreed that checking with students provides feelings of being supported to the student. Demi reflected:

Identifying a trusted adult in the building is critical. When the rapport has been built, school counselors can provide the support students need. At times you must be innovative and creative so that you can supply support and relate to the students.

Likewise, Sydney also commented that establishing relationships with adolescents is critical to their success. She shared if an adolescent has at least one connection it will significantly increase that adolescent’s success rate. Sydney also shared, “If I am detached because of death, and I cannot even make that one connection, then the adolescent’s chances for success dwindle.”

Taylor stressed the importance of connecting adolescents to a trusted adult, if rapport is not established with the school counselor. Moreover, she described a time when she connected a student with a teacher who had tragically lost her mother during her teenage years, which is the precise situation the student was experiencing. Taylor revealed that “This technique was beneficial for the student and teacher as they had a shared experience.”

The research participants also provided feedback regarding how adolescents could be better supported when experiencing a sudden and traumatic loss. Francesca explained:

When a student has a relationship with you, they are more likely to come and talk with you even if it is traumatic. Even if the student cannot discuss the event with their peers, if a school counselor has established rapport, by truly getting to know them as an individual, they will come and seek the services of a school counselor. We (school counselors) must communicate with them in a manner that shows that we care, without being judgmental, and just being our authentic selves.

Mia contributed that students could be better supported if that trusted individual is “checking in on them, and not just at school.” She indicated conducting home visits or making more effort to spend time with the adolescent. Further, Taylor concluded that “having the ministry of presence” (being there to listen or sit with the adolescent during the grieving process) is also a means of establishing rapport with the adolescents in these situations.

**Subtheme: Family Involvement/Support.** Taylor asserted that support for the student incorporates assisting the family. Taylor discussed how this ensures “everyone is on the same page, so the student is hearing the same thing.” Further she reflected she considers this to be “protection” for the student as they navigate through the grief process. Similarly, Demi agreed that support is a wraparound service. She conveyed:

Support does not just stop at the schoolhouse because the students go home. If the family is grieving because they too have experienced this traumatic event, do they have the appropriate resources? Do the parents have the capacity to support their children when they are grieving as well?

Demi also shared that in addition to providing wraparound services, the services provided by the school should be ongoing.

**Subtheme: Empowerment/Education About Coping Strategies.** The research participants indicated they implemented an array of coping strategies when working with grief-stricken adolescents. Francesca, Riley, Fallon, Taylor, and Demi reflected that journaling or art are invaluable resources to implement with students. Francesca said she keeps blank journals in her office for students to write or draw to express their feelings. Further, Mia and Riley contributed that art therapy and crafts (within grief groups) permits students to process their feelings and emotions. Fallon revealed how the “Grief Through Colors” activity enables students to express their emotions related to grief through color. She described:

With Grief Through Colors, the students have a heart, and they select five or six colors.

For each color, they correlate to an emotion to each color. The students take those colors and design the heart the way they desire to.

Leilani and Chloe mentioned individual counseling is another intervention they will implement with students. Lelani contributed she questions students about events occurring in their world. Specifically, she conveyed, “I think that usually my go-to is to discuss the long-term coping process, which is more substantial. Chloe described how with individual counseling “talk therapy” the stages of grief can be explained while simultaneously permitting the adolescents to process their feelings. Also, she expressed:

The goal is for the adolescents to have coping skills to function as they navigate the grieving process. It could be 10 years later, and they are still having moments of missing that loved one or peer. They will continue to have moments of missing the loved one/peer or they could be trying to process what occurred.

Mia and Fallon revealed that small group counseling is also effective. Mia stated that grief groups are facilitated in her building during the first semester. She also discussed:

We have considered conducting the groups during the second semester because of the constant occurrence unfortunately. Traumatic deaths continue to plague this community and the short time might not be beneficial as more students will probably need the group counseling services within a school year.

Fallon stated the school will implement grief groups if there is a cadre of students who have “all lost the same individual, to provide time and space for them to process their feelings.” Providing additional counseling resources was to bereaved adolescents was also indicated as an intervention. Jayden and Demi confirmed that connecting adolescents with community resources provides another layer of support for bereaved adolescents. Jayden conveyed the importance of informing the adolescents regarding the benefits of counseling and utilizing counseling to express your feelings. Sydney explained that she will refer a student to the school psychologist or school social worker depending on the circumstances that are involved with the student.

### **Research Question 2 Responses**

Research question 2 sought to determine the cognizance of secondary school counselors regarding the impact of sudden and traumatic death on secondary students. With this question, the researcher was able to identify additional themes and sub-themes that contributed to the

Study's research. With this research question, the researcher identified 3 themes and 6 sub-themes.

### ***Contextual Factors Affecting the Impact of Death***

This theme was presented as the research participants provided responses about their observations of way that sudden and traumatic deaths impact adolescents. Francesca and Riley provided differing responses regarding the impact of the receipt of information about the death of a loved one or peer. Specifically, Riley reflected:

I recently had a student who lost his grandmother. The parent called to tell him while he was at school. He was noticeably upset and crying. He was able to convey what occurred, but his communication was limited. He returned to school the following day as if nothing happened. He was moved but based on the information and the time he received the information, he acclimated very quickly, pushed his emotions down and carried on with the business at hand the next day.

Francesca discussed depending on how the adolescents learn about the death dictates that the grieving process may be extended. She explained how she has observed parents pick students up from school to share the unfortunate news and has also seen students receive the information via text. Depending on how the adolescent receives the information indicates how traumatized they will be, according to Francesca.

**Subtheme: Closeness of the Relationship.** Jayden and Leilani commented that the connection of the adolescent to the deceased directly influences how students will respond.

Leilani concluded:

Students have different reactions to death depending on the situation and the person. But when it's a parent or a sibling, and definitely when it's unexpected, you can see that pause in their progression. You can see a break.

Jayden described how some students are numb to death because they have no experience with death, yet others may have experience with death because of the loss of a family member or peer. Moreover, he reflected:

Unless it really, really, and truly hits home will we see a different reaction. Then, they may become more emotional and experience challenging feelings. This is also where the students could potentially go into depression.

Taylor indicated when an adolescent is coping (or attempting to cope) with a sudden and traumatic death, they will struggle academically, especially when they had an immediate relationship with the deceased. She also stated the relationship the adolescent has with the disease will dictate their reactions.

**Subtheme: Type of Death.** Francesca expressed the way the individual dies will cause adolescents' reactions to vary. She reported that:

It is extremely traumatic for adolescents if it is a family member who has been murdered as opposed to dying of natural cause, like a grandparent who passed away because of old age. I believe this is where the real trauma comes in because if it's a murder, they seem to take it differently versus an elderly parent or grandparent or someone they know has a disease and they are slowly dying.

Jayden indicated there "is a line between traumatic and natural," regarding the response from the adolescents. Chloe noted that when students are grieving the loss of a grandparent or parent during elementary school, the memory of that loss may resurface. Additionally, she believes this

is more noticeable when a loved one has died of natural causes as it causes the students to “become stuck.” Further, Chloe revealed:

It is like the students experience periods of grief that resurfaced out of nowhere and it was not triggered. The students may mention remembering when their grandmother died when they were in second grade for example, and now they are in 10<sup>th</sup> grade. Most likely those feelings of sadness were triggered, as a thought came about. However, frequently it is random when it is more of a personal loss because of natural causes versus a traumatic loss.

### *Academic Impacts*

The research participants shared a plethora of ways adolescents are academically impacted by sudden and traumatic death. According to Demi, a grieving student’s attendance at school could be particularly impacted at the high school level. Taylor shared because adolescents are consumed with grief, they begin not to care and lack motivation. She reflected:

The students begin to question the point of everything. If their mom did all these things for them and she died, or my brother did all these things and he died, they begin to think who cares? They question what’s the point? The hope went into the grave with that person. There is a lack of hope, so there is a lack of motivation.

**Subtheme: Lack of Focus.** Many school counselors mentioned bereaved adolescents will lack focus when it comes to their academics. Mia discussed observing seeing an honors or advanced level student simply “not perform when they were capable of performing.” Further, she shared “depression might set in because they lack focus and therefore their grades or test scores drastically drop. Francesca noted the students on her caseload who have experienced a traumatic death will have plummeting grades, “unless they have a fabulous support system.”

Fallon agreed the adolescents will not focus on academics because their mind is focused on the tragedy. Fallon affirmed:

When we are going through emotional issues, we cannot focus, we cannot concentrate.

God knows the adolescent brain is still developing. Many of them can't focus and concentrate in their classes. Additionally, they will miss a great deal of class time because they are seeking the services of the school counselor.

Chloe explained the students are often "stuck and trying to process the death." She stated, "That constant need to process what happened impacts their ability to focus academically or focus on themselves personally." Sydney shared:

If the person was close to their family or friends, the death may rip through the community. In those instances, I believe that it is hard for the adolescent to pull themselves together and start thinking about the homework they have. And to appropriately grieve the students are not focused on their classes.

### ***Barriers to Process Grief***

During the interviews, the research participants indicated that barriers existed with adolescent grief. Barriers inhibit an adolescent's response to grief. The participants identified lack of a support system, lack of awareness of the grieving process (from others), and the stigma of mental health which contribute to an adolescent's inability to process grief.

**Subtheme: Lack of Support System.** Lacking a support system was identified as a barrier to processing grief by several participants. When considering an adolescent's academics, Francesca noted that because school counselors may not discover a student has experienced a sudden and traumatic loss until after several days, school counselors are able to "put systems or

procedures in place to support the student academically.” Fallon shared, “Sometimes you have teachers who are not sensitive to what students are going through.” She described the following:

I had a student that had another sibling who had drawn a picture of the brother that was shot and killed. The student was in class, just staring at his brother’s picture. The teacher came, grabbed it, tore it to pieces and threw it in the trash. The teacher did not even ask who or what it was. She did not care.

When Fallon discussed the incident with the teacher and informed her of the situation with the student’s sibling and her actions, the teacher admitted what she had done and “did not appear to care.” Yet, Demi declared:

The teachers may not know what the student has experienced. This is extremely prevalent at the high school level where there may not be common planning time. The teachers do not come together as a team to know and discuss what the students may be experiencing.

Sydney commented that parental supervision also plays a critical role. Specifically, Sydney stated if the student has support, has a quiet place to complete work, or even feels safe will influence their academics. Chloe confirmed the reason adolescents experience academic challenges is “because they do not have anyone to help talk them through the process or teach them the tools or coping skills that are necessary to come to grips with that traumatic loss.”

Chloe also revealed:

They (adolescents) are just kind of stuck, trying to process it...they are really just trying to understand what has happened and there is no real form of, how do I work past this. Or how do I continue to move on in life with this type of debilitating experience.

Moreover, it was discovered that the participants believed that adolescents are challenged by not having support to process their grief. Leilani declared, “They are not encouraged to express

themselves, and encouraging adolescents to express themselves should not happen once a traumatic event has occurred.” She also mentioned:

If they do not know how to express themselves when a traumatic event happens, they are going to shut down because they don’t know how to express themselves. Often kids are shielded from traumatic events and traumatic events are inevitably going to occur. So, they need to know how to express themselves, be it a happy or sad occasion.

Chloe shared that many adolescents “hold a lot within and they don’t want to share.” Chloe indicated “I have experienced students that have tragically lost a loved one or peer and when I attempt to reach out to provide support, they have a barrier. They obviously did not want to deal with me.”

Demi reflected some adults lack the capacity to unpack a traumatic event and guide an adolescent through it. Further, an adult may be challenged by their own responses to grief. She also stated, “Because they (the adults) are not in the know, they (adolescents) feel more comfortable with their peer group.” The adolescents may believe an adult could not understand the grief they are attempting to cope with.

**Subtheme: Lack of Awareness of Grieving Process (from others).** During the interviews participants indicated that lack of awareness of the grieving process from other individuals influences an adolescent’s capacity to process grief because of traumatic deaths. Leilani reflected, “I believe that those around them want them to get over it.” She also stated because everyone manifests the stages of grief differently, “the individuals who are pushing them to get over it are belittling their experience.” Fallon described how often males are told (by other males), “Come on man, come on man. You know you don’t need to be crying Man up. Man up.” She continued:

With males or females oftentimes family members will tell them they have had 2- or 3- days grieving. Or you should start to get over it by now. Frequently, they cannot go through the (grieving) process the way they need to, and mostly adults convey this to them. The family members will put how they grieve on the student or tell the student how they believe they should grieve.

Chloe agreed with Fallon in that “sometimes people will project what they need on someone else.”

**Subtheme: Stigma of Mental Health.** Many participants affirmed the stigma of receiving mental health services poses as a challenge for adolescents. Leilani believes a negative perception of mental health services is common. She mentioned having parents or guardians who state, “There is nothing wrong with them. They are fine. Or no, we are not going to a counselor.”

Leilani continued with:

These parents state you cannot get medication for my baby. It is like medication, or a counselor cannot even be considered. This is because it is still taboo in our community to need those kinds of services.

Mia asserted that in situations where guardianship of the adolescent is changed, “whoever is responsible for the child may believe the child will be fine.” Further, she concluded, “These parents/guardians will indicate help is not needed. They may even say therapy is not needed or we will pray for it. Sometimes, the barrier can be the family member or guardian.”

Jayden asserted the household and culture in which the adolescent is from may potentially serve as barrier to the way they process grief. Specifically, Jayden referenced Black males and how they are told, “Men should not cry.” He believes those statements can impact the grieving process and the likelihood the adolescent will believe it is appropriate to seek resources

for grief. Sydney agreed utilizing counseling resources continues to be stigmatized in communities of color. Furthermore, she stated:

When you have parents that are struggling to be present for adolescents in other ways, such as keeping bills paid or food on the table, or for the adults to make it to work, or if they are caring for other children, it just appears like another sort of cumbersome task. In some communities the expectation is because everyone has been experiencing so much pain, everyone should continue to do so without any help.

Sydney also reflected several adolescents lack trusted relationships with an adult, “where they can be open and honest.” She continued with, “Even if the adolescent was interested in therapy, that would have to be a barrier to overcome...just trusting adults in the first place to be there, support you, put you first, and have your best interest.”

### **Summary**

This chapter synopsis the interviews conducted for this qualitative, phenomenological research study. During the review of the transcriptions, seven themes and fifteen sub-themes were discovered. In response to research question 1 about the experiences of secondary school counselors with sudden and traumatic death, the following themes were identified:

individual/personal factors affecting the impact of death, grieving process/negative mental health reactions to death, societal impacts, and finally interventions/treatment strategies. Research

question 2 sought to ascertain school counselor perceptions of the impact of traumatic death on secondary adolescents. The following themes were correlated with research question 2:

contextual factors affecting the impact of death, academic impacts, and barriers to process grief.

## **Chapter Five: Conclusion**

### **Overview**

The purpose of this qualitative phenomenological research study was to understand secondary school counselor perceptions of the impact of sudden and traumatic deaths on adolescents. The study aimed to obtain the lived experiences of secondary school counselors during their work with adolescents who are grieving a traumatic death. Moreover, the goal of the study was to acquire knowledge about their beliefs and observations of the influence of sudden and traumatic deaths on adolescents. This chapter encompasses a summary of research findings, discussion of the findings, implications of this phenomenological study, delimitations and limitations, and lastly, specific recommendations for future research.

### **Summary of Findings**

This study investigated the experiential experiences of secondary school counselors as they worked with adolescents who had been exposed to sudden and traumatic deaths. The study aimed to answer the following two research questions: “What are secondary school counselors experience with sudden and traumatic death in urban school settings?” and “What are secondary school counselor’s perceptions of the impact of sudden and traumatic death on urban adolescents?”

### **Research Question 1 Findings**

The purpose of the first research question was to understand the lived experiences of secondary school counselors when dealing with adolescents who had experienced sudden and traumatic death. This research question produced four themes. Below is a summary of the findings of this study's first research question.

***Theme 1: Individual/Personal Factors Affecting the Impact of Death***

The participants of this research investigation indicated individual or personal factors influenced the way an adolescent responds to sudden and traumatic death. Repeatedly, the school counselors shared reactions to traumatic death varies amongst students. Additionally, it was discovered that age had a profound influence as middle school adolescents were depicted as having more overt reactions while reactions by high school adolescents varied according to their experience with death.

***Theme 2: Grieving Process/Negative Mental Health Reactions to Death***

The secondary school counselors had experience with diverse mental health responses to grief and adolescent grief. Withdrawal was indicated as a coping mechanism adolescents will employ to cope with the challenges of grief. In multiple instances, the research participants also described observing numbness and shock in adolescents after a death. Moreover, initially adolescents become grief-stricken, however, as they repeatedly experience death, they will become desensitized and fail to exhibit emotions. The participants shared observing various mental health reactions, such as anxiety or depression in bereaved adolescents.

***Theme 3: Societal Impacts/Aspects***

This research investigation shed light on the influence of societal aspects upon the grieving process of adolescents. The school counselors emphasized that social media contributes to the desensitization of adolescents as distinct social media platforms habitually display violence and death. Because the students are repeatedly exposed to violence on social media, and then it is experienced in their communities, the teens are more receptive about death and lack the ability to display their emotions and feelings.

***Theme 4: Interventions/Treatment Strategies***

Secondary school counselors employ many methods and techniques to address adolescents who are grieving sudden and traumatic deaths. One of the main concepts the school counselors concluded benefited the grieving teens was having relationships with trusted adults. Moreover, when adolescents have a trusted relationship with a school counselor, they are more likely to seek assistance while grieving a traumatic death. Providing wraparound support for a bereaved family was also indicated by the school counselors. Lastly, empowering and informing the adolescents of diverse coping techniques, and utilizing group counseling as a strategy for bereaved adolescents was also mentioned.

**Research Question 2 Findings**

The goal of the second research question was to ascertain the cognizance of secondary school counselors of the influence of sudden and traumatic deaths on adolescents. With this research question three themes evolved. The discoveries of the second research question are presented below.

***Theme 5: Contextual Factors Affecting the Impact of Death***

The school counselors reflected that the relationship the adolescent had with the deceased influences the student's response to the death. Many believed when the death "hits home" is when an observable reaction is present. Further, the way an individual tragically dies contributes to how an adolescent will respond. The research participants contributed that an elderly grandparent's death as opposed to a traumatic death will also guide how an adolescent responds.

***Theme 6: Academic Impacts***

The research participants of this study affirmed when an adolescent experiences a sudden and traumatic death, it is inevitable the student's academics will suffer. The students lack focus

and may become an attendance concern. Additionally, the school counselors believe because the adolescents become consumed with attempting to process the traumatic death, they are not capable of focusing on their education.

***Theme 7: Barriers to Process Grief***

The last theme of this study was discovered as the school counselors reflected upon what presents as a barrier for an adolescent when they are grieving. The research participants concluded that when a student lacks a support system, the adolescent struggles to navigate grief. Furthermore, it was discovered that family members may inhibit an adolescent's capacity to process grief because of lacking knowledge of the grieving process or projecting their feelings onto the teen. Additionally, the stigma of receiving mental health services is correlated with being a hurdle as some families do not believe in the merit of counseling.

**Discussion**

This qualitative study's purpose was to understand the perceptions of secondary school counselors as adolescents grieve a sudden and traumatic loss. Losing an individual via tragic means has an undeniable influence. Research exists regarding how teachers support grieving adolescents, but the researcher could not find information about the beliefs and experiences of secondary school counselors as they support adolescents navigating through grief.

The Center for Victim Research (2019) concluded when a person from an individual's family or peer group (immediate or distant) dies via homicide, that person is deemed a co-victim. This research investigation discovered secondary school counselors discussed how the relationship an adolescent has with the deceased influences their "co-victimization" response. The secondary school counselors asserted that although adolescent responses to death may vary, when they tragically lose a person, some students may "break" and yet others will have minimal

reactions. Further, the way an individual dies influences adolescent response to the death, according to secondary school counselors. The results of this study depict that school counselors have observed a difference in adolescent reactions when the death was traumatic or because of natural causes.

Most individuals experience an unexpected loss during adolescence and the loss is typically connected to another traumatic event (Asgari & Naghavi, 2020; Oosterhoff et al., 2018). The school counselors of this study reflected that the grieving process varies from individual to individual, which concurs with the research of Dods (2015). Moreover, barriers exist that substantially contribute to the ability to process grief. This study suggests when adolescents lack a support system, their ability to process grief is substantially inhibited. Likewise, Smit (2015) determined that in African American communities, males were often encouraged to remain strong and not outwardly manifest feelings of grief and despair. Multiple research participants of this study also confirmed that the stigma attached to receiving mental health services encourages adolescents to refrain from seeking support.

The findings of this study indicate that sudden and traumatic deaths impact adolescents in an assortment of ways. The school counselors of this research investigation concluded the adolescent mental health responses to sudden and traumatic deaths vary. Palmer et al. (2016) conveyed adolescents may respond to death with anger. This study revealed the school counselors believe in addition to manifesting anger, adolescents may withdraw from their normal daily routine. Additionally, it was discovered they may express numbness or shock which depends on their connection to the deceased and how the information about the deceased was shared. Sharpe et al. (2014) discussed when an adolescent is closely connected to a homicide victim, they are more prone to experience post-traumatic symptoms. Johnsen et al. (2021)

declared that adolescents may manifest responses to grief up to almost four years after the death occurred. The research findings illustrate that because of the amount of violence in select communities, adolescents are repeatedly exposed to sudden and traumatic deaths. The adolescents are not provided with an opportunity to grieve before the next traumatic event occurs. This causes the adolescents to have a layering effect with grief as the deaths continue to pile up. Moreover, the research participants concluded because the adolescents are habitually exposed to the deaths, they become desensitized and lack the capacity to express emotions and feelings.

### **Implications**

Secondary school counselors are charged with meeting the academic, career and college readiness, and social/emotional needs of their students. The impact of a sudden and traumatic death has the propensity to impact adolescents in the years to come. For school counselors to provide support and help teens, researching the lived experiences of secondary school counselors with this phenomenon is critical. The goal of this study was to capture the experiences of secondary school counselors when dealing with bereaved adolescents. From this research investigation, multiple educational entities would benefit from learning ways to support bereaved adolescents.

### **School Counselors**

The discoveries of this research study stipulate that the role of secondary school counselors with a grieving adolescent varies. Per the American School Counselor Association (ASCA) guidelines (ASCA, 2019), school counselors play a pivotal role in fostering a “trauma-sensitive environment” in their buildings. Ensuring school counselors are provided with best practices in trauma-informed care through the lens of a school counselor is critical. Further, the

professional development that school counselors receive should be tailored to the specific school counselor tasks. School counselors should advocate for being engaged in completing tasks aligned with the ASCA national model, which incorporates spending 80% of their time in direct counseling services (ASCA, 2019). Lastly, school counselors should utilize data to drive the comprehensive school counseling program at the building level.

### **School Administrators**

With the marked increase in the need for trauma-informed teaching, it is vital for school administrators to be cognizant of the grieving process of adolescents. It is imperative for school counseling administrators to ensure their school counselors are engaged with tasks aligned with the ASCA National Model of school counseling to support the needs of students. School administrators must provide opportunities for school counselors to attend professional development to address the evolving needs of adolescents. Furthermore, school divisions should hire enough school counselors at every level (e.g., elementary and secondary) to meet the recommended ASCA counselor to student ratio of 1 to 250.

### **School Counselor Educators**

Aspiring secondary school counselors often enter the field of school counseling, lacking the skillset to handle bereaved adolescents. School counselor educators should be aligned to meet the needs of today's adolescents, which includes traumatized youth. Graduate school counseling programs should be strategically designed to equip aspiring school counselors with techniques to serve traumatized adolescents.

### **Community Stakeholders**

The ASCA (2022) provides distinct information regarding establishing partnerships between the school, the community and families. School counselors play a critical role in

fostering collaboration with families and community entities (ASCA, 2022). Community stakeholders should provide sufficient resources within the community to address the needs of bereaved adolescents and their families.

### **Delimitations and Limitations**

The objective of this study was to identify the perceptions of secondary school counselors during their work with adolescents who are grieving because of sudden and traumatic deaths. The researcher desired to obtain the knowledge of solely secondary school counselors during their work with this phenomenon, therefore elementary school counselors, nor private school counselors participated in this research study. During this research investigation, secondary school counselors from only one school division in the state of Virginia were participants. Further, most participants were Black, and only one male participated, which may have caused additional bias. Since only the secondary school counselors of one school division were the participants, it is difficult to generalize the results of this study to other localities of the United States.

### **Recommendations for Future Research**

The purpose of this qualitative study was to obtain the perceptions of urban secondary school counselors as they worked with secondary adolescents who are grieving sudden and traumatic deaths. Acquiring qualitative data from secondary school counselors of varying ethnicities and gender from rural and suburban areas across the United States would provide a robust exploration of this phenomenon. Furthermore, it would be advantageous to gather data from secondary adolescents about their grieving process as they experienced sudden and traumatic death. Finally, utilizing elementary school counselors as participants for a phenomenological study would provide additional insight.

### **Summary**

This qualitative study sought to identify the lived experiences of urban secondary school counselors during their work with adolescents who have experienced sudden and traumatic death. The study demonstrated how adolescents grieve a sudden and traumatic death varies according to the individual. The way an adolescent receives the information and their relationship with the deceased was also recognized as contributing factors that predict the way an adolescent grieves. Moreover, when an adolescent is repeatedly exposed to sudden and traumatic deaths, they become desensitized, however they have the potential to develop layers of traumatized grief that may surface later during their lives. The results of this research investigation demonstrate the need for school counselors to receive professional development regarding providing trauma-informed care as a school counselor. Finally, it would behoove community stakeholders to provide an array of resources to support the needs of grief-stricken adolescents.

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## Appendix A

### Institutional Review Board Approval

# LIBERTY UNIVERSITY

## INSTITUTIONAL REVIEW BOARD

May 24, 2023

Tiffany Hillian  
Krystal Clemons

Re: IRB Exemption - IRB-FY22-23-1017 School Counselor Perceptions of the Influence of Sudden and Traumatic Death on Secondary Urban Adolescents

Dear Tiffany Hillian, Krystal Clemons,

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds your study to be exempt from further IRB review. This means you may begin your research with the data safeguarding methods mentioned in your approved application, and no further IRB oversight is required.

Your study falls under the following exemption category, which identifies specific situations in which human participants research is exempt from the policy set forth in 45 CFR 46:104(d):

Category 2.(iii). Research that only includes interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording) if at least one of the following criteria is met:

The information obtained is recorded by the investigator in such a manner that the identity of the human subjects can readily be ascertained, directly or through identifiers linked to the subjects, and an IRB conducts a limited IRB review to make the determination required by §46.111(a)(7).

**Your stamped consent form(s) and final versions of your study documents can be found under the Attachments tab within the Submission Details section of your study on Cayuse IRB.** Your stamped consent form(s) should be copied and used to gain the consent of your research participants. If you plan to provide your consent information electronically, the contents of the attached consent document(s) should be made available without alteration.

Please note that this exemption only applies to your current research application, and any modifications to your protocol must be reported to the Liberty University IRB for verification of continued exemption status. You may report these changes by completing a modification submission through your Cayuse IRB account.

If you have any questions about this exemption or need assistance in determining whether possible modifications to your protocol would change your exemption status, please email us at [irb@liberty.edu](mailto:irb@liberty.edu).

Sincerely,

**G. Michele Baker, PhD, CIP**  
*Administrative Chair*  
**Research Ethics Office**

## Appendix B

### Consent

**Title of the Project:** School Counselor Perceptions of the Influence of Sudden and Traumatic Death on Secondary Urban Adolescents

**Principal Investigator:** Tiffany Hillian-Sullivan, Doctoral Candidate in the Community Care and Counseling Department, Liberty University

#### Invitation to be Part of a Research Study

You are invited to participate in a research study. To participate, you must be a school counselor in a middle or high school. Taking part in this research project is voluntary.

Please take time to read this entire form and ask questions before deciding whether to take part in this research.

#### What is the study about and why is it being done?

The purpose of the study is to analyze secondary school counselor experiences of how secondary students respond to traumatic deaths.

#### What will happen if you take part in this study?

If you agree to be in this study, I will ask you to do the following:

1. Participate in a 1-hour interview (in person, zoom, or telephone) that will be recorded
2. Complete member checking which will require you to review your interview transcript for validity. Member checking will allow you to ensure your transcript is accurate.

#### How could you or others benefit from this study?

Participants should not expect to receive a direct benefit from taking part in this study.

Benefits to society include information that will be acquired regarding current trends observed by secondary school counselors when working with urban adolescents who have experienced sudden and traumatic deaths.

#### What risks might you experience from being in this study?

The expected risks from participating in this study are minimal, which means they are equal to the risks you would encounter in everyday life.

#### How will personal information be protected?

The records of this study will be kept private. Published reports will not include any information that will make it possible to identify a subject. Research records will be stored securely, and only the researcher will have access to the records.

- Participant responses will be anonymous and will be kept confidential by replacing names with pseudonyms.
- Interviews will be conducted in a location where others will not be able to hear the conversation.
- Data will be stored on a computer that is locked with a password. After five years, all electronic records stored on the computer will be deleted and all hardcopy records that were created will be shredded.
- The recordings will be stored on a computer that is locked with a password locked computer or recording device. The recordings will be stored for five years on a computer that is password-locked. Once the research participants have reviewed the accuracy of the interview transcript, the transcript will be deleted. Only the researcher and members of her doctoral committee will have access to the recordings.

**How will you be compensated for being part of the study?**

Participants will not be compensated for participating in this study.

**Is the researcher in a position of authority over participants, or does the researcher have a financial conflict of interest?**

The researcher serves as [REDACTED].  
The researcher's position will not have an impact on the participants of this study. This disclosure is made so that you can decide if this relationship will affect your willingness to participate in this study. No action will be taken against an individual based on his or her decision to participate or not participate in this study.

**Is study participation voluntary?**

Participation in this study is voluntary. Your decision whether to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

**What should you do if you decide to withdraw from the study?**

If you choose to withdraw from the study, please contact the researcher at the email address/phone number included in the next paragraph. Should you choose to withdraw, data collected from you will be destroyed immediately and will not be included in this study.

**Whom do you contact if you have questions or concerns about the study?**

The researcher conducting this study Tiffany Hillian-Sullivan. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact her at [REDACTED] or [REDACTED]. You may also contact the researcher's faculty sponsor, Dr. Krystal Clemons, at [REDACTED].

### Whom do you contact if you have questions about your rights as a research participant?

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the IRB. Our physical address is Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA, 24515; our phone number is 434-592-5530, and our email address is [irb@liberty.edu](mailto:irb@liberty.edu).

*Disclaimer: The Institutional Review Board (IRB) is tasked with ensuring that human subjects research will be conducted in an ethical manner as defined and required by federal regulations. The topics covered and viewpoints expressed or alluded to by student and faculty researchers are those of the researchers and do not necessarily reflect the official policies or positions of Liberty University.*

### Your Consent

By signing this document, you are agreeing to be in this study. Make sure you understand what the study is about before you sign. You will be given a copy of this document for your records. The researcher will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

*I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.*

The researcher has my permission to audio-record me as part of my participation in this study.

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Printed Subject Name

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Signature & Date

**Appendix C**

**Demographics Survey**

Name (First and Last)

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Gender

Male

Female

Prefer Not to Say

Age

20-30

31-40

41-50

51-60

61-70

70+

Length of time as a school counselor:

Less than 5 years

5-10 years

11-15 years

16+ years

What is your ethnicity?

American Indian or Alaskan Native

Asian/Pacific Islander

Black or African American

Hispanic

White/Caucasian

Multiple Ethnicities

## Appendix D

### Interview Questions

1. Describe your observations of how death impacts students during their adolescent years.
2. Discuss your observations of the grieving process of adolescents.
3. Describe your observations of how repeated sudden traumatic deaths impacts students during adolescence? (*Prompt: How are the students different after these losses?*)
4. How does the impact of sudden and traumatic deaths inhibit a student's capacity to be successful academically? (*Prompt: How do their grades, test scores, behavior, relationships with peers & family change, etc.?*)
5. What are some of the barriers that contribute to a student's inability to process the grief they are experiencing because of a sudden and traumatic death? (*Prompt: time to process, preconceived ideas of showing emotion, etc.*)
6. What are the long-term effects of grief on adolescents when they are repeatedly exposed to sudden and traumatic losses?
7. Describe your thoughts regarding adolescents being desensitized to death.
8. What are some of the interventions you have implemented with adolescents who have experienced traumatic grief?
9. How do you believe students could be better supported when they have experienced a sudden and traumatic death?
10. Is there anything else you would like to contribute?